

**Submission
No 347**

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

Name: Mrs Sharon Bird, Bonalbo Pharmacy

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We have a wonderful local doctor who works out of the Bonalbo Multi Purpose Service. The only problem is that he cannot be here 24 hours a day and needs to have days off to see his family and annual leave and possibly sick leave if covid were to become a problem here, leaving us vulnerable. In normal times it usually takes 3 weeks to get an appointment.

There are remote working options where the local hospital nurses can phone for support or advice after hours and if it were a serious trauma, the ambulance service has it covered. For less immediate problems, the pharmacy is often the most accessible source of advice.

It is my job to take a history and determine whether it is a minor ailment which I can treat or whether referral to a doctor is necessary. When I do refer people with worrying symptoms on to the doctor, I know it will be three weeks until they get an appointment and if they need blood tests, it will be a further three weeks before they can see the doctor for those results. Considering that appointments are usually 15-20 minutes each, it can take many months to see a doctor long enough to elicit the cause of a problem. You can't just go back in a week if you are no better. It is the same scenario in Casino, the nearest large town. I was told they have gone from 15 doctors down to 9 doctors due to retirement or doctors moving away and that new residents can't get to see a doctor as many clinics in Casino have closed their books. Some patients have doctors in Ballina, Murwillumbah, Kyogle and Ocean Shores.

Going to a larger town for medical care assumes you are feeling well enough to make a three hour round trip.

If you wanted to see a GP right away, within a day or so, you would need to travel to the Gold Coast which is about three hours each way. The border closures with Queensland made it impossible for local residents to seek timely care for non-emergency situations and also meant our specialists were off limits. It was the biggest hardship we faced at that time. I had patients scheduled for major surgery and cancer appointments who went through a lot of additional stress, unsure of whether they could get an exemption.

Telehealth has been a wonderful thing for us, as those people new to town can still communicate with their old doctor. I have a medical practice I visited at the Gold Coast while we were evacuated from the bushfires. I can't get to appointments but I can talk to them on the phone. I had been liaising with them by phone and when I became very ill, my GP up there organised for me to be admitted to hospital at the Gold Coast that night and I had surgery the next day. She had contacts and knowledge of the private system that isn't really accessible to us here.

I see many people fall through the cracks because the whole exercise is so difficult. Others become disillusioned with the system and stop trying after a while. It is not surprising to me that rural health outcomes are poorer than in city areas or than cancers and other illnesses go undetected. The system is not really accessible.

When it comes to emergency treatment, it is okay for people who have friends or family available, but if a single person calls an ambulance, there is a real possibility you will end up stranded in Lismore with nothing and no way of getting home. This is a barrier to seeking care or even going to our local hospital in a serious situation as they are scared of being sent to Lismore by ambulance with no way to get home again.

Patients have told me of prior experiences being discharged from the emergency in the middle of the night with no way to get home. A friend of ours recently had a medical emergency in the middle of the night, He was found unconscious outside on the ground. He woke up in Lismore hospital in his underwear, and a hospital gown and with no wallet or phone. It was just fortunate we were in a position to get clothes and everything to him and then my husband drove in to collect him a few days later. Without us, he would have been in a very difficult situation, but there are many people like him without family or even close friends. It is a pervasive fear in the community and a big barrier to seeking help.

I can well understand the difficulty of attracting medical professionals to rural areas as I am one myself. The lack of health care out here is surely a barrier to those considering a move here as well, although the job itself is rewarding and the lifestyle is way less stressful than the city. It was okay in my younger days as I was in better health. Now I am 51 and more likely to need help. I am lucky to have married nearly 5 years ago and have a husband who can drive me places when I am sick, otherwise I wouldn't be well enough to access help. Without him I think I would have to seriously consider whether I could live and work here. As it is, I have to take holidays in order to see a dentist, optometrist and physiotherapist. There is an emergency locum service for pharmacists which has been of great help this year as I had two emergency hospital admissions two weeks apart and then a funeral. The cost of accessing it is still very high though, \$66 per hour for the locum and they couldn't do anything without me filling in and scanning and sending back a pile of forms.

I hope as a result of this inquiry you are able to improve the rural health workforce and address doctor shortages. In our area, we have quality, but not quantity. We are also concerned about burn out in the few brave souls that do come out to serve rural communities. Those who do take up the call are warmly welcomed and greatly appreciated by their communities and really make a difference which is an incentive in itself.