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CARPA AGM October 2022: Chair report

CARPA, the Central Australian Rural Practitioners Association, was formed in 1984 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.

Our purpose is to be a focus for multidisciplinary activity in support of primary health care in remote and First Nations communities. Today, our vision is still to be a driving force for improvements in primary health care in remote Australia.

For their work towards this goal, I'd like to thank our management committee members: Katie Michell (Treasurer), John Wright (Vice Chair), Chris Perry, Tony Lane, Fiona Hildebrand (Secretary for most of the year) and Lyn Byers (current Secretary).

Over the past year, our key undertakings have been the governance of the Remote Primary Health Care Manuals, advocacy in primary health, and establishing a project to investigate how managers in remote health could receive better training and support.

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.

This year, a major focus for CARPA has been the governance of the manuals. The previous edition was published in 2017, and this year the new edition has been completed, ready to be rolled out over the coming months. To ensure equitable access to the manuals for even the most remote clinics, we have revamped the distribution strategy to minimise costs to health services. Health Centres within the Northern Territory will also receive sufficient complimentary manuals to ensure the initial transition is free of charge.

In the coming year, we will continue to advocate for fair and transparent governance and administration of the RPHCM project. Related projects include collaborations on the development of online training modules about the new manuals, and improving the usability of the online manuals.

2. Advocacy

Our advocacy efforts this year include participation in the Climate and Health Alliance, and consultation input for the National Heart Foundation ACS guidelines review, and the NACCHO-RACGP Aboriginal and Torres Strait Islander Primary Care Guidelines Project.

3. Remote health management project

Poor management has a significant impact on staff wellbeing and retention, but managers in remote health are often dropped into the role without training as the 'last one standing'. However, previous remote-specific management training courses have either been cancelled or put on hold due to low uptake. CARPA has identified this as a topic which could improve remote health care, and are leading a collaboration with CRANaplus, Flinders University, and James Cook University to investigate potential solutions.

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