Welcome to the September issue of the CRANAplus Magazine. The cover photo for this edition was taken during the launch in Alice Springs, of the CRANAplus eRemote program. This innovative, online, educational resource has been enthusiastically received by both individuals and organisations, keen to use these engaging, interactive e-learning modules.

Our 28th National Conference is less than a month away. CRANAplus has a reputation for conferences of value and significance and you’ll find the 2010 Conference Program once again reflects this high standard.

It is 12 months since the Adelaide FLEC office opened and, in this issue, team members offer insights into their roles and the logistical challenges of course delivery.

We are proud to announce we have reached a membership of 1000. Our 1000th member, Claire Kappel, will join us in Adelaide with the Conference pass she won to commemorate this milestone in CRANAplus history.

CRANAplus is enjoying increasing support from organisations throughout Australia and we currently have 12 Corporate members. To keep you informed of these successful partnerships and to illustrate how highly we value their continuing support, we will now include the logos of these outstanding associations and service organisations in each edition of our magazine.

After a year as Publications Liaison, Paula Waggoner has left the organisation to pursue other business interests. Paula’s knowledge proved invaluable during the revamping of the CRANAplus publications and our rebranding. We thank her for her contribution to CRANAplus and wish her well for the future.

What are your favourite strategies to combat stress? We’d love you to share your ideas with us no matter how small or zany. Fill out the competition entry form included in this edition and be in the running for some great prizes.

See you at the conference,

Anne-Marie Borchers
Business Manager, CRANAplus
The theme of this magazine is education, which is an expanding area of work for CRANAplus. In this edition members will be aware that we have launched the eRemote program, and that all of our other new programs have been launched and evaluated.

We have come a long way from the development and delivery of our REC and MEC courses, the groundbreaking remote courses that have defined our education program for a number of years.

It is because of the success of both of the those programs, that we are now in a position whereby we can expand into other areas of need in the remote sector and other ‘players’ are seeking us out to join in our program achievements.

It is quite clear that due to the hard work of our education team and those who have gone before them, that our work in this area is both respected and highly sought after.

Remote Area nursing is a field that is not accurately understood by those outside the sector. It is our belief that remote area nursing is a sub-specialty of nursing and should be recognised and remunerated as such. As an organisation we are constantly being asked to define both the sector and its health professionals and the need to do so is becoming more urgent. CRANAplus understands the need to ensure consistency of scope within the remote professions and is actively developing this process for the remote industry. CRANAplus is dedicating its limited resources to researching the parameters around which the professions can be defined, which clearly highlights our dedication to this very important professional issue.

However, it is you the members that epitomise and define what remote health is really about. Education is important and I would encourage all members to continually upskill and advance their knowledge.

But it is so much more. It is about attitude, dedication, a sense of “wanting to make a difference”.

It’s about you. Keep it up – you do make a difference – and you really do matter.

Carole Taylor
CEO, CRANAplus

We want to hear your stories about remote health practice, and the best will be included in future editions. Editorial submissions, photos and questions about editorial content should be directed to publications@crana.org.au
I have recently returned from a visit to several remote Inuit communities in Northern Quebec, Canada, where they successfully combine birthing onsite alongside the education of Inuit midwives.

It was absolutely incredible to see the similarities between these communities and our own remote areas: predominately Indigenous communities (even more remote than ours) where hunting is important, while going to school is less so; the 4-wheel quad bike is a popular method of transport; unemployment and the cost of food is high; and take-away food is popular.

It was one of the most interesting trips I have ever experienced. I have wanted to visit for many years (in fact I had a starting date to work there in 2004 before life circumstances intervened). So instead of our dream of spending a year with the Inuit, both Sue Kruske and I had one week there. But what a week.

“…flying in a Dash 8 – 45 seater over miles and miles of ‘tundra’, low, flat, desolate, windswept plains with water everywhere and no trees.”

The first community was Puvirnituq (population 1,800) – the famous community from the Birthrites video – which took hours to reach flying in a Dash 8 – 45 seater over miles and miles of ‘tundra’, low, flat, desolate, windswept plains with water everywhere and no trees.

The Maternity service sits within, though separate from, the hospital, a 20-bed inpatient facility with no surgical facilities servicing the entire region of Nunuvik, which is similar in size and community numbers to Arnhem Land.
Sue Kildea reports on one of the most interesting trips she has ever experienced, a recent visit to remote Inuit communities in Northern Quebec.

Pregnant women are sent there from any of the six or so villages in Western Nunivik.

Most of these communities have health centres, staffed by nurses and interpreters, but no midwives or Aboriginal Health Workers. They have been birthing in Puv (as it is called) since 1985 and commenced onsite training of midwives at the same time. The challenges have been huge but it is one of the most successful community initiatives I’ve ever heard of. We heard stories of women with very low literacy who had learnt to be midwives through an apprentice-type training and now carry an individual caseload of women that they are primary carers for.

“They have been birthing in Puv since 1985 and commenced onsite training of midwives at the same time. The challenges have been huge but it is one of the most successful community initiatives I’ve ever heard of.”

Women with complications in pregnancy from the two other communities which also provide birthing services and midwifery education (Salluit, pop: 1,100 and Inuksujuaq, pop: 1,400), send women to Puv and anyone with serious complications travels to Montreal (5–6 hours away if weather allows).
The second community we visited (Inukjuak) was fogged in on the day we were to visit but we didn’t know this until the aircraft was about 200 feet off landing and then accelerated at an urgent pace to lift us skyward.

“I was struck by the amazing maternal and neonatal outcomes and the onsite education that incorporates both Inuit and Western knowledge.”

Apparently it happens a lot and made me think of the implications of this if complications occurred in birth. When we did arrive there the next day it was fabulous to see the unit run by Inuit midwives talking to Inuit women in their own language. Student midwives are employed as postnatal workers and are embedded in the clinical area with Thursdays set aside for studying.

Across the area there are now nine registered Inuit midwives and a similar number of students.

So, although the challenges and health statistics were incredibly similar, I was struck by the amazing maternal and neonatal outcomes and the onsite education that incorporates both Inuit and Western knowledge. With the theme of this month’s publication being education it has certainly given me a lot to think about.

Looking forward to seeing many of you at the conference.

Sue Kildea
Vice President, CRANAplus

A Notice of the Annual General Meeting to be held Friday October 15th 2010, at 11.20 at Hotel Grand Chancellor, Hindley St, Adelaide has been sent to members. All members are welcome to attend.
## Advertising Rates

### Standard Rates

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### Colour Rates

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Rates are in AUD$ and are inclusive of GST. All artwork to be submitted by close of business on the published deadline date. Full colour ads to be submitted in high resolution PDF format with all fonts embedded and all colours separated into CMYK.

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**Publication Dates:** March, June, September, and December

**Submission Dates:** First day of February, May, August and November

Magazine is printed in A5 format. Other advertising sizes can be negotiated.
Diabetes, stress in the workplace, reproductive health and Indigenous issues are among the diversity of papers for discussion and debate at the 2010 CRANAplus conference.

Coupled with fun-filled activities before, during and after the formal program, attendees can expect a stimulating and entertaining few days.

