

Submission
No 227

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

Name: Mr Graeme (Mick) McLeod
Date Received: 9 December 2020

Partially
Confidential

Submission to the NSW Parliamentary Committee into Health Outcomes for Rural and Regional NSW.

This submission refers to the provision of GP and VMO services to the community of Coolah.

At the beginning of 2020 we had three Doctors serving the community, all of them busy.

- Dr _____, was the GP operating as the VMO at the Coolah MPS and held his surgery at the facility for General Practice
- His Assistant, in her final year of training as a GP under Dr _____ supervision.
- Dr _____, a private practitioner GP who had previously worked with Dr Hashgenas.

Dr _____ rooms at the Hospital were part of a recent Upgrade of the Coolah MPS at considerable cost to the taxpayer. The facility, staff and service were excellent. He had been a popular and trusted Doctor in the community for some years.

In an ageing community with only remote access to alternate medical services and serving a community population of approximately 1300 people this meant access to timely, proficient medical service was available to all in the Community. It also meant the hospital had ready access for emergency, outpatient and inpatient services as well as service to the Aged Care facility attached.

These services were stretched due to the demands of Covid despite there being no recorded cases in the community.

Apparently the GP practice of Dr _____ and his VMO service were under the auspices of RaRMS, who have some contractual agreement with the NSW Government and Western Area Health to provide Medical services to the smaller communities in Western and New England North West health areas.

It also appears that RaRMS OR Western Area Health had decided that the service in Coolah was not making enough money to Justify its continuance, and as such pressure was applied on Dr _____ to take a cut in salary for the service to continue. This all in the middle of the greatest challenge to national health for 100 years.

Dr _____ was also resident in a House built specifically by the Coolah (now Warrumbungle) Shire some years ago to help attract doctors to the Community. It also appears that moves were made to have Dr _____ pay additional rental for that facility (details unknown)

Not surprisingly Dr _____ felt that he was being poorly treated and indeed being pushed out. Nor is it surprising that despite being a popular local doctor, wanting to stay in the community, he decided to offer his resignation. It does not appear that much (any) attempt was made to resolve the issues.

RaRMS (and Western Area Health?) took the decision, without any consultation with the local community to thus close the GP facility with its GP and VMO service. Their attempts at public explanation in local media answered few questions and in fact opened up the spectre of alternate agendas. After some community pressure all of Dr [redacted] patients and their medical Records were transferred to Dr [redacted].

No criticism of Dr [redacted] is intended, because the community can easily see that she is now overburdened with Patients. However it is now extremely difficult to get an appointment to see the Doctor, with waiting times of five and six weeks common. In an ageing community this is unsatisfactory, and way below the standards acceptable in C21st NSW or Australia. The feeling in the community is that yet again those of us living in Rural NSW have been left behind or forgotten.

The loss of an active Doctor at the MPS, and replacement by Telemedicine from bigger centres has also been the cause of considerable frustration and anguish. Despite the best efforts of MPS Nursing staff, this has been a very slow and inadequate response to community needs. In the eyes of many it also is potentially life threatening. Indeed it looks decidedly third world.

While, I write this submission as an individual, I know my thoughts and angst are shared by many in the Community as our provision of Medical Services has taken a huge backward step in recent months.

Surely it is the PRIME responsibility of the NSW Department of Health and its functionary body Western Area Health to ensure the provision of quality and accessible medical and health services in all communities, including Coolah and surrounds.