

Submission
No 434

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

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Partially
Confidential

Stroke Victim – Slow Ambulance Response Time. This submission is to highlight the poor service an older Australian was recently confronted with when seeking urgent medical assistance from the NSW Ambulance Service in the NSW Northern Rivers region. It is not a criticism of the NSW paramedics who work extremely hard to assist people in need, albeit with insufficient numbers of trained staff and inadequate resources.

On 10 November 2020, my mother suffered what was assessed as being a serious stroke. On that morning, having just had a shower, she realised she had suddenly lost the use of her right arm and could not grip her towel. Her initial realisation was that she had most probably had a stroke, and it was ultimately established that the condition had affected the entire right side of her body.

My mother is an eighty-five-year-old widow and pensioner who lives alone in Grafton in the Northern Rivers region of NSW. It is a town of less than twenty-thousand people whose medical services have been progressively reduced over many years. My two siblings and I live in south-east Queensland. My mother has family and friends in Grafton, most of whom are also elderly.

In her state of anxiety, my mother telephoned her brother, who also lives in Grafton, and asked him to call her an ambulance. Her brother was number one on speed dial on her telephone. Rather than dial 000 herself, it was her first reaction to call her brother. My mother's voice was slurred, but she managed to get the message across and told her brother she thought she had had a stroke. My uncle immediately called 000 and requested an ambulance. He told them his sister had suffered a stroke and needed an ambulance to take her to hospital. He provided them with the limited details he had together with his sister's address and contact number. My uncle himself had suffered from two transient ischaemic attacks in mid-2020 and could no longer drive a car.

A person from NSW emergency services telephoned my mother to confirm her situation and informed her that an ambulance had been dispatched but may take a little while to arrive. The Grafton ambulance station is less than five minutes' drive from my mother's home in Street and the Grafton Base Hospital is less than two minutes' drive around the corner in Arthur Street.

While waiting for the ambulance, neighbours sat with my mother. Also, her brother asked a neighbour to drive him to her home. It took more than an hour for the ambulance to arrive at her address and it was roughly an hour and a half before my mother arrived at the hospital, such a short distance away. The ambulance was called from Coffs Harbour to attend to my mother's needs, a drive of approximately one hour.

A stroke is a significant medical emergency and prompt attention is essential. For stroke victims, time is of the essence in relation to treatment options which may reduce the long-term effects. The delay in reaching the hospital meant that the options available to the medical staff in the hospital's emergency ward to treat my mother were significantly reduced because of the time that had elapsed. A doctor informed me that the window available to emergency medical staff to consider delivering thrombolytic therapy to break up blood clots had been closed due to the delay in arriving at the hospital.

Before the ambulance arrived, the neighbours sitting with my mother called 000 twice more to check on progress. Given the ambulance station was only a short distance away and they expected the paramedics to arrive imminently, no thought was given to placing her in someone's car and taking her around to the hospital themselves. Their trust was in the efficiency of the system and it failed them spectacularly. Each of them is now most anxious about what might happen if they themselves were to experience a medical emergency requiring an ambulance.

After a period of time in the emergency ward, my mother was admitted to the coronary care unit of the Grafton Base Hospital. The next day, it was decided to send her out for an MRI (magnetic resonance imaging). Given Grafton's only hospital does not have MRI capabilities, my mother was to be sent by ambulance for the few minutes' drive to Clarence Valley Imaging (North Coast Radiology Group), a private service provider in Fitzroy Street. The ambulance to take her for the MRI was called from Lismore, approximately ninety minutes away.

On 16 November 2020, my mother was to be transferred to a rehabilitation unit Maclean District Hospital, roughly a forty-minute drive from Grafton. A communication breakdown between the Grafton and Maclean hospitals, coupled with the unavailability of a patient transport vehicle due to a high demand for the service, meant that the transfer did not occur until 17 November. On that day, I was advised that the transfer may take place, but competing priorities could result in another day's delay. Given that situation, I drove my mother from Grafton hospital to Maclean hospital, together with her discharge papers, myself.

The poor state of ambulance resources in Grafton is an outrageous indictment on the NSW health system. It is appalling to think that it would take approximately ninety minutes to get a stroke victim to a hospital in a town the size of Grafton. Unfortunately, it is symptomatic of the inadequate health services available to NSW residents domiciled so far away from Sydney, the state's epicentre and focal point for attention and investment by the current and previous governments.

My wife and I are former residents of NSW, having moved from Murwillumbah to the QLD Gold Coast in April 2020. One of the driving factors for our move was to be closer to hospitals and medical services. We had first-hand experience of the parlous condition of the health and allied support services in the NSW Northern Rivers when our fathers died from cancer in Grafton in November 2017 and in Murwillumbah in May 2018, respectively.