

**Submission
No 27**

**THE IMPLEMENTATION OF PORTFOLIO COMMITTEE No. 2
RECOMMENDATIONS RELATING TO THE DELIVERY OF SPECIFIC HEALTH
SERVICES AND SPECIALIST CARE IN REMOTE, RURAL AND REGIONAL NSW**

Name: Ms Allison Reynolds

Date Received: 20 April 2024

I am a rural resident who has chronic degenerative autoimmune disease(s). I have noticed no significant positive change in the medical system in Coonabarabran, Dubbo, or Orange since the implementation of any of the changes in the report.

The patient travel subsidy is not offered, advertised, or talked about in my local GP or area. Possibly because many out here see asking the government for assistance is "having your hand out" and that is looked down on. Unless you know it exists you won't find out about it. This system needs to be made easier to access and promoted. To be honest I have never used it and only know about it from friends, and I have been driving 6 hour return trips to see specialists for 10 years.

My local area GPs have reduced in numbers so there's now weeks waiting to see one. They are unaware of what specialists are available within a three hour drive and have asked me to research who is where, and whether their books are open to new patients. I don't know what information is being shared with GPs but it seems like an arcane system that is not working for patients like myself who are ill, have mere hours of capacity a week for any tasks, let alone having to research something that would seem very simple to solve with specialists booking systems and/or availability databases that GPs could access.

Most specialists in Dubbo, Tamworth, Orange have a 5-6 month wait for a new patient, and 3 month wait for an appointment. For people with autoimmune diseases this will mean often visiting a specialist AFTER the horse has bolted. This leads to patients being medically gaslighted because the symptoms that drove them to seek the appointment in the first place are long gone and the specialist who could have diagnosed at the time of illness flare up, has nothing to work with. This causes great distress in patients who already struggle with symptoms that are severe but transient and so are often written off as "stress" or "depression", or even hypochondria.

Regards

Allison Reynolds