

annual report 2012–2013



educating, supporting and advocating for remote health across australia



contents

CEO's report.....	2
President's report.....	3
CEO and CFO.....	4
Board of directors.....	5
Our organisation at a glance.....	8
Our strategic framework 2012-2017.....	10
Who we are.....	11
Educate.....	12
Education report.....	12
CRH short courses.....	20
Our national conference.....	21
Our awards.....	24
Student engagement.....	26
Our publications.....	28
Advocate.....	30
Our voice.....	30
Our representation on committees.....	31
Our membership.....	32
Support.....	34
Bush Support Services report.....	34
BSS hotline at a glance.....	35
Financial overview.....	36
Contacts.....	back cover

ceo's report



The Bush Support Services team has this year developed an informational DVD outlining the services available to remote health professionals and their families. They were very lucky to have secured the help and voice of Jack Thompson, Australian acting icon and a great friend of CRANApplus, who agreed to provide the visual and narrate the content for this work. His involvement will ensure a very professional product for the organisation. The DVD should be available by the end of 2013.

Our Cairns office is now fully operational with staff enjoying the benefits of working in our own premises. This means that, unlike the Alice and Adelaide premises which are both leased, the Cairns space was able to be fitted out in a way that meets our needs and those of our members. If you are in Cairns, please drop in for a cuppa, make your self known and have a look around.

In the past twelve months and over the next few years CRANApplus will be making a huge effort to re-visit processes and procedures so that it is not out of step with its own growth and future staffing and resource needs.

We have just completed a new three-year business plan and will be developing a marketing strategy in the next little while in concert with that document.

We have undertaken a rigorous forward-planning exercise, looking at finance, staff, resources and risk, and we have almost completed a staff management plan to be presented to the Board at the end of this year.

In addition, by the time this report is printed, we are likely to have become a Registered Training Organisation (RTO). This is a very exciting prospect and follows almost two years of intense work to get us to this point. I sincerely thank Libby Bowell and the team for their efforts leading up to the RTO audit and the consulting firm that guided us through the process.

And lastly, I, on behalf of the staff, Board of Directors, members and friends, say farewell to Christopher Cliffe.

Christopher, until very recently was the President of CRANApplus, a position he held for just over seven years. During that time, Christopher and the Board of the time, helped guide CRANApplus through the massive period of change that has led us to where we are today.

This was not an easy time. There needed to be a recognition that CRANApplus needed to change and grow or wither on the vine. And the Board, under Christopher, embraced that challenge facing the organisation and worked hard to support the work necessary to take CRANApplus to the next level.

It meant that, as the new CEO (from 2008), I had to rely on the confidence, support and assistance of a competent and hard working Board. I am extremely grateful that I had all of that and more when I first took up my role and that together and under Christopher's leadership, we were able to achieve so much.

On both a personal and professional level, I thank you Chris and will miss your effective and flamboyant style of leadership. The organisation will be ever the better for your involvement and I wish you well in the next phase of your life.

I also thank Paul Stephenson for readily stepping into the breach from the position of Vice President, ensuring a seamless transition for the new President following the elections at the Darwin Conference and AGM. Thank you Paul: like all of our Board members, you gave your time willingly and well.

I look forward to working with the new President in the coming years and I am very confident that the organisation will remain in safe hands and continue to be the organisation that works for its members and sector in which they serve.

Thank you all.

Carole Taylor
CEO, CRANApplus

interim president's report



As CRANApplus interim President, I welcome this opportunity to address our membership on progress within our organisation, which continually strives to ensure you have access to quality education and support services.

I recently had the chance to visit each of our organisation's offices and to discuss future needs in education and support programs.

Our education team indeed has no equal: it's organised, highly-qualified, committed and in touch. All the providers have a dedicated approach to the delivery of nationally renowned education programs. The effort behind this work has added great value to our efforts in working towards RTO status.

The BSS program, providing support for remote practitioners, was recently acclaimed as unique, essential and outstanding by recipients in the network and also service referrers. Great work and a real passion to support the remote health care provider within our geography reflects a fantastic team of individual practitioners.

Professional support services continues to make sure we are in the front seat on opinion-leading forums and maintains advocacy for our remote professionals.

And our corporate and management services have been busy over the last few months with issues such as the funding allocation and ensuring systems improvement for future proofing with a Business and Risk plan to shore up our position over the next few years.

We have a remote area workforce prepared to deliver. However, there is still plenty of work to be done to ensure equitable recognition and support for remote practitioners so they can continue to contribute to our communities.

Our mate Christopher Cliffe has laid down a solid platform for the CRANApplus Board and staff to progress the aims and objectives of your membership and the Board continues to deliver on strategy and planning, to support our organisation's future accountability.

The success of our applications for Australian government funding for the next few years indicates our worth and reputation as a lead organisation in the remote health sector.

CRANApplus continues to deliver high quality Education and Training, Advocacy for the remote health sector and Psycho-social support services and in addition to this, has been a significant contributor to national based, professional and remote health forums. All of this has been supported by a dedicated team of management and staff that your membership can be very proud to be supporting.

Paul Stephenson
Interim President, CRANApplus

ceo



carole taylor

CEO

Carole Taylor has been CEO of CRANAPlus since March 2008, instigating numerous changes in areas

of training, support and Indigenous health. Her career path and personal life experiences have provided a wealth of knowledge and skills for the position.

Carole entered the political arena in the early 80s working latterly as the Senior Advisor/Chief of staff to the Minister for Aged, Family and Health Services. Following this period, appointments included CEO of the South Gippsland Division of General Practice, Executive Director of Save the Children, Victoria and Executive Director of the Optometrists Association of Victoria, positions where she achieved significant successes.

A two-week stint as a house parent at Worawa College, Victoria's only Aboriginal specific Boarding School, where her adopted son was a student, turned into a two-year experience, where Carole worked ultimately as Registrar and Submission Writer.

A growing love of the desert took Carole, her son and her partner to Alice Springs in 2006, there she worked with Tangentyere Council as the Coordinator of the Remote Area Night Patrol program and then as the Coordinator of the Return to Country, Amajere and Kurdudju projects with prisoner release, emergency relief and the Tangentyere ID card.

CRANAPlus is "an excellent organisation that gives back much more than its size would suggest", says Carole. It now has a far greater role in the preparation of remote health professionals and is vital to the 'closing the gap' strategy of the Government.

She believes that, in concert with a very aware and supportive Board of Directors and fabulous staff, CRANAPlus will continue to grow and to provide support to all those who work in this

cfo



most challenging of sectors.

steven dangaards

CFO

Steven was appointed Chief Finance Officer (CFO) of CRANAPlus in September 2011. As an accountant Steven boasts impressive practical and academic achievements and comes highly regarded within his profession and local community.

Before joining CRANAPlus Steven previously worked in the forensic and insolvency industry for seven years. During this time Steven attained his professional membership with the Institute of Public Accountants, became a Justice of the Peace and completed both his Postgraduate Degree in Professional Accounting and Masters Degree in Commerce.

Over the past five years Steven has also been enthusiastically involved in the not-for-profit industry by currently acting as treasurer for Youth Empowerment Towards Independence (YETI) which engages in local youth health projects. Having grown up, studied and worked in Far North Queensland, Steven is now based in the newly established Cairns office.

With Steven's youthful enthusiasm, strong leadership attributes and demonstrated experience we are confident he will continue to play an integral role in helping the organisation achieve its aims and objectives.



paul stephenson

Interim President Chair Fellowship Subcommittee

Paul's background and qualifications are in isolated practice nursing, and health care management.

He began his career in health as a registered nurse in the heart of Sydney, trained and worked across numerous speciality areas including burns, sexual health and community health, and moved to Cairns in 1990 to begin what is now two decades of experience with Queensland Health in the FNQ.

After six years as a clinical nurse consultant/program manager in sexual health and HIV with community health services, he went on to public health nursing on Palm Island and then as Director of nursing/service manager at Cooktown. Four years later, he took on the same role in the Mossman.

board of directors

He has served on the Board of Directors for Family Planning QLD along with multiple rural and remote health advisory committees.

His transition to management streams means the satisfaction of making a difference at strategic levels, with an emphasis on practical improvements in health care access and outcomes in rural and remote communities.

In 2002, he became District Manager of the Cape York Health Service District and remains proud of the progress made by the team in Cape York during the mid 2000s.

He accepted his first role in the Torres Strait as relieving District Manager of the Torres Strait and Northern Peninsula Area Health Service in 2003 and then returned to Cape York in 2005.

An appointment as CEO of the Mt Isa Health Services District followed in 2009 and currently he is District Chief Executive Officer of the Torres Strait and Northern Peninsula Area Health Service District.

Paul is the Executive Manager of PHC Apunipma Cape York Health Council.



john wright

Acting Vice President Chair Nurse Practitioner Subcommittee

John is a Remote Area Nurse working in the Northern

Territory. He started work as a farmer, shearer, and grain handler before attending university and commencing a career in nursing. After two years as a ward nurse and seven years as an emergency nurse, John moved to the bush in 2003. Since then he has attained a Masters Degree in Remote Health Practice, and a second Masters Degree in Remote Health Management.

John is the CRANAPlus representative on the NT Administrator's Medals in Primary Health Care panel.



dr nicholas williams

Secretary

Nick Williams was born in the mid-north of South Australia and trained at Adelaide

University, graduating in 1980. He has considerable public health experience and has worked in Indigenous health for over 21 years in Africa, northern Canada and central Australia. He was the Senior District Medical Officer in Alice Springs for seven years in the nineties, providing RFDS evacuations and community medical services to remote Aboriginal communities.

