

MEDIA RELEASE



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Rural doctors call for workforce boost to be 'front and centre' of health reform agenda

The Rural Doctors Association of Australia (RDAA) says the current health reform agenda must focus on boosting the number of doctors and other health professionals in rural Australia if access to healthcare is to be markedly improved in the bush.

"Unfortunately, the current health reform agenda is missing the main point—that services in rural communities are best delivered by committed local doctors, nurses and other health professionals with the training, qualifications and skills that meet the needs of their communities" RDAA President, Dr Paul Mara, said.

"There is sometimes a lack of understanding of the difference between rural and city practice.

"Rural doctors mostly provide primary and secondary level care through private general practice and local hospitals. This includes being on-call often for days at a time and providing emergency after-hours care.

"We need to build sustainable practices in the bush, and not simply apply bandaid solutions.

"A case in point is the new *after hours GP helpline*.

"While RDAA supports this initiative, it will not provide much help in rural practice where doctors are available to their patients by phone most of the time, nurses provide a valuable triage service through local hospitals, and doctors provide frontline emergency care that goes way beyond that required of city GPs."

Dr Mara expressed RDAA's concern about the proposal to move responsibility for the provision of all after-hours services to the unproven Medicare Locals.

"Medicare Locals are a completely un-tested initiative and, as such, we have concerns about their ability to maintain, let alone improve, after-hours care in rural settings" he said.

"We are not yet convinced that they will have the resources, commitment or even accountability mechanisms in place to take over after-hours care in rural communities.

"In fact, they may make things harder for communities to attract doctors willing and able to provide after-hours care, as many longstanding rural doctors who have been providing after-hours care for years take some of the changes as a signal that their services are not valued and simply walk away."

Dr Mara outlined RDAA's position at a productive meeting last week with the Federal Health Minister, Nicola Roxon. The Association welcomed an offer of further discussions with the Minister to address the broader issues around medical workforce.

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