

Submission
No 638

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

Name: Name suppressed
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Partially
Confidential

The restricted access to health and poor health outcomes in rural New South Wales is not only the responsibility of the staff in the hospital but also the NSW government. Staff can only do their best with what they have been provided with.

Due to an outdated hospital that is awaiting a promised new hospital, services provided by ED and acute wards are unsafe and impractical to staff and patients.

For example, the hospital of which I am referring to, has an ED the size of a resuscitation bay where 3 beds, two desks, one consult room, and a triage room. All are interconnected with no way of offering privacy.

The acute floor has doorways that are not wide enough to fit beds through let alone bariatric beds.

Many rooms do not have oxygen in the walls, so a separate cylinder is needed for the room. Staffing is still based on a model from over a decade ago so with above information, staff are still required to care for patients in subpar facilities.

With no access to a patient transport van within 110km of a facility not only delays treatment but puts more pressure on an already burnt out health service provider.

Maybe before looking at what rural facilities are doing wrong based on health outcomes and access, maybe the government should be looking into upgrading hospitals and full time equivalent (FTEs) hours in all areas so that it can be offered first. Then, and only then, can it be improved.