He was extensively involved in the initial development of the CARPA Standard treatment Manual and is on the current editorial committee for the Remote Primary Health Care manuals.

He worked in general practice/public health at the Parks Community Health Service for 12 years until 2011. He maintained his emergency medicine skills with weekly sessions at Queen Elizabeth Hospital Emergency Department throughout this time.

In 2009 he undertook a three month ICRC humanitarian mission to the North West Frontier Province of Pakistan and continues to be available for ICRC Emergency relief duties.

He has been a facilitator for the CRANAPlus Remote Emergency Care program for over 12 years.

He lectures in Aboriginal Health/Public Health at Adelaide University.

Nick is currently working with the Aboriginal Health Council of South Australia as a GP Supervisor, Aboriginal Health. This involves supporting the GP workforce in rural and remote Community Controlled Aboriginal Health Services in SA and supervising GP Registrars. He spends more than sixty per cent of his time working in rural general practice, and loves it.



christopher cliffe

Chair Students and Graduates Subcommittee

Christopher is the Executive Director of Nursing & Midwifery (Cape York Hospital & Health Service). Prior to this role he served as Manager for Primary Health Care for the Royal Flying Doctor Service Queensland.

An experienced clinical leader in the field of remote comprehensive Primary Health Care, Christopher has worked as a Remote Area Nurse in a variety of remote and rural communities in South Australia and the Northern Territory.

Christopher has provided leadership to a variety of health care organisations during his career, specifically as Nursing Director for Remote Health in the NT, Leigh Creek Hospital in SA, and Lorne and Colac Hospitals in Victoria.

Christopher was executive director of the National Centre for Quality Improvement in Indigenous Primary Health Care, helping to establish the centre as a sustainable not-for-profit entity for the health industry.

Christopher has extensive international experience, working for the Red Cross in war and disaster zones, with missions to the South of Sudan, Abkhazia (Georgia), Afghanistan, PNG, Sri Lanka, the Bali Bombing, the Boxing Day Tsunami and most recently the earthquake in Haiti.

Christopher is a Member of the National Lead Clinicians Group, Deputy Chairperson of CONNO (Coalition of National Nursing Organisations) and Member of the Prevention and Community Health Committee of the NHMRC. Christopher served as President of CRAN*Aplus* for six years.

In addition to undergraduate nursing qualifications, he holds a Masters Degree in Public Health and is a Justice of the Peace.



dr janie smith

Chair Conference Subcommittee

Dr Janie Smith is a rural woman who now lives on the beautiful northern

rivers of New South Wales. She is a highly experienced health educationalist, evaluator and project manager who has extensive experience in remote and rural workforce issues across all of the health disciplines. In 2004 Janie established her own small dynamic national organisation, RhED Consulting Pty Ltd, and has since led over 40 consultancies that involved high level project management in developing accredited undergraduate and postgraduate curricula, policy development, Indigenous health, program review, research and innovative workforce development.

Janie lived in the Northern Territory for 11 years in the 1980s, where she undertook her midwifery training, was in charge of the medical ward at the Royal Darwin Hospital and worked on Bathurst Island (Nguiu) in 1985. She wrote the Queensland Aboriginal and Torres Strait Islander Health Worker Program in Cairns and later worked as the Executive Officer for CRANA in 1993–1994.

In the past five years she has undertaken numerous consultancies that involved remote work – the development of an education plan for the Remote Vocational Training Scheme, the NT Review of Nursing and Midwifery Education and Training, NT Review of Medical Education and Training, the Organisational Review of CRANA, an Evaluation of the NT Chronic Disease Strategy, strategic and educational development for Royal Flying Doctor Service and The Public Health Research and Education Program in Chronic Disease education with Menzies School of Health Research.

Janie previously wrote the Bachelor of Pharmacy Program at James Cook University in 2000 and has recently completed a large research consultancy for the Pharmacy Guild of Australia. She has also worked for four years for the Royal Australian College of General Practitioners as their National Education Development Officer and multiple other roles across the public, private, community controlled and not for profit sectors. Janie is well published, is the author of Australia's rural and remote health: A social justice perspective now in its second edition, she is adjunct Associate Professor at James Cook University and Southern Cross University and sits on the Council of the National Rural Health Alliance as chair of its friends committee.



john ryan

Acting Treasurer

John is a lawyer living in Newcastle, focusing in recent years on medical negligence. As luck would

have it, he says, his wife is a nurse.

As well as owning and operating successful practices, John has experience in a wide range of legal areas. He was the first president of the professional standards panel of the Newcastle Anglican Diocese; and is a past member of the Community Aid Program through Belmont Local Court.

He has been a tutor at Newcastle university; a supervisor at the Newcastle Legal Centre; and a lawyer representing patients at Mental Health tribunals.

John has worked with rural, remote and Indigenous clients and was drawn to CRAN*Aplus*, with its vision and energy, as a way to contribute to improved outcomes.



breanna bailey

Chair IT and Social Media Subcommittee

Breanna joined the Board of Directors of CRAN*Aplus* in December 2011. Breanna

was elected by her fellow directors to bring accounting expertise to the Board of CRAN*Aplus*. She grew up in Far North Queensland and graduated from James Cook University with a Bachelor of Business and Information Technology.

Breanna spent four years in the Audit Division of KPMG Chartered Accountants, providing audit and other professional services to clients in Cairns and remote areas of far north Queensland.

Breanna is currently employed as an Upstream Accountant for InterOil Corporation. InterOil Corporation is an integrated oil and gas company listed on the New York Stock Exchange with operations based in Papua New Guinea.

Breanna is currently studying a Graduate Diploma of Chartered Accounting to obtain professional accreditation with the Institute of Chartered Accountants.



jo appoo

Chair Indigenous Subcommittee

Jo is a highly regarded and very experienced Aboriginal Health Worker. Jo currently

works as a locum in a variety of remote community clinics.

Jo, a Bunjalung woman, was born in Murwillumbah NSW. She was employed in a number of fields but it was when she went to work in Aged Care in Docker River that, in her words, “an old fella told me I’d be a good Aboriginal Health Worker” that she decided to give that a go. Completing Certificate 3 in Aboriginal Health Work she worked at Alice Springs Hospital and later on Tiwi Island. Here she set up and managed their first aged-care program and over five years, built it into a successful and sustainable service. In conjunction with the Tiwi Health Board, Jo assisted in the development of alternative care options for the elderly and culturally appropriate models for the residents of four communities on the Island and introduced a meals on wheels program.

Later Jo was appointed Clinic Manager, Central Australian Aboriginal Congress, the largest Medical Health Clinic in Central Australia. Jo’s role was to oversee changes in intervention outcomes, patient flow and client complaints.

Jo is the first Aboriginal appointee to the Board of Directors of CRAN*Aplus*.



kathryn zeitz

Chair Research Subcommittee

Kathryn first became associated with the Council of Remote Area Nurses in 1998 when she

developed the Remote Emergency Care Program and piloted the first four programs – and ever since then, she has been a member of CRAN*Aplus*. Again, in 2002, she had the opportunity to review the Remote Emergency Care program.

She has seen CRAN*Aplus* grow over the past 10 years or so and the significant changes to the organisation this has required.

She also recognises that the organisation benefits from the support of a strong board, which she considers comes from a balance of frontline clinical expertise supported by expertise in specialist areas.

She has worked in a number of areas since graduating as a Registered Nurse from Sturt College of Advanced Education in 1985. Her early career was at Flinders Medical Centre, specialising in the emergency department. Since that time, she has worked in rural primary care and at the Royal Adelaide Hospital.

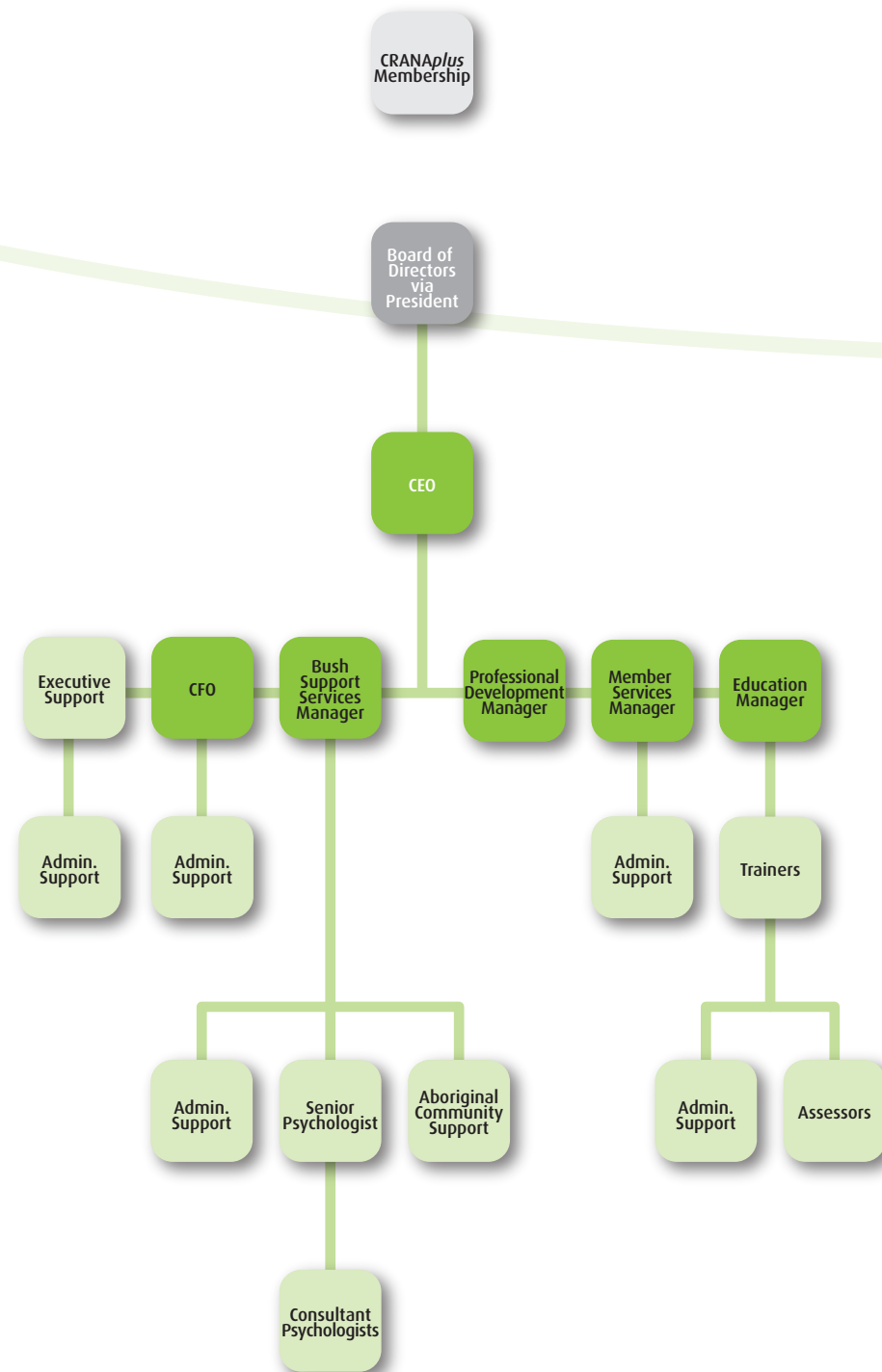
Her current role with the Central Adelaide Local Health Network is in change management and she has a strong background in research, completing her PhD at the University of Adelaide Clinical Nursing School.

