

Inquiry: The factors affecting the supply of health services and medical professionals in rural areas.

As a solo rural/remote medical practitioner and other community/ professional positions in NSW for the last 11 years, I believe I have solid grounds to respond to this enquiry with real facts that are affecting a community every day.

For the last 5-6 years I have been trying to recruit a second or replacement doctor including overseas trained doctor to the township Coolah. This has become an impossible task when you are comparing a small remote community with restricted facilities both medically and community to other larger townships with the same zoning (some which are based on the beaches and short distances from major cities)!

The classification has not looked into details that are relevant to the remoteness of communities, as an example if I am participating in any personal development then the closest city is Sydney and that would be an 5 hour road trip (on Kangaroo hazardous roads) or 2 hour road trip and then 50 minute flight plus taxi etc from airport.

How can we compete with other communities and more to the point, why should we?

Though our town is typical of the smaller communities which provides all the basic facilities including two schools/ a bowling club/ two pubs and an IGA that operates restricted hours on weekends, we still struggle to compete with the towns with populations over 1500 and more?

In the past 18 months I have had more than 8 overseas trained doctors visit our town with the option to take up placement! However at the time they are always looking at a minimum of 2 other places and these places always have more than one doctor plus offer more facilities to the partner and children.

In the smaller communities there are not a lot of career opportunities for the partner if he or she is not medically trained therefore forcing the partner to travel great distances every day or stay away from the family for the week only returning for the weekend or worst drawing the doctor away from the smaller community over the weekends?

The choice of schools is restricted? For some applicants the schools were an issue and the limited choices in extra curriculum activities for their children only added to the discrepancies between the other options the doctors were considering?

It was my understanding that the purpose behind the ASGC-RA was to establish a more accurate zoning from the previous RRAMA however this new system is far more short sighted than the previous?

This back step by the government has given myself no option but to consider other options for me and my family which will included us leaving our community in 2012 with no doctor or VMO for the 20 bed hospital!

If the government does not care or have the foresight then why should I?

Should you wish to discuss the above in more detail, I am available on my mobile or to be personally present for the inquiry to put my real experiences forward for a possible positive change.

Yours Sincerely

electronically signed

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