‘Are we there yet?’ on the issue of national health reform; ‘What happens during the 1st year of life?’ talking about health services used for Aboriginal infants from two remote Top End communities: these are just two of the complex questions explored over the three days.

Attendees will also get a glimpse of the challenges facing health professions in far-flung places from Haiti to Pakistan, as well as locations closer to home but still remote, from the Torres Strait islands to rural Victoria.

The conference is hosted by MC Sue Kruske, a midwife and child health nurse with extensive experience in working with Australian Aboriginal families in remote areas of Australia.

She is currently an Associate Professor at the Queensland Centre of Mothers and Babies and the Vice President of the Australian Association of the Maternal Child and Family Health Nurses.

A cruise on the Popeye riverboat on the River Torrens heralds the opening of the conference on Wednesday October 13th. This is the first of many South Australian icons for locals and interstate visitors to enjoy.

Attendees will enjoy a half hour river cruise and alight at Adelaide Zoological Gardens landing where they will receive a private tour of the Bamboo forest enclosure housing the Giant Pandas from China, Funi and Wang Wang.

Above and overleaf: Rwandan dancers, who will be performing for us on the 14th, at the launch of Refugee Week, The Bob Hawke Prime Ministerial Centre, 21 June 2010.
The annual CRANAplus Undergraduate Remote Placement Scholarships provide $1000 each to six students who, as part of their undergraduate health course of study through any Australian University, wish to undertake a placement in a remote location. This opportunity is to encourage the remote health professionals of the future.

A performance by the highly acclaimed Rwandan Dancers (SA Refugee Association) will reflect South Australia's cultural diversity, while SA food and wines will be showcased at the Conference dinner on the Saturday night.

Conference dinner MC is top Australian comedienne Nelly Thomas who will undoubtedly entertain attendees while also dropping in some health promotional issues for teenagers, one of her specialties.

The annual awards ceremony is a major highlight of the conference.

The Aurora Award recognises leadership and outstanding contribution to remote area nursing and remote health in Australia. Presented each year to ‘a leading light’, this award acknowledges individuals who inspire and motivate us through their leadership, excellence, enthusiasm and commitment.

The CRANAplus Awards are presented to remote health professionals who ‘have made a special contribution to improve health outcomes’. The recipients can be nominated by their co-workers and those who receive their care. There are seven award categories:

1. Clinical Excellence
2. Research and Education
3. Management
4. Primary Health Care Champion
5. Novice/Encouragement Award
6. Collaborative Team Award
7. Mentoring

The annual CRANAplus Undergraduate Remote Placement Scholarships provide $1000 each to six students who, as part of their undergraduate health course of study through any Australian University, wish to undertake a placement in a remote location. This opportunity is to encourage the remote health professionals of the future.

The NT Medic Nursing Agency Prize is awarded to the student with the highest overall performance in the topic HLTH8203 Remote Advanced Nursing Practice and Pharmacotherapeutics. This award aims to encourage the development of new RANs entering the ranks and to show our ongoing appreciation of the work of our very special RANs.

©SATC
# conference program

**Wednesday 13 October**

<table>
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<tr>
<th>Time</th>
<th>Event</th>
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<tbody>
<tr>
<td>1:00 pm</td>
<td><strong>Registration opens</strong> Hotel Grand Chancellor on Hindley Street</td>
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<tr>
<td>3:00 pm</td>
<td>Registration closes</td>
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<tr>
<td>4:00 pm</td>
<td>Popeye River Boats Depart (Elder Park) for Opening function at Adelaide Zoo</td>
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<td>Private Tour of the Panda Enclosure</td>
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<td>6:00 pm</td>
<td>Opening Ceremony and Cocktail Party, Zoological Gardens Rotunda</td>
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<td>Official opening by Hon Warren Snowden MP, Minister for Indigenous Health, Rural and Regional Health and Regional Services Delivery</td>
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<td><strong>Welcome to Country by Mrs Josie Agius, Kaurna Elder</strong></td>
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**Thursday 14 October**

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<tr>
<th>Time</th>
<th>Event</th>
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<tbody>
<tr>
<td>8:00 am</td>
<td><strong>Registration opens</strong> coffee, tea and networking</td>
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<tr>
<td>8:30 am</td>
<td>Tradeshow opens</td>
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<tr>
<td>9:00 am</td>
<td>Conference opened by CRANAplus President, Christopher Cliffe</td>
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<td>Introduction of Conference MC Sue Kruiske, PhD, Associate Professor, Charles Darwin University</td>
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<tr>
<td>9:15 am</td>
<td><strong>Keynote address</strong> Rosemary Bryant, Chief Nurse and Midwifery Officer</td>
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<tr>
<td>9:45 am</td>
<td>Libby Bowell, Christopher Cliffe and Rhonda Golsby-Smith</td>
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<td>Haiti: The changing face of a disaster</td>
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<td>10:20 am</td>
<td>Nick Williams <strong>A short stay on the edge of the Hindu Kush with the ICRC in north-west Pakistan</strong></td>
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<td>10:40 am</td>
<td>Leanne Miller <strong>From local to global – Women’s advocacy</strong></td>
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<tr>
<td>11:00 am</td>
<td><strong>Morning tea</strong> served in the Tradeshow</td>
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<tr>
<td>11:30 am</td>
<td>Jan Hall <strong>Online cultural orientation for health professionals working in Aboriginal health</strong></td>
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<tr>
<td>11:50 am</td>
<td>Wendy Mackay <strong>Ochre to Aqua: A specialised graduate nurse program in the remote setting</strong></td>
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<tr>
<td>12:10 pm</td>
<td>Kerrie Doyle <strong>Teaching &amp; Learning: selling remote health to students in urban settings: a teacher/student perspective</strong></td>
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<tr>
<td>12:30 pm</td>
<td><strong>Lunch</strong> served in the Tradeshow</td>
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<tr>
<td>1:30 pm</td>
<td>Lee Thomas <strong>Nurse Practitioners and Midwives: MBS &amp; PBS access – action for everyday practice</strong></td>
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<tr>
<td>1:50 pm</td>
<td>Isabelle Ellis <strong>Credentialing to improve quality and safety in remote health</strong></td>
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<tr>
<td>2:10 pm</td>
<td>Sabina Knight <strong>Are we there yet? Will national health reform be the road to comprehensive primary health care in remote and vulnerable populations?</strong></td>
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<td>2:30 pm</td>
<td><strong>Rwandan Dancers</strong> (SA Refugee Association)</td>
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<tr>
<td>3:00 pm</td>
<td><strong>Afternoon tea</strong> served in the Tradeshow</td>
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<td>3:30 pm</td>
<td>Sarah Bar-Zeev and Sue Kruiske <strong>What happens during the 1st year of life? Health service utilisation by Aboriginal infants from two remote Top End communities</strong></td>
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<tr>
<td>3:50 pm</td>
<td>Sue Kildea and Sue Kruiske <strong>Northern Exposure: Describing a fleeting visit to the remote Inuit birthing services</strong></td>
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<td>4:10 pm</td>
<td>Florence Sofield <strong>Continuous quality improvement and the OATSIH healthy for life program</strong></td>
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<tr>
<td>4:30 pm</td>
<td>Doune Heppner <strong>Flexible and innovative NP model of care</strong></td>
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<td>4:50 pm</td>
<td><strong>Raffle draw and close</strong></td>
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Friday 15 October