She has over 30 years’ experience as a volunteer with St John Ambulance Australia, providing frontline health care provision in the mass gathering setting and national leadership positions.

Her board experience has included being a member of the board for Variety, the Children’s Charity in SA, and a member of the South Australian Government’s Volunteer Minister’s Advisory Panel.

She would love the opportunity to support the members of CRAN*Aplus* and the organisation’s ongoing work as a member of the Board through her expertise in governance, strategy and planning.

our organisation at a glance



CRANApplus, which celebrated its 30th anniversary in 2012, has been steadily expanding its operation over the last few years. It is truly a national organisation, working on national issues, and performing on the national stage: promoting, supporting and advocating for all remote health professionals living and working in the remote health sector throughout Australia.

alice springs

CRANApplus head office in Alice Springs is home of the organisation's Corporate Services Centre (CSC), providing the planning, support and grant income generation that the organisation needs to survive. From this base, the CEO, who is the public face and spokesperson of the organisation, provides non-clinical representation and advocacy and is responsible for federal grant applications and acquittals.

The CSC provides vital support to the Board of Directors and the subcommittees of the Board to ensure the highest level of governance practices are maintained.

It also provides support to the general public, those working in the remote health sector, and potential workers who are considering this move. Head office maintains an extensive database of the sector and services a small retail outlet for CRANApplus merchandise and professional manuals vital for use in remote health.

As well as being responsible for website development, maintenance and IT support, the CSC also provides HR functions for the staff of all offices: including insurance policy maintenance, staff benefits, taxation requirements and the maintenance of the requirements of all statutory bodies.

The Alice Springs office is also home to one of the Remote Emergency Course Coordinators and the Aboriginal Community Support Program.



adelaide

The CRANApplus Adelaide office is the operational hub of the organisation, where the Member Services Manager and staff work to reduce the isolation of the remote health workforce through the production of a quarterly magazine, a weekly e-newsletter, and access to journals and web-based materials.

This office is also responsible for the challenging role of providing logistical and administrative support to ensure the overall management and delivery for the nationally acclaimed CRANApplus Education Programs.

The extraordinary growth in these Programs saw the relocation of the Adelaide office to larger premises with warehousing facilities in early 2013.

The Professional Development Manager, Special Projects Officer and Materinty Emergency Care Coordinator are also based in these premises.

This office also has CSC functions, including building and retention of membership, scholarship administration, organisation of the annual National Conference and additional income generation.

cairns

The newest office to be opened in the CRANApplus organisation is in Cairns.

The office, housing the Bush Support Services Program Manager and staff, is responsible for the coordination of the consultant psychologists who staff the BSS hotline and deliver additional workshops and services to remote Australians and their families.

The Chief Finance Officer and associated finance administrative support staff, are also based in the Cairns office.



Top: Alice Springs Office.
Middle: Adelaide Office.
Bottom: Cairns Office

our strategic framework 2012–2017

our purpose

CRAN*Aplus* – improving remote health

our values

- Integrity
- Social Justice
- Respect
- Inclusiveness
- Excellence in all we do

our vision

CRAN*Aplus* will be the pre-eminent expert making a difference in remote health

our aspirations

- Reduce health disparity
- Bolster our impact, influence and partnerships
- Strengthen our ability to realise our purpose
- Setting remote health best practice benchmarks
- Build remote health workforce sense of value

our key strategies in 2012–2013

- Develop a recruitment and retention strategy creating a larger and more diverse membership
- Create an organisational revenue growth and diversification strategy
- Build a product development and sales strategy relevant to our industry
- Create a research knowledge warehouse using a clearing house approach
- Explore the opportunities for further international activities
- Expand the company model
- Develop a marketing/engagement strategy that utilises social media

who we are

CRAN*Aplus* is a member-based organisation.

Our core business is to educate, support and advocate for health professionals working in the remote sector of Australia. We are the only health organisation that has the remote sector as its sole focus.

What that really means is that it is incumbent on us to help ensure that those who choose to work in this most difficult of sectors are as prepared as they can be for the challenges they will face.

We provide vital training opportunities to potential and existing staff to help them work in settings that have very little access to the wide variety of professional staff and resources that other nurses, allied health professionals and doctors take for granted.

A likely scenario is that a remote Indigenous Community will be staffed by a team of two or three nurses and an Aboriginal Health Worker. This small team will have the sole care of the complete health needs of that community.

Working in these types of situations is an enormous responsibility and the people who do this work deserve the best training opportunities possible and a great deal of support if they are to practise safely and remain able to continue their work.

The education and support provided by CRAN*Aplus* is unique. It is totally focused on remote staffing needs and provides the kind of support that is vital for staff satisfaction and retention.

Health professionals who undertake such work deserve our thanks.

Those who work in remote Indigenous communities, in mining camps, on off shore islands and oil rigs and the few lucky ones who work on island holiday resorts are the backbone of remote health. It is for these professionals that we provide the service we have developed over the years. It is for the health of those who rely on these people that we continue to meet the challenge.



education report

education

Education and training continues to be one of the three main focuses for CRANApplus. In 2013 course numbers increased to 90 for the calendar year.

The CRANApplus focus of improving health outcomes through the delivery of safe, quality health care has been enhanced by the successful further development of new courses in 2012–2013. This past year has seen the piloting and rollout of the following face to face courses:

1. Advanced Paediatric Life Support for remote health professionals
2. Paediatric Life Support for remote health professionals
3. Basic Life Support for remote health professionals
4. Triage for remote health professionals

All of these courses require completion of online modules prior to the face to face course.

The Ambulance Preparation for Trauma course that was piloted in 2012 has now been 'picked up' by West Australian Country Health Service (WACHS) Kimberley and is running in 2 locations 2–3 times per year.

All of the new courses above will be included in the 2014 program schedule.

All disciplines of health are welcome to register for the appropriate course.

Our courses are endorsed by several organisations:

CRANApplus course	Endorsed or accredited by
REC (Remote Emergency Care)	Endorsed by ACN, accredited by ACRRM
MEC (Maternity Emergency Care)	Endorsed by ACN, and Midplus, accredited by ACRRM and RACGP
AREC (Advanced Remote Emergency Care)	Endorsed by ACN, accredited by ACRRM and RACGP
MIDUS (Midwifery Up Skilling)	Endorsed by ACN and Midplus, accredited by ACRRM
ALS (Advanced Life Support)	Endorsed by ACN, accredited by ACRRM and RACGP
PLS (Paediatric Life Support)	Endorsed by ACN, accredited by RACGP

The education sector continues to cater for all levels of practitioners working in the remote setting including:

- Remote Area Nurses (RAN)
- Remote Area Midwives (RAM)
- Flight Nurses
- Registered Nurses working in the rural setting (RN)
- Enrolled Nurses working in the rural setting (EN)
- Third year nursing students (preparation for practice in remote)
- Aboriginal and Torres Strait Islander Health Workers (ATSIHW)
- Ambulance officers
- Paramedics – including industrial medics and those who work in the mining environment
- Offshore medical/nursing/paramedical staff
- Isolated practice Medical Officers (GP)
- Allied health professionals such as dentists and physiotherapists
- Remote hospital orderlies (Kimberley ambulance preparation for trauma course)

The development of new courses has proved successful with an increase in demand right across most courses in 2012. A&TSHW courses being the course that has struggled beyond the NT in the last year with several reasons for this being identified.

remote emergency care (REC)

REC was developed in consultation with the Australian College of Rural and Remote Medicine and the College of Emergency Medicine with input from several other emergency specialties and RANs. The course was designed to enable health practitioners to develop knowledge and skills essential to provide safe emergency care and treatment in emergency situations encountered in the remote setting.

