

Submission
No 89

**THE MANAGEMENT AND OPERATIONS OF THE NSW
AMBULANCE SERVICE**

Name: Mrs Kathy Maslin

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I have grave concerns about the lack of maps/GPS devices provided to rural ambulances. In our small community up until the month of March I know of three incidents where our local ambulance officers had trouble finding patients due to lack of navigational aids.

The first case involved finding an elderly patient in the township of Beckom. Our ambulance is stationed at nearby Ardlethan, 8km away. The patients family had given the correct street address but as both towns had streets of the same name this created some confusion. It was after local residents had seen the ambulance pass by several times that the ambulance was stopped and asked if they needed help. Local residents were very alarmed to find that all the new officers had to direct them around the district was a hand drawn map, made by an officer who was stationed at Ardlethan over 15years ago. The map contained only details for the township of Ardlethan, none of the surrounding areas covered by the service were included.

The second occasion that I am aware of occurred on the 18th February 2008. My father had collapsed and my mother called for an ambulance. This was sent to Rannock from Wagga Wagga. My parents live on a bitumen road that is considered a main road in their farming area. On arriving at the scene the officers called for the paramedic ambulance from Ardlethan as my father was in a critical state. The officers from Ardlethan were directed to travel to Coolamon and then out to Rannock, a distance of over 100kms. Fate was on our side and a relieving officer was on duty who had worked in the area ten years ago. He had some basic knowledge of the area and knew that there was a more direct route to Rannock from Ardlethan. This route was 60kms and saved very valuable time. Unfortunately my father had had a massive cerebral hemorrhage and he died several hours later. Had this turned out to be a time critical case the directions given to the officers could have cost a life.

The third case occurred when officers attending a local function were called out to a rural property. Their directions were once again to travel back to Coolamon, over 70kms away, and then to travel back toward the property. Local knowledge directed them straight to the property saving nearly an hour in time.

It is appalling to think that ambulances are not equipped with any local maps. Our Rural Fire Service units are all equipped with very good maps with the names of all local properties on them. Why can't our ambulances be issued with these maps as a minimum standard? I am also aware of computer programs that contain every public roadway. Why could this not be combined with a GPS system to help them navigate through the maze of country lanes that rural people live on? It amazes me in this day and age that the Ambulance Service cannot direct an ambulance directly to a site without double tracking.

This lack of equipment must surely create high stress levels among the officers stationed in rural areas. It is little wonder that none of them stay for long in our communities.

Navigational aids that could direct an ambulance to an accident site on a rural property must be a priority. Lives are at risk and rural people deserve better. Implementation of adequate navigational aids would improve the health outcomes for rural people and help the stress levels of those officers who are stationed in rural and remote areas.