8:00 am  **Registration opens** coffee, tea and networking
8:30 am  Tradeshow opens
9:00 am  **Keynote address** Mr Greg Cavanagh – Northern Territory Coroner
9:30 am  Kathy Tori and Tracy Kidd *The Role of the Nurse Practitioner in rural and remote Victoria*
9:50 am  Sue Lenthall *Back from the Edge: reducing and preventing occupational stress in the remote area nursing workforce*
10:10 am Peter May *Overburden: Impacts of morbidity in Central Australia*
10:30 am  **Morning tea** served in the Tradeshow
11:00 am Trudy Yuginovich *Connected care communities in regional Queensland*
11:20 am  **CRANAplus Annual General Meeting**
12:30 pm  **Lunch** served in the Tradeshow
12:30 pm  Alice Rumbold (presenting on behalf of Bronwyn Silver) *Reproductive Health at Risk: Challenges associated with pelvic inflammatory disease in remote Central Australia*
1:50 pm  Sue Kildea *Can fetal fibronectin (fFN) be used to predict term labour and reduce time spent away from family for remote dwelling women relocated for birth?*
2:10 pm  Cynthia Porter *Diabetes in pregnancy impacting differently for Aboriginal women in WA*
2:30 pm  Alice Rumbold *Equitable access to fetal anomaly screening: Views of Aboriginal women in NT*
2:50 pm  **Afternoon tea** served in the Tradeshow
3:20 pm  Stephanie Jeremy *REC Canberra: Doing it here and beyond*
3:40 pm  Annmaree Wilson *Going off the beaten track: Flexible service delivery and the challenge of new technology for Bush Support Services*
4:00 pm  Mark Millard *BSS open days on the road: Reaching out to remote workers face to face*
4:20 pm  Greg Rickard *The nursing workforce in very remote Australia: Characteristics and key issues*
4:40 pm  **Raffle draw and close**
### Saturday 16 October

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<td>8:00 am</td>
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<td>8:30 am</td>
<td>Tradeshow opens</td>
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<td>9:00 am</td>
<td>Keynote address Mr John Mofflin, Co-Founder Jack Thompson Foundation</td>
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<tr>
<td>9:30 am</td>
<td>Julia Stewart and Christopher Cliffe <em>Being safe, Practising safe</em></td>
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<tr>
<td>9:50 am</td>
<td>John Wright <em>Critical thinking in Remote Health Practice</em></td>
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<tr>
<td>10:10 am</td>
<td><strong>Morning tea</strong> served in the Tradeshow</td>
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<tr>
<td>10:45 am</td>
<td>Tess Opie <em>Trends in workplace violence in the remote area health workforce</em></td>
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<td>11:05 am</td>
<td>Kylie McCullough <em>Violence towards remote area nurses: Results from a Delphi study to develop a risk management approach</em></td>
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<tr>
<td>11:25 am</td>
<td>FLEC and eRemote Showcase</td>
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<tr>
<td>12:00 pm</td>
<td><strong>Lunch served</strong> in the Tradeshow</td>
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<tr>
<td>1:00 pm</td>
<td>Tradeshow closes</td>
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<tr>
<td>1:00 pm</td>
<td>Kyllie Cripps and Jodie Saxton <em>Beating the drums of silence: Inclusive practice and stronger partnerships responding to Indigenous violence and disabilities</em></td>
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<td>1:20 pm</td>
<td>Daphne Yarram <em>The challenges of developing and implementing a community-led approach to Indigenous family violence at a grassroots level</em></td>
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<td>1:40 pm</td>
<td>Wendy Mackay <em>Growing the primary health care workforce landscape</em></td>
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<tr>
<td>2:00 pm</td>
<td>Lyn Hinspeter <em>Remote health professionals do health care in many different ways and places</em></td>
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<tr>
<td>2:20 pm</td>
<td>Sue Leverton <em>Third world in the real world</em></td>
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<tr>
<td>2:40 pm</td>
<td>Janet Struber <em>Supporting remote health through the development of primary health care guidelines; a partnership approach</em></td>
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<tr>
<td>3:00 pm</td>
<td><strong>Afternoon tea</strong> served in the Tradeshow &amp; Raffle Draw</td>
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<tr>
<td>3:30 pm</td>
<td><strong>Close</strong> for setup of official conference dinner</td>
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<tr>
<td>6:45 pm</td>
<td><strong>Conference dinner</strong> at the Hotel Grand Chancellor</td>
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Rosemary Bryant commenced in the position of Commonwealth Chief Nurse and Midwifery Officer in July 2008. She was formerly Executive Director of the Royal College of Nursing, Australia, a position she held for eight years.

She has had a broad career in acute hospital and community nursing, as well as in government relations. Executive positions she has held include Director of Nursing at Royal Adelaide Hospital and also at the then Child, Adolescent and Family Health Service in SA and the chief government nursing position in Victoria. She also spent some time in private consulting undertaking projects on nursing and health. During this time she was a consultant to the World Health Organisation.

Rosemary has had a broad experience in policy development both in nursing and the broader health sector. Since taking up the position in the Commonwealth, Rosemary led a review of maternity services which culminated in a report to the Minister in March 2009.

Rosemary is a Fellow of the Royal College of Nursing, Australia, is Emeritus Director of Nursing at Royal Adelaide Hospital and was elected as President of the International Council of Nurses in 2009.

Mr Greg Cavanagh, B.Juris. LL.B (Monash), LL.M (London)
Territory Coroner, Northern Territory of Australia
Appointed Magistrate in 1996
Appointed Territory Coroner in 1997

John Mofflin, Director and General Manager Jack Thompson Foundation Ltd.

In 2007, John Mofflin attended the Garma Festival in the North East Arnhem Land of the Northern Territory and was moved by the stories he heard of overcrowded homes and the ensuing social problems. Through his knowledge of timber milling and building, he realised how the timber growing in the area could be used to solve the chronic housing shortage in Arnhem Land. People living ‘on country’ could be taught to build their own houses out of the ‘living ground’. He approached Jack Thompson, for his support and Jack, fully seeing the potential of the idea, offered his backing and the Jack Thompson Foundation was born.

John lived in Northeast Arnhem Land for 9 months in 2008, working with the Yolngu people, and teaching logging and milling techniques and facilitating instruction on how to build their own homes. It was a resounding success; this constituted the Jack Thompson Foundation pilot project.

Since then the Foundation has been spearheaded by John’s continued voluntary commitment. John has become a Keynote speaker at conferences in the area of Indigenous issues and has gained respect in remote communities throughout Australia as an advocate and champion of Indigenous issues. John Mofflin is an ordinary bloke with an extraordinary vision.
conference sponsors

CRANApplus has a reputation for conferences of value and significance and we appreciate and value the support of our conference sponsors. This partnership and involvement in the conference provides a further opportunity for participants to update on current policy, innovations, products and career opportunities relevant to the remote health sector in Australia.

Principal Partner

Australian Government
Department of Health and Ageing

The vision of the Department of Health and Ageing is Better health and active ageing for all Australians.

