

2018 ANNUAL REPORT



**Health Workforce
Queensland**

OUR VISION

To ensure optimal health workforce to enhance the health of Queensland communities.

OUR MISSION

Creating sustainable health workforce solutions that meet the needs of remote, rural and regional and Aboriginal and Torres Strait Islander communities.

OUR VALUES

Integrity

We behave in an ethical and professional manner at all times showing respect and empathy.

Commitment

We enhance health services in rural and remote Queensland communities.

Equity

We provide equal access to services based on prioritised need.

ACKNOWLEDGEMENTS



Health Workforce Queensland acknowledges the traditional custodians of the land and sea where we live and work, and pay our respects to Elders past, present and future.

Health Workforce Queensland would like to acknowledge the Australian Government Department of Health as our funding partner for the 2017-2018 financial year.

The front cover image is of Rockhampton and taken by Krishna Doshi, an undergraduate medical student.

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CHAIR'S REPORT



The past year has had substantial yet positive change to the Agency's funding and operations, as Health Workforce Queensland was awarded two new health workforce contracts by the Australian Government Department of Health in July 2017. The two new contracts are the:

- + Rural Health Workforce Support Program (RHWSP), which aims to address health workforce shortages and maldistribution in Queensland's remote, rural and Aboriginal and Torres Strait Islander communities and is the Agency's core business.
- + Health Workforce Scholarship Program (HWSP), which is a nationwide program administered by the Consortium of Rural Workforce Agencies to improve the access to services in remote and rural areas by supporting an increase in health professionals' skills, capacity and scope of practice. Health Workforce Queensland is the Lead Agency for the HWSP.

The two new contracts are in addition to the John Flynn Placement Program (JFPP), which was awarded to the Consortium of Rural Workforce Agencies in February 2017. Health Workforce Queensland is also the Lead Agency for this rural immersion program for undergraduate medical students.

Following the assignment of contracts, the Board, Leadership Team and Team Leaders came together in November 2017 for a planning day. Collectively, the group outlined strategies and activities for each contract over the next three years, as well as for the Agency overall. From the planning day, the Agency finalised its

Strategic Plan and identified goals and objectives for 2017-2020. The Agency will work towards the following goals:

- + Identify health workforce needs of remote and rural communities that need it the most.
- + Increase access to health professionals for Aboriginal and Torres Strait Islander communities.
- + Deliver evidence based and locally responsive health workforce solutions.
- + Foster high quality service delivery.

The new contracts have further enabled the Agency to engage with a diverse range of stakeholders and maintain collaborative relationships with Primary Health Networks (PHNs), Hospital and Health Services (HHSs), Aboriginal Community Controlled Health Services (ACCHSs), the Rural Doctors Association of Queensland (RDAQ), General Practitioner (GP) Training Organisations and Colleges, Local Government and non-government organisations, to name a few.

It is through these connections that we are able to learn of the primary healthcare workforce concerns and needs from those on the ground in remote, rural and Aboriginal and Torres Strait Islander communities. With Queensland's vast remote and rural landscape, we are grateful for the new and existing relationships as they continue to build the Agency's awareness of the breadth of issues affecting communities in relation to their health service and workforce needs. The relationship with stakeholders also enable the Agency to propose effective and practical health workforce solutions that are specifically designed for that stakeholder and implemented together.

The guidance of the Governance and Risk Committee has been invaluable during 2017-2018. With the greater role the Agency has as Lead for the JFPP and HWSP and the expansion of services provided, the work of both Committees has facilitated a smooth transition to the new contracts and effective concurrent implementation of the three programs. Thanks to Dr John Lamb and Ms Naomi Blake as respective Chairs of the Governance Committee and Risk Committee.

On behalf of the Board, I am pleased to advise that Health Workforce Queensland has ended the 2017-2018 financial year in a solid financial position. With the administration of the three contracts comes increased funding and increased complexity in financial management. Due to this, the Agency redesigned our delivery of services in line with the

available resources and careful attention to cost containment. There has been calculated investment in the long-term growth of the Agency's systems to support our new service, which will result in efficient processes and greater stakeholder satisfaction. Despite the financial intricacies of the three contracts, the Agency has continued to deliver high-quality services that meet key performance indicators and the needs of our stakeholders.

Whilst the Agency aims to do all in our capacity for the health and wellbeing of residents in remote and rural Queensland, there are some elements outside our control. Regrettably, Queensland's remote and rural landscape has been subjected to an enduring drought, which has had a devastating impact on residents, communities, livestock, produce and various industries – all of which may impact the health and wellbeing of individuals. The drought shows the difficulties that remote and rural Queenslanders face daily and the variety of support services they still need. The Agency is even more determined in the work we are doing to enable access to primary healthcare services for those in remote and rural Queensland.

In 2018, the Agency Celebrates 20 Years as a Rural Workforce Agency. This is a significant milestone for Health Workforce Queensland and I would like to acknowledge all Directors who have been part of the Health Workforce Queensland Board since 1998. I would also like to express my gratitude for the Chief Executive Officer, Chris Mitchell, and the Leadership Team who, over the past 12 months, continue to demonstrate commitment, creativity and enthusiasm in delivering improved primary healthcare solutions for remote, rural and Aboriginal and Torres Strait Islander communities in Queensland. Lastly, I would like to extend my thanks to the dedicated and hardworking staff of Health Workforce Queensland, who embed the values of integrity, commitment and equity in all they do. Our staff have accomplished many targets and projects in the past 12 months and have done so within an ever-changing operating environment.

Emeritus Professor Robert Stable

Board Chair

CEO'S REPORT



The 2017-2018 Annual Report reflects on Health Workforce Queensland's activities and performance over the past year and it's been a strong 12 months for the Agency.

Our new core contract, the Rural Health Workforce Support Program (RHWSP), commenced on 1 July, 2017. The objective of the RHWSP is to address health workforce shortages and maldistribution in remote, rural and regional Queensland. In delivering the Program, we have focused on identifying needs and undertaking activities in three key priority areas:

- + Access: improve access and continuity of access to primary health care
- + Quality: build local health workforce capability
- + Sustainability: build a sustainable health workforce

The 2017-18 Annual Report reflects on the Agency's activities, performance and relevant highlights within each key area throughout the year.

As part of the RHWSP, the Agency undertook and published our first Health Workforce Needs Assessment, which provides a state-wide review of the primary health care workforce throughout remote

and rural Queensland. In 2017-18, the HWNA focused on the medical workforce and subsequent years will build on this foundation and the health professions included in the state-wide review. In the past year, the Health Workforce Stakeholder Group (HWSG) was also established. The purpose of the HWSG was for various organisations within the rural health sector to come together and examine the current status of the remote and rural primary health workforce in Queensland and provide feedback on the findings of the HWNA. The HWSG will continue over the following years.

In addition to the RHWSP, the Health Workforce Scholarship Program (HWSP) also commenced on 1 July, 2017, which is administered nationally through the Consortium of Rural Workforce Agencies. Through the provision of scholarships and bursaries to rural health professionals to expand their existing skill set, this Program is a key link in achieving a high quality rural health workforce and consequently providing a greater range of primary health care services to those in remote and rural communities.

The administration of the John Flynn Placement Program has continued. As the Lead Agency for the Program, Health Workforce Queensland was responsible for delivering and managing the application period; where for the first-time medical students could apply for the JFPP online. Following this, the 300 successful students were matched with a rural mentor and location. The JFPP is a renowned rural immersion program throughout Australia and the Program continues to go from strength to strength due to internal support from new information technology systems.

The nation-wide administration and execution of the HWSP and JFPP promote engagement

and partnerships with the Rural Workforce Agency's in other states. This partnership enables the Rural Workforce Agency Network to identify and address remote and rural health workforce issues at a national level, through a strong cohesive voice.

It can easily be seen that our three Programs are interconnected. The combination of the three Programs gives Health Workforce Queensland a solid foundation to deliver a greater variety of services to rural health professionals and the Programs' collective output strengthen our capacity to achieve our vision.

The Agency could not do the work it does without the medical, nursing, allied health and Aboriginal and Torres Strait Islander health workforce in remote and rural Queensland. On behalf of the Agency, I thank you for your continued commitment to the health and wellbeing of Queensland's remote and rural residents.

