

9 March 2022

GP and related primary health services inquiry

The Rural Doctor's Association of South Australia (RDASA) would like to thank you and the Committee for the opportunity to be heard at the recent Senate hearing into GP and related primary health services.

During my presentation, I referred to a survey we had conducted with our members in 2020 which provided insight into the workforce conditions currently being faced by rural doctors. The Committee then invited RDASA to submit the survey results which we are happy to do.

Please find attached with this letter a summary of the key discoveries regarding workforce shortages drawn from the survey. This was a survey regarding our contract negotiations, so we have only included information relevant to this hearing.

In addition, we have provided a copy of some comments collected from a similar survey conducted in 2021 (again, we haven't included a copy of the full survey because the content concentrates on our recent state Contract Negotiations).

RDASA would like to thank you again for the opportunity to present at the Hearing and we hope we have been able to help provide the Committee with greater insight into the delivery of rural primary health services.

Best wishes

Peter Rischbieth
President RDASA



RDASA 2020 Workforce Survey

65 Practices | 42 Hospitals represented

50%

Believe they have poor to severe workforce shortages to
provide hospital services

'The future looks bleak'

'Relying on good will and sweat'

60%

Experiencing long-term vacancies

30% experiencing difficulty recruiting

52%

Hospitals reliant on locums to provide services

'If it wasn't for locums, our casualty
service would not exist'

14

Number of hospitals that have been on bypass in the past 12
months due to a lack of doctors

'Every weekend'

'Approximately 5 days per month'

51

The average age of doctors surveyed

Will you have foreseeable workforce shortages in the next 12 months?

64% Yes

17% Possible

9% No

'Yes - very worried'

'Have them now'

'Definitely'

'We will have a shortage if we don't manage to recruit a registrar
or GP in the next couple of months'

'Yes - very worried. Especially female as one of the two is pregnant now!'

'Short and getting worse'

Will you have foreseeable workforce shortages in the next 2 - 5 years?

46 responders said yes

7 responders said no

'Yes - unless serious action is taken at both a State and Federal level.'

'Definitely'

'Already here'

'It is only going to get worse'

'Constant shortage'

'Especially with less registrars'

'Losing up to 4 doctors in the next 5 years'

How would you describe the current general practice workforce situation for your community in providing hospital services?

23% Severe Workforce Shortage

26% Poor

31% Satisfactory

18% Good

'On bypass 8 days a month - the community backlash and outrage is about to unfurl'

'On edge of being unsustainable'

'Probably nil once I'm gone'

'Short and getting worse'

'Locums are brought in to cover the hospital'

'But only just. Need 1-2 more GPs.'

Workforce vacancies

'CHSA don't recognise or advertise'

'Since permanent GP retired recruitment has been an ongoing struggle'

'Have been advertising for more than 10 years'

'No fully registerable doctors applied to work here since 1993'

'Long term issues as well as very difficult to fill'

'Renmark Emergency department was not staffed appropriately, had no supply of required equipment and nurses were not appropriately trained in emergency medicine. Thus the emergency department was closed this year'

'Current model is unsustainable with our workforce shortage. Our doctors are feeling overworked and exhausted, not wanting to staff the Emergency roster. Especially when not remunerated to the degree they would like.'

'I will probably be retired (within the next five years) but at the moment, succession planning seems a dirty word'

'In the last 2 years, we have decreased by 2FTE in fellowed GPs. Over the last 3 years register positions have not been filled and GPEx reporting another decrease in applications for 2021.'

'We keep going, but only with increasing personal sacrifice from senior docs in the practice. We are just keeping our head above water, but if we were to lose anyone, we will fall over.'

'Not enough local GPs in the Riverland to replace upcoming mass retirements and not enough to service local demand as it stands.'

'Are you kidding??? We are only just hanging on to emergency cover by the skin of our teeth. There is a solo GP in town also contributing to the emergency roster - he is 72. He may stop providing emergency services at any time and we will suffer enormously.'

RDAA undertook a similar survey in 2021 and the results echoed the same cries for help.

I have loved my work in the practice and hospital and always felt very positive about the future. Now I see its impact on me and my fellow GPs, on the clinic staff and practice manager, and the flow on affects to our family, less time to spend with kids and husband, more on calls. Now I feel defeated. I feel the future looks hopeless. I worry about the community as it may be we have to withdraw services from the hospital and I worry about the flow on affect it will have on our staff and the Drs as the community has a high expectation of us. I cannot believe the hospital and LHN seem to be so disinterested and obstructive. I've been here 19 years and until now the relationship has been amicable and collegial. It's sad and disheartening.

Rural medicine is dying through lack of awareness or deliberate disregard for necessary medical services provision. The GP workforce feels devalued, demoralised & depressed. We are persisting, despite state & federal bureaucratic incompetence, so that we continue to be advocates for our patients.

System is broken and under severe stress. Hospital staff are stressed and the whole atmosphere is unpleasant and difficult to work.

SA Health run practice, those that run it have no understanding of general practice and think that an untrained receptionist is all I should need and I can just fulfill everyone's needs. Endless promise of a practice nurse, which never happens, payments for service often late (and would be later if I didn't repeatedly complain), requests for a practice manager just one day a month, essentially ignored.