This course continues to meet the needs of the Remote Area Health Professional with demand continuing to increase. Despite an increase in the number of courses, all courses for the year have been full and many participants have been waitlisted in the last 12 months (despite additional unfunded courses being added again mid year).



A strong commitment by the education team to provide up-to-date emergency skills and knowledge to allow teams to work together for the best possible patient outcome continues. The REC course continues to attract new facilitators and more importantly retain almost, if not all of them long-term.

The NT DoH requirement for all RANs to undertake the course every 2 years has impacted nationally on other agencies who send their staff to work in the NT. In conjunction with this demand the REC course is a very good course for the generalist wishing to work in the remote sector, it has strong fundamental principles for the management of the critically ill or injured patients and is taught in a supportive environment which identifies that emergency principles are not necessarily well understood. This ensures that all courses are full and despite additional courses being added we struggle to keep up with the demand for this course.

The NT Department of Health contracted CRANApplus to a further four REC courses in the NT as part of their Remote Area Nursing orientation program for 2012/13. These courses were held in Alice Springs and Darwin. The courses in Alice Springs are also attended by the students from the Remote Health Practice post graduate courses. There have also been 2 additional private REC courses in Qld and WA.

Clockwise from top left:
Facilitator Ken Iles demonstrates cannulation.
Facilitator Rachel Walker with students of the ATSI Health Worker course.
From left to right: Julia Stewart, Libby Bowell, Kate Zanotti (RFDS educator), Elly Fontes and Dr Annabel Somerville (Cairns).
ATSI Health Worker course skill station.
Participants of the Student MEC course Adelaide.

Testimonials

"I found the course extremely interesting and informative. The flow went at the right pace, was easy to understand and follow. Great chance to network – find out of more experienced nurses regarding placings/ towns/communities and working remote. Will recommend course to fellow staff members."
(Cooktown, REC367)

"I am preparing to go to work as a RAN in the near future and this course was highly relevant, fun and made me a more confident nurse. I can't wait to be a RAN!!!"
(Kununurra, REC362)

"The REC course teaches things that cannot be obtained with out years of "on the floor" experience. Everything is invaluable. Loved it!"
(Kununurra, REC362)

"Thanks for bringing REC to the lands! It was awesome that as a team we could benefit from this education. Fantastic resources and tutors, lively interesting and knowledgeable. Really good to see what we need to get sorted in our communities to be able to provide appropriate/ efficient emergency care – vac mat, IO drill/BIG."
(Warakuna, REC348)

"I would have loved to have done this before or just after starting remote. I would recommend anyone who wanted to work remote do this first. I feel more confident."
(Warakuna, REC348)

maternity emergency care (MEC)

MEC was developed in consultation with the Australian College of Midwives with input from several specialist Midwives and rural and Remote Nurses (RANs). The course was designed to enable non-midwives to deliver the basic maternity emergency care in a remote setting when required.

Opposite, clockwise from top:
The MEC course in Warakurna WA: the most remote location reached by road in the history of CRANApplus courses.
ATSIHW course skill station.
REC Coordinator Sue Orsmond (3rd from left) with the ATSIHW course participants.
Facilitator Lenny Cooper demonstrates "back blows".



The course continues to fill a specific need with most courses full this year. Whilst there is a shortage nationally of midwives, the MEC course will continue to deliver up to date skills and emergency maternity knowledge to the non-midwives working in the remote setting. The NT Department of Health again contracted CRANApplus to provide MEC courses as part of the orientation process in 2012/13. These courses were held in Alice Springs and Darwin. The courses in Alice Springs are also attended by the students from the Remote Health Practice post graduate courses. There have also been 3 private MEC courses delivered in Victoria, Qld and WA.

Testimonials

This is a recent example of the regular stories we get after attending a MEC course:

"Thank you for the Mec course at Mackay. The knowledge acquired was put to good use last night. Your description of "if they are doubled over unable to talk they are in labour" was my first thought."

A busy night turned pear shape. No local doctor available, our on call nurse on her way to the airport with a snake bite victim, leaving myself and another RN (her second shift here).

Presentation: 32 weeks, pains for 13 hours, back ache for a further 12 hours.

Now strong contractions 3 mins apart and wanting to push. Waters not broken.

I had time to notify Thursday Island on call, then time only for mum.

Presentation of membranes which ruptured then a leg and bottom. Mum was on a bed at this time and declined to move. A small baby was born 2 pushes later.

Baby responded to bag and mask room air with spontaneous breathing after approx 1 minute then skin to skin on mum.

Medical retrieval + midwife arrive about 1 hour after the birth. Baby stable with all appropriate treatment given. The on call nurse was surprised on her return to the hospital to find a mum + baby and a very calm atmosphere.

This result is a testament to your training."
(Mackay, MEC363)

"Fantastic!! Brilliant teachers with excellent presentation styles. So understanding of the circumstances of rural and remote nurses. Thank you."
(Newman, MEC340)



The AREC, MIDUS and Aboriginal and Torres Strait Islander Health Worker/Practitioner (ATSIHW) specific REC and MEC courses were developed to meet the needs of all practitioners working in the remote setting.

advanced REC

This was developed and piloted to specifically meet the growing needs of the advanced practitioner in the remote setting. Advanced health professionals needed to have the next level of course available to allow development of critical thinking and team leadership during an emergency. The course specifically targets these skills in a multidisciplinary skill and scenario based environment.

Feedback has continued to be extremely positive about the inclusion of the on line advanced life support (ALS) in this course. Participants for this course include RANs, Registered Nurses, flight nurses, isolated practice GPs, mining paramedics, offshore medical and nursing personnel.

This course has had a big increase in demand over the last 12 months with 2 requests for private courses in WA.

Testimonials

"Really enjoyed this course, even though nerve racking at times. Will look forward to attending other courses in the future found this course very good for making me think about my patient and to be more organised with my assessment of them, something I know I often forget! I really appreciate the chance to practice skills and absolutely gain new ones."
(Broken Hill, AREC325)

"I found the course really interesting. It is also very challenging for me as it has thrown me out of my comfort zone. Not working in a remote setting with paediatric experience is quite a struggle for me but I take it as a challenge to broaden my knowledge and skills. Thank you."
(Jandakott, AREC332)

"Would encourage anyone thinking of working remote/flight nursing to do course. I wish I'd done it 5 years ago!"
(Jandakott, AREC332)

MIDUS

This course was developed and piloted to specifically meet the growing needs of midwives working in the remote setting. Feedback around the MEC course was that midwives needed and wanted the same style of course but with information specific to midwife skills.

Feedback suggests that this course is meeting the needs of the isolated practice midwife who often works as a generalist nurse first and midwife second. The course is endorsed by ACN and Midplus and accredited by ACRRM. There has been one private courses this year in the NT.

The MIDUS course was externally evaluated this year to meet the funding requirements and feedback was extremely positive. There was a recommendation that the course should be more widely marketed as it was not widely known about. We are looking at strategies for 2014 to improve this.



Testimonials

"Excellent 2 ½ days, met all my needs without going into a hospital. Great content & lectures many congrat's. Great senses of humour and made us feel a team. Loved the timely manner and help from the facilitators. Great participants. Thankyou so much for the privilege."
(Mt Isa, MIDUS361)

"It was fantastic having smaller groups for the skill sessions. It has given me new confidence to go back to the workforce and deal with ongoing situations. A 'must' for any midwife working in rural and remote. The skill sessions were fantastic. How fantastic to be amongst a group of midwives again - renews my passion!"

ATSIHW REC and MEC

The ATSIHW REC and MEC courses are essentially the same course but have an extra half day to maximise the learning environment. Where possible further skill stations and case scenarios have been included to make it as beneficial as possible to participants. The program also facilitates a better learning environment by moving frequently between lectures and skill stations.

There is a strong commitment from the education team to provide facilitators who have extensive remote experience. The addition of ATSI facilitators has had mixed success due to difficulties for them to travel away from home. However, it remains a priority to continue to attract more facilitators and provide the necessary support for it to succeed.

Courses have received extremely positive feedback around relevance, comfort of learning environment and level of information. Both REC and MEC courses have been run in both the NT, Qld and WA during this 12 month period.

CRANApus remains committed to delivering the courses nationally and being pivotal in ATSIHW education and is continuing to be represented in appropriate forums.

The feedback from these courses are extremely positive with a common theme being that *"you teach it the right way."* The difficulties however, continue with filling the courses and appear to relate to inability to provide relief or lack of support and communication to ATSIHWs within their existing workplace. The education team is committed to continue to develop and market accordingly to try and provide the courses in the most appropriate locations and at the most appropriate time. An additional coordinator has been added to the team in August which should allow more time to increase the engagement of pivotal stakeholders.

Testimonials

"Excellent course which is very relevant to my work as a Health worker and also in my home life."

"Enjoyed the course and it was great that it was so relaxed."

"The learning was really good- got to learn things and do things I didn't know I could do. I would like for them to return and do another session, please come back."

"Facilitators extremely easy to work with, easy to understand and very understanding of issues indigenous women face when pregnant and birthing."

"Excellent with facilitators showing us the models and what to expect when out in the communities. A great course that I would recommend to all AHW's."

"Thoroughly enjoyed the course, learnt heaps and believe I will feel more comfortable talking to antenatal women and girls in the community using these extra skills and knowledge. Having this knowledge will assist me in feeling confident if I need to help a pregnant woman."

eRemote

The online program is a result of a commitment from CRANApus to fill the void of readily available learning material and information for remote practitioners in between attending face to face learning. It is based on feedback from participants and organisations and perception of experienced coordinators and facilitators.