The department is responsible for achieving the Australian Government’s priorities for population health, aged care and population ageing as well as medical services, primary care, rural health, hearing services and Indigenous health. The department administers programs to meet the Australian Government’s objectives in health system capacity and quality, mental health, health workforce, acute care, biosecurity and emergency response, as well as sport performance and participation. The department supports the Australian community’s access to affordable private health services and is responsible for policy on Medicare and the Pharmaceutical Benefits Scheme.

Conference program sponsor

The College of Nursing

The College of Nursing is a peak professional body representing nurses across Australia. It is the largest, longest established and most innovative provider of quality clinical specialty development and postgraduate nursing education in Australia.

Associate Sponsor

Randstad's Health and Community Care team has provided the best health professionals and support staff to your industry for over 30 years. Coming from nursing, medical and community care backgrounds, our team knows your industry inside and out.

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Our expertise in supplying agency staff to rural and remote areas has seen us awarded preferred supplier status to a large number of public and private health organisations across Australia.

Our recruitment methodology using strict procedures and quality assured processes, ensures we only employ staff that meet our highest expectations and we only supply staff to you that will exceed your expectations and fit seamlessly into your team.

But it is through our ability to match staff to your individual recruitment needs that you can be assured you get consistent service and quality of staff from Randstad each and every time. We take the time to know our staff, their needs and ensure they match not only the skills set you require but also the team and the environment in which they will be required to work in with you.

Working with Randstad will make your life easier. Call us now on 1300 658 899.
The Remote Area Health Corps (RAHC) has been established to strengthen primary health care services in remote Indigenous communities in the Northern Territory. By working in close collaboration with the Aboriginal Medical Services Alliance Northern Territory (AMSANT) and the Northern Territory Department of Health and Families (NT DHF) we are able to provide support by responding to their requests for recruitment of specific primary healthcare professionals. RAHC is designed to mobilize urban-based health professionals – doctors, nurses, dental and allied health – to work in primary health services for Indigenous people in remote areas of the Northern Territory (NT).

Sue Kruske is a midwife and child health nurse with extensive experience in working with Australian Aboriginal families in remote areas of Australia. She is currently Associate Professor at Charles Darwin University, and Vice President of the Queensland Child and Family Nurses Association.

Nelly Thomas is one of Australia’s most natural and intelligent performers. Swinging fast and boldly between refined social satire and a guilty gorging on junk TV, you’d be hard pressed to find a more engaging, challenging stand up comedy experience. Nelly sprung into comedy suddenly, winning the Comedy Festival’s Raw Comedy competition in 2003. Six action packed years later, she continues to work in the community and government sectors in particular, as a corporate performer and producer of custom-made performances. Visit www.nellythomas.com for background information, reviews and testimonials.
**registration options**

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<td><strong>Full Conference Package: 13–16 October 2010</strong></td>
<td>$650</td>
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<td><strong>Student Rate for Full Conference Package</strong></td>
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<td><strong>Single Day Pass</strong></td>
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<td><strong>Opening Ceremony: 13 October 2010</strong></td>
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<td><strong>Conference Dinner: 16 October 2010</strong></td>
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**post-conference tour: barossa & hahndorf**

**Barossa Valley**

Tempt your senses in the magnificent Barossa Valley. You’ll capture the atmosphere of the Barossa, touring quaint villages set amidst rolling hills and pastures dotted with superb wineries. Wine tastings await at the Langmeil Winery.

The tour package includes a stop at Kaesler Winery Restaurant for lunch.

**Adelaide Hills**

Heading over the beautiful Adelaide Hills – a region with market gardens and colorful history, you’ll pass by stunning scenery with rows of vines, natural bushland, historic villages and the old mill town of Woodside.

**Hahndorf**

Your senses will be consumed by the atmosphere of Hahndorf, a quaint Bavarian village nestled in the Adelaide Hills. Perhaps indulge in a local tradition of scones, jam and cream with tea or coffee (own expense) and stroll under Elm trees and browse in the craft shops.

The fare of only $75 includes wine tasting at Langmeil Winery, lunch at Kaesler Winery and bus transportation. The tour will depart the Hotel Grand Chancellor at 9:30am on Sunday 17 October and return to the hotel at 5:30 pm.

Booking for the post-conference tour can be made in conjunction with your conference registration or by calling Helen Phipps at (08) 8408 8200.
accommodation

The city of Adelaide offers a wide range of accommodation options. We have negotiated special conference rates at four hotels. The conference will be held at the Hotel Grand Chancellor where rooms are available starting at $160 per night. We have options for every price range, all within walking distance of the conference venue.

Hotel Grand Chancellor
(Conference Venue)
65 Hindley Street, Adelaide
from $160 per room per night
Code: CRANA

Mercure Grosvenor Hotel
125 North Terrace, Adelaide
$115 3 star/$165 4 star per room per night
Code: CRANA Conference

Comfort Hotel
31 North Terrace, Adelaide
from $135 per room per night, includes breakfast
Code: CRANA135

Hostel
Adelaide Travellers Inn/Backpackers
220 Hutt St, Adelaide
$26 per bed per night with common bathroom
$30 per bed per night in 4 bed ensuite room
Code: No code required
**Loss of Rights Report**

**Rev Dr Djiniyini Gondarra OAM** said of the visit to the UN, “The environment in which we were speaking was one focused solely on human rights; it was not intruded upon by politics. We were able to reach the heights in dialogue and understanding that we hadn’t expected.”

**Rosalie Kunoth-Monks OAM** agreed and said, “I went to the UN to relieve my pain by being able to present the true facts of what is happening in the remote parts of our country. I had to find a platform where it could be told.”

**Concerned Australians and the UN Convention on the Elimination All Forms of Racial Discrimination 1966**

This Convention has been ratified by more than 156 countries around the world. Australia ratified the Convention almost 35 years ago, in 1975.

The Committee, made up of 18 international experts meets in Geneva every 6 months and Australia reports to the Committee every 2 years when its turn comes around. Each country is obliged to show the Committee how it has complied with the Convention and to report on the changes it has made in response to recommendations made by the Committee since the previous meeting.

The Government’s report for the August 2010 meeting can be found at www.dfat.gov.au

In addition to the report from government, reports from NGOs and Individuals or groups of individuals can also be submitted.

The main NGO report was compiled by National Association of Community Legal Centres. It is an excellent report and concerned Australians have endorsed it. To complement this report and to provide an opportunity for the people of the Northern Territory to express their views to the Committee, concerned Australians submitted an additional report, *Loss of Rights*. This report is in 2 parts, the first being a legal overview which was written by Professor Alastair Nicholson AO RFD QC. The second part of the report provides a framework within which the voices of Aboriginal people from across the Northern Territory are able to provide some insights into their desperation.

The *Loss of Rights* report was presented in Geneva by Rev. Dr. Djiniyini Gondarra OAM from Galiwin’ku and Rosalie Kunoth-Monks OAM from Utopia in Central Australia.

Should you wish to have a hard copy of the report, please contact us at harrisme@bigpond.com. Sadly we are unable to cover the cost of printing and will need to pass this on to you – $6+ postage.
Australian Aboriginal people give their views on the Northern Territory Intervention

At the 2010 Wentworth Lecture, The Hon. Michael Kirby AC CMG said of the book, “I commend to those who have not seen it,...This Is What We Said,... because these are words that we should hear, that our Parliament should hear, that our leaders should hear.”

