

MEDIA RELEASE



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Rural doctors warn COAG there can be no health reform without a health workforce

When the Council of Australian Governments (COAG) meets to discuss health reform on Monday, it must first seek to solve the chronic rural health workforce shortage, without which reform is impossible.

Rural Doctors Association of Australia (RDAA) warns the recommendations put forward by the National Health and Hospitals Reform Commission (NHHRC) to address rural workforce shortages are woefully inadequate.

On the eve of the Brisbane COAG meeting, RDAA President, Dr Nola Maxfield, urges COAG to reject the workforce recommendations put forward by the NHHRC and instead commit money and resources to build a skilled and sustainable rural health workforce.

“Reforming the Australian health system is only valuable in rural Australia if there is the medical and health workforce to put them in place,” Dr Maxfield said.

“We estimate rural Australia is currently short 17 000 health professionals - that’s doctors, nurses, and allied health workers – we can’t expect to bring about meaningful change in a system that is so grossly under resourced,” she said.

“The crucial element missing from the NHHRC report was any recommendation for substantial new initiatives to get more doctors and other healthcare professionals to the bush. We need the Federal Government to commit to a comprehensive package of incentives which will make rural practice a desirable and viable option and we need the States to support this through their mechanisms.

“At the end of the day, the real issue for rural Australia is not whether our nation has one health system or whether the states or Commonwealth control it, but whether there is a health system at all in the bush.

“Currently the Federal Government short changes rural Australia to the tune of around \$1b a year, as a result of an underspend on Medicare and the private health insurance rebate – its time that inequity is addressed.”

Dr Maxfield said it was also important for COAG to be mindful of the pitfalls of developing a ‘one size fits all’ approach to solving the chronic problems in the health system.

Any changes to how the health system operates must take into consideration the significant differentials in rural areas.

“We fear that reform of the health system could lead to some unintended consequences for rural communities,” Dr Maxfield said. “The unique circumstances of health care delivery in rural Australia mean that blunt, untargeted mechanisms for system wide reform are not only unlikely to be meaningful in the context of the bush, but in some instances can do substantial harm.

“To avoid this, rural proofing must be rigorously applied to all of COAG’s reform and policy decisions.”

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