The eRemote program now has a total of 997 end users from as far as Canada, Christmas/Cocos Keeling Islands, New Zealand and Indonesia utilising various modules for their professional development and organisational requirements.

Clinical support continues to be utilised on a daily bases and is a success for this program. There has been 1,596 unique page views for / education/eremote/ on the CRANApus website.

Numbers continue to grow with end users utilising Skype and external assessors to achieve competency for various modules. The Kimberly Remote Nurse/Public Health have utilised Skype to assess their remote staff for ALS and this has worked well for the organisation and the staff. In addition to ALS, Skype has been successfully used for BLS, IV cannulation, suturing and plastering.

The Advanced Paediatric Life Support (APLS) course was trialled in April with the RFDS Jandakot base as a private course. Students were from various RFDS bases around the state and Silverchain remote clinics. This was followed by 2 one day Paediatric Life Support (PLS) courses with Medicare Local in Morawa and Meekatharra for local hospital and practice staff. The APLS online modules comprises of 7 modules with 19 chapters of content and the PLS comprises of 4 modules with 7 chapters of content.

Overall, the outcomes were extremely positive for the courses and meet the needs of the requesting agency.

Opposite page, from top:
From left to right: Education Trainers Wendy Bowyer, Julia Stewart, Sue Orsmond, Michelle Bodington, Libby Bowell, Glenda Gleeson and Annie MacNamara.
ATSIHP facilitators join the Education Team.
NRHSN Student Nurses at the MEC course in Canberra.

Mentoring Program

The Rural and Remote Mentoring program is up and running with 3 mentoring relationships established and working well with ongoing maintenance and regular updates via e-mail including website links and resources to continue to support the program.

Telehealth Online Learning Program

CRANAp^{plus} was part of the Telehealth Consortium Steering Committee – Standards Advisory Committee and Education and Training. eRemote was involved in the development of the Telehealth Online Learning Program which is now available free of charge through the eRemote platform.

Revision of the eRemote platform and its functionality is ongoing to ensure a smooth end user process. With the rollout of the CRM and website development this year the eRemote processes have been able to be tweaked to streamline registration.

All modules are reviewed annually to ensure best practice and current resources are linked and available. Assessments are also updated as part of this process.



New Developments

The reviews will continue through each year with the ongoing development of new modules such as Venipuncture and Mining Industry modules.

Testimonials

“I loved being able to do the theory online in my own time and then doing the practical via Skype. It was far less time consuming and also more enjoyable this way.”

“APLS -Fantastic program! Really loved the online learning modules to consolidate the theory and pass the theory prior to the course! Many thanks.”

“PLS – Well organised and very relevant. Good facilitation – good demos and knowledge. Good mix of practical and theoretical experience. Enjoyable and valuable experience.”

“I was surprised by the high quality of the computer based modules, the additional resources identified were also very useful. The modules were a great mix of refreshing current knowledge, challenging the brain to remember forgotten tidbits and learning new ways to look at/ remember information essential to advanced practice.”

“Thank you for providing such a full and informative program. I found it very user friendly and the information was delivered in an easy to understand way. Having downloaded all the course module information I know it will continue to be helpful for future reference, too.”

“ALS – I was really impressed with the content and information included and I know this extra knowledge gained will give me more confidence in Resus situations ... Especially when working in country and remote areas where there is less support.”

“Absolutely! Everyone working in rural and remote should have to do it.”



education course numbers

Course registrations are outlined below. Numbers have steadily risen again with an overall 12.75% growth in the last 12 months. It is pleasing to see a 80% increase in Medical Officers registrations, 80% increase in paramedics and 58% in ATSIHWs. The successful application to seek ACCRRM and RACGP accreditation has aided the increase in medical officers numbers.

With the successful piloting of the unfunded ALS course we have rolled out more courses this year with a sharp increase in registrations and demand for many more courses this financial year. The APLS, PLS and BLS courses have now been successfully piloted and will be scheduled into the course program this year.

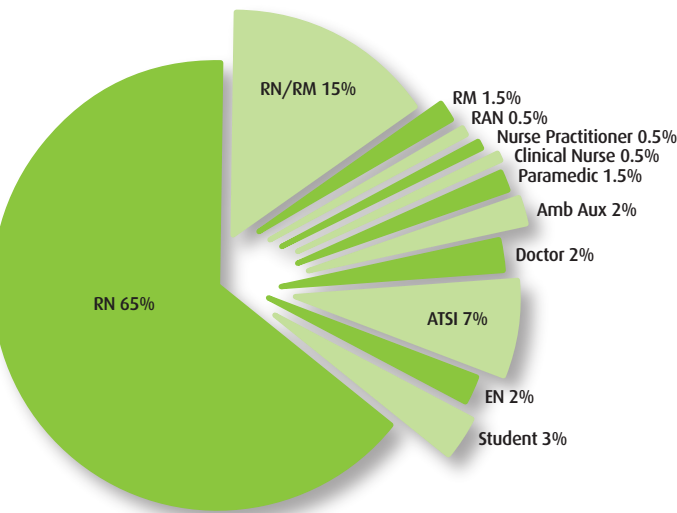
Courses (Registrations)

Course	2010-11	2011-12	2012-13
REC	476	495	532
MEC	167	361	323
AREC	43	62	132
MIDUS	93	98	137
AHW	83	83	74
ALS	0	31	101
Ambo	0	30	43
Student REC	0	21	24
Student MEC	0	0	20
MHW	0	27	0

Locations (where students identify place of work)

Location	2010-11	2011-12	2012-13
NT	257	291	431
WA	140	291	284
QLD	151	226	347
NSW	59	136	68
VIC	91	68	78
TAS	42	75	32
SA	94	83	38
ACT	20	36	70
International	8	2	13

Breakdown of disciplines 2012-2013



Funded/Private

June 2012	
Funded Courses	33
Private Courses	23
June 2013	
Funded Courses	38
Private Courses	24

June 2013: Please note 5 additional funded courses from the funding period were added due to cancelled courses for varying reasons during the 3-year funding cycle.

CRH short courses

remote health practice

CRANAP_{plus} is a major stakeholder in the Remote Health Practice Program run in conjunction with the Centre for Remote Health and a joint venture between Flinders University and Charles Darwin University.

Through this program, we support the continuing education efforts of remote health practitioners in an effort to build a highly sustainable workforce in remote and isolated Australia.

The Graduate Certificate and Graduate Diploma in Remote Health Practice have three major areas of study – the remote context, primary health care and advanced practice.

The Graduate Certificate and Graduate Diploma of Remote Health Practice articulates with the Master of Remote and Indigenous Health, 18 months full time or equivalent study part time, and the Master of Remote Health Practice (Nurse Practitioner), 2 years full study or equivalent part time.

The Master of Remote and Indigenous Health is designed for health professionals experienced in working within the remote and Indigenous context to advance their knowledge of the discipline of Remote and Indigenous Health. Core topics provide theoretical knowledge for understanding social determinants of health and illness, implementing Primary Health Care and practicing at an advanced clinical level. It includes public health topics and the Masters is equivalent to a Public Health Masters.

short courses 2012–2013 financial year

Chronic Disease in Remote Practice

Alice Springs	September 2012
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Fracture Assessment and Management

Alice Springs	August 2012
Alice Springs	September 2012
Alice Springs	May 2013
Darwin	June 2013

Framing Indigenous Health

Alice Springs	August 2012
Alice Springs	September 2012
Alice Springs	March 2013
Darwin	June 2013

Pharmacotherapeutics for RANS

Alice Springs	August 2012
Umuwa	September 2012
Mt Isa	October 2012
Longreach	October 2012
Broome	November 2012
Fitzroy Crossing	November 2012
Bamaga	February 2013
Warakuna	February 2013
Alice Springs	March 2013
Alice Springs	March 2013
Darwin	April 2013
Darwin	May 2013
Mt Isa	May 2013
Darwin	June 2013

PHC: Making a difference

Cairns	October 2012
Broome	November 2012
Christmas Island	November 2012
Cocos Islands	November 2012

Recognising and Responding to Dementia in Indigenous Communities

Alice Springs	March 2012
Port Augusta	October 2012

Remote Advanced Nursing and Family Practice

Alice Springs	November 2012
Alice Springs	April 2013

Remote Advanced Nursing Practice

Alice Springs	August 2012
Alice Springs	March 2013
Darwin	June 2013

our national conference



CRANAP_{plus} has held an annual conference since the organisations inception in 1983. In 2012 we celebrated our 'pearl anniversary' at our 30th National Conference appropriately titled '*remote pearls of wisdom*'.

This event proved to be our largest to date with Delegates representative of all areas of remote health delivery, student bodies and educational institutions. Also in attendance were representatives from state and federal governments, academics, managers and policy makers.

The Hon Michael Kirby gave the opening Keynote Address. Many of our participants are located in isolated areas and therefore have limited access to ongoing professional development. They often rely on our annual conference to keep abreast of the latest information and technology available to their field.

During the three day conference, participants are informed of the latest developments in remote health care policy, drug therapies, technologies and therapeutic treatments for clients in their care.



Photos: Rosey Boehm.

Clockwise from top left:
Remote Area Nurses of Australia Inaugural Conference
Alice Springs, 27–28 October 1983.
Welcome to Country by Seith Fourmile.
Traditional dancers from Cairns entertained Conference delegates.
The Hon Michael Kirby gave the opening Keynote Address.



Photos: Rosey Boehm.

Four CRANaplus members having achieved academic success, were congratulated at the opening ceremony on 24 October by Sue Lenthall, Head of Remote Health Education Programmes at the Centre for Remote Health in Alice Springs.