This Is What We Said was launched in February 2010. Using pictures and quotations taken from footage of actual consultations at Bagot, Ampilatwatja, Utopia and Yirrkala in 2009, plus quotes from other well known Australians and UN representatives, this book provides a graphic account of true feelings of many Aboriginal people in the Northern Territory about the Intervention.

The legislation passed by Parliament in June paid scant attention to the views expressed by many Aboriginal people during the consultations process.

The hard back book is available at A$15 + A$2 packaging and postage, per copy, within Australia.

For orders larger than 4, packaging and postage is free but please note it is best to order in multiples of 9. e.g. 9,18, 27 etc.

To purchase, fill in details below and mail to: Michele Harris, concerned Australians, PO Box 281, East Melbourne, Victoria 8002

Purchase Order Form for This Is What We Said

Your details (please print)

Name

Organisation (if applicable)

Address Street

Suburb State Postcode

Phone number Email

Price per copy – A$15 + A$2 packaging and postage (packaging and postage is free for orders of 4 or more copies)

Number of copies Total payment A$

Please attach your cheque (made payable to Michele. A. Harris) for the total amount payable and send with order form OR make a payment directly into the account below, providing your full name as a reference. Account name: Michele Harris BSB: 733 031 Account number: 578 268

For more information or for email purchases please contact harrisme@bigpond.com

Order now!
eRemote program launched

by Julia Stewart

The new eRemote online learning program launched by CRANAplus in June is a major educational step forward for remote health practitioners.

It has already been hailed as a successful answer to overcoming traditional barriers facing those who want to continue their education and training.

The program aims to empower health professionals by delivering learning modules that are relevant to remote practice. It offers specialised educational opportunities for nurses, doctors, paramedics and aboriginal health workers.

Training is delivered using engaging and interactive methods including downloadable resources, videos, an educational blog and discussion forums.

eRemote is the final of the four pilot educational programs launched over the past 10 months as part of the new suite of First Line Emergency Courses (FLEC) from CRANAplus. The new programs complement the existing Remote and Maternity Emergency Course (REC & MEC). To learn more about the new programs please visit the educational website http://courses.crana.org.au/

“The program aims to empower health professionals by delivering learning modules that are relevant to remote practice. It offers specialised educational opportunities…”
Keeping to the theme of using technology and remote access, Federal Minister for Indigenous, Rural and Regional Health Warren Snowdon launched the program by teleconference from Darwin to a gathering in Alice Springs of more than 30 people including key stakeholders from the department of health, private practice, agencies and educators from various fields.

Following a welcome to country by Pat Ancell Dodds, a traditional Arrente woman, Education Manager Libby Bowell outlined how eRemote was founded, followed by the Online Program Coordinator, Julia Stewart (pictured above), who gave an overview of the program.
CRANApus CEO Carole Taylor said: “There is no doubt that Libby Bowell and Julia Stewart and the team including the advisory group have done an amazing job. The product itself is so comprehensive and they seem to have thought of everything in terms of remote accessibility and need. There is something in this for everyone and it will grow as other needs are identified.”

Testimonials from current users:

“I have been eagerly awaiting these courses for months. Each time I was on the computer for anything, I would quickly check the CRANApus site. I was quite excited yesterday to see I could actually enrol! Well done Julia (and others). This is a great site and education resource for remote nurses.”

First user of eRemote,
Helen Grainger, Registered Nurse

Their online Advanced Life Support (ALS) Program is great, very detailed and impressive (so far – I am only up to module 2!!)

Doctor attending the Mackay AREC course

For more information about this exciting new resource, visit http://courses.crana.org.au/83-page-modules-explained-crana.html or contact Online Program Coordinator Julia Stewart at julia@crana.org.au
Remote areas are characterised by dispersed populations and predominantly high health need. The people who live in remote, rural and isolated areas experience higher levels of trauma, and delays to treatment associated with location and geography – often vast distances, but sometimes water, weather or transport. Remote health professionals not only provide the emergency care, but as part of the primary health care service, perform a wide range of clinical procedures on site. This resource is designed to support this practice.

As with the first edition of the manual, this edition has been written by remote practitioners, for their remote and rural colleagues. The aim is to incorporate the practice, wisdom and experience of these practitioners into a practical, best-practice guide to the many routine emergency procedures carried out in the bush, often in isolation.

Order online www.crana.org.au or phone (08) 8959 1111.
reFLEctions

A year after joining CRANApIus, Claire Prophet, Karen Clarke and Steve Batten reflect on how their lives have changed since taking on roles within the administration team based in the Adelaide office to help deliver training courses to health professionals based in remote parts of Australia.

A recurring nightmare involving a butcher and a sheep’s chest; chatting to rubber mannequins as personal friends; and learning the difference between a trachea tube and a toothbrush: welcome to the coordinating logistics world at CRANApIus.

Claire Prophet, who previously worked as a Ward clerk at Adelaide’s Women’s and Children’s Hospital, reckons she was put in charge of making all the travel arrangements for the First Line Emergency Care (FLEC) team “once they found out that myself and family had spent several years living in various countries around the world, without ever losing one of my four daughters or a suitcase.”

A main task as travel administrator is to ensure all coordinators and facilitators are booked into reasonable accommodation.

“When you consider the remote locations where the courses are held, this can be challenging at times,” Claire said. “One thing I have learnt is even though it states that the accommodation is at a resort, it doesn’t mean resort as I know it, with a spa, room service and luxurious facilities.”

One of her more quirky tasks when planning the Remote Emergency Care (REC) courses is to contact the local butcher to order a whole sheep’s chest, used to simulate putting cannulas
“Karen eagerly traded corporate suits and heels for jeans, casual polo tops and sensible, flat casual footwear.”

Karen eagerly traded corporate suits and heels for jeans, casual polo tops and sensible, flat casual footwear after several years working in a corporate/legal environment, followed by roles in training and operations management.

into a human chest. “I can always hear in the butcher’s voice that he believes it is a hoax call,” Claire said. “Each time, I am always worried that I’ll end up with a whole lot of chops.”

“I believe this is the only job where I get the opportunity to talk to rubber mannequins as though they were my personal friends.”

For Administration manager Karen Clarke, the challenge is moving up to 400 kg of training equipment the length and breadth of Australia within tight time frames.

“I believe this is the only job where I get the opportunity to talk to rubber mannequins as though they were my personal friends,” she laughed.

“I have also learnt that my sense of urgency doesn’t always equate with others, when dealing with airlines, transport suppliers or those operating in different time zones.”

Karen Clarke and Lenny Cooper (Aboriginal Liaison Officer) at Palm Valley.
She now relishes rolling up her sleeves and wading through the dust and dirt to restock equipment supplies.

“Who would’ve thought 12 months ago, I was about to embark on a role that was quite different to anything I had ever experienced in my working life,” she said.

“I am now familiar with locations in Australia that were never previously on my radar and I have had some enlightening and at times thought-provoking discussions with members, as they ring to enquire about course registrations and are eager to discuss what’s happening in their world.”

