Submission No 67

## THE IMPLEMENTATION OF PORTFOLIO COMMITTEE NO. 2 RECOMMENDATIONS RELATING TO CROSS-JURISDICTIONAL HEALTH REFORM AND GOVERNMENT CONSULTATION WITH REMOTE, RURAL AND REGIONAL COMMUNITIES

Name: Mrs Kathryn Pearson

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Since the parliamentary enquiry into health two years ago, health services in the Central West of NSW have worsened considerably.

Our town now has no doctor since the one doctor we had was forced to close his practice due to ill health. The small MPS has very limited capacity, and only has access to a doctor via Telehealth. On a recent visit I made to the facility when I was experiencing chest pain, staff were very competent, but had to rely on the advice of a virtual doctor before proceeding with treatment.

In nearby Mudgee, which has a population in excess of ten thousand people, both medical practices have closed their books to new patients, which has caused stress, despair, and very poor health outcomes for all those needing to see a GP or specialist. Just to renew a driving licence has required many of the elderly to travel to other centres such as Merriwa, Orange or Bathurst for a medical, and some have met with a refusal because the doctor does not know their medical history. It is appalling, and causing great angst within the community, particularly the elderly, the sick, and the disadvantaged who are unable to travel long distances in order to access basic healthcare.

Whilst I realise that there is a desperate shortage of GPs, emergency measures need to be taken to provide better health outcomes than are currently being experienced in country NSW. We are in crisis. One suggestion is to make the GP option more attractive to medical students; another is to train more nurse practitioners to help fill the gap. In addition, bring back mandatory country service for GPs and overseas doctors wishing to practice in Australia.

A parliamentary enquiry is important, but far more important is implementing its recommendations.