I am immensely proud of the activities undertaken and performance presented in the 2017-18 Annual Report. As said, it has been a strong year for Health Workforce Queensland and it is due to the dedicated and passionate staff within the Agency that have contributed to the past years' success. I hope you enjoy reading our 2017-18 Annual Report. We look forward to the work we will undertake in 2018-19.

Chris Mitchell

Chief Executive Officer

BOARD MEMBERS

We would like to thank our 2017-2018 Health Workforce Queensland Board for their valuable contributions to the Agency.



Prof Robert Stable
Board Appointed Chair
Appointed 21.07.12



Dr John Lamb
Nominated Member of CheckUP
Chair of Governance Committee
Appointed 21.07.07



Ms Naomi Blake
Nominated Member of Health Consumers of Rural and Remote Australia
Chair of Risk Management Committee
Appointed 05.08.14



Dr Michael Belonogoff
Nominated Member of Central Queensland Rural Division of General Practice
Appointed 28.11.15



Dr Natasha Coventry
Nominated Member of Rural Doctors Association of Queensland
Appointed 05.11.16



Mr Terry Fleischfresser
Nominated Member Local Government Association of Queensland
Appointed 17.02.07



Dr Ross Hetherington
Nominated Member of RHealth
Appointed 01.10.00

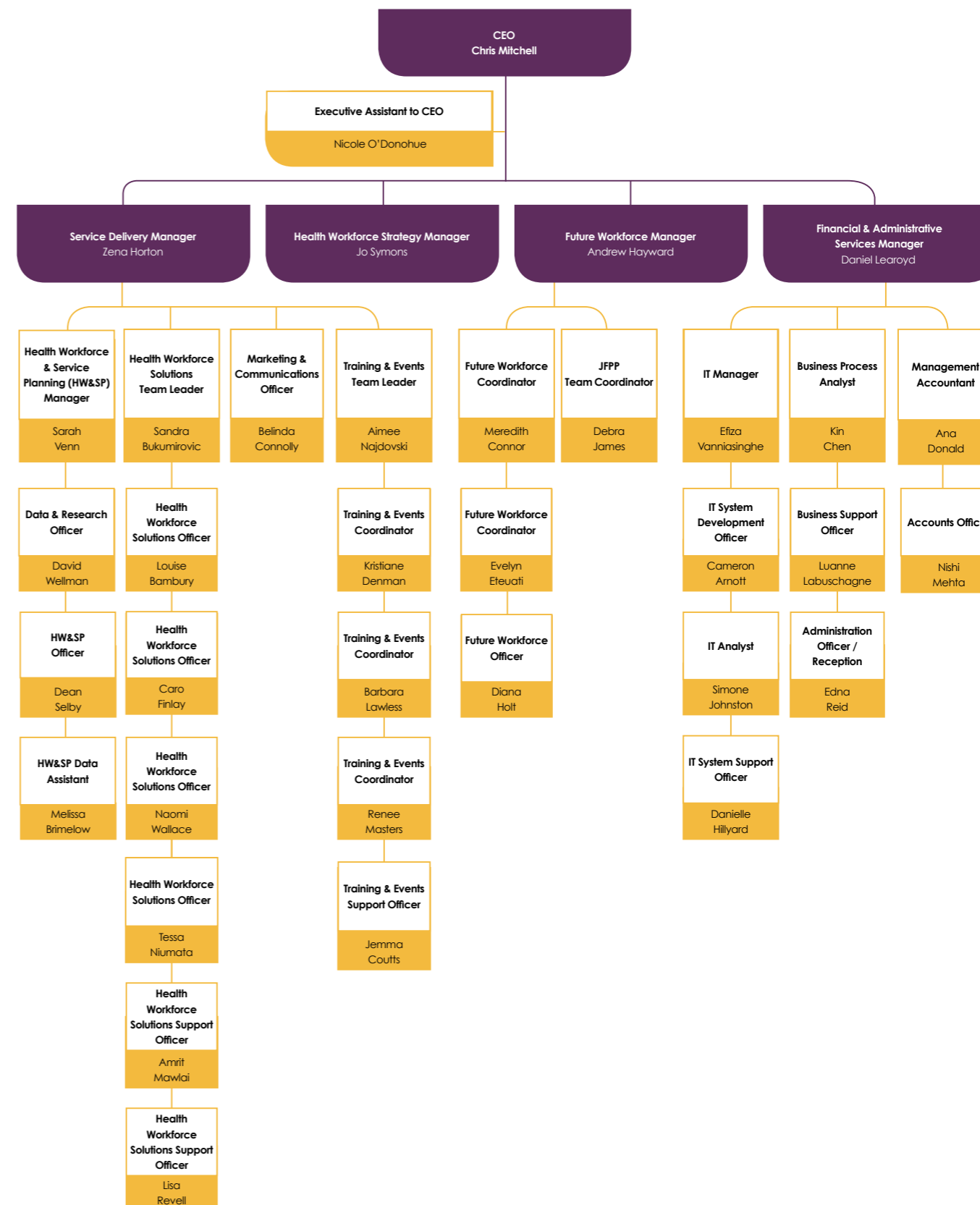


Dr Alan McMahon
Nominated Member of FNQDocs
Appointed 18.10.06



Ms Stella Taylor-Johnson
Nominated Member of Queensland Aboriginal and Islander Health Council
Appointed 14.11.09

ORGANISATION STRUCTURE



STAFF MEMBERS

We would like to the staff members at Health Workforce Queensland for their ongoing hard work, commitment and enthusiasm to the work the Agency undertakes.

Absent Staff: Louise Bambury, Meredith Connor, Jemma Coutts, Caro Finlay, Debra James, Edna Reid, and Jo Symons.



CAMERON ARNOTT
IT System Administrator &
Developer



MELISSA BRIMELOW
Health Workforce and
Service Planning Data
Assistant



**SANDRA
BUKUMIROVIC**
Health Workforce Solution
Team Leader



KIN CHEN
Business Process Analyst



BELINDA CONNOLLY
Marketing and
Communications Officer



DANIEL LEAROYD
Finance and
Administrative Services
Manager



RENEE MASTERS
Training and Events
Coordinator



AMRIT MAWLAI
Health Workforce
Solutions Support Officer



NISHI MEHTA
Accounts Officer



CHRIS MITCHELL
Chief Executive Officer



KRISTIANE DENMAN
Training and Events
Coordinator



ANA DONALD
Management
Accountant



EVELYN ETEUATI
Future Workforce
Coordinator



ANDREW HAYWARD
Future Workforce
Manager



DANIELLE HILLYARD
IT System Support Officer



AIMEE NAJDOVSKI
Training and Events Team
Leader



TESSA NIUMATA
Health Workforce
Solutions Officer



NICOLE O'DONOHUE
Executive Assistant to the
CEO



LISA REVELL
Health Workforce
Solutions Support Officer



DEAN SELBY
Health Workforce and
Service Planning Officer



DIANA HOLT
Future Workforce Officer



ZENA HORTON
Service Delivery Manager



SIMONE JOHNSTON
IT Analyst



**LUANNE
LABUSCHAGNE**
Business Support Officer



BARBARA LAWLESS
Training and Events
Coordinator



EFIZA VANNIASINGHE
IT Manager



SARAH VENN
Health Workforce
and Service Planning
Manager



NAOMI WALLACE
Health Workforce
Solutions Officer



DAVID WELLMAN
Data and Research
Officer

CELEBRATING 20 YEARS AS A RURAL WORKFORCE AGENCY



1998
Queensland's Rural Workforce Agency formed and Queensland Rural Divisions Coordinating Unit (QRDCU) commenced trading as Queensland Rural Medical Support Agency (QRMSA). Establishment funding was provided by Australian Government under the Rural and Remote General Practice Program (RRGPP).



2001
Queensland's first Minimum Data Set Report on the rural medical workforce was published and continues today.



2002
The Agency officially changed its name to Queensland Rural Medical Support Agency (QRMSA).



2017
A new era began with three new programs: Rural Health Workforce Support Program, John Flynn Placement Program and Health Workforce Scholarship Program.



2012
Health Workforce Queensland expanded its recruitment services and retention services to include nursing and allied health professionals.