Kylie McCullough graduated with First Class Honours on completing a Bachelor of Science (Nursing). Her research project was to identify hazards and possible strategies to reduce the risk of violence towards RANs.

Lilian Duthie achieved a Graduate Certificate in Remote Health Practice.

Ian Redwood and Sue Ellen Kovack, who spent seven years in Maningrida in the Northern Territory and who now live in Cairns, have completed their Graduate Certificates in Aeromedical Retrieval.

"We spent so many years preparing patients to be flown out of Maningrida, we felt it was important to find out more about what happens once they leave our care," Ian said

Opposite, clockwise from top left:
 Doune Heppner presenting a Cassowary Headdress to Michael Kirby.
 Carole Taylor, CEO of CRANaplus, the Hon Michael Kirby and
 CRANaplus President Christopher Cliffe, in the exhibitor hall.
 Ms Lee Thomas, Federal Secretary of the
 Australian Nursing Federation (ANF).
 Conference delegates.
 Michael Kirby dons a warrior headdress, a gift made especially
 for him by the people of Sabai Island in the Torres Strait.
 Above: Four CRANaplus graduate members with
 Dr Chris Davis, MP, Assistant Minister for Health and Member
 for Stafford, who officially opened the Conference.

our awards

the aurora award

The prestigious Aurora Award was initiated by CRANAp^{plus} to recognise individuals who have made an outstanding contribution to remote health. These individuals stand out, not because they are an extrovert or seek recognition, but often the opposite, in that they may be the silent achiever who provides inspiration, leadership and energy to make things happen. Nominated by a mentor, colleague or co-worker as a 'A Shining Light' in the delivery of remote health care and for their contributions to remote health.



the CRANAp^{plus} awards

The CRANAp^{plus} Awards recognise remote health professionals who have made a significant contribution improving health outcomes or have made a special contribution to their profession in general. There are seven categories for these awards. Any individual, group or community may nominate a person for an award.



Above, from top left:
Rebecca Vele receiving the Excellence in Remote Health Practice Award from Lesley Brown NT Dept of Health.
Anna Burnley accepts the Collaborative Team Award on behalf of Frontier Services Savannah Regional Health Service.
Sarah Marsh winner of the Novice Award with colleagues at Angurugu Health Centre.
Lesley Pearson of Silverchain winner of the CRANAp^{plus} Remote Health Management Award.
Opposite: Joint Aurora Award winners:
Karen Schnitzlerling (left) and Sue Kildea (right).



Photos: Rosey Boehm.

student engagement

supporting the remote health professionals of the future

In addition to the professional connections, access to resources and support, undergraduate students gain from CRANAp^{plus} membership, there is the possibility of being awarded an Undergraduate Remote Placement Scholarship.

The scholarships offer financial assistance to support students who are interested in working remotely and gives them the opportunity to experience a remote health setting first hand. This demonstrates the commitment of CRANAp^{plus} to the future remote health workforce.

Through the generosity of a number of Individual CRANAp^{plus} Members and Stakeholders 12 Scholarships will be offered in 2013.

student and new graduate subcommittee of board of directors

At the AGM 2011 some of our students and new graduate members raised the issue of support for this group and suggested that they would like to further their involvement and have a stronger voice in the organisation.

As a result of that request, the Board of CRANAp^{plus} elected to form a subcommittee of the Board of Directors and called for nominations and expressions of interest from students, new graduates and the wider membership of the organisation.

The committee was formed and consists of two representatives of the NRHSN including a representative from allied health, two recent nurse graduates and an organisational member from CRANAp^{plus} as a conduit to the Board.

The initial tasks before the sub committee were to develop the terms of reference, establish meeting times and identify the level of communication needed between meetings.

The student and new graduate group is now an enthusiastic and vocal group which takes its role and representation very seriously.

We received over 40 applications for the 2012 Scholarships and the successful recipients were:

Recipient	University	Discipline	Placement Location
Kim Izod	Charles Darwin University	Nursing	Nhulunbuy, NT
Kylie Lopes-Floro	University of Queensland – St Lucia	Medicine	Thursday Island, QLD
Ben Crough	University of New England	Pharmacy	Kimberley Pharmacy Services, WA
Catherine Ryan	Australian Catholic University – Melbourne	Nursing	Mt Isa Hospital, QLD
Courtney Challinor	University of Sydney	Pharmacy	Broken Hill/ Wilcannia
Daniel Pekin-Stores	University of Canberra	Nursing	RFDS Cairns Base, QLD

They have some new and refreshing ideas and have raised a number of issues, including remote clinical placements, scholarships and the mentoring needs of students and new graduates. It is clear that this group understands what it needs and can identify that which would make working in the remote and rural sectors possible.

It is vital that we encourage and mentor these people into the organisation as we all have a lot to learn from each other. More importantly these people are the leaders of the future, and it is their views that will shape remote and rural health in years to come.

student REC and MEC

CRANAp^{plus} has responded positively to strong lobbying from the National Rural Health Student Network (NRHSN) for members to have the chance to benefit from our educational courses.

The outcome is that two courses a year are being provided for students (a Remote Emergency Care course and a Maternity Emergency Care course).

The criteria is that the students must be in their third and final year of study and be a current member of a NRHSN Club. There are currently 29 university clubs in the network. The selection process and organisation of the courses is the responsibility of the local sponsoring Rural Health Club.

Testimonials

“MEC was great! I learnt so much and it has inspired me to study midwifery.”

“MEC was so inspiring and motivated me to work rural and remote.”

“MEC has given us the opportunity to up skill and feel more confident in potentially scary situations.”

“Thanks to the facilitators for a fun relaxed learning environment.”

“The skills learnt in MEC has complimented my RN studies and gave me a better understanding of pregnancy and birth.”

“This was such a great opportunity! Thanks so much for inspiring me to work remote and for giving me the confidence to be able to do so!”

“Wow! Now I want to help deliver a baby!”

“MEC was so much fun! The facilitators made everything easier to understand and I learnt so many valuable skills.”

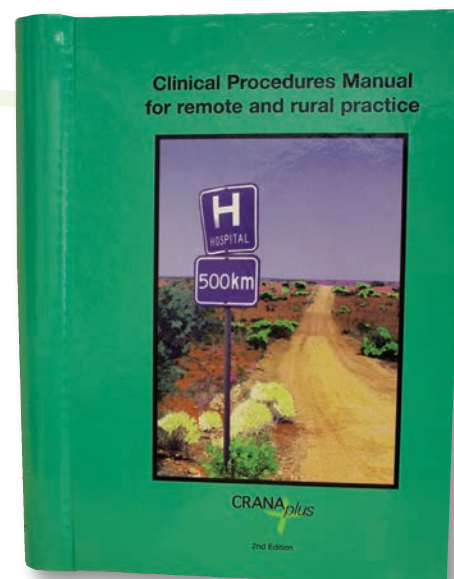


Clockwise from top left:
Christopher Cliffe and Geri Malone with student delegates.
Teena Downton and Cat Ryan.
Student MEC participants during a skills station.
Students and facilitators relax after the MEC course.
NRHSN Nursing Student Ely Taylor.
NRHSN Pharmacy Student Ben Crough.

our publications

the clinical procedures manual

The aim of CRANApplus is to promote the development and delivery of safe, high quality health care to remote areas of Australia. CRANApplus has initiated, and continues to develop practical programs and resources for remote practitioners.



The second edition of the *Clinical Procedures Manual for remote and rural practice* reflects the collaboration between Australian and New Zealand health professionals facilitated by CRANApplus and the New Zealand Institute of Rural Health.

the CRANApplus magazine

The CRANApplus Magazine is a quarterly publication reflecting the broadened scope of the organisation. This compact glossy publication enjoys a circulation of 15,000 copies each edition and reaches those who are passionate about remote health in Australia. It is posted throughout Australia, her Territories and to International subscribers. As '*the voice of remote health*' this content rich publication reflects the three areas of CRANApplus core business; to educate, advocate and support the remote health sector. Members are actively encouraged to submit content and photos for inclusion in the Magazine.

Our print publication is supported by website resources with each issue online in perpetuity.

the friday update

The '*Friday Update*' is our weekly e-newsletter available to current and lapsed members and stakeholders. Designed to keep readers in touch with current events and educational opportunities, it has an informal style and invites readers to contribute information relevant to their colleagues and the remote health sector. Forwarded to over 5000 recipients 50 weeks of the year it is uniquely placed to reach Australia's remote health professionals. In combination with our website it is an effective method in bringing time sensitive information to the attention of our readership.



our voice



CRANApus is recognised as the voice of remote health. There is now a clear recognition, both within Government and in the wider sector, that the people who make up our organisation have an unparalleled level of knowledge and expertise in this area.

We are well acknowledged as the preferred provider of professional development courses in management of emergencies in the remote context and the key providers of psychological and professional advice to the remote workforce.

This recognition has made advocacy for the sector easier. Our representation is highly sought after for national and more local jurisdictional issues pertaining to remote health, from health reform to the broader health agenda. This representation includes; through Expert Advisory groups, working parties and to comment on policy and discussion papers.

We will continue to work towards an understanding of 'remote' and to consistently highlight the differences between rural and remote. There are certainly some overlaps between the two areas of work, but the challenges facing those living and working in the remote sector are unique; and so too must be the solutions.

Most policy decisions that benefit the rest of the health sector often either don't work in remote situations or, worse, have a negative impact. This has yet to be clearly understood, with each decision having to be unravelled and rethought for this area. It is a task that is ongoing, challenging and also rewarding.

