



ABN: 59430776617

E: carpa.inc@outlook.com Mail: C/O PO BOX 203, Alice Springs, NT, 0871 www.carpa.org.au

CARPA AGM October 2021: Chair report

CARPA, the Central Australian Rural Practitioners Association, was formed in the 1980s to support rural and remote health professionals to deliver quality healthcare in their unique and challenging settings. This is an ongoing mission that has continued to this day, as CARPA's goal is a healthy remote Australian population.

Today, our purpose is to be a focus for multidisciplinary activity in support of primary care in remote and First Nations communities of Australia.

For their work towards this aim, I'd like to thank our management committee members: Lyn Byers (Secretary), Tobias Speare (Treasurer and Public Officer), Tony Lane (Vice Chair), Rosalie Shultz, Chris Perry, John Wright and Liz Moore.

Over the past year, our key undertakings have been the governance of the Remote Primary Health Care Manuals, advocacy in primary health and climate matters, and the Vaccine Story project evaluation and presentations.

1. Remote Primary Health Care Manuals governance

What started as the *CARPA Standard Treatment Manual* and the *Women's Business Manual* in the 1990s, has since expanded to include the *Clinical Procedures Manual* and the *Medicines Book*. These manuals form the RPHCM suite, and guide clinical practice for many remote health practitioners in Australia. CARPA, Central Australian Aboriginal Congress, CRANaplus and Flinders University are Joint Venture Partners to the Remote Primary Health Care Manuals project.

The current editions of the manuals were published in 2017 and are currently being updated, with the new editions expected to be ready for release by the end of 2022. The project team are also working hard on making the online versions of the new manuals easier to use, and exploring solutions to reduce freight costs for the hard copies. It's hoped that these efforts will make the manuals even more user-friendly for clinicians, and ensure more equitable pricing for remote health services.

2. Advocacy

One of the key focus areas of our advocacy efforts this year have been around climate change and its impact on human health. CARPA is a member of CAHA, the Climate and Health Alliance, and has supported several of their advocacy initiatives. For example, we were a signatory on the CAHA

Healthy Regenerative and Just policy agenda, and have disseminated climate and health advocacy resources to CARPA members.

Another key advocacy area this year was around nifedipine, the medication used to manage pre-term labour in remote areas while awaiting retrieval. When the supply of IR nifedipine was discontinued for Australia, CARPA committee members were actively involved in advocating for continued access to IR nifedipine in remote health, and participated in the Medicine Shortages Action Group – Nifedipine IR. All previous use of nifedipine for tocolysis was off-label (including overseas), so there were no pre-existing approvals to build on, and no drug company that would champion it. In the end, the special access scheme was determined to be the way to ensure continued access, and information sheets on how to utilise this scheme were circulated.

We also recently made a submission to the *Inquiry into provision of general practitioner and related primary health services to outer metropolitan, rural, and regional Australians*. Our stance was that there is a need for widespread reform in Australia's healthcare system. Currently, the greater the need, the poorer the resourcing and access to healthcare. We argued that there needs to be equitable healthcare services, funding and research, and offered specific recommendations on where the reform could start.

Other advocacy work included the dissemination of consultation opportunities to CARPA members, such as the opportunity to comment on the national guidelines for managing lower back pain, and the climate national strategy. We also participated in consultation during HOT NORTH's development of a resource directory app for remote clinicians.

3. Vaccine Story project

Lastly, this year has seen the evaluation of the vaccine story project. The vaccine story is a short, seven minute video of the journey vaccines take from the pharmacies to remote clinics, providing education on the cold chain and vaccine safety. It was developed with a grant from Northern Territory Primary Health Network and is available on our website:

<https://www.carpa.com.au/activities/>.

The evaluation of this project is now complete and being written up for publication, with the findings presented at the 2021 National Immunisation Conference. A great article that discusses the vaccine story has also been published in *The Conversation*: <https://theconversation.com/dont-leave-the-esky-in-the-sun-how-to-get-cold-vaccines-to-hot-remote-australia-164551>

We look forward to next year, with the hope of getting back into supporting education opportunities for remote health professionals, as well as continuing our advocacy efforts. Thanks again for your support during the year. Please keep in touch: <https://www.carpa.com.au/contact-us/>

Warm regards,

Laura Wright

CARPA Chair