



AUSTRALASIAN COLLEGE OF
SPORT AND EXERCISE PHYSICIANS

ACSEP RURAL CAPACITY BUILDING

STRATEGIC ACTION PLAN

2022-2027

Our Vision

is to provide world's best practice with regard to training, standards and research in the speciality of Sport and Exercise Medicine.

Our Mission

is to provide and promote excellence in the training and continuing professional development of Sport and Exercise Medicine Physicians in Australia and New Zealand

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Introduction

In Australia, around 28% of the population live in rural and remote areas across many diverse locations and communities.¹ These Australians experience a greater burden of disease and higher rates of hospitalisation, death and injury than those living in major cities.² In New Zealand, approximately 16% of the population live in rural areas.³ Facilitating the appropriate distribution of medical specialists across geographical areas is a key component of overcoming barriers impacting access to healthcare for rural populations and promoting rural health equality.

ACSEP's Rural Workforce

ACSEP's March 2022 Workforce Planning Project demonstrated that the specialty of Sport and Exercise Medicine is in overall undersupply in Australia, with shortfalls experienced across metropolitan, regional and remote areas based on the ratio of Sport and Exercise Medicine Practitioners to population density.⁴ However, due to barriers related to geographical distance, Australians living outside metropolitan areas (Modified Monash Model 2-7) face particular difficulties accessing Sport and Exercise Medicine as only 4.5% of the workforce is based in these areas.

In New Zealand only one Fellow has a practice based in a rural area (Statistical Area 2 (SA2), 2018) equating to 2.7% of the SEMP workforce.



Figure 1: Distribution of Rural ACSEP Fellows in Australia (March 2022)

Rural Capacity Building Project

In 2020, ACSEP used Specialist Training Program Support Project funding to commission KBC Australia to conduct a Rural Capacity Building Project for the College. Following extensive consultation with ACSEP Registrars, ACSEP Fellows, other Colleges and Regional Training Hubs, KBC Australia identified strategic challenges, barriers and opportunities to increase rural training and practice in Sport and

Exercise Medicine. Recommendations from the *Rural Capacity Building Project: Final Report* have been incorporated into the ACSEP Rural Capacity Building Strategic Action Plan (2022-2027).

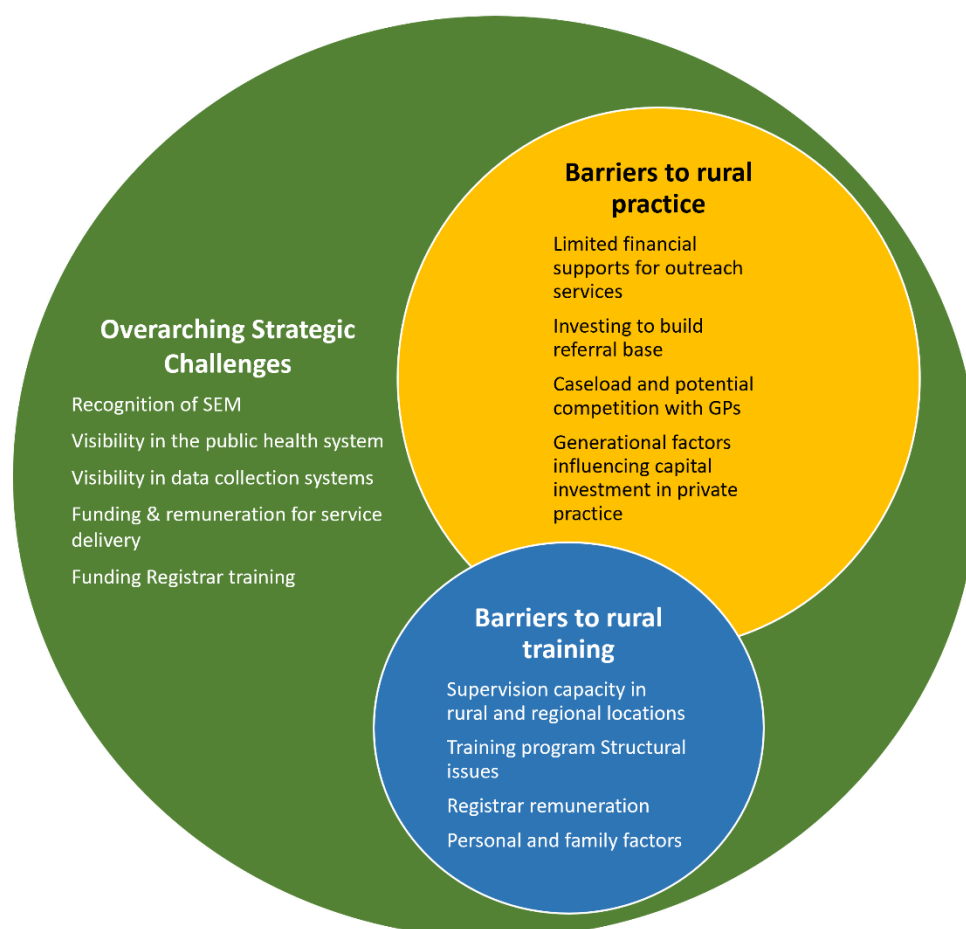


Figure 2: Summary of strategic challenges and barriers to rural training and practice in Sport and Exercise Medicine identified in the ACSEP Rural Capacity Building Project: Final Report.⁵