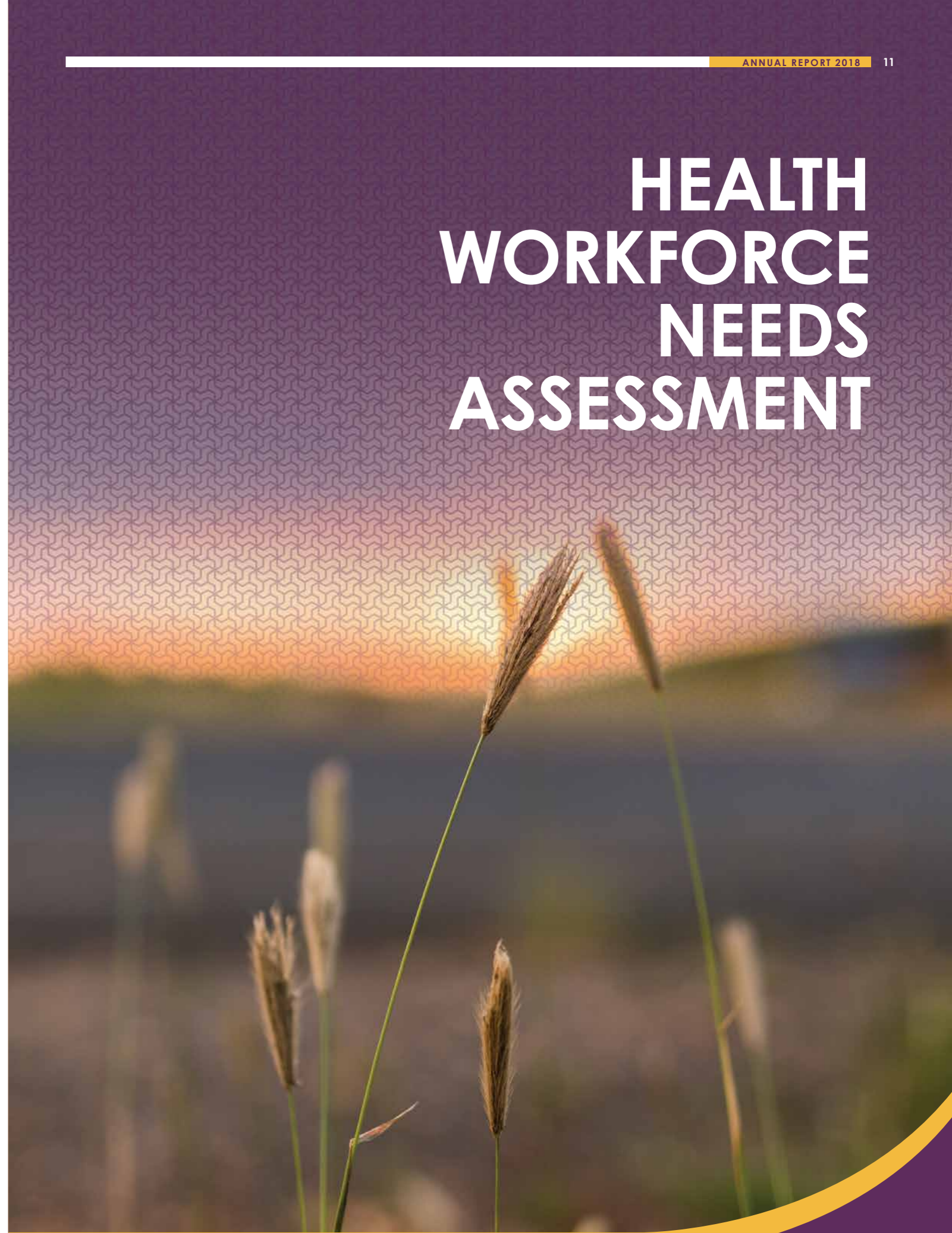


2004
The Agency changed its name to Health Workforce Queensland.



2018
Health Workforce Queensland celebrates 20 years of operation as a Rural Workforce Agency. The Agency undertook and published its inaugural Health Workforce Needs Assessment.

HEALTH WORKFORCE NEEDS ASSESSMENT



HEALTH WORKFORCE NEEDS ASSESSMENT



As part of our new funding agreement in 2017/2018 with the Australian Government Department of Health, Health Workforce Queensland has undertaken a state-wide workforce needs assessment for remote and rural Queensland, leveraging off the comprehensive health and service needs assessments undertaken at regional levels through the Primary Health Networks (PHNs) and others. With a focus on the primary health care landscape, the Health Workforce Needs Assessment (HWNA) identifies high priority locations, professions and workforce requirements to develop and support evidence-based and effective models of service delivery in remote and rural Queensland.

The HWNA contributes to the development and implementation of an evidence-based Activity Work Plan (AWP), to address specific priorities relating to localised health

workforce needs and service gaps. Information used to inform the HWNA was sourced from available data sources and from consultations with communities, health professionals and stakeholders. As a key part of the process, a formal jurisdictional Health Workforce Stakeholder Group (HWSG) was also created to provide strategic advice and expertise to inform planning, analysis and strategy development.

The inaugural HWNA developed a baseline understanding of the primary health care workforce needs of populations and communities in Modified Monash Model (MMM) areas 2-7 in Queensland. It integrated demographic, population health and workforce data alongside structured consultations and considered populations with special needs and those at risk of poorer health outcomes.

Issues identified are categorised into three priority areas:

-  **Access** – improving access and continuity of access to essential primary health care;
-  **Quality** – building health workforce capability; and
-  **Sustainability** – growing the sustainability of the health workforce.

The key workforce issues identified in the inaugural HWNA are summarised on the adjacent page.

OVERVIEW OF KEY WORKFORCE ISSUES

MAJOR THEMES KEY WORKFORCE ISSUE

MAJOR THEMES	KEY WORKFORCE ISSUE
 Access	
Access to Local Health Workforce	Shortage of GP, nursing, allied health and Aboriginal and Torres Strait Islander health worker workforce in remote, rural and regional Queensland
Maldistribution of GP Workforce	Inequitable distribution of health workforce in rural areas
Access to Comprehensive Primary Health Care Services	Care available is episodic rather than comprehensive, continuous and person-centred care
Remoteness/Distance to Travel	Lack of affordable and appropriate transport to access health services Cost of travel for health professionals for rural outreach/hub and spoke arrangements
Lack of Appropriate Infrastructure	ICT infrastructure – Telehealth and internet access Physical infrastructure – staff accommodation, clinical space After hours services
Barriers to Accessing Health Care	Cost of services Culturally appropriate health services Service awareness/service understanding
 Quality	
Adequately Skilled Workforce	Building a capable workforce that is responsive to local needs
Culturally Appropriate Care	Capability to deliver culturally appropriate health care
 Sustainability	
Growing the Health Workforce Pipeline	Training the future workforce with a view to address maldistribution and local need
Service Provider Collaboration	Inefficient and fragmented care
Achieving Sustainable Workforce Models	Vulnerable and non-viable workforce models
Attracting Health Workforce	Attracting future workforce to health careers and rural health Attracting current workforce to general practice and rural health
Retaining Health Workforce	Provision of incentives and other supports

CONFERENCE PAPERS AND PRESENTATIONS

Health Workforce in Queensland – A rural perspective

Presentation

Griffith University – Health Services
Management, School of Medicine
Brisbane, QLD – July, 2017

Workforce Planning in Action

Statewide Rural and Remote Clinical Network
Brisbane, QLD – June, 2018

General Practitioner perceptions of the sufficiency of the local primary health care workforce in remote and rural QLD

