# The Council of the SHIRE OF BREWARRINA



All communications to be addressed to the General Manager

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OUR REF: YOUR REF:

Committee Secretary Senate Standing Committee on Community Affairs PO Box 6100 CANBERRA ACT 2600

community.affairs.sen@aph.gov.au

Dear Secretary,

Re: Enquiry into the factors affecting the supply of health services and medical professionals in rural areas.

Sufficient health infrastructure and health services are recognised by Brewarrina Shire Council as a vital element to sound social and economic development and the sustainability of the Brewarrina Shire.

Below are challenges that face the Brewarrina Shire Council as we work toward a sustainable and healthier community;

## **Demographics and Health Statistics**

The Brewarrina LGA is the most disadvantaged LGA in NSW as measured by the SEIFA Index of Relative Socio-economic Disadvantage with a SEIFA index score of 765. This places Brewarrina as the most disadvantaged LGA in NSW and the sixty-forth most disadvantaged LGA in the nation as a whole.

The health status of the Brewarrina LGA is worrying and the rates of chronic disease associated with overweight and obesity well outstrip the National, State and Country Areas averages.

Table 1: Synthetic Prediction 2007/08 – Social Health Atlas of Australian Local Government Areas, 2010

Disease	<b>Brewarrina</b> <b>LGA</b> (Rate per 100)	Australia (Rate per 100)	NSW (Rate per 100)	NSW (Country Areas) (rate per 100)	Diff. NSW (Country Areas) and Brewarrina
Type 2 Diabetes	6.5	3.4	3.5	3.7	+ 75.6%
High Cholesterol	8.2	5.6	5.5	5.7	+ 43.85%
Circulatory System Diseases (incl. Hypertension)	16.2	16.0	14.7	15.9	+ 1.8%
Musculoskeletal System Diseases	33.0	30.1	29.8	31.7	+ 4.1%

These statistics demonstrate Brewarrina LGA exhibits some of the highest rates of chronic disease associated with overweight and obesity in the nation.

This most recent data used here are Synthetic Predictions of Chronic Disease based on the 2001 ABS *National Health Survey*. This survey excluded those living households classified as 'very remote' which represents 38.4% of the Brewarrina LGA population and drew on self-reported data. The lack of comprehensive chronic disease management in the Brewarrina Shire at that time (leading to underdiagnosis), combined with our very high Aboriginal population will likely mean that actual rates of Chronic Disease will be higher in this LGA than those published in the *National Health Survey* or the synthetic predictions extrapolated from that data presented here.

The result of this higher-than-average rate of chronic disease and other health factors for the LGA mean that Brewarrina LGA has the highest annual rate of premature mortality in the entire state of NSW (PHIDU, 2010). Brewarrina LGA exhibits an annual average rate of 683.8 premature deaths per 100,000 (0-74 years) compared with the national average of 252.2, NSW average of 253.1 and the NSW (Country Areas) average of 280.9 (PHIDU, 2010). This shocking level of premature mortality is 171% higher than the national average.

Brewarrina LGA exhibits the highest level of preventable deaths in NSW (deaths attributable to preventable causes rather than avoidable error etc). The Brewarrina Standard Death Rate for Preventable Deaths is 316 which is 216% higher than the national average and is such a significant cause of death that it is even 32% higher than the next most affected LGA (Bourke Shire with an SDR for preventable deaths of 239).

Brewarrina is a town seriously affected by chronic disease and premature mortality. As such our health providers are already providing a comprehensive range of enhanced primary care/chronic disease management services with Brewarrina LGA's GPs delivering the highest rate of chronic disease care (measured by EPC Medicare Items) in the state (PHIDU, 2010).

#### **Travel and Distance**

Travel and distance has become the principal limiting factor in accessing a reliable and comprehensive health service for western NSW and in particular those that live in the Brewarrina Shire. There is no consistent daily public transport system in place to service this massive geographical area.

Residents of the Brewarrina Shire are reliant on the Royal Flying Doctor and air ambulance services to access critical, emergency care. In addition, relatives and friends of a critical patient have to be prepared to travel and pay for accommodation in larger centres to provide support to the patient.

Generally, western NSW residents travel longer distances and encounter considerably more out-of-pocket expenses to access medical treatment and surgical procedures than other NSW residents.

Isolated Patient Transport Assistance Scheme (IPTAS) funding is insufficient to cover all associated travel costs and as it is a post-payment, is often not available at the critical time.

## **Centralised Health Services**

Residents of the Brewarrina Shire have to attend Dubbo, our regional centre for specialised medical service such as childbirth, fracture clinic, kidney dialysis and treatment of chronic disease such as diabetes. The basic hospital and health services in Brewarrina are inadequate for a community that has critical community health and will not suffice to close the gap in Indigenous health.

Residents of Goodooga (approximately 300 residents) have access to a health service that operates weekdays without a Doctor and are reliant on emergency response by ambulance from Lightning Ridge (75km's away). This was the "compromise" provided by the NSW Government in 2010, when the Goodooga Health Service was scaled down and the Volunteer Ambulance Service cut.

#### **Cost Shifting**

An alarming inequity in health funding and services has typically cost shifted to the community and, in particular for this Shire the responsibility has devolved upon local government to supply health infrastructure in order to attract general practitioners, dentists, pharmacists and allied health professionals.

Brewarrina Shire Council provides the following health facilities at Councils own cost;

- Doctors house (3 bedroom brick home)
- · Doctors motor vehicle
- Reduced rental on Pharmacy including all repairs, maintenance and gardening services
- Reduced rental on Medical Centre including all repairs, maintenance and gardening services
- Brewarrina Rural and Remote Dental Service (managed in partnership with Griffith University, funded by DoHA and NSW Health)
- Brewarrina Healthy Communities Project (Funded by DoHA)

Although Brewarrina Shire Council receives some financial contribution to these projects, a contribution of \$105,000 a year from Council is required to maintain a basic health services in our Shire.

Metropolitan Council's do not face these challenges nor are they expected by the community to fulfil health expectations.

Cost Shifting is not only a challenge faced by Brewarrina Shire Council, but a common challenge in rural areas. Councils in the Orana Regional Organisation of Council's region (OROC) contribute in excess of \$1.65 million per annum to operate medical facilities and have invested over \$28 million in health infrastructure and aged care facilities. This health investment is considered to be exceptional and, Brewarrina Shire Council supports OROC's belief that this does not occur in either other regions or metropolitan areas of NSW.

### Recruitment and Retention of qualified Staff

This a challenge for all rural and remote communities and is not isolated only to the health industry. Brewarrina Shire Council has been forced to offer accommodation at its own expense to ensure the retention of a Doctor.

Trained medical professionals (nurses and dental assistants) are difficult to recruit and at times health services in Brewarrina have been operating at less than capacity due staff shortages.

The above information is from a local shire prospective and includes a snapshot of the factors that Brewarrina Shire Council considers has an impact on the supply of health services and medical professionals in rural areas.

On behalf of Brewarrina Shire Council welcome you to visit the shire to further consider and discuss firsthand the challenges Council has to ensure our community receives adequate health services.

Yours faithfully

Rod Shaw General Manager 20 December 2011