ACSEP Rural Capacity Building Strategic Action Plan

Advocacy & Awareness

ACTION	DELIVERABLE	RESPONSIBILITY
Develop evidence base demonstrating the value of Sport & Exercise Medicine	Investigate opportunities for data collection and analysis demonstrating need for SEM and cost-benefit as complementary with existing publicly provided orthopaedic and other services.	CEO & Board
	Develop business case modelling based on robust data demonstrating value of SEM services.	CEO & Board

	Identify a range of research topics and projects that could be undertaken by registrars to develop the evidence around community need and potential demand for SEM services drawing on hospital data collections in regional, rural, remote, and metropolitan locations.	Research Committee & Research Officer
Increase awareness of SEM in key stakeholder groups including junior doctors, other specialities, public hospitals etc.	Identify & engage with medical schools (especially rural medical schools) and Regional Training Hubs regarding opportunities to promote SEM as a specialty and career option, including: <ul style="list-style-type: none"> - Guest speaking opportunities for Fellows. - Career events. 	Senior Operations Officer
	Develop resources that registrars, Fellows and the College can use to promote SEM to different stakeholders.	CEO
	Develop a comprehensive awareness raising strategy with community, GPs, other medical specialists, public health services.	CEO
Advocacy to government	Engage with the Commonwealth Government to advocate for inclusion in future national medical workforce data collection initiatives & highlight the role of SEM.	CEO
	Continue to advocate to the Australian Commonwealth Government for improved Medicare rebates for SEMP.	CEO
	Continue to advocate to the Australian Department of Health for registrar funding, options could include:	CEO

	<ol style="list-style-type: none"> 1. An appropriately funded training model (e.g., General Practice Funding Model); 2. Receiving a greater proportion of Registrar positions funded through STP, given the lack of access to publicly funded positions and the reliance on private practice for training. 	
	Engage at jurisdiction and LHN levels to promote value and benefit of SEM services in public hospital context.	COO
	Continue to engage with and advocate to ACC NZ for more equitable registrar payments for service delivery to ACC clients.	CEO & NZ Representative
	Engage with Health NZ to explore more sustainable options to funded SEM Registrar training.	CEO & NZ Representative

Representation and Consultation

ACTION	DELIVERABLE	RESPONSIBILITY
Increase opportunities for rural Registrars and Fellows to provide feedback to the College on issues that impact them.	Consider creating opportunities for an ACSEP Rural Representative or Rural Advisory Group.	Senior Operations Officer & CEO
Monitor and evaluate registrar's experiences in existing rural and regional training posts.	Gather feedback on existing regional & rural training posts to learn from registrars' experience and inform ideas for improvement.	Training Committee Training Program Manager Senior Operations Officer
	Ensure an appropriate evaluation component is incorporated into new initiatives impacting registrar training (e.g., remote	Training Committee Training Program Manager Senior Operations Officer

	supervision models, networked training models etc.)	
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Training & Selection

ACTION	DELIVERABLE	RESPONSIBILITY
Increase recruitment of candidates with a rural background in line with current evidence of factors which contribute to medical practitioners undertaking rural training and careers.	Consider candidate's rural background and/or genuine interest in pursuing rural training as part of registrar selection (for example as demonstrated through participation in rural placements in undergraduate training).	ACSEP Selection Sub-committee & Training Program Manager
	Monitor numbers of candidates with a rural background/experience applying for the program and being selected over time to evaluate effectiveness of promotion and Selection Policy changes.	ACSEP Selection Sub-committee & Training Program Manager
Mitigate structural barriers within the ACSEP Training Program which limit training outside metropolitan settings.	Review curriculum to determine whether/what learning outcomes relating to Events and Team Management could be achieved in regional settings.	ACSEP Curriculum Working Group
Increase flexibility within the training program to facilitate safe & effective rural training options.	Develop and pilot innovative training models such as remote supervision options.	ACSEP Training Committee & STP Working Group Senior Operations Officer
	Work with interested Fellows and Regional Training Hubs to explore opportunities for networked training pathways to support individual registrars to complete rurally focused training and meet the 66% MM2-7 area IRTTP target.	Senior Operations Officer
	Investigate and document examples of registrars working in public hospitals to support	Training Program Manager Senior Operations Officer COO

	Fellows and Registrars in exploring and establishing new practices and posts.	
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Business Development Support

ACTION	DELIVERABLE	RESPONSIBILITY
Support ACSEP Fellows to establish practices outside metropolitan areas.	Engage with Rural Workforce Agencies to identify resources to support expanding rural SEM practice including: <ul style="list-style-type: none"> Practice, professional and family supports to promote recruitment and retention of SEM physicians & registrars to rural areas. 	Senior Operations Officer
	Investigate opportunities for seed funding to support establishment of SEM practice in rural and regional areas.	Senior Operations Officer
	Collect and analyse workforce data to determine potential demand for SEM in rural areas in the interim while this information is not being collected through commonwealth or jurisdictional processes.	Quality Coordinator

References

1. Australian Institute of Health and Welfare. (2022). *Rural and remote health*. <https://www.aihw.gov.au/reports/rural-remote-australians/rural-and-remote-health>
2. Ibid.
3. Massey University Environmental Health Intelligence New Zealand. *Urban–rural profile*. <https://www.ehinz.ac.nz/indicators/population-vulnerability/urbanrural-profile> (Accessed 19 August 2022).
4. Lawrence, J. (2022). *ACSEP Workforce Planning Project*. <https://datastudio.google.com/reporting/a2678cd5-0b07-4082-853b-384a1549b5b5/page/spLoC>
5. KBC Australia. 2020. *ACSEP Rural Capacity Building Project: Final Report*.