Primary Health Care Research Conference
2017
Brisbane, QLD – August, 2017

Health Workforce Queensland – Reflection on 20 Years

Presentation

RDAQ Conference, Workforce Breakfast 2018
Brisbane, QLD – June 2018

Workforce Planning – the missing piece of the puzzle

CheckUP Forum 2017
Brisbane, QLD – September, 2017

Findings from the Health Workforce Needs Assessment

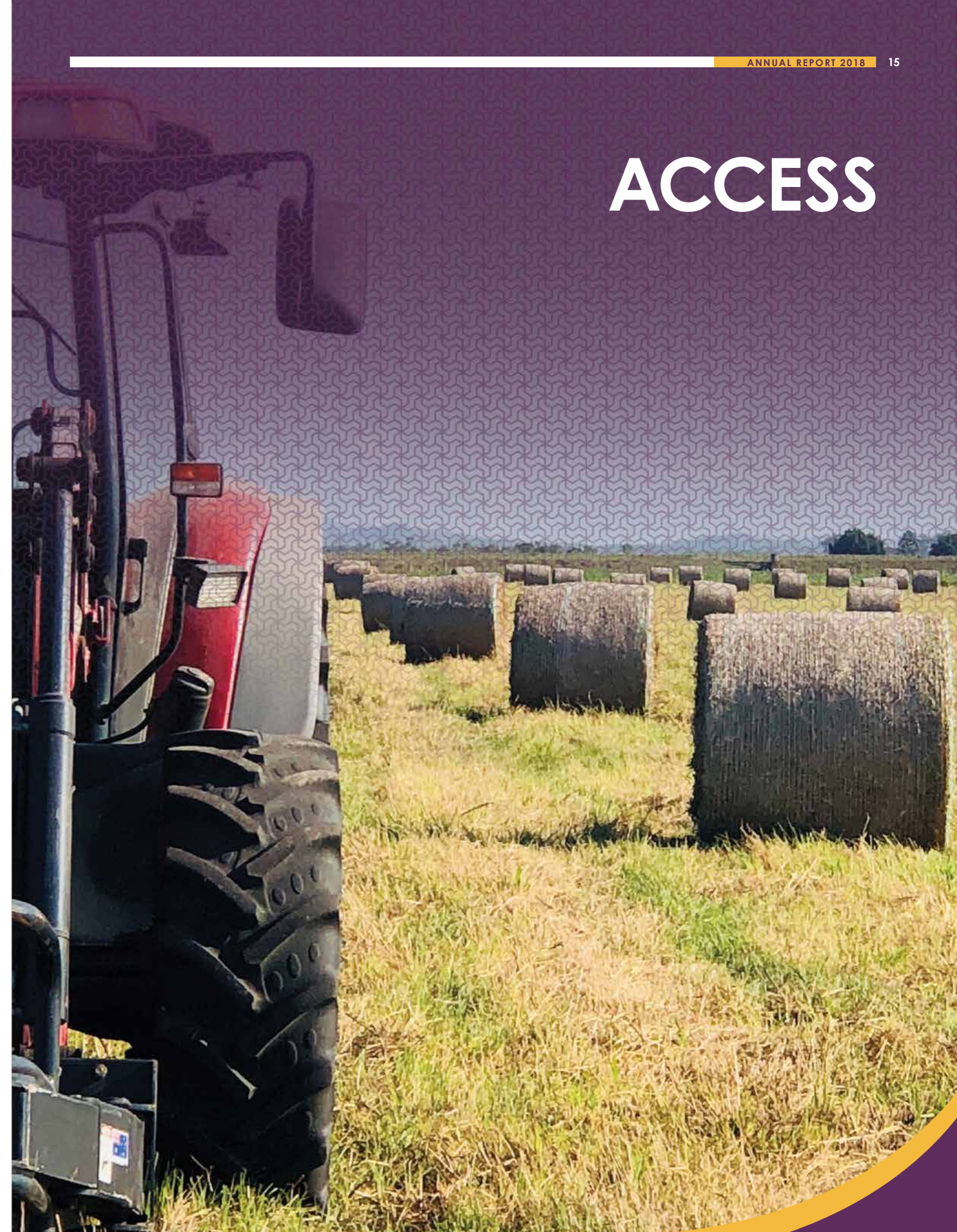
Presentation

RDAQ Conference, Workforce Breakfast 2018
Brisbane, QLD – June 2018

Engagement strategies to attract medical, allied health and nursing professionals to rural areas

Australian Physiotherapy Association,
Momentum 2017
Sydney, NSW – October, 2017

ACCESS



RECRUITING HEALTH PROFESSIONALS



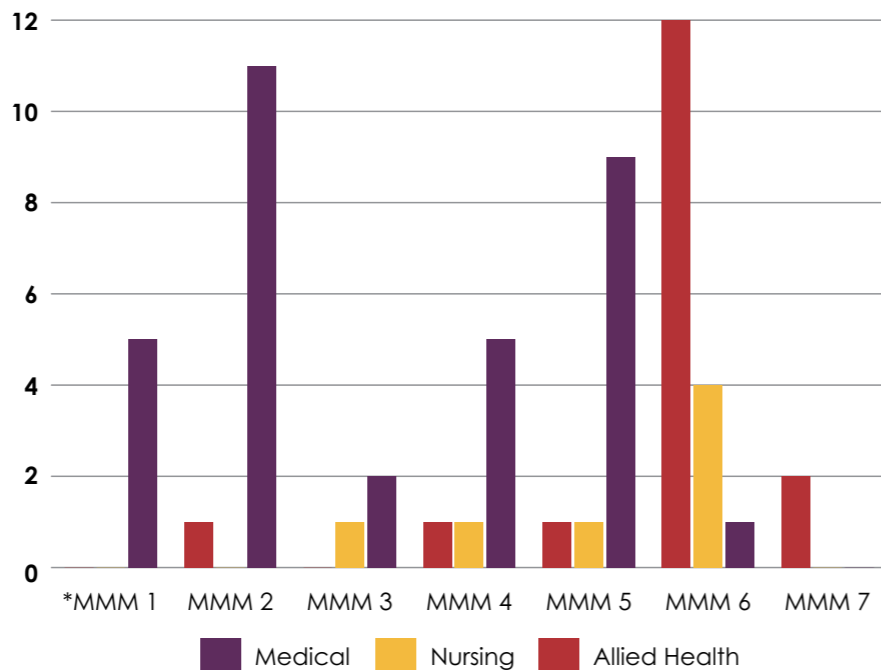
We recruit highly skilled medical, nursing and allied health professionals to remote and rural Queensland.

Over 2017-2018, we have worked with a variety of general practices and primary health care service providers throughout remote and rural Queensland to recruit health professionals to their organisations, based on the health workforce needs of the community.

This targeted needs-based approach to the recruitment of health professionals ensures that those living in remote and rural Queensland have access to health professionals close to home.

*Note: Three medical professionals recruited to MMM 1 were placed in Aboriginal Community Controlled Health Services.

DISTRIBUTION OF RECRUITED HEALTH PROFESSIONALS



57  Total number of health professionals recruited to remote and rural Queensland

7  Nurses recruited

17  Allied health professionals recruited

33  General practitioners recruited

20

847

21

10  Health professionals recruited to Aboriginal Community Controlled Health Services / Aboriginal Medical Services


Grants provided to health professionals as incentive and support packages

Locum days provided 

Locum general practitioners placed 

2,248  General practitioners practicing in remote and rural Queensland

2  Targeted marketing campaigns to recruit health professionals to Mount Isa and surrounds

20  Locum days provided to Aboriginal Medical Services

WORKFORCE PROGRAMS

RURAL LOCUM RELIEF PROGRAM

The Rural Locum Relief Program (RLRP) allows doctors who are permanent residents or Australian citizens to access a temporary Medicare provider number to work in remote and rural areas while they are working towards GP Fellowship.

5-YEAR OVERSEAS TRAINED DOCTOR SCHEME

The 5-Year Overseas Trained Doctor (OTD) Scheme allows a reduction in the 10 Year Moratorium for Overseas Trained Doctors; encouraging them to work in remote or difficult-to-recruit locations. By opting to work in an eligible location, an Overseas Trained Doctor can reduce the 10 year moratorium to 5 years.

GENERAL PRACTICE RURAL INCENTIVE PROGRAM

The General Practice Rural Incentives Program (GPRIP) is a component of the 2009/10 Rural Health Workforce Strategy. GPRIP aims to encourage medical practitioners to practise in remote, rural and regional communities and to promote careers in rural medicine through the provision of financial incentives.

296

active candidates managed on the RLRP

29



active candidates on the 5-Year OTD Scheme

81



number of applications received for GPRIP Flexible Payment Scheme

78



new candidates added to the RLRP

SIX

new candidates added to the 5-Year OTD Scheme

57



applications assessed as eligible for GPRIP Flexible Payment Scheme

33



medical practitioners passed Fellowship exams and achieved vocational registration

SIX

number of 5-Year OTD Scheme candidates that achieved Vocational Registration

\$1+ MILLION

total value of incentives provided as part of the GPRIP

QUALITY



HEALTH WORKFORCE SCHOLARSHIP PROGRAM

The Health Workforce Scholarship Program was established in 2017 to provide scholarships and bursaries to eligible remote and rural medical, nursing and allied health professionals, including Aboriginal and Torres Strait Islander Health Workers, to improve their skills and expand their scope of practice.

By supporting health professionals to expand their theoretical and practical skills, this ensures Queensland's remote and rural communities are able to access health professionals and services most in need.

