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**From:** Peter Chilcott

**Subject:** Inquiry into the use of FIFO workforce practices in regional Australia

To whom it may concern,

I have been a medical practitioner practicing rural and remote for over 38 years.

The following are my personal comments and recollections in relation to my experience with FIFO and DIDO communities in three Communities in which I have practiced.

I worked for 12 months in Glenden (small Coal mining town West of Mackay) in 1997-1998. This was a Mt Isa run town which went from residential to Drive-in-Drive-out. From a GP point of view it was a disaster. The mass reduction of families meant that the GP Practice became almost non-existent. The school reduced in size dramatically. The Bank closed. The pharmacy left town. There were no shops anymore, and we were still over an hour from Mackay by road.

While at Alyangula on Groote Eylandt, GEMCO the mining Company decided to go FIFO. At first there was a mass influx of workers preparing for the temporary accommodation to house the FIFO workers. This had social repercussions on places like the local Golf Club with an increase in boozing and rowdy workers. Later when the number of resident workers decreased, the social fabric of the Town changed dramatically with reduction in membership of Community organisations. It was soon recognised that FIFO workers saw themselves as workers in Remote and wanted to take advantage of services that were originally defined as being for residents only. They saw their time back at their "home base" as time that should be quarantined for their own entertainment as well as family time. They were quite reluctant to give up this time to attend to their medical needs such as visiting their dentist, GP or their Specialist. Workers were quite happy to take time off from work rather than time from their days when with their families. Not only that they thought they deserved special treatment with Specialist Clinics and Patient Travel, even though their residential status disqualified them from the qualifying criteria.

My Gove experience has been similar to that on Groote Eylandt. In Gove, FIFO mining workers visit their GP down town and then try to claim trips to Darwin for X-Rays and other Specialist visits. We are trying to educate the GP practice to tell these patients that medical services that require Specialist visits and Patient Travel are only for people who qualify for the residency status, but that is difficult. We have worked very hard to reduce our waiting lists for specialist appointments in Gove. We have Orthopaedic clinic waiting times much less than those in Darwin. Now we are experiencing an influx of FIFO people taking advantage of these improvements. However other services are not as efficient as the Orthopaedic Clinics for us in Gove. FIFO people attend those home base services when in suits them, and try to take advantage of our services where we can offer efficiencies, but to the detriment of our local population. The impact on our services because of our small size, can be quite significant.

Problems have arisen when (in one actual instance) a management plan involving regular visits to Darwin was commenced when the worker was a resident of Groote Eylandt. It was difficult to transfer his treatment and his management when he went to FIFO. Fortunately the patient was cooperative. However the transition can be complex and if the patient is not cooperative, it can be quite time consuming on our limited resources.

In Gove when a FIFO patient is evacuated by Careflight to Darwin in an emergency, PATS does not offer a return flight back to Gove; similarly for Groote Eylandt. They then have to contact their travel to their mining company officer to organise other travel arrangements. However I am sure that there are many cases that "fall between the cracks" and we end up paying for services that people are not actually entitled to receive.

In general Gove has seen a reduction of those services which were traditionally supplied by the mining companies best described as "community building programs". I would welcome any efforts to shame mining companies into becoming more community minded.

I have lived in small remote communities for most of my life. Nothing destroys a community more than rapid change in industry and population. The community suffers when the size dramatically increases; it also suffers when the size is reduced, even if that reduction is gradual. Mining companies are the major cause of both.

I would like to thank you for the opportunity to tell my story.

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