

Submission
No 95

**INQUIRY INTO HEALTH OUTCOMES AND ACCESS TO
HEALTH AND HOSPITAL SERVICES IN RURAL,
REGIONAL AND REMOTE NEW SOUTH WALES**

Organisation: Deniliquin Health Action Group

Date Received: 30 November 2020

ISSUES WITH HEALTH AT DENILIQVIN

Deniliquin Health Action Group is an advocacy group of community members. It was initially set up by the Murrumbidgee Primary Health Network but is now a specifically community group.

Deniliquin is in a part of New South Wales that is a long distance from any major population centre within the state. People from up to 100 kilometres from the town rely on the health services in Deniliquin. With the closure of the Victorian/NSW border due to Covid19 that reliance became much greater with no way to scale the services to meet the increased demand.

Being near the Victorian border the overwhelming trend is for residents to go to Victoria, particularly Melbourne, Shepparton or Bendigo for complex and specialist services. The nearest of these is 140 km away.

There is a daily bus service to Melbourne that allows a 7 hour visit to the city. Public transport services to Bendigo and Shepparton are possible but not simple. There are bus services to Albury (3 days a week, including Saturday) and Wagga (4 days a week, including Saturday). Neither of the latter 2 services allow a significant period of time in the town so an overnight stay is almost impossible to avoid. The difficulty with public transport means that community transport for patients from Deniliquin is overstretched.

Services delivered in Victoria to NSW residents are rarely reported to the NSW health authorities unless there is a charge for public hospital services. The cost of Deniliquin residents consulting doctors hundreds of kilometres away in Victoria is not a consideration to the NSW health budget. It also means that data available to NSW Health on health conditions in the Riverina are not reliable.

The nearest NSW town where a range of specialist services is Albury (200 km away). This reinforces the need for capacity to treat common serious conditions.

Because of the relatively small size of the community and its relative isolation there are significant problems in attracting and retaining medical health professionals whether they be medical practitioners, specialist nursing staff or allied health providers.

The low case load means that there is no likelihood of local health practitioners becoming experienced in the diagnosis, treatment or management of less common conditions, which, at times, are life-threatening and time-critical.

In the past medical specialists have visited Deniliquin on a regular basis. This has become less common so that relatively large numbers of locals have to travel considerable distances for simple procedures or treatments.

The small number of nursing staff and pharmacists trained in specialist procedures such as dialysis or chemotherapy and the lag time between staff vacancies and recruitment or training of replacements makes some of those services unreliable and unsustainable in the long term.

International medical graduates who are undertaking supervised practice as part of their provisional or limited registration do not have visiting privileges at Deniliquin hospital. This places extra burden on the practitioners in the town who are supervising them.

It is often difficult for visiting health professionals to get suitable accommodation within the town, particularly for students and interns who do not have a significant income.

Videoconferencing and remote presents an opportunity to revolutionise the way in which health services are delivered to remote communities. Consultations with medical specialists in conjunction

with local medical practitioners or nurses can deliver a much wider range of services to the community.

The New England Virtual Health Network appears to offer means by which smaller communities can share in the clinical expertise available in larger communities.

RECOMMENDATIONS:

- That NSW Health produce a list of services available from Deniliquin Hospital and ancillary services and make that readily available.
- That NSW Health adopt a strategic approach to maintaining key staff in isolated communities. That means having enough trained staff to provide the services mentioned above, covering leave and illness, and promptly filling any vacancies.
- That a process be established so that common serious health problems can be treated at Deniliquin Hospital. This will probably require a process where local general practitioners can be assisted by specialists from larger centres using remote consultation technology.
- That regional health districts be supported to become accredited by the Australian Medical Council for the Standard pathway (workplace-based assessment) for registration of international medical graduates.
- That the NSW government review the availability of community transport for patients from remote communities to attend medical appointments.
- That a program be developed to encourage medical specialists to visit remote communities.
- That the principles of the New England Virtual Health Network be extended to all regional communities in NSW.
- That the NSW Government establish a program to encourage medical graduates to enter, and remain in, rural general practice.
- That NSW Health arrange for suitable accommodation for visiting health professionals, interns and students.