\$1 MILLION

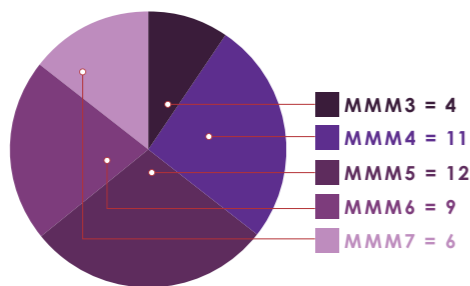
Total value of scholarships and bursaries provided to remote and rural health professionals

SCHOLARSHIPS

94 applications received by June 2018

61 applications assessed as eligible by June 2018

LOCATION OF RECIPIENTS

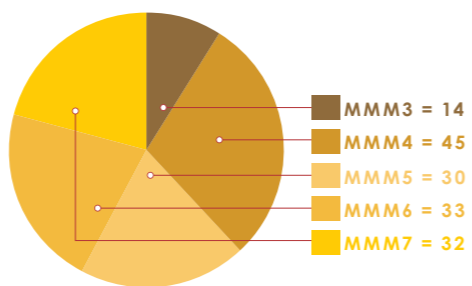


BURSARIES

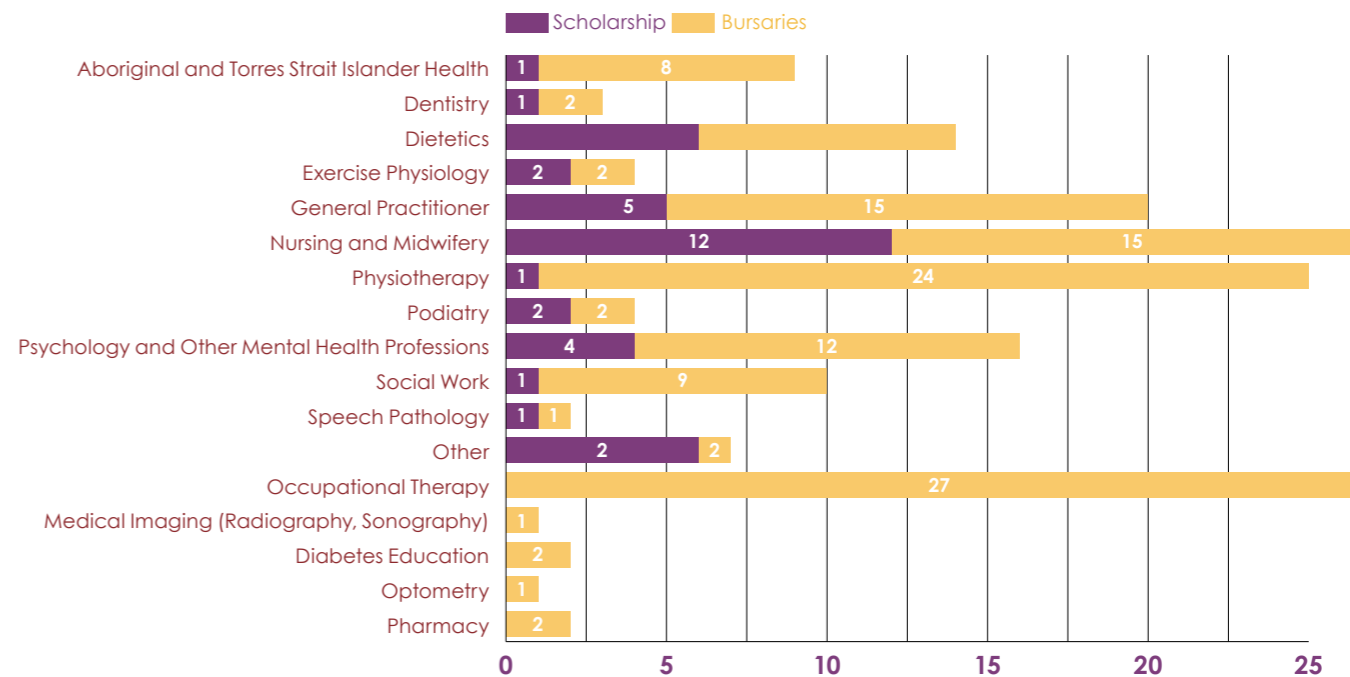
339 applications received by June 2018

219 applications assessed as eligible by June 2018

LOCATION OF RECIPIENTS



HEALTH PROFESSIONS THAT RECEIVED A SCHOLARSHIP OR BURSARY



GATTON GP RECEIVES BURSARY



Dr Jessica Moss is a general practitioner who was successful in receiving a bursary through the Health Workforce Scholarship Program. Dr Moss was practicing in Gatton, which is located in the Lockyer Valley in South-East Queensland.

Dr Moss used her bursary towards the Dermatology and Wound Management Workshop held on the Gold Coast in April 2018. This CPD Workshop was accredited through ACRRM and RACGP.

FELLOWSHIP SUPPORT

Health Workforce Queensland provides case management and funding for Australian and overseas trained doctors who are working towards Fellowship of the Australian College of Rural and Remote Medicine (ACRRM) and/or the Royal Australian College of General Practitioners (RACGP).

68



grants provided for Fellowship support and exam preparation

\$250K

total value of grants provided

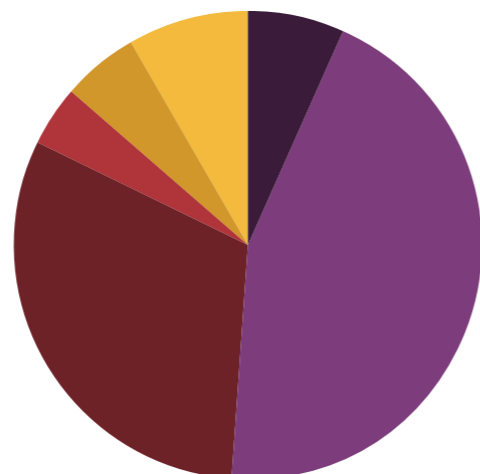


CONTINUING PROFESSIONAL DEVELOPMENT (CPD) WORKSHOPS

To ensure rural health professionals can up-skill and expand their scope of practice, Health Workforce Queensland provides a range of hands-on and interactive CPD Workshops throughout the year, tailored specifically for rural health professionals.

We pride ourselves on engaging leading health professionals, with an understanding of the challenges in practicing in remote and rural locations, as our workshop facilitators. Our facilitators provide high calibre practical workshops with the most up-to-date clinical knowledge and use the latest simulation training technologies. Through providing these CPD Workshops, this ensures that rural communities can access highly skilled health professionals close to home.

LOCATION OF WORKSHOP ATTENDEES



Unspecified = 6
 RA5 = 5
 RA4 = 3
 RA3 = 23
 RA2 = 33
 RA1 = 4

6 number of CPD workshops provided
 77 total number of workshop delegates

98% delegates' satisfaction rating in relation to learning objectives being met

TOPIC	LOCATION	DATE
Rural Emergency Medicine Workshop	Brisbane	September, 2017
Emergency Cardiology Workshop	Brisbane	October, 2017
Rural Emergency Medicine Workshop	Mackay	March, 2018
Dermatology and Wound Management Workshop	Gold Coast	April, 2018
Emergency Cardiology Workshop	Cairns	May, 2018
Addiction Medicine Workshop	Brisbane	June, 2018

"Excellent course. Well delivered and entirely appropriate level. Expect I shall find what I have learnt here this weekend of great value in my practice – especially in rural ED settings."

