

Statement of Expectations for the National Rural Health Commissioner

1. Introduction

This Statement provides the Australian Government's expectations about the role and responsibilities of the National Rural Health Commissioner (the Commissioner) from receipt of this document until 30 December 2019, including the Commissioner's relationship with the Government, issues of transparency and accountability and operational matters.

The Commissioner is a statutory appointment, independent from the Department of Health (the Department) and the responsible Minister. This position has been established to independently and impartially improve rural health policies and champion the cause of rural practice.

The Government recognises and respects the statutory independence of the Commissioner. It is imperative that, as Commissioner, you act independently and objectively in performing functions and exercising powers as set out in Schedule 1 of the Part VA of the *Health Insurance Act 1973* (the Act). However, the Government expects that you take into account the Government's broad policy framework, including its agenda to reform the health workforce and improve the health outcomes of rural, regional and remote Australians, in performing your role and functions.

You have met your legislated obligations to define rural generalism and to provide advice to Government on the development of a National Rural Generalist Pathway. As per Section 79AC (1C), your advice is now sought on rural allied health workforce reform.

The responsible Minister with oversight of rural health expects to be fully informed in a timely manner about the activities of the Commissioner and any emerging trends, problems or issues in respect of its functions. If requested by the Minister, the Commissioner may also provide advice to the Minister on matters relating to rural health reform.

2. Priorities for the Rural Health Commissioner

The Commissioner will develop recommendations to Government on effective and efficient strategies that will improve access to allied health services and quality of services, and to improve the distribution of the rural allied health workforce in regional, rural and remote Australia. The final advice is due to Government no later than 30 December 2019, with consultation with the sector complete by 1 October 2019. The October-December period will be used to refine the report and consult within government.

As Commissioner, to achieve this you will:

1. Conduct a literature review to: explore the means by which allied health services are delivered in rural, regional and remote areas; identify existing or developing issues; identify potential duplication of services provided by the Commonwealth and jurisdictions; and provide an evidence base for advice to Government.

2. Work with the Australian Allied Health Leadership Forum (which includes Allied Health Professions Australia, Indigenous Allied Health Australia, and Services for Australian Rural and Remote Allied Health Australia), Australian Healthcare and Hospitals Association and the National Rural Health Alliance to:
 - a. Prepare a discussion paper on policy options, within the Commonwealth's remit, to improve the quality, accessibility and distribution of allied health services in regional, rural and remote Australia;
 - b. Deliver a final report with evidence-based recommendations for consideration by the Minister;
 - c. Consult on policy concepts in the discussion paper. The above organisations can consult independently, on your behalf via their membership, and report back to you.
3. Provide advice on rural allied health matters at the request of the minister responsible for rural health.

Separate to allied health you are also required to provide assistance to the two GP Colleges (the Royal Australian College of General Practitioners and the Australian College of Rural and Remote Medicine) to collaboratively pursue recognition of Rural Generalists through a protected title and specialised field within General Practice.

3. Stakeholder Relationships

Your role as Commissioner will require you to work closely with key professional allied health bodies and the Government expects that you will engage professionally and collaboratively with these stakeholders throughout your appointment.

These key bodies will in turn liaise with regional, rural and remote communities, the health sector, universities and allied health training organisations. You may also be required to work closely with state and territory governments.

A key stakeholder group is the Australian Allied Health Leadership Forum, which was established to provide a collective view for allied health by bringing together key aspects and stakeholders of the Australian allied health sector and services.

Another key stakeholder group is the Rural Health Stakeholder Roundtable (the Roundtable), which was established to promote rural health strategic discussion and to bring together key rural health stakeholders to assist the Government with informing and developing national rural health policy. The Government expects that you will engage closely with members of the Roundtable where appropriate and take part in meetings, which are held biannually.

The Government expects that you will work collaboratively and closely with the Department of Health and the Minister responsible for rural health, and that you are aware of the Government's agenda on rural health reform. Conducive to an effective working relationship, the Department will continue to consult with you on any issues that may impact on you fulfilling your statutory objective or compliance with the law.

4. Organisational Governance and Financial Management

As Commissioner, you do not hold any financial delegation powers, or have any specific employment powers. The Secretary of the Department of Health may enter into an arrangement with you for the services of APS employees in the department to be made available. This is intended as assistance for the position whilst you undertake your duties. Further, it is requested that you continue to manage the affairs as National Rural Health Commissioner in a way that promotes the efficient, effective and ethical use of resources. In support of this and in line with the allocated budget for the position, the Department will continue to provide you with the necessary corporate support, policies and systems to fulfil the functions of your role.

Where you are assisted by staff employed by the Department of Health under the *Public Service Act 1999* you should ensure that all parties uphold and promote the Australia Public Service (APS) Values and ensure that all APS employees adhere to the APS Code of Conduct.

5. Reporting

You are expected to provide final advice to Government on the priorities outlined in this Statement of Expectations by no later than 30 December 2019, or earlier if specified by the Minister.

As part of your legislative requirements under 79AC of the Act, the Office of the Commissioner must prepare and present to the Minister a draft report about the Commissioner's functions that includes advice and recommendations before 1 January 2020, or earlier if specified by the Minister.

The Office of the Commissioner must also prepare and present to the Minister a Final Report about the Commissioner's functions that includes advice and recommendations before 1 July 2020, which will be tabled in the House of the Parliament, within five sitting days of the Minister receiving the final report. Reporting requirements may continue beyond 30 June 2020, should the Commissioner's position be extended beyond that date.

Additionally, the Office of the Commissioner must, within three months after the end of each calendar year, prepare and give to the Minister, for presentation to the Parliament, a report on the Commissioner's activities during the previous calendar year, which also includes any other matters that the Minister may direct you to include in the report.

In addition to the reports that you prepare as part of your legislative requirements, it is expected that you provide input to the department's annual report and other publications as requested from time to time.

6. Conclusion

The Government expects that the appointment of the Commissioner will benefit the rural health workforce and communities living in rural and remote areas by placing rural and remote issues at the forefront of Government decision making. In your role as

Commissioner, the Government expects that you will help improve rural health policies and champion the cause of rural practice in Australia. The Government expects that you will work cooperatively and collaboratively with the Department, rural health stakeholders, and all levels of government to fulfil your legislative obligations and Government expectations of the role the National Rural Health Commission.