



**ANZCA**  
FPM

President  
Australian and New Zealand  
College of Anaesthetists

Wednesday 1 March 2023

Professor Nicholas Buckmaster  
Chair, Regional and Rural Physician Working Group  
Royal Australasian College of Physicians

Via email: [council@racp.edu.au](mailto:council@racp.edu.au)

Dear Professor Buckmaster

### Regional, Rural and Remote Physician Strategy

Thank you for sharing the RACP's draft Regional, Rural and Remote Physician Strategy with us.

Like you, ANZCA recognises that Australian and New Zealanders living in regional rural and remote communities have poorer health outcomes across a range of measures compared with those living in metropolitan areas. While the reasons for this are multi-factorial and complex, timely access to safe and high quality health services are a significant determinant.

In 2021, we released our [regional and rural workforce strategy](#) which outlines six key priority areas to guide our activities and initiatives to:

- Address the geographic maldistribution of anaesthetists and specialist pain medicine physicians to improve health outcomes for Australian and New Zealand communities in regional and rural areas.
- Develop a valued, skilled and healthy anaesthesia and pain medicine workforce in regional and rural Australia and New Zealand, practising within a supportive environment and culture, focused on delivering safe and high quality patient care.

There are many areas of alignment in our strategy with the draft RACP physician strategy, particularly around building training capacity and capability outside of metropolitan areas and improving the attraction and retention of doctors to our regional and rural communities.

The draft RACP physician strategy also highlights the important of collaboration and we would be happy to share any insights or resources in this area. Recent ANZCA regional and rural workforce initiatives include:

- The establishment of a rural training pathway in Victoria, supported by Department of Health and Aged Care Specialist Training Program (STP) funding, for two new Integrated Rural Training Pipeline posts. We also received departmental approval to further support this pathway with significant infrastructure and non-clinical coordination work utilising program underspend.
- Support for our existing Tasmanian Anaesthetics Training Program with an additional Integrated Rural Training Pipeline post and STP Flexible Approaches to Training in Expanded Settings (FATES) funding to develop a Tasmanian Anaesthetic Simulation, Education and Training Network.

- A collaborative FATES project with the Royal Australasian College of Surgeons, the Royal Australasian College of Medical Administrators and the Royal Australian and New Zealand College of Ophthalmologists to develop a rural training pathway in the Northern Territory. These new and developing training pathways are in addition to our long-standing northern training pathway based in Queensland which rotates through the Townsville, Cairns, Mackay and Royal Darwin hospitals.
- The launch this year of our new Diploma of Rural Generalist Anaesthesia in collaboration with the Australian College of Rural and Remote Medicine and the Royal Australian College of General Practitioners. This new 12 month qualification will provide training to produce rural generalist anaesthesia graduates who can deliver safe anaesthesia and perioperative care in rural and remote settings for patients classed as ASA 1, 2 and stable 3 undergoing elective surgery and patients requiring emergent surgery.
- The development of a critical incident debriefing toolkit of resources which provides trainees, their supervisors and heads of departments a comprehensive, evidence-based resource on critical incidents, how to provide support and a hot debrief following a critical incident. The toolkit has a particular emphasis on resources that will support doctors in regional and rural health services.

As evidenced by the broad range of recommendations in your draft strategy, a holistic and long-term approach is required to address the long-standing 'rural health deficit' in Australia and New Zealand. We commend the RACP Regional and Rural Physician Working Group on this important piece of work and look forward to working with you on relevant initiatives.

Yours sincerely



Dr Chris Cokis  
**President**