– Emergency Cardiology Workshop, 2017 Attendee

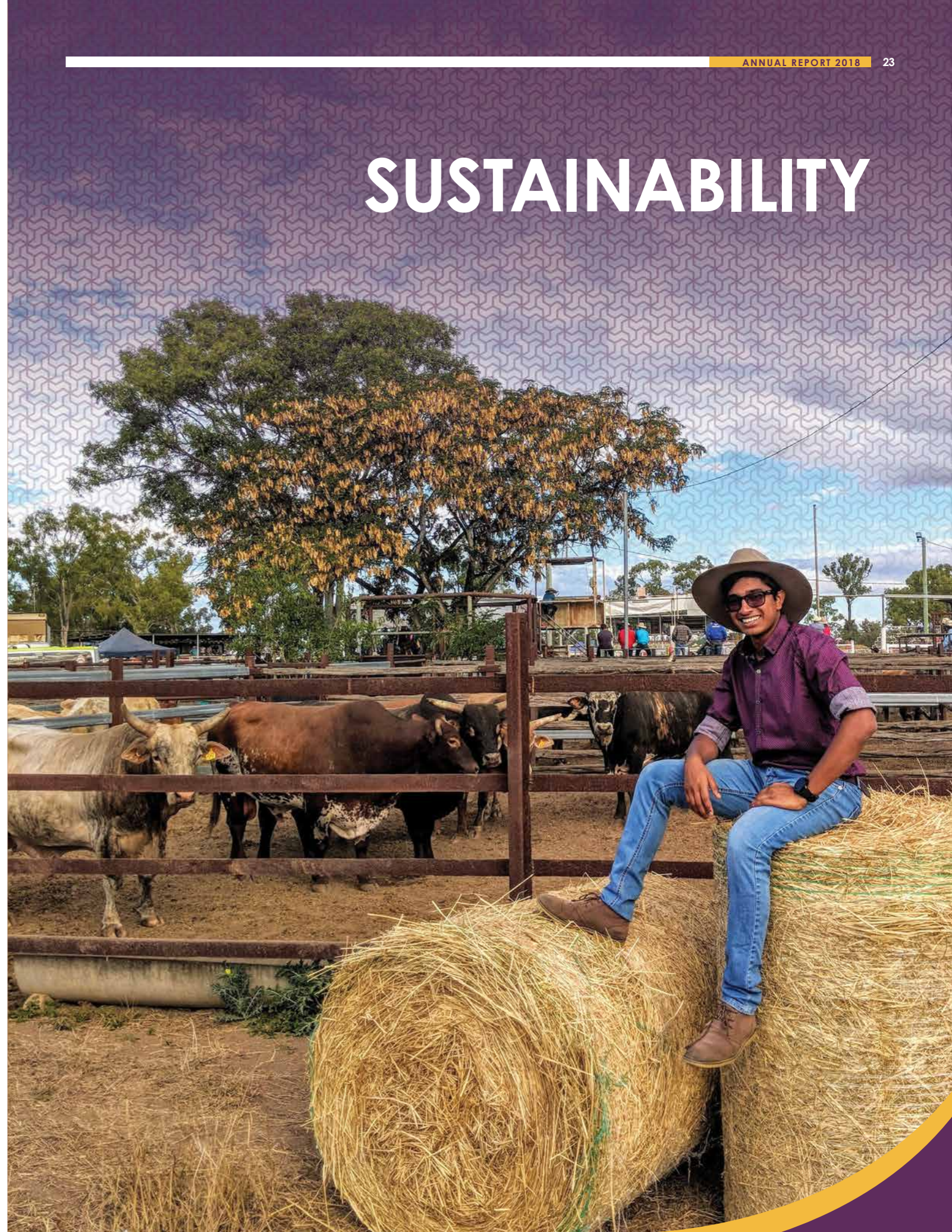
"The morning session was very relevant to my role as a practice nurse. I really value the product selection and lower limb care session."

– Dermatology and Wound Management, 2018 Attendee

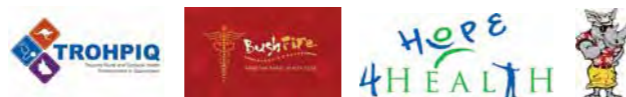
"Very informative and practical course. Provides a succinct overview, with reinforcement of clinical updates and changes of clinical practice."

– Emergency Cardiology Workshop, 2018 Attendee

SUSTAINABILITY



JOINT RURAL HEALTH CLUB WEEKEND



Emerald | 13-15 October, 2017

The Rural Health Clubs (TROHPIQ, RHINO, HOPE4HEALTH and BUSHFIRE) are a key link between students and the primary health care workforce in rural Queensland. Each year, the Clubs come together for a weekend of academic, social and cultural activities to further develop health students' passion for and interest in working in remote and rural Queensland on completion of their tertiary education.

After arriving in warm and sunny Emerald, students learnt about the local agriculture industry in visiting the Queensland Cotton Emerald Gin, as well as Avondale Farm which

grows crops of corn and chickpeas. Students had the opportunity to establish new and maintain current connections with local health professionals and residents, key health organisations and Rural Health Club members from other universities at the Friday night Networking Dinner.

Saturday and Sunday were full of hands-on and theoretical workshops on a variety of topics. On Saturday afternoon, students were able to experience what rural towns can offer with the Emerald 100 Race Day being held. The weekend concluded with a visit

to Emerald's Fairbairn Dam before students returned to their respective universities.

Evaluations received from students suggest that the JRHCW may have positively influenced participants interest and intentions to practise in a rural location. The main reasons said to positively influence this intention was that the weekend gave them insight into rural life, rural practise, and the strong sense of community which rural towns can offer.

42

undergraduate health students attended the JRHCW

EMERALD

870km north of Brisbane, located in RA3 and Central Queensland, Wide Bay and Sunshine Coast PHN

WORKSHOPS

Farm Health, Mental Health, Domestic and Family Violence, ED Scenario, Emergency Paediatrics, Suturing, Vascular Access, Immunisation, and Diabetes

"Makes me want to dive head-first into rural health."

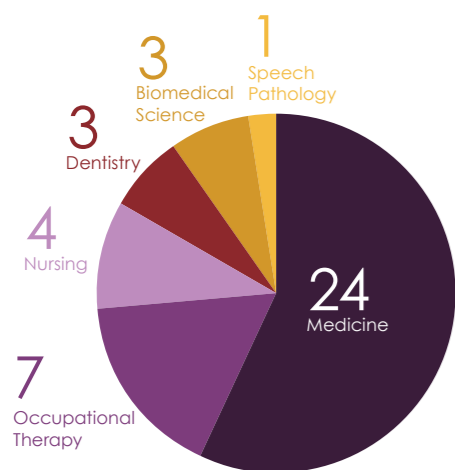
"Such a worthwhile weekend – not only do you learn valuable skills, but you meet new people, make new friends and network. All in a great rural setting!"

"This was by far the best educational, cultural, motivational, inspirational and enjoyable event I've ever been to and only in the span of a weekend!"

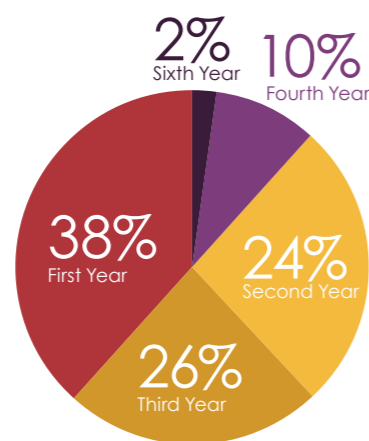
"An eye-opening experience that gave me great insights on the rural lifestyle and dispelled so many misconceptions."

– 2017 JRHCW Attendees

BREAKDOWN OF HEALTH DISCIPLINE



BREAKDOWN OF YEAR OF STUDY



GROW RURAL



Central Queensland | 28-30 July 2017

GROW Rural is a three-year program which provides medical, nursing and allied health students the annual opportunity to experience comprehensive clinical practice and the unique lifestyle of remote and rural Queensland communities.

The inaugural GROW Rural was a huge success. Students were warmly welcomed into the rural communities of Woorabinda, Baralaba, Moura, Theodore and Biloela and in return the rural communities left a lasting impression in the minds of students.

The program consisted of students experiencing rural life through the hands-on activities of whip cracking, cow milking, animal feeding, lassoing, and harvesting vegetables. Students were made to feel a part of the rural communities through conversations with residents and Aboriginal elders, homemade morning teas, and a memorable trivia night with singing and dancing throughout.

The significant part of the program for the 26 multi-discipline health students was seeing the health facilities in rural communities and undertaking clinical skill rotations. The GROW Rural program is designed to reflect the multi-discipline team approach students will be working in post-graduation. This team approach was evident to students when they visited the Woorabinda Multipurpose Health Service, Moura Community Hospital, Moura Dawson Medical Practice, the Theodore Medical Centre and Baralaba Multi-Purpose Health Service.

