Silver bullet approach leaves rural health in critical condition

Rural doctors have criticised both the Coalition and Labor after today’s Press Club Health Debate that showed no sign of interest in rural health.

Dr John Hall, President-Elect of the Rural Doctors Association of Australia (RDAA), said that apart from previously announced funding for a National Rural Generalist Pathway, rural health issues have not rated a mention in the election campaign to date, and were nowhere to be seen in the debate between the Hon Catherine King and Minister Hunt.

“While we are very grateful for the funding allocated by the Coalition for the development of the Rural Generalist Pathway in the recent Budget, and for Labor’s promise to match it if elected, it’s no silver bullet that will magically solve all of the issues facing the provision of healthcare in the bush.

“In fact, the $62.2million promised is only a fraction of the money that has been allocated for other broad-based programs, that will deliver little or no benefit to rural Australians.

“Both parties are planning to throw billions of dollars into health, with Labor promising $2.3billion for cancer care and the Coalition $1billion for improved primary care. Unfortunately the cancer care money will do nothing to keep this care local and support health services in the bush.

“Next to this the $62.2million to help train doctors with the right skills to work in rural areas works out at about $10/head, when indexed next to the approximately 6.1million Australians in rural and remote communities,” Dr Hall said.

“This is an appalling number, and both parties need to address the shocking $2billion in health underspend in the bush with rural-focussed initiatives.”

RDAA has provided both sides of government with a number of solutions, which will work towards achieving greater health equity.

“A rural loading on Medicare rebates that covers all rural medical services and consultations with both GPs and specialists would go a long way in making healthcare more affordable for rural patients,” Dr Hall said.
“It would also create a financial incentive to entice more specialists to provide services in rural locations, and closer to the home of the patient, rather than requiring them to make the long trek to the city where additional expense is invariably incurred.

“We have also suggested improvements to the General Practice Rural Incentives Program (GPRIP) to provide support payments to rural doctors that reflect not only the remoteness of the location in which each doctor works, but also the level of skills and extent of services that the doctor delivers.

“A revamped Rural Medical Infrastructure Fund, that supports health services and general practices that have a track-record in training rural doctors, is needed to increase their capacity to train more.

“A lack of training places is often a bottleneck in the rural doctor pipeline, and more are urgently needed to meet the demand from the ever-increasing number of medical graduates hitting the workplace,” Dr Hall said.

“We also need further supports specifically for rural hospitals and to support rural birthing units, many of which are under threat right across the country.

“Despite a lot of talk, rural health continues to be a policy black hole in the upcoming election, and we hope to see more announcements in this critical area in the final weeks of the campaign.

“In what is proving to be a very close election, Labor or the Coalition could win or lose based on rural seats, and more needs to be done to convince rural voters which way to go.”

A high resolution photo of Dr John Hall is available here

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