Remote health has a small population, a huge geographic land mass and poorly resourced infrastructure. It is difficult to find cost effective health solutions when it is understood that everything else is expensive. We will push on in the belief that we can make a difference and we will continue to be heard – that is what advocacy is all about.

our representation on committees 2012–2013

CRANApus staff and members are actively involved in a wide range of professional bodies and our work in this area is crucial to developing and maintaining good networks and working relationships with a wide range of partners.

Julia Stewart (Online Education Coordinator)

- WA Country Health Forum
- Climate & Health Alliance, Executive Committee
- Telehealth Nursing & Midwifery Consortia Education Advisory Group

Libby Bowell (Education Manager)

- Royal College of Nursing Australia (RCNA) Disaster faculty
- Primary Reviewer (emergency/trauma) CARPA Manual
- NT Remote Health Emergency Equipment and Training Group

Carole Taylor (CEO)

- Executive of Australian Health Care Reform Alliance (AHCRA)
- Health Workforce Australia Expert Reference Group on Aboriginal Health Workers review
- Minister's Advisory Group on Rural & Remote
- Specialist Outreach Northern Territory (SONT) Advisory Committee
- Remote Primary Health Care Manuals Governance Committee
- Jack Thompson Foundation AD Committee
- Office of Rural Health Review
- NT Cancer Plan
- Palliative Care Panel
- Therapeutic Goods Administration (TGA) Review
- Remote Health Advisory Group

- National Council to Reduce Violence Against Women and Children
- Nursing & Allied Health Rural Locum Scheme (NAHRLS) Steering Committee
- Medicare Locals Reference Group
- Aboriginal & Torres Strait Islander Health Worker (ATSIHW) Project Combined Reference Group
- Working Safe in Rural and Remote Project Steering Committee
- RAHC Governance Committee

Geri Malone (CRANApus Professional Development Manager)

- Nursing and Allied Health Scholarship and Support Selection and Advisory Committee
- Aged Care Scholarship Advisory & Selection Committee
- Health Workforce Australia (HWA)
 - ERG Rural & Remote Workforce Strategy
 - ERG Nursing & Midwifery Workforce
 - ERG National Training Plan
- Geographical Distribution
- ANMAC Registration Standards Forum
- Telehealth Nursing & Midwifery Consortium Steering Group
- Rural Health Continuing Education (RHCE) Assessment Panel
- Remote & Regional Workforce Strategy
- Centre for Remote Health Manuals Remote context sub-group
- ACRRM Telehealth Advisory Group (ATHAC)
- Community Nursing reference group (DVA)
- National Rural Health Alliance

Christopher Cliffe

- Coalition of National Nursing Organisations (CoNNO)
- Nursing & Midwifery Stakeholder Reference Group

Colleen Niedermeyer (Bush Support Services Manager)

- Life Promotion Steering Committee (Mental Health Central Australia)

Dr Annmaree Wilson (Senior Clinical Psychologist)

- Australian Psychological Society Rural and Remote Interest Group
- Helpline Australia

our membership



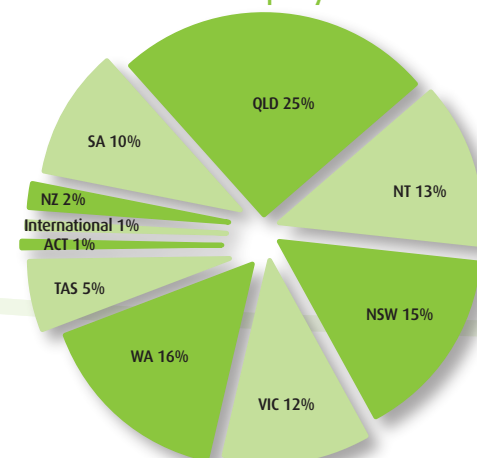
CRANAPlus has been offering membership since the organisations inception in 1983. We continue to see strong growth and a diversity of disciplines represented among our membership.

We have seen an increased growth and high retention across all States with Queensland continuing to represent our largest membership base. We have experienced a significant growth in membership from New Zealand for the period and in part reflects the fly-in/fly-out work lifestyles. We have chosen to reflect this increase distinct from our International membership category.

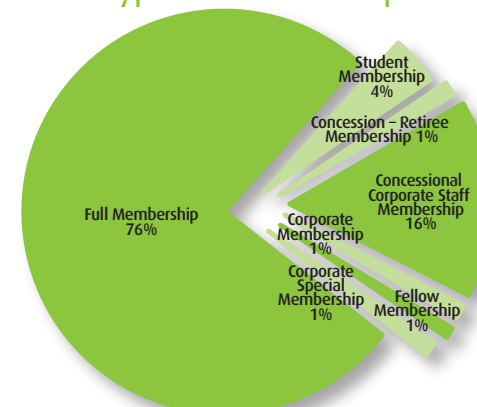
Government, private sector, Aboriginal Medical Services and NGOs are among the 29 organisations choosing to partner with us as Corporate Members. Among the benefits afforded our Corporate Membership is discounted individual CRANAPlus membership for their employees (while still offering the benefits of full membership), complimentary advertising on our website, significant discounts on Magazine advertising and conference costs.

We believe the growth in membership, the retention rate and the diversity of health disciplines, and increases in student membership, is an acknowledgement of the value of CRANAPlus expertise in the areas of remote education, support and advocacy for all current remote health professionals and the remote health professionals of the future.

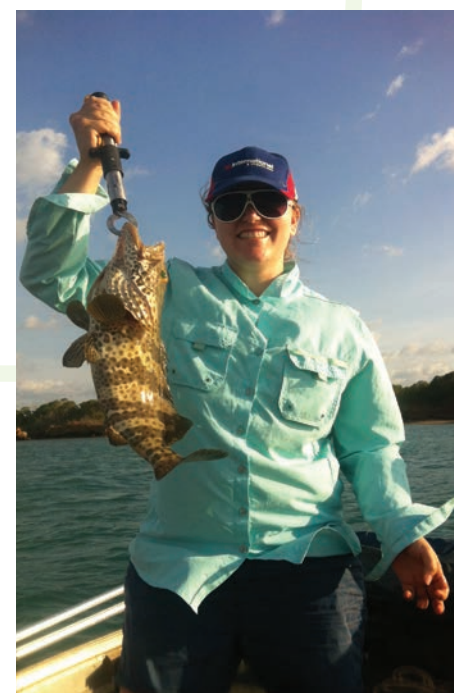
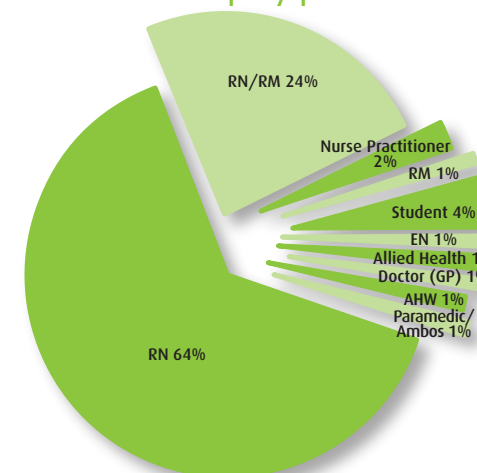
membership by state



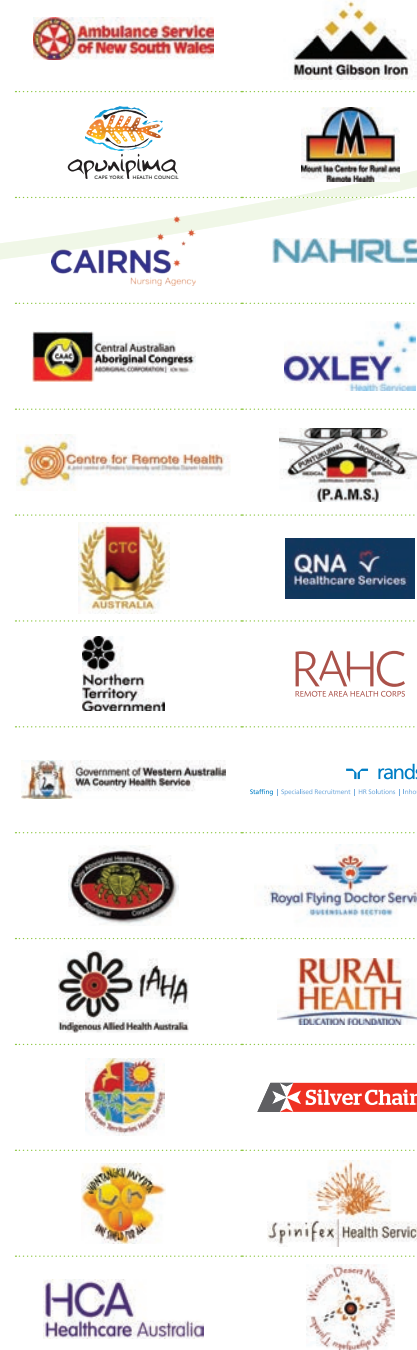
type of membership



membership by profession



corporate members



Above: Student Nurse Nancy Weatherford, Thursday Island Hospital.
Opposite, clockwise from top left:
Kim Izod, a 3rd year Medical/Surgical nurse – six weeks at Gove District Hospital in Nhulunbuy at the northern tip of Arnhem Land has fed her drive to work in remote Australia in the future.
Sister Mary Jane and friends – Gibb River Station – Community Clinic Nurse for 10 years, 18+ years in the Kimberley.
Tjuntjuntjara Remote Indigenous School Organic Garden Project.

bush support services report

The 24-hour 7-days a week BSS 1800 805 391 Toll Free Telephone Support Line continues to be the most important service we provide for remote health practitioners and their families throughout Australia. The service is free and confidential and it is staffed by professional psychologists with remote experience. We strive to provide a personalised service. For example, regular callers can ask to speak to the same psychologist if they wish and callers who have complex or ongoing issues, can be placed on a 'care plan' system which allows for regular sessions within an agreed timeframe. Callers wishing to speak with an Indigenous Counsellor may do so on request.