26

multidisciplinary students



50%

students in their first year of study



25.6

mean age of GROW Rural participants



FOUR

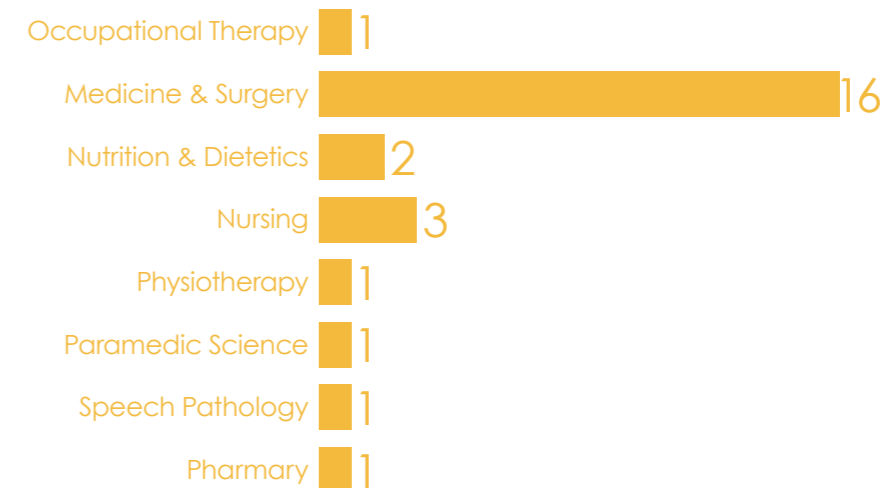
towns in Central Queensland

46%

considered themselves as having a remote, rural or regional background



HEALTH DISCIPLINE OF GROW RURAL PARTICIPANTS



JOHN FLYNN PLACEMENT PROGRAM



Medical students' early exposure to rural clinical practice and the unique lifestyle that comes with it, is a key influence in them undertaking a rural medical career in the future. The John Flynn Placement Program (JFPP) is designed to attract the future medical workforce to a rural career.

Each year 300 rural placements are available to medical students from 21 participating universities to experience the one of a kind rural clinical practice and rural lifestyle throughout Australia.

Successful students are matched with a doctor in a rural location. Whilst undertaking their tertiary studies, students spend two weeks each year over three or four years working alongside a rural doctor, experiencing the diversity of rural practice and expanding their hands-on skills.

During their rural placement, most students reside with a community host or are provided a community contact that gives them an exclusive insight into the social and cultural life of remote or rural Australia. The key aspect of the JFPP, is that students return to the same remote or rural location each year; creating lasting connections with the people and the place.

NATIONAL 
1,194

Applications received in the 2018 Application Period

300 

New Scholars accepted onto the Program

979 


Total active Mentors on the Program

1,101

Total number of Scholars on the Program

1,586

Placement weeks completed

 Online self-service portal launched for Scholars to manage their placement

QUEENSLAND 
FOUR

Induction sessions delivered to Queensland Scholars

66 

Queensland-based Scholars accepted on to the Program

240 

Number of Mentors in Queensland

125

Number of Hosts in Queensland

189

Number of placements by Queensland Scholars

LAUREN'S JFPP EXPERIENCE

Lauren Fernandes is a second-year undergraduate medical student studying at the University of Queensland and a Scholar on the John Flynn Placement Program. She undertook her first two-week placement in January this year at Malanda Medical Centre, located in tropical North Queensland approximately 1.5 hours' drive south-west from Cairns.

Her upbringing in a metropolitan area with easy access to all healthcare services was a stark contrast to that of her parents' upbringing in India. It was this that inspired her to apply for the JFPP; she has a passion to provide healthcare to those that need it the most. After submitting an application, she was accepted on to the JFPP in 2017.

"My first placement gave me so much more experience than just the clinical."

The purpose of the JFPP is to give medical students an insight into living and working in rural Australia and Lauren had that exact experience. "The placement gave me an invaluable insight into the daily lifestyle of rural doctors



and their family – one of warmth, inclusion, hard work and great satisfaction."

"I cannot believe how many experiences and learning opportunities were packed into 14 days." Lauren had the chance to learn suturing, wound dressing, driving license safety assessment and paediatric communication skills, as well as having the opportunity to work individually with patients and report her findings. "There was such a great focus on the patient rather than the disease, which I hope to bring to my practice wherever I am."

In addition to the clinical experiences, Lauren stayed on a farm where she learnt how to ride a horse, take care of cattle and provide hormone injections to breeding heifers. "I also had the opportunity to immerse myself in the community through Australia



Day celebrations...I could not have imagined a better first placement!"

"I had previously thought it would be difficult moving to a rural area to live and work. However, now that I have spent two weeks within a rural area, I can safely say it is a career choice I am seriously considering." Lauren has another placement coming up at the end of 2018 and now that she is halfway through her medical degree, she's looking forward to bringing more clinical experience and knowledge to her placement.

"Whilst on placement, I never once felt like I was 'missing out' or longing for the city bustle. In fact, it was quite the contrary. During my placement, I felt more connected to the community, I felt more grounded in myself and was overall more content. I cannot wait until my next JFPP placement."

CONFERENCE BURSARIES

The Future Workforce Team enable students, interns and junior doctors to connect and engage with the rural health sector through providing bursaries to attend key conferences for health professionals within the sector.

Australian Indigenous Doctors Association (AIDA) Conference

Hunter Valley, NSW – September, 2017

Two Indigenous students from James Cook University were provided bursaries to cover registration.

2018 RDAQ Conference

Brisbane, QLD – June, 2018

10 medical students throughout Queensland were provided bursaries for registration, travel and accommodation.

2018 Junior Doctor Conference

Brisbane, QLD – June, 2018

10 bursaries provided to cover registration for three medical students, four interns and three junior doctors.

2018 RDAQ CONFERENCE FAMILY PROGRAM

7-9 June 2018 | Brisbane QLD



Once again, with valuable funding from Health Workforce Queensland the QRMFN held their Family Program alongside the annual RDAQ Conference, which took place in Brisbane at the Convention and Exhibition Centre. The Family Program had endless activities for the children involved, including:

- + Seeing a magic show
- + Joining the Vulcana Circus
- + Friday Night Social with 1969 fancy dress and the unforgettable chocolate fountain
- + A hip-hop dance class and disco
- + Movie Night of Zootopia and Peter Rabbit
- + Exploring the iconic Southbank with a ride on the Wheel of Brisbane

The QRMFN Annual General Meeting was held on Friday 8 June where the 2018-2019 Committee was agreed on and journalist Ian Townsend attended as guest speaker. Also, at the AGM, the QRMFN relaunched their exciting initiative of bursaries for spouses of rural doctors, which is now funded by and delivered in conjunction with the RDAQ Foundation.

61 Included in the QRMFN Family Program



2018 BACKBONE OF THE BUSH AWARD

9 June 2018 | Brisbane QLD



Wendy McPhee receives the 2018 Backbone of the Bush Award from QRMFN President, James Constable.

Through the Backbone of the Bush Award, the QRMFN recognises the positive contributions to communities and personal accomplishments made by spouses and partners of rural medical practitioners.

For the 2018 Award, the QRMFN and Health Workforce Queensland were pleased to present the award to Wendy McPhee. Wendy is the supportive wife of Emerald general practitioner Dr Ewen McPhee and proud mother of Rohan and Megan. She has passionately served rural Queensland communities for 31 years.

Some of Wendy's personal achievements include:

- + Current Practice Manager for Emerald Medical Group
- + Current Board Director and Acting CEO for Central Highlands Health
- + Assisted in the growth of Emerald Medical Group to include GP registrar training
- + Instrumental in starting one of the first intern programs in general practice through the Junior Doctor Training Innovation Fund
- + Current Training Officer for the Central Highlands Generalist Medical Training and responsible for 16 Registrars across Central Queensland
- + Fostered and supported Japanese clinicians visiting Emerald as part of the Japanese Rural Generalist Program

Most importantly, Wendy has been a welcoming companion of spouses and partners of those Registrars commencing practice in Emerald and has provided both the Registrar and their family practical advice on living and working in the bush. On the whole, Wendy has been a significant facilitator for the success of Emerald as a GP and RG training hub.

PARTNERSHIPS AND COLLABORATION

RURAL WORKFORCE AGENCY NETWORK AND CONSORTIUM

Health Workforce Queensland is one of seven Rural Workforce Agencies (RWAs) across Australia that provides support to and advocates for the remote and rural health workforce in their jurisdiction.

The RWAs initially came together as a Consortium in 2016-2017 when they successfully tendered for the John Flynn Placement Program. The RWA Consortium now administer and deliver two nation-wide programs: John Flynn Placement Program and the Health Workforce Scholarship Program, as well as

providing administration support to the National Rural Health Student Network.