“It’s very rewarding... Seeing what remote practitioners deal with and the conditions they choose to live in, amazes me. Such dedication is rare indeed.”

Steve Batten, who coordinates course bookings and supports the online training program, has had a similar career shift: swapping an unfulfilling job “making rich people richer” to working in an environment where the bottom line is helping others to better themselves.

“It’s very rewarding,” he said. “Seeing what remote practitioners deal with and the conditions they choose to live in, amazes me. Such dedication is rare indeed.”

He considers being retrenched during the global financial crisis was a godsend. After 20 years in the Trustee and superannuation industries, he no longer has to deal with “cranky millionaires complaining when their financial statements were out by 1 cent, which was a daily occurrence.”

“My background is anything but health-related,” said Steve, “But 12 months on, I love working in this industry.

“And I wasn’t aware that some of the actual training methods and procedures actually sunk in somewhere in the deep recesses of my mind until watching an Emergency Rescue program on TV.

“The helicopter staff attended a car crash and had to extract the driver. I was shocked when they didn’t follow practices around neck support and the guy was just dragged out and placed on the stretcher. I sat there, shouting at the TV ‘what about the neck brace? Who’s supporting his spine? Who trained these guys?’”

Steve is looking forward to exploring more of remote Australia through his work.

“Our induction in Alice Springs opened up a part of the country I had never thought of visiting,” Steve said. “I imagined Alice Springs to be a small town on the flats of central Australia – one road through the middle, nothing on either side. How wrong I was.

“I fell in love with Alice right there and then and have been awestruck since. After the Conference I’ll be going on a 10-day road trip to remote communities so my view of ‘remote’ may well be enhanced again and I can’t wait.

“One day, as well as getting the coordinators and facilitators to their destinations in one piece, I hope to visit some of these wonderful sounding places myself.”

UK-born Claire, who has found pronouncing some of the place names a little difficult, is also keen to see more of this country.

“One day, as well as getting the coordinators and facilitators to their destinations in one piece,” she said, “I hope to visit some of these wonderful sounding places myself.”
12 months on, all three agree that the days have flown by in a whirlwind and the learning curve has been fast and furious.

“I joined the CRANAPlus team filled with excitement and anticipation, eager to develop some understanding around the complexities and challenges for health professionals working in remote environments,” Karen said.

“I feel privileged to be working with a team of health professionals who are passionate, engaging and dedicated to their craft.

“They are always supportive of those of us who don’t know the difference between a trachea tube and a toothbrush.

“No doubt the second part of this year will hurl some curve balls but with one’s sense of humour firmly intact and a fantastically supportive team to work with, ‘bring it on!’ I say.”

Claire agreed. “I feel privileged to work with this professional and caring team,” she said. “I know that each day I come to work is different from the next, and that’s what makes it so challenging, but very, very enjoyable.”

“I can’t remember being so happy to come to work each day...The girls look after me well and I enjoy telling them (or trying to anyway) how things really should work.”

“I can’t remember being so happy to come to work each day,” said Steve, who was initially slightly concerned about working in such a small team – and being the only male in the Adelaide office.

“The girls look after me well and I enjoy telling them (or trying to anyway) how things really should work,” he joked.
advocate

advocacy and health reform

As I write this article, Australia sits there without a Government. It is three days after the election and may take another two weeks to resolve. My first choice would be to wait until there is an outcome and we have some idea of where health is likely to go in the near future. Unfortunately the deadline for our magazine cannot wait for the system to resolve itself.

Whatever happens this is a difficult time as it would be very hard to believe that the tough decisions to be taken around health reform can, or will, be taken with any Government having to trade-off policy to parties and Independents in order to achieve stability.

It is quite possible, even highly likely, that the bulk of the advocacy work we have done in the past months has been for nothing. By the time this article goes to print, health reform could be forgotten and the agreement with the States reviewed or even rescinded.

Apart from the usual work we do in terms of clinical support and general trouble shooting for various members and community clinics, the bulk of my time has been spent working through the new health reform measures.

“By the time this article goes to print, health reform could be forgotten and the agreement with the States reviewed or even rescinded.”

CRANApplus is very supportive of major health reform in this country and has been quite vocal in this regard.

The whole subject of Local Hospital Networks and Medicare locals has taken many hours of discussion, numerous papers and a great deal of lobbying.
As an organisation, CRANAplus has as its sole focus, the support of health professionals in the remote, very remote and isolated areas of Australia and its Territories. We educate, support and advocate for this sector and are one of the very few organisations in that space.

In all of the meetings we have attended, we have argued that there needs to be a great deal of flexibility in both the rural and remote sectors so as to ensure that local needs can be met. One of our major concerns has been that all reforms remain consumer-focused and that dealings with reform in the remote sector, are based on equity of access and improved health outcomes.

This does not mean that everyone should have access to a GP surgery, but that for example an Indigenous woman gets the care that she wants, by whom she wants in a location that suits her and her family during her pregnancy, birth and child rearing years.

Of course, this whole discussion is probably now moot. In order to deliver reform of the magnitude suggested, a Government would need a substantial majority and a clear mandate. This is clearly not the case.

I guess we just take a deep breath, wait till the dust settles and do what we do best. Educate, nag and cajole the new decision makers into taking us seriously and working with us to make a difference. Remote health exists and it is vital that the health needs of that sector do not fall back into the ‘lack of interest’ category.

As I said these are interesting times.

Carole Taylor
CEO, CRANAplus

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This does not mean that everyone should have access to a GP surgery, but that for example an Indigenous woman gets the care that she wants, by whom she wants in a location that suits her and her family during her pregnancy, birth and child rearing years.
1000 and still growing

CRANApplus reached a milestone in our membership history recently by welcoming our 1000th member, Claire Kappel.

“CRANApplus reached a milestone in our membership history recently by welcoming our 1000th member, Claire Kappel.”

To mark the milestone, Claire, who is currently undertaking her Graduate Certificate in Paediatric Nursing Studies, has been given a full pass for the conference in October.

Claire’s membership is reflective of a growing trend: a first time member setting up some of the networks and supports available to her as she embarks on a career in the remote sector.

Since January 2010, 67% of those joining CRANApplus have identified as new, first time members of CRANApplus.

Membership has doubled in less than a year, with a number of strategies contributing to lifting the profile of CRANApplus.

- Increase in the number of FLEC courses, which are often the first point of contact for many potential new members, coupled with proactive promotion of the benefits of membership. Several courses have enjoyed 100% membership among the participants.
In the two years since membership opened up to all health disciplines, almost 14% of our members are from outside the nursing profession. Social Workers, Paramedics, Doctors, Aboriginal Health Workers and Ambulance officers are among the growing range of disciplines featured in our membership today.

Historically Queensland and the Northern Territory are the states where we have enjoyed the greatest proportional membership. This year has seen increased awareness of our organisation in South Australia, New South Wales and the ACT, with a resulting significant increase in membership numbers.

CRANAPlus enjoys continued growth - bucking the current trend of membership decline within many organisations. We believe our increasing membership is an acknowledgment of the value of CRANAPlus expertise in the areas of remote education, support and advocacy for all remote health professionals.
claire’s lucky win tops off a highly successful year

CRANApplus member No. 1000 is Claire Kappel, who is heading off to the conference with her free pass. 2010 has been a very good year for this nursing professional.

