



RURAL & REMOTE HEALTH ACTION RESEARCH AGENDA

There is a substantial body of research to demonstrate the important role of GP-led integrated primary health and hospital care in preventing illness, reducing the onset of chronic disease, reducing unnecessary hospitalisation, increasing Years of Life and reducing the cost of healthcare in rural, remote and Indigenous communities. The RARMS Rural and Remote Health Action Research Agenda is informed by, and extends on, the key features of sustainable rural integrated health systems identified by Wakerman* *et al.* Our aim is to work with our communities and leading universities and research organisations to identify and address opportunities and barriers to sustainable rural health services with a focus on how we can improve access to high quality care in rural and remote communities incorporating data analytics, Telehealth and remote medicine.

* Wakerman, et al "Features of effective primary health care models in rural and remote Australia: a case-study analysis" Med J Aust 2009; 191 (2): 88-91. || doi: 10.5694/j.1326-5377.2009.tb02700.x at <https://www.mja.com.au/journal/2009/191/2/features-effective-primary-health-care-models-rural-and-remote-australia-case>





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Projects							
	Developing a new approach to Patient History taking to improve capacity to capture baseline health data and track improvements.	Trial of community led place-based health planning in 3 rural and remote towns.	Collaborative approach to improve clinical and medical training capacity in rural and remote communities.	Trial of GP-Led allied health integrated care using a hybrid telehealth model.	Impact of primary health-led Telehealth care on hospital service quality, safety and stakeholder satisfaction.	Improving access to primary health care and reducing hospitalisations by optimising telehealth for remote and rural Australians.	The role of GP VMOs in continuity of care and the impact on patient safety and quality.
Enabling open access to independent health and social data to inform community priorities and monitor outcomes.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Commitment to community accountability from providers.							
Local commitment to participation in planning for a healthy future.	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Community engagement in the development of local health plans and monitoring performance.		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>	
Trusted governance and leadership structures supported by community and effective multidirectional communication.		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>	
Continuous improvement and quality assurance	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Appropriate infrastructure, systems and protocols to ensure high quality primary, hospital and community care.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Collaborative funding models based on community health needs (incorporating social determinants)		<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>
A sustainable health and medical workforce pipeline through engagement with education and training and infrastructure that optimises inter professional learning.			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
24/7 access to rural health care including appropriate use of telehealth to support resident workforce.			<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>
Effective coordination of primary, hospital, community and human services and resources.		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>
Interprofessional team-based approaches to health and human service delivery.		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>