

Submission
No 125

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

Name: Name suppressed
Date Received: 9 December 2020

Partially
Confidential

Rural Healthcare needs more doctors and better support.

My mother with Advanced Dementia struggled to get an appointment for her GP when needed and on recommendation to attend hospital was never thoroughly assessed as she would have been in a Sydney hospital.

My 1st incident occurred in January 2020 at Mudgee Hospital, after 2 seizures we were taken to hospital via Ambulance, the fly in doctor did basic checks but nothing thorough as he was more interested in getting to Harvey Norman to purchase an Ipad. When I confronted him and requested to know what caused the seizures he agreed to do get a CT Scan but commented he did not see a point as I would not treat it if it was a brain bleed. I was never provided with the CT results and my mother was only provided with an iceblock during the 8 hours we were at hospital, we had to get my husband to bring in food and thickened water for my mother to have whilst we were in hospital.

To further substantiate that no thorough checks were done we did not realise my mother was immobile until we got her home from hospital and she could no longer walk yet she was walking fine prior to the seizures that resulted in her being sent to hospital.

2nd incident Gulgong Hospital May 2020.

My mother was sent to Gulgong MPS as her blood pressure was low, this recommendation was made by the community nurse.

We arrived by ambulance and only a nurse was on duty, there was no doctor. A virtual doctor was called and he recommended fluids, a test on a large bed sore, a blood test etc. Fluids were administered, no bed sore testing was conducted.

The next day another virtual doctor appeared online and advised again that the bed sore needed to be swabbed and agreed antibiotics and fluid should continue via iv, he also advised we would be in for a few more days at least.

The 3rd day another virtual doctor dialled in, this was the 3rd doctor in 3 days. She advised my mother's bed sore was probably sepsis even though no swabbing etc had occurred, she recommended letting nature take its course and advised we could go home that day. I was also advised by this last virtual doctor that my mother was in her final stages and treating the sepsis with antibiotics will just delay the inevitable, I was also advised I would need to decide whether or not to give her the antibiotics. This contradicted the 2 other doctors and was not a decision that I felt comfortable making.

I agreed to take my mother home as seriously it was as though the doctors could not agree on what to do and I had to have some form of consistency. The nurses could also be heard during the 2 days my mother and I were in hospital commenting about other patients and discussing how I was wasting hospital time and should have all things done under NDIS. Seriously my mother was a tax payer her entire life and deserved to be treated like she mattered.

Anyway my experience is that in this day and age Rural Health Care is something that needs to be addressed by having full-time doctors on-site so that consistency and proper examination is done of patients. It also allows carers to discuss options regarding care in a more private manner.

Also in home Palliative Care is virtually non existent yes you get put on their books but they seriously are useless.