In May, she was awarded the N.T. Nursing and Midwifery Excellence Award – Graduate Registered Nurse of the Year.

“As a novice nurse full of enthusiasm and optimism for remote area nursing, I could also see the endless opportunities available.”

“Ever since I started my nursing degree in 2005, I have remained dedicated to working in rural and remote Australia and, in particular, with Indigenous Australians,” said Claire.

Claire, who comes from Perth, moved to Alice Springs in January 2009. She began her Graduate Certificate in Paediatric Nursing Studies at the Alice Springs Hospital in January this year, after completing her Graduate Nurse Program.

“I was drawn to Central Australia by the extraordinary landscape, culture and unique lifestyle,” she said.

“As a novice nurse full of enthusiasm and optimism for remote area nursing, I could also see the endless opportunities available.”

Claire believes her NT award in May reflects the support provided by ASH, the Graduate Nurse Educators and the Surgical, Paediatric and Intensive Care Units where she completed her grad year rotations.

“I’m eager to head out bush sooner rather than later…”

“I’m eager to head out bush sooner rather than later,” she said. “But in the meantime, I’m keen to keep developing my skills and knowledge.

“Thank you CRANApplus for continuing to support health professionals at all stages of their career.

“See you all at the Conference!”

Claire Kappel, Todd River in Alice Springs flowing, January 2010.
CRANApplus Nursing Stakeholder Award Prize winner, Matthew Dyson, with CEO Carole Taylor.

CEO Carole Taylor was one of a panel of expert speakers invited by the National Rural Health Students’ Network (NRHSN) to their annual conference held recently in Alice Springs. NRHSN boasts over 9000 members through their 29 Rural Health Clubs in Universities Australia-wide. They include students from medical, nursing and allied health courses.

The NRHSN offers multi-disciplinary networking, professional development and opportunities to raise community awareness of health issues and provides a voice for students who are passionate about improving health outcomes for rural and remote Australians.


Nursing students were invited to submit a short essay explaining how they believe these publications would assist them in their future practice. University of Tasmania student Matthew Dyson, from the RUSTICA Health Club was the recipient of the CRANApplus Nursing Stakeholder Award Prize.
health workers: is it better to be a lighthouse

by Mark Millard

If you were part of the BSS self-care workshop series recently conducted in the Cape York Northern Peninsula Area and Torres Straits, you would know what most of the participants thought was the best answer to this question.

In fact, one participant had everyone falling off their chairs with laughter when he suggested,

in response to an exercise about how he could be a ‘lighthouse’ in his work, that he was often used more as a torch than a lighthouse:

“…people sometimes want to pick you up, turn you on and point you in a particular direction to illuminate the way they want to go…then when they’re finished, they turn you off again and put you back in the cupboard…”

“…people sometimes want to pick you up, turn you on and point you in a particular direction to illuminate the way they want to go…then when
Bush Support Services psychologist, Mark Millard, reports from the Cape York Northern Peninsula Area and Torres Straits as part of his ongoing series of posts for the CRANApplus Magazine.

**Se or a torch?**

They’re finished, they turn you off again and put you back in the cupboard...this works OK in the short term, but it’s not the same as showing the way from a solid place like a lighthouse does – as a lighthouse we can show the direction for our communities!”

This was one of the many messages, some light-hearted, some serious, some both, that were taken home by participants from the workshops, which were groundbreaking in many ways for CRANApplus and for the principal employer involved, Queensland Health.

Two members of the BSS Team, Psychologists Therese Forbes and me, joined with QH Team members Bev Hamerton, Henri Aviga, Kylie Parry, Ghislaine Wharton, Nellie Enosa and Philomena Morseu to provide a series of self-care and coping workshops for workers from throughout the tip of Cape York and the Torres Straits.

In all, four workshops were conducted, in a range of different formats. There was one at Bamaga, another ‘drop-in’ day at Thursday Island, and planned day-long sessions for Health workers conducted on two of the major outer island Health Centres at Badu and Saibai Islands.

“Two members of the BSS Team...joined with QH Team members...to provide a series of self-care and coping workshops for workers from throughout the tip of Cape York and the Torres Straits.”

In addition, the Psychologists visited the Northern Peninsula Area Community Health Centres at Injinoo, Umagico, New Mapoon and Seisia – the four other NPA communities outside Bamaga.
The Bamaga workshop was less formal than the others, but resulted in a high level of participation and interaction from those who attended. As a result of the workshop, Shirley Hill, Diabetes Educator based at Bamaga, offered to help facilitate further ongoing links between BSS and the NPA staff.

At TI Hospital the BSS Team tried a new format – a drop-in day (with some food, of course) which allows staff to just drop by and pick up some CRANaplus information packs, have a brief or not so brief chat, and, if needed have a spontaneous formal session with one of the Psychologists.

This format, where the BSS Team are located somewhere private but quite close to the working environment of the staff, was very successful. Well over 30 people came by to the BSS station during the day.

Participants in the two major Outer Island workshops said it was the first time such a stress and self-care workshop had been presented at these island locations. They appreciated BSS taking the time and effort to visit their home bases.

“Material for the workshops had been specially developed to meet the needs of an audience made up of primarily local TSI Health workers and the RNs working with them in their communities.”

Material for the workshops had been specially developed to meet the needs of an audience made up of primarily local TSI Health workers and the RNs working with them in their communities. Queensland Health had provided substantial support for the workshops also, not only through
the time of many of the staff, some of whom are mentioned above, but also by providing a charter aircraft which did the rounds of smaller islands on the days of the workshops bringing workers from these to Badu and Saibai respectively. Henri Aviga, the acting Educator for the Torres who along with the regular Educator Kylie Parry, contributed enormously to the success of the exercise by assisting with organising and by participating in the workshops, had to work the day of the Saibai workshop in the clinic to cover for other workers to attend, because staff had been up most of the night with an emergency.

“Participants’ evaluations for the workshops were exceptionally positive.”

All in all, there were 14 participants in the workshop on Badu, and up to 25 people participated in the Saibai workshop.

Participants’ evaluations for the workshops were exceptionally positive. Apart from saying that they liked the interaction and many of the group exercises in the workshops, many participants also expressed appreciation of new sections of material on mindfulness and meditation, trauma and traumatic stress and the exercise on sharing stories of how you can be a lighthouse in your work!

That means, of course, sticking to the right place at the right time, holding firm in a storm, not wavering or shifting when things get tough, showing the way that is the right course, seeing farther than a torch, and giving guidance that is long-sighted rather than short-sighted.

It’s a big ask, being a lighthouse – but one that many of the NPA and TSI Health Worker participants were not only comfortable with, but also very expressive about. Their response to this exercise were illuminating not only for other participants, but also for the presenters as well.
Another belief about resilience is that it helps to make problems go away. This clearly is not the case. A resilient person still experiences the anger of being overlooked for a promotion, the pain and heartache of an affair gone wrong, the trauma of being the first on the scene of a motor vehicle accident.

“A resilient person still experiences the anger of being overlooked for a promotion, the pain and heartache of an affair gone wrong, the trauma of being the first on the scene of a motor vehicle accident.”