Our written resources and publications are distributed free on request. BSS currently offer free online courses covering 'Managing Conflict' and 'Self Esteem'. We also have a portfolio of self care workshops which can be tailored to suit individual requirements. Short workshops for small groups of health practitioners in very remote areas via SKYPE are proving to be successful and gaining in popularity.

Senior Clinical Psychologist, Dr Annmaree Wilson has a strong ongoing commitment to provide up-to-date clinical skills and knowledge (including cultural awareness training) to equip the BSS team of eight consulting psychologists. BSS Psychologists work within the guidelines and framework of the BSS Best Practice Manual.

While the majority of people use our Telephone Support Line, there is a gradual swing to Internet based counselling and we envisage this will increase with the spread of the NBN providing a reliable and swift connection to and from remote areas.

BSS has been awarded funding through the 'Keep Them Safe' initiative of the NSW Department of Family and Community Services for two mini projects to assist in the retention of the remote area health and community service workforce.

BSS workshops will explore the personal and professional impact associated with working with domestic violence and child abuse in safe and creative ways; assist workers to develop skills in resilience and reflective practice; and to develop a sustainable peer support network in remote area workplaces.

CRANApus's focus of improving health outcomes through the delivery of safe, quality health care is about to be enhanced even further with the development of an App, through Android and Iphone systems, on the much-publicised current topic of 'bullying'. The CRANApus BSS Bullying App will not only assist users to identify bullying but also provide information, links and guidelines on the best course of action to take, as well as useful links to legislation in each state. In addition, the user will have the option of working closely with a BSS Psychologist at the same time.

The successful "BSS Cosy Blanket Project" which commenced in 2010 continues to flourish, with blankets being distributed to homeless people in Melbourne and Aboriginal Aged Care facilities in the Northern Territory. The squares are knitted by remote health practitioners and their families and then sent to the Cairns Office where volunteers sew the squares into blankets for distribution to those in need. The cosy blanket idea was originally introduced as a form of combating stress by knitting a square for a mate in need.

As well as the cosy blanket project, BSS has been promoting mental health through an innovative pilot singing project. The 'Sing for Your Life' partnership provides weekly singing lessons, by videoconferencing, to 14 remote health workers situated as far afield as Thursday Island, Bamaga (Far North Qld), Cape Barren Island (Tas.), Alice Springs and Darwin, rural and remote NSW and Victoria. The Project commenced at the beginning of 2013 and is the first ever "cyber choir". The culmination of the videoconferencing sessions will be three face-to-face group rehearsals, prior to the choir's performance at the CRANApus National Conference in late September.



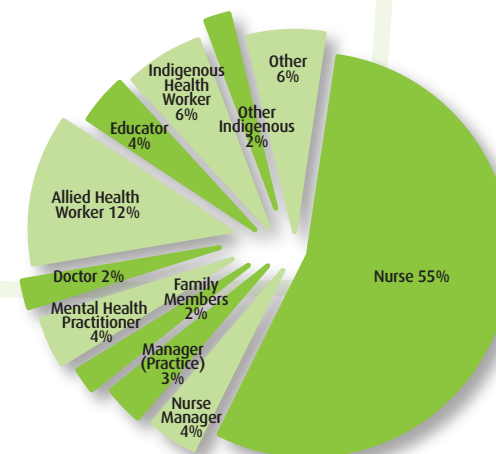
People out bush appreciate face to face contact and 'road shows' now play an important part in imparting knowledge about Bush Support Services. To this end, our team of psychologists took to the road in Tasmania (Chris Martins), Victoria (Cheryl Anderson), NSW & WA (Lee Rushton), and the Christmas/Cocos Keeling Islands where BSS Psychologist Therese Forbes found herself presenting to a workshop of health staff shortly after they had dealt with the emergency of an overturned refugee boat.

However, the most memorable road show of all turned out to be the "Psychs on Bikes" ride. Eleven towns throughout rural New South Wales and Queensland were invaded by a group of motorbike riders (all mental health professionals) under the banner of 'Psychs on Bikes - Adventure before Dementia' lead by psychiatrist, Dr Joseph Dunn. Bush Support Services went with them as sponsors, attending town meetings and helping to gather health professionals and to inform them about mental health issues and the support available through CRANApus BSS.

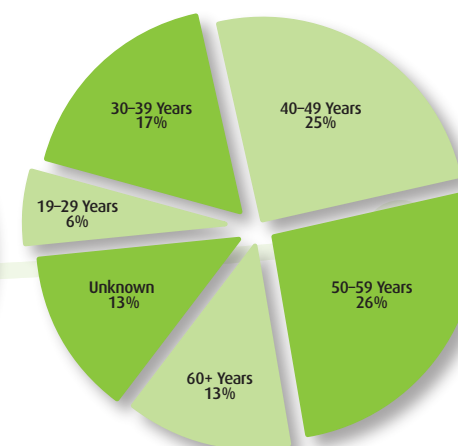
Above: Richard Whitton and Dr Annmaree Wilson, BSS.

bss hotline at a glance

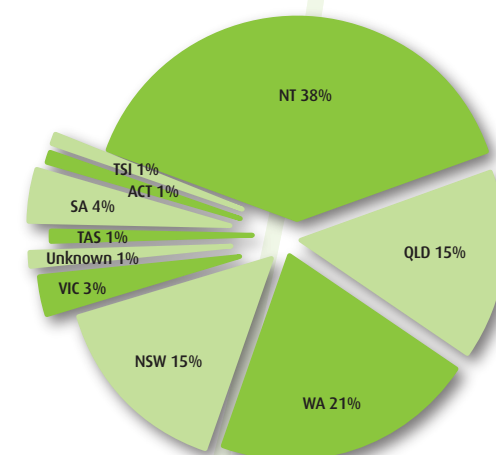
who?
82% of callers are female



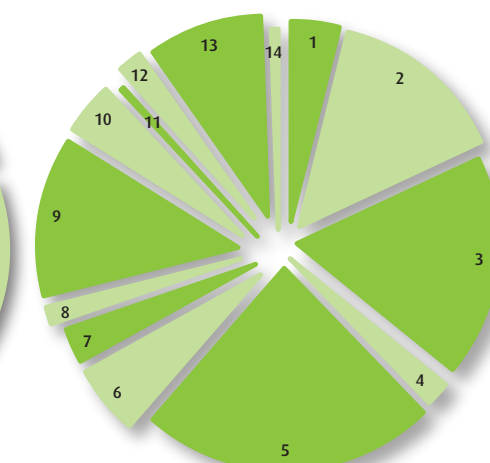
what?
age group



where?
setting/location



why?
reason for the calls



when?
53% of calls received during business hours

- 1 Assistance with psychological interventions 9%
- 2 Conflict 31%
- 3 Debriefing 39%
- 4 Grief issues 4%
- 5 High levels of day-to-day stress 52%
- 6 Job related trauma 12%
- 7 Mental Health disorder 6%
- 8 Physical health problems 3%
- 9 Professional issues 28%
- 10 Relationship issues 9%
- 11 Suicide ideation 1%
- 12 Violence against practitioner 4%
- 13 Workplace bullying 20%
- 14 Substance abuse 1%

financial overview

CRANAp^{lus} incorporated income statement for the year ended 30 June 2013

Sales		\$	Expenditure		\$	
Sales	64,849		Advertising and promotion	5,202	Staff amenities	6,750
	64,849		Audit fees	12,910	Staff clothing	2,265
			Awards	4,256	Stationery and printing	157,661
			Bank charges	22,742	Storage	2,046
			Cleaning	14,990	Sub contractors	302,829
Less: cost of goods sold			Conference costs	132,529	Sundry expenses	3,348
Opening stock	120,700		Consultants' fees	32,032	Superannuation	176,729
Purchases	37,095		Consumables	4,811	Telephone, fax and email	91,059
	157,795		Course costs, catering and facilitators	166,061	Tools and minor equipment	56,227
Closing stock	(103,753)		Depreciation	141,314	Staff training and development	34,976
	54,042		Donations	3,600	Travel and accommodation	619,464
			Doubtful debts	1,264	Venue charges	97,184
Gross profit (loss) from trading	10,807		Employee entitlement provision	40,037	Workers compensation	24,749
			Equipment hire	364		
			Insurance	67,289	Total expenses	5,333,174
			Interest expense	17,710		
Revenue	\$		IT costs	166,589	Net surplus	204,195
Grant revenue	4,174,781		Legal fees	17,511		
Interest received	71,333		Loss on disposal of assets	2,777		
Gross profit from trading	10,807		Magazine and newsletter	12,132		
Course fees	837,391		Marketing products	116,018		
Advertising	18,016		Membership packs	6,913		
Conference fees	216,592		Motor vehicle	13,613		
Consultancy	1,055		Postage and freight	197,695		
Membership fees	179,114		Reference materials	52,734		
Raffle income	3,369		Relocation costs	5,888		
Rental income	22,793		Rent and utilities	144,240		
Website	909		Repairs and maintenance	10,149		
Scholarships	1,209		Salaries, wages and allowances	2,330,671		
			Security	5,067		
Total income	5,537,369		Scholarship awards	8,779		

* Please contact CRANAp^{lus} if you wish to be sent the full financial report.

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Photo: Barry Skipsey