



21 December, 2011

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

Dear Secretary

Inquiry into the factors affecting the supply of health services and medical professionals in rural area

I note the terms of reference of the inquiry and would like to make the following submission:

General

Lachlan Shire lies in the Central West at the heart of New South Wales, to the west of major centres such as Orange and Parkes, south west of Dubbo and north east of Griffith. These larger centres provide many of the higher level services to the Shire residents including services such as health. The Shire is the home to many traditional farming cultures including sheep, wool and beef production and is one of the largest grain producing areas of NSW. A small but very successful light manufacturing sector has emerged in both Condobolin and Lake Cargelligo and Council has established Industrial Estates to promote further growth.

Lachlan Shire has a road network of over 4,000 km, the largest road network responsibility for any single local government authority in NSW. This network consists of 999 km of sealed roads and 3,000km of gravel, formed and unformed roads.

The Shire is the home to 6670 people across 14,973 square kilometres. Many of these people are located within the townships of Condobolin (3000), Lake Cargelligo (1100) and Tottenham (500), as well as the smaller villages of Tullibigeal, Burcher, Albert and Fifield. 14.8% of the population is indigenous.

(a) the factors limiting the supply of health services and medical, nursing and allied health professionals to small regional communities as compared with major regional and metropolitan centres;

Over the past several years there has been a steady but certain decline in the level of health services available to residents immediately within Lachlan Shire as the availability of General Practitioners and registered nurses has declined and the level of servicing at local health centres and aged care facilities has reduced. Surgery is no longer performed within the shire, no birthing facilities are available and patients have to be transported out of the shire to regional facilities to receive specialist treatment. Recognising the importance of health services Council plays an active role in recruiting GP's into each of the towns in the shire and provides medical centres and financial support.

Factors affecting the supply of health services include...

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- The apparent reluctance of Australian trained doctors to practice in small rural communities. This is a natural but very powerful influence. Within the shire there are presently 7 doctors practicing as GP's all are overseas trained and there has not been an Australian trained doctor recruited into the shire for well over ten years. The increase in places for training of doctors that has occurred recently may turn this trend around however that remains to be seen. Our fear is that the system which produces doctors is aimed away from rural practice and focuses attention on large regional hospitals and the city.
- The lack of opportunities for doctors to practice "cutting edge" medicine in small rural hospitals. Medical training is more and more specialised and the opportunity for doctors to practice specialist skills in rural hospitals is becoming more and more limited. So in our shire for example if the issue is any more complicated than a minor procedure the patient is quickly referred to a regional hospital.
- The doctors that are being recruited into shires like Lachlan are overseas trained and whilst offering an essential service they are looking for the best Australia can offer in terms of lifestyle, education for their families and recreational and cultural experiences. We find that almost invariably when the children reach school age the family leaves for the city and the doctor eventually follows.
- There is a lack of coordination and support. Areas of need overseas trained doctors new to the country invariably need supervision and obtaining supervision is problematic. Local Health Services see their role as being to recruit doctors to act as VMOs and not necessarily as GPs, in the towns. Due to the lack of coordination of these different roles obstacles tend to prevent many potential doctors from actually getting to the starting line. So for example an overseas trained doctor may be able to work full time in a regional or city emergency department but lacks the experience necessary to be a general practitioner in a "one doctor town". There is no incentive or mechanism that will provide support for that doctor while he or she gets that experience.
- Recruitment of Registered nurses and allied health professionals into rural centres is extremely difficult. Unless the professional is married to a long term local the chances of recruitment are remote. Lachlan Shire has found over the ten years in particular that recruitment of registered nurses into the Condobolin Retirement Village was impossible and the facility had to rely on agency nurses who were often overseas trained and provided at a premium cost. Eventually the lack of professional staff forced the Council to hand management of the facility over to a private operator who is facing similar problems. Unfortunately the lack of staff affects the standard of care provided and the financial results for both resident and operator.

(b) the effect of the introduction of Medicare Locals on the provision of medical services in rural areas;

From the Council perspective there are no apparent changes whatsoever. We all hoped that with the intervention of the Commonwealth into the health system the issues would be addressed and the level of service provided locally would improve. That has not been the case.

(c) current incentive programs for recruitment and retention of doctors and dentists, particularly in smaller rural communities, including:

- (i) their role, structure and effectiveness,*
- (ii) the appropriateness of the delivery model, and*
- (iii) whether the application of the current Australian Standard Geographical Classification – Remoteness Areas classification scheme ensures appropriate distribution of funds and delivers intended outcomes; and*

Lachlan Shire offers a range of incentives to attract doctors including...

- Modern fully furnished homes and units free of rent
- Fully equipped medical centres again free of rent

- Motor vehicles suitable for local conditions with the doctors having to meet their own fuel costs
- Cash payments to help offset operational costs
- The offset is that doctors must bulk bill

Unfortunately these incentives are “expected” by the doctors and if Council even discusses the option of decreasing the incentives or removing any of them the doctors immediately threaten to leave. Because recruitment is so difficult and the service so essential it is very difficult for a Council to say no.

The additional income that is available to doctors who manage “accredited medical centres” is a significant factor in keeping the doctors satisfied.

It would be fair to conclude that these incentives are working because we do have 7 doctors for a population of just under seven thousand people. But there have been many times when we have been down to four doctors and we are currently quickly negotiating with one of our doctors in order to keep him. It is a constant ongoing battle.

(d) any other related matters.

I would like to acknowledge the role of the Commonwealth in assisting Council with the provision of a new medical centre and some equipment. Lachlan Shire is in the early stages of constructing a new medical centre in Condobolin that when finished will assist in lifting the standard of medicine in the town by providing a building that can house an accredited medical service and provide the modern atmosphere and equipment necessary to attract young doctors. (Hopefully) The Commonwealth is meeting 50% of that cost and the project would not be possible without that support. At the moment the seven doctors operate out of Council provided facilities three of which are accredited.

Unfortunately what also needs to be kept in mind is that the standard of medical facilities is a powerful location motivating factor for people with young families or for the elderly and chronically ill. We are gradually losing our population and one of the factors affected that decline is the reduction in local medical facilities. The shire has a combination of poor or nonexistent public transport and a large number of welfare dependent residents. Local health services are really very important.

I wish you well with your inquiry and would be more than happy to provide more detailed information on any issue I have raised should you consider that to be helpful.

Yours faithfully,

George Cowan
General Manager