When resilience comes into play in these situations, however, the person is likely to be able to see the bottle as half full rather than half empty. Resilience will help the person get on with day to day activities that are important rather than focussing on and ruminating about the stressful event. A resilient person is less likely to use drugs or alcohol as coping strategies. Resilience, if you like, is the first line defence against anxiety or depression.
So how to nurture resilience?

Well, it seems that it is exactly those things which are good for your overall health and well being, that also allow resilience to develop:

1. Looking after yourself. You need to be aware of what your needs are and prioritise them. This means allowing yourself to be a little selfish and create time to do your own thing, whether that is engaging in a hobby or giving yourself an extra 5 minutes to finish your lunch.

2. Don’t be a hermit. Establish and maintain positive and supportive relationships in your life.

3. Do meaningful things. This is about being engaged in friendships and activities that have a personal purpose.

4. Laugh. Laughter is definitely the best medicine and is an effective stress-buster. If there is a choice between a comedy and drama on TV, really give yourself a choice.

5. Don’t make mountains out of molehills. This is where the BSS telephone line can be really helpful because it is easy to lose perspective when you are working remote. It is so important that long-term and wider perspectives are looked at when you are dealing with difficult situations.

6. Walk the talk. If you are feeling stressed about a situation it is important to (eventually) take some action. Talking to friends about taking plans of action in situations can be really helpful as is calling BSS.

7. Build into your day to day thinking the idea that change is inevitable and don’t automatically resist it.

8. Eat, sleep and be merry

9. Exercise…get the endorphins flowing every day.

stressed buster contest

We all struggle with the daily hassles that can slowly wear us down. Some are better than others at dealing with those stressors. The team at Bush Support Services would like to reward those with creative or interesting approaches to stress busting and share those great ideas with everyone else.

How the contest works:
• Document the ways you combat stress
• Submit the idea to the BSS office in Alice Springs by 15 September
• Winners will be selected by a secret panel of experts
• Winner will be announced at the 2010 CRANAPlus Conference in Adelaide, SA 13–16 October.

No idea is too minor or too crazy! Blogging, baking, fiddling, fossicking, jogging, juggling, Skyping or sky diving; no matter what you do for the sheer enjoyment of it, we’re interested.

Your submission itself could be a creative outlet, photography, painting, sketching, scrapbooking, etc… Just show us how you take care of you and there just might be a prize in it for you.

For more information or to submit your entry, contact Laura Nelson at (08) 8959 1107 or laura@crana.org.au CRANAPlus PMB 203, Alice Springs, NT 0872.
Bush Support Services has had a tremendous response to the Cosy Blanket Project. The squares just keep rolling in from around the country. Not a week goes by that we don’t receive squares. Sometimes it’s only one or two or it could be a box full. Knitting is a great way to relax and help others keep warm this winter. This stress-buster knitting project is a great way to click-clack your way to inner tranquillity while making blankets to be given to those in need. We’ll turn your squares into cosy blankets made from the heart.

We’ll be working with charitable organisations to help identify people who could use a cosy blanket.

You don’t have to knit a whole blanket, a few squares will do.

Here are a few simple guidelines to follow:

To make a 25 cm knitted square:
- Use 8-ply 100% acrylic, any colour or brand
- Cast on 51–55 stitches using 4mm knitting needles (depending on your tension)
- Work until piece measures 25 cm in garter stitch (continuous plain knitting)
- 35 squares will make a blanket (5x7)

BSS will happily provide the needles and wool free of charge. Please send knitted squares to:

Bush Support Services, CRANAplus, PMB 203, Alice Springs, NT 0872.

Contact us today at (08) 8959 1110 or email bss@crana.org.au to order your knitting kit.

CRANAplus gratefully acknowledges the generous contribution of Australia Post staff in Victoria who also rose to the ‘cosy blanket challenge’. Australia Post staff contributed 150 blankets, which were distributed to those in need in Alice Springs during what has been a particularly cold and wet winter.

Slightly stressed?
Bordering on burnout?

Give yourself a break during the conference and take advantage of a free counseling session with Bush Support Services (BSS).

Our caring professional staff understands the realities of isolation and a remote lifestyle. We can help you with practical coping strategies and survival tips to prevent burnout and other concerns becoming a crisis.

Make an appointment with the BSS Psychology staff for a private face-to-face consultation. We offer anonymity, confidentiality and a safe place to talk things over.

Counselling days

Thursday 14 October/Friday 15 October
10.00 am – 12.30 pm and 1.30 pm – 4.00 pm
Saturday 16 October
9.00 am – 11.30 am

Contact

Annmaree Wilson
Senior Clinical Psychologist
Bush Support Services
Email: scp@crana.org.au
Phone: 0458 635 888
to make an appointment

CRANAplus gratefully acknowledges the generous contribution of Australia Post staff in Victoria who also rose to the ‘cosy blanket challenge’. Australia Post staff contributed 150 blankets, which were distributed to those in need in Alice Springs during what has been a particularly cold and wet winter.
Gillian Frances is working in the Nyirripi Health Centre in NT. She dropped by the BSS office in July to pick up wool. She has found the Cosy Blanket Project a wonderful activity and a good cause. We are very grateful for her participation and beautiful beanies and squares she has contributed.
warming gesture by knitters from outback

Centralian Advocate, Friday, July 16, 2010
by Mluleki Moyo

Needy indigenous people in Alice Springs have received dozens of hand-knitted blankets from people in remote areas.

The blankets were presented to Tangentyere Council by CRANApulse Bush Support Services National Program Manager Colleen Niedermeyer this week.

Ms Niedermeyer said: “We have responded to the desperate calls by Tangentyere Council about people exposed to very low temperatures.

“We hope this consignment will go a long way in assisting our people,” she said.

Tangentyere Council executive director William Tilmouth said: “Many people need to realise that there are desperate people in our midst, who are on the verge of dying of cold.

“I am happy that CRANApulse has come to our aid.”

Ms Niedermeyer thanked health professionals working in remote communities who use their spare time after work to knit cosy blankets.

“They work in isolated and remote areas.

“Taking their time to knit is a de-stressing measure – it is a great way to relax and keep others warm.”

Colleen Niedermeyer presents Michael Klerck with blankets at the Tangentyere Council offices to help the homeless in Alice Springs. Keeping warm with them are CRANApulse Operations Manager Jenny Longland and Betty Gonway from Tangentyere Day Patrol services. Picture: Kabir Dhanji.
BUSH SUPPORT SERVICES

1800 805 391

Toll-free Support line

a confidential telephone support and debriefing service
available 24 hours every day of the year
for multi-disciplinary remote health practitioners and their families
staffed by registered psychologists with remote and cross-cultural experience
available from anywhere in Australia

Resources also available
SELF-CARE BOOKS • SELF-CARE WORKSHOPS

Phone: (08) 8959 1110 Email: bss@crana.org.au Web: www.bss.crana.org.au
The time for talking is over
Be part of the effort to improve Indigenous health

We need Registered Nurses to fill short-term paid placements in the NT for as little as three weeks.

Get involved.
Call 1300 MYRAHC
or apply online at rahc.com.au

Imagine a great Australia...
for everyone

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