

**Submission  
No 427**

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

**Name:** Mrs Julie Layton

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This is a submission related to my recent personal experiences of access to health care across the health district. I had a stroke December 2020, I was taken by ambulance to my local Parkes Health Service Emergency Department, had a CT scan and monitored for 5 hours.

I was discharged with a referral for an MRI to be had within the week and follow up with my GP. I had recovered many of the deficits lost including being able to walk independently. The nearest MRI available within the week was in Dubbo 130km away in a private practice.

I was told that the scan was not available on Medicare and the nearest available Medicare rebated scanner was in Bathurst (165km) and that only specialist referrals would be eligible (a GP working within an ED was not specialist enough).

I made the appointment for the middle of the day in order to manage school hours since my 2 school age children were in their final weeks of school. My aged mother accompanied me to Dubbo since I was not confident I would be alert enough to drive the entire distance. At the end of the scan I was told to make my way to Dubbo emergency department to explore further findings that were made during the scan.

I attended Dubbo Hospital emergency department and was quickly admitted to the short stay ward. I did not expect this so had not prepared personal items to stay overnight. Fortunately my husband was able to finish work early and make arrangements for the children's care after school before they returned home.

The following day I had another CT scan, Ultrasounds and later was sent back to the same private practice as an outpatient for an Ultrasound scan which was not available at the hospital. My Mum, who'd stayed in her car overnight, was asked to drive me to have the scan rather than waiting for patient transport and then being unable to arrange an appointment. I was not discharged, to my knowledge.

After the scan I returned to the hospital but my bed had been given to another patient and I was asked to wait in the common waiting room until another bed became available. I was incredibly fatigued, the waiting room was full. My Mum and I sat on the floor in the corridor and waited. I was seen by one of my Dr's whilst waiting and they provided me with some food I shared with my Mum. An hour past and we were transported (me via wheelchair), to a new ward with a bed. Still I did not have any personal toiletries or items to shower.

The second day I waited all day to have a single ultrasound within the hospital and was discharged shortly afterward to follow up with my GP. I was also given two referrals which were to be sent direct to the Dr's where they would contact me. I had previously made an appointment to follow up with my GP after my first stay at Parkes Hospital so could meet with him shortly after my discharge from Dubbo hospital.

The care offered by the staff throughout this process was incredibly supportive considering the limitations they have in lack of resources; my submission is related to lack of diagnostic services available across the central west which leads to sub standard care. For patients unable to transport themselves or pay for the scans independently health care is

unacceptably limited. The choice to live in rural and regional areas should not be fuelled by whether someone is wealthy enough to take full responsibility for their healthcare.

Why was the decision made to update 2 hospitals within 30km of each other (Forbes/Parkes) and neither allocated an MRI? Why are only some MRI scanners granted access to Medicare rebates by some doctors when clearly the system in regional and rural areas is not set up to have 'specialist neurologists or cardiologists' working in ED across all facilities.