

**Submission
No 696**

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

Name: Ms Glenis Lorna Prisk

Date Received: 11 January 2021

11 January, 2021

The Chair
Legislative Council Portfolio Committee 2 – Health
NSW Parliament
6 Macquarie Street
SYDNEY NSW 2000

SUBMISSION BY GLENIS LORNA PRISK

Dear Sir/Madam,

I write to you in relation to the Health Care Provisions at Cobar.

My name is Glenis Lorna Prisk

By way of submission I enclose copy of pages 4 & 5 of the Sydney Morning Herald of Wednesday, May 20, 2020.

I confirm the contents of the reference to my experience on page 5.

Yours faithfully,

Glenis Lorna Prisk



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Sent home three times with 'food poisoning' before his bowel ruptured

Sydney Morning Herald, Sydney



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Sent home three times with 'food poisoning' before his bowel ruptured

Opposition calls for inquiry into hospital failings, writes Carrie Fellner.

A man had 2.5 metres of his intestines removed after he was turned away three times from a western NSW hospital and his bowel burst and poisoned his bloodstream.

Another resident who nearly bled out in his home was rushed to the same facility only to be told he could not have a blood transfusion because the nearest stocks of blood were three hours away.

The NSW Opposition is now calling for an independent inquiry into rural and regional hospitals addressing staffing, funding and management culture.

It comes after a *Herald* investigation exposed a death and a series of near misses in the past 12 months at Cobar District and Dubbo Base hospitals, which both fall within the Western NSW Health District.

There are allegations an elderly man was forced to go without food, water and pain relief and another man ended up having an amputation after months pleading for treatment of an infected blister.

"There must be an independent inquiry to get to the heart of this dysfunction that is putting lives at risk," Opposition health spokesman Ryan Park said.

In response to detailed questions, the office of Health Minister Brad Hazzard issued a statement yesterday saying the minister had directed the Western NSW Local Health District to ensure a review of patients' experiences and that the report by

the Clinical Governance Unit be made available to him for review. Mr Hazzard acknowledged the patient accounts were distressing, adding the local health district indicated its records contradict some of the reported claims. The statement did not detail which claims were contradicted.

NSW Health data shows life expectancy went backwards 1.5 years in the state's far west between 1996 and 2016. It went up by 3.1 years in western NSW and 6.9 years in Sydney in the same period.

Cobar resident Stuart* told the story of his near-death experience on the condition of anonymity due to his fears of a backlash in his community of 4000 people.

A friend discovered him last May curled over in the foetal position on his lounge room floor.

The 66-year-old had presented at Cobar District Hospital three times in April, passing blood and with excruciating abdominal pain. He was diagnosed with food poisoning and then constipation, and was sent home with pain relief and enemas.

"I was on the phone crying saying, 'There is something very wrong dad, you need to keep going back there until they take you seriously,'" Stuart's daughter said.

On May 2, Stuart's mate carried him through the doors of the hospital, demanding he be admitted.

Stuart was flown to Dubbo Base Hospital where it was discovered his small intestines had ruptured,

leaking the contents into his abdominal cavity and triggering life-threatening sepsis.

Doctors told the family a blood clot appeared to have cut off blood supply to the bowel, and they would need to remove the "dead" parts of the organ. After the first operation,

the infection was so severe surgeons had to leave Stuart's abdomen open as he was placed on life support.

After seven operations only 110 centimetres of Stuart's small intestine were left. "To survive without having to have intravenous feeding, you need to have about 100 centimetres," his daughter said.

"Every surgery we weren't sure if there was enough left to keep him alive because Dad wouldn't want to be kept on a drip for the rest of his life. You never want to see your loved one go through what he did ... it wasn't, 'Will he make it to tomorrow?' It was, 'Will he make it to the end of this hour?'"

Stuart suffered acute kidney injury and congestive heart failure. He spent a month in Dubbo Base Hospital and three months at Concord Repatriation Hospital.

Just months later, in September, Cobar solicitor Geoffrey Langford collapsed bleeding in his kitchen following surgery to remove prostate cancer.

At Cobar District Hospital, Mr Langford was told he would have to wait three hours for police highway patrol officers to drive blood from Dubbo or to be flown to another hospital.

Barwon MP Roy Butler, of the Shooters and Fishers party, put questions about Mr Langford's predicament to Mr Hazzard.

The minister responded that NSW Ambulance aeromedical teams carried blood with them and were able to seek additional supplies from "nearby" NSW Health facilities if necessary.

"With respect to Mr Hazzard,



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when you're talking about nearby, you're not talking about the distance from Dee Why to Fairlight," Mr Langford said. "My reading of what Mr Hazzard said was you're lucky to get blood in three hours. I don't think anywhere in NSW deserves to be subjected to that kind of treatment."

A spokesperson said Cobar District Hospital provided blood transfusions and had "immediate access to adequate blood supply for trauma cases, including mine and motor vehicle accidents."

Another resident, Glenis Prisk, said she had to travel 300 kilometres to Dubbo for an intravenous infusion of iron because no one was able to insert the cannula down the road at Cobar District Hospital.

Her son Allan Prisk slammed the situation as "unacceptable".

He said the town's hospital, which has just undergone a redevelopment worth more than \$15 million dollars, was "perfect but it hasn't got no services".

Another resident, who asked not to be named, claimed she went to the hospital for help after her husband's stoma bags burst but was told staff were not trained to assist and she should go to Dubbo.

A spokesperson denied that was the case and insisted staff at Cobar could perform stoma care.

"Nursing staff at Cobar Health

Service are highly skilled and all credentialled to provide venesection and cannulation and provide this service on a daily basis," she said.

The bedside team was supported by visiting medical officers and virtual services, where a skilled remote team was on hand to provide support, the spokesperson added.

"These services help treat patients safely in the local setting, and support the safe transfer of patients to higher level care when required," she said.

The spokesperson said there were a range of strategies in place to improve health outcomes in the bush – including a men's health strategy focusing on prostate cancer, diabetes and mental health, and a program working with younger people to prevent chronic illnesses.

'I don't think anywhere in NSW deserves that kind of treatment.'

Roy Butler, Barwon MP



Glenis Prisk was forced to travel 300 kilometres for a basic procedure when her iron levels dropped. Left, solicitor Geoffrey Langford at his office in Cobar. Photos: Janie Barrett



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A man's bowel ruptured after he was turned away three times from a western NSW hospital. Photo: Janie Barrett