In addition to this, each RWA has been contracted to deliver the Rural Health Workforce Support Program within their jurisdiction. Part of this contractual agreement is undertaking a Health Workforce Needs Assessment on the remote and rural primary health care workforce in their respective state or territory. The RWAs developed a national methodology for the Health Workforce Needs Assessment to

ensure the consistent collection and reporting on remote and rural health workforce data.

The RWAs have established a strong partnership and collectively aim to:

- + Work hard to ensure rural communities have access to quality healthcare
- + Deliver programs and services that encourage health professionals to live and work in rural locations
- + Build healthy rural communities



EXTERNAL EVENTS

MYPHN CONFERENCE

7-9 July, 2017 | Cairns – ‘Transforming Healthcare Together’

After a sell-out inaugural event in 2016, the myPHN Conference 2017 was again held in Cairns. The national Primary Health Network conference explored the ever-changing landscape of health.

The myPHN Conference program aimed to prepare health professionals for the future, through focusing on current health reforms, the future of digital health, and what they mean for healthcare.

Health Workforce Queensland's Training & Events Team provided event management services. In addition to this, staff also attended for the trade booth and as delegates.

ST GEORGE POST-GRADUATE MEDICAL CONFERENCE

3-5 November, 2017 | St George

The St George Postgraduate Medical Conference is a free biennial event. Health Workforce Queensland was the Conference Partner and our Training and Events Team provided event management services for the St George Medical Centre.

The conference is aimed at anyone interested in engaging in rural medicine, with participants usually involving general practitioners, specialist doctors, junior doctors, nurses, pharmacists, allied health professionals and students. The St George Conference is hosted in conjunction with JCU Generalist Medical Training.

RDAQ CONFERENCE

7-9 June, 2018 | Brisbane – ‘Many Journeys Common Ground’



Health Workforce Queensland continues our strong partnership with the Rural Doctors Association of Queensland (RDAQ). Our Training and Events Team provided event management services to deliver the 2018 RDAQ Conference in Brisbane, as well as the Agency being the Conference Partner.

Health Workforce Queensland sponsored the Workforce Breakfast on Friday 8 June. In 2018, the Agency recognises 20 years as Rural Workforce Agency and integrated this theme in the Workforce Breakfast presentation – looking at the medical workforce then and now and some of the policy levers and influences that have impacted the workforce since 1998. The presentation also provided a brief overview of the findings of the state-wide Health Workforce Needs Assessment and how the focus now is on collaboration and implementation.

We also have a trade stand at the RDAQ Conference, which gives us the opportunity to engage with general practitioners in rural Queensland – many of which the Agency works with individually and with their practice. Lastly, the Queensland Rural Medical Family Network, funded by Health Workforce Queensland, delivered the Family Program for spouses, partners and children of delegates.



FINANCIAL STATEMENTS



STATEMENT OF PROFIT OR LOSS

Statement of Profit or Loss and Other Comprehensive Income

For the Year Ended 30 June 2018

	2018 (\$)	2017 (\$)
Revenue	10,789,876	5,533,875
Expenses	(10,631,792)	(5,678,239)
Surplus/(Deficit) before income tax	158,084	(144,364)
Income tax expense	-	-
Surplus/(Deficit) for the year	158,084	(144,364)
Other comprehensive income, net of income tax		
Items that will not be reclassified subsequently to profit or loss	-	-
Items that will be reclassified to profit or loss when specific conditions are met	-	-
Total Comprehensive income attributable to members of the entity	158,084	(144,364)

STATEMENT OF FINANCIAL POSITION

	2018 (\$)	2017 (\$)
ASSETS		
CURRENT ASSETS		
Cash and cash equivalents	8,478,473	4,974,029
Trade and other receivables	6,400,953	211,636
TOTAL CURRENT ASSETS	14,879,426	5,185,665
NON-CURRENT ASSETS		
Total Property, plant and equipment	133,862	155,282
TOTAL NON-CURRENT ASSETS	133,862	155,282
TOTAL ASSETS	15,013,288	5,340,947
LIABILITIES		
CURRENT LIABILITIES		
Trade and other payables	697,175	274,157
Short-term provisions	380,054	147,412
Other liabilities	11,755,021	2,673,544
TOTAL CURRENT LIABILITIES	12,832,250	3,095,113
NON-CURRENT LIABILITIES		
Long-term provisions	27,753	250,633
TOTAL NON-CURRENT LIABILITIES	27,753	250,633
TOTAL LIABILITIES	12,860,003	3,345,746
NET ASSETS	2,153,285	1,995,201
EQUITY		
Retained earnings	2,153,285	1,995,201
TOTAL EQUITY	2,153,285	1,995,201

INDEPENDENT AUDITOR REPORT



Independent Auditor's Report to the Members of Health Workforce Queensland Limited

Report on the Audit of the Financial Report

Opinion

We have audited the financial report of Health Workforce Queensland Limited (the Company), which comprises the statement of financial position as at 30 June 2018, the statement of profit or loss and other comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies, and the directors' declaration.

In our opinion, the accompanying financial report of Health Workforce Queensland Limited has been prepared in accordance with Div 60 of the *Australian Charities and Not-for-Profits Commission Act 2012*, including:

- i) giving a true and fair view of the Company's financial position as at 30 June 2018 and of its financial performance for the year ended; and
- ii) complying with Australian Accounting Standards and Div 60 of the *Australian Charities and Not-for-Profits Commission Regulation 2013*.

Basis for Opinion

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Report section of our report. We are independent of the Company in accordance with Australian Charities and Not-for-Profits Commission Act and the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110: *Code of Ethics for Professional Accountants* (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

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**Independent Auditor's Report to the Members of Health Workforce Queensland Limited
(continued)**

Information Other than the Financial Report and Auditor's Report Thereon

The directors are responsible for the other information. The other information comprises the information included in the Company's annual report for the year ended 30 June 2018, but does not include the financial report and our auditor's report thereon. Our opinion on the financial report does not cover the other information and accordingly we do not express any form of assurance conclusion thereon. In connection with our audit of the financial report, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial report or our knowledge obtained in the audit or otherwise appears to be materially misstated. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

Responsibilities of the Directors for the Financial Report

The directors of the Company are responsible for the preparation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards and the *Australian Charities and Not-for Profits Commission Act 2012* and for such internal control as the directors determine is necessary to enable the preparation of the financial report that gives a true and fair view and is free from material misstatement, whether due to fraud or error.

In preparing the financial report, the directors are responsible for assessing the ability of the Company to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the directors either intend to liquidate the Company or to cease operations, or have no realistic alternative but to do so.

Auditor's Responsibilities for the Audit of the Financial Report

Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with the Australian Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of this financial report.

As part of an audit in accordance with the Australian Auditing Standards, we exercise professional judgement and maintain professional scepticism throughout the audit. We also:



**Independent Auditor's Report to the Members of Health Workforce Queensland Limited
(continued)**

Information Other than the Financial Report and Auditor's Report Thereon

The directors are responsible for the other information. The other information comprises the information included in the Company's annual report for the year ended 30 June 2018, but does not include the financial report and our auditor's report thereon. Our opinion on the financial report does not cover the other information and accordingly we do not express any form of assurance conclusion thereon. In connection with our audit of the financial report, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial report or our knowledge obtained in the audit or otherwise appears to be materially misstated. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

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In preparing the financial report, the directors are responsible for assessing the ability of the Company to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the directors either intend to liquidate the Company or to cease operations, or have no realistic alternative but to do so.

Auditor's Responsibilities for the Audit of the Financial Report

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As part of an audit in accordance with the Australian Auditing Standards, we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

INDEPENDENCE DECLARATION



Auditor's Independence Declaration

Under Section 307C of the *Corporations Act 2001*

To the directors of Health Workforce Queensland Limited

I declare that, to the best of my knowledge and belief, during the year ended 30 June 2018 there have been no contraventions of:

- (i) the auditor independence requirements as set out in the *Corporations Act 2001* in relation to the audit; and
- (ii) any applicable code of professional conduct in relation to the audit.

Nexia Brisbane Audit Pty Ltd

Nexia Brisbane Audit Pty Ltd

Nigel Bamford

N D Bamford
Director

Date: 24 October 2018

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**Health Workforce
Queensland**

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**Health Workforce
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