

18<sup>th</sup> December 2011

Re: Senate inquiry Rural Doctors

Dear Sir,

My name is Karen Hutchinson, I am a Councillor on Great Lakes Council (NSW). My submission is based on my own personal experience in my own town.

We live in a small town called Booral, our nearest doctor is in the township of Stroud (pop 550, Stroud catchment population approx. 2000), and he has an associate's agreement with Gloucester Medical Centre.

Hospitals that serve this area are Buladelah, Gloucester, Taree, John Hunter Newcastle, The Mater in Newcastle and Maitland. Even though there is no lack of hospitals, the waiting times for Emergency are horrendous as they are everywhere. Bulahdelah hospital is now closed at night due to the local doctor being very ill. The doctor from Nahiack has been helping out in Bulahdelah but this situation as it stands is very unsatisfactory for everyone concerned.

Stroud Ambulance officers are second to none! We have a 24hr button at the station for emergencies, (when the station is unmanned) which puts you through to 000 even in a blackout situation, this makes my community feel there is help close at hand.

Our Doctor situation is a little less comforting! I called a community meeting last month to inform the community that our local family Doctor is retiring in September 2012, after giving this community a wonderful service for some 14 years. He turns 70 next year. It was also pointed out to the community that finding a doctor for Stroud was possibly going to be difficult as Australian trained doctors are very few and far between so we would have to look at an OTD. This then became another problem as our application for "Area of Need" status had not been granted on the Gloucester documentation even though Stroud's demographics were used in the application. This is being attended to by the Practice Manager in Gloucester and hopefully will be rectified in the near future. We have had an application from an OTD who showed much interest in Stroud, but it all hinges on the above paperwork and of course Medicare status.

Gloucester Medical Centre has had doctors retire in 2011 and is now unable to send a relief doctor to Stroud one day a week so our surgery is now closed on a Thursday.

What has gone wrong in our system that we do not have enough Australian trained doctors to service our regional areas, from my research I am getting the message from the medicos I have spoken to that the incentives for our graduates is far from satisfactory. Being a doctor in 2011 is a very expensive business to be in, like any business it has to be viable. I am told it is because of the small incentive our Australian trained doctors are offered to move to regional areas they decline and move into specialised fields or research. This scheme obviously must change.

This brings me to the cost to a community to have an agency procure an OTD; this is in the vicinity of \$25,000. This is outrageous; it shouldn't be a privilege to have a local GP. This cost is an impost on small communities why should we have to pay?

Yours sincerely,

Karen Hutchinson