

23 June 2008

Hon John Hill MP
SA Minister of Health
GPO Box 2555
ADELAIDE SA 5001
(By email: MinisterHealth@saugov.sa.gov.au
cc to: Amy.Kitselaar@health.sa.gov.au)

Dear Minister

Thank you for your letter of the 18 June 2008 regarding South Australia's Country Health Care Plan.

We are disappointed that the majority of questions we asked you regarding the Plan have not been satisfactorily answered and lack the detailed background we are seeking regarding the basis on which this Plan has been developed.

While some generic responses to our questions have been provided, these answers do not provide rural doctors or rural South Australians with the **detailed and specific information** we are seeking as to how the Country Health Plan will be implemented, exactly what it will mean for hospitals affected by the Plan, or what **empirical evidence and research** specifically has been relied upon in developing this Plan.

Your response also lacks any detailed information regarding empirical evidence and research you have used to substantiate the Government's claims that the Plan will result in *better access* to healthcare services for rural South Australians.

RDASA believes that under the current Plan there will be very serious long-term implications for the delivery of hospital and health care in rural South Australia, particularly regarding:

- the continued availability of acute medical inpatient care in 43 rural hospitals across the state — **we seek a written commitment from you that all existing acute medical inpatient beds provided at these hospitals will continue to be provided at these hospitals under your Plan. We also ask you to define the level of services that would be provided at each of these hospitals under the current Plan (especially with regards to the continuation of 24-hour emergency capability at these hospitals).**
- the continued availability of local obstetric services at those rural hospitals that are currently providing maternity services — **we seek a written commitment from you that these services will be continue to be provided at these hospitals under your Plan.**
- a rapid decline in the number of doctors and nurses working in these 43 communities following implementation of the Plan in its current state
- a significant decrease in teaching opportunities for medical/health students and junior doctors following implementation of the Plan in its current state
- a substantial increase in costs for rural patients and their families as a result of ~~them not being able~~ to access local hospital care and primary health care under the Plan in its current state

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- a substantial increase in pressure on already overstretched ambulance services and SA's remaining Community and Regional hospitals — **we seek your clarification as to whether these hospitals will receive additional, rather than simply re-allocated, funding under your Plan to enable them to cope with the increased patient workload they would be required to meet.**

A growing number of medical, nursing and community groups—as well as thousands of country South Australians—are joining RDASA in calling for the immediate withdrawal of the SA Country Health Plan.

Rather than seeking to downgrade SA's rural hospitals, the SA Government should be actively implementing measures to address the rural medical and nursing workforce shortage in this State. Reducing country hospital services will not attract more health professionals to our country areas.

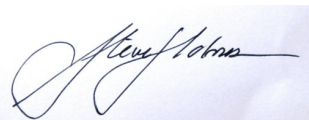
Rural South Australians need and deserve quality hospital care and health care that is locally accessible, equitable and sustainable. Rather than delivering on these needs, the current SA Country Health Care Plan will further jeopardise the future of these cost-effective and essential services in country South Australia.

We would appreciate a more detailed, annotated response to the questions we have provided you, including the specific details of empirical and research-based evidence your Department has relied upon in formulating this Plan and what specific aspects of the Plan that evidence has underpinned.

RDASA would like to work with the SA Government to improve rural health services for country South Australians and the thousands of other South Australians who travel to our rural areas. However, it is crucial that there is immediate clarity provided by you relating to the true intent of the Plan. The last week has seen many interpretations of the intent of the Plan provided by senior officers of your department to groups and individuals. This does nothing to alleviate the concerns of rural doctors, nor the anxiety of rural communities.

The consultation process that you refer to has at no stage disclosed the content of the Plan. The processes that you provided in response to our questions related to discussions around the networking of GP services. These consultation processes did not at any stage suggest that there would no longer be in-patient activity at these 43 locations. If there is to be genuine consultation, which is actually focussed on the content of the Plan and its ramifications, then there must be certainty and a shared understanding, of not only the language used, but its intent. The RDASA is prepared to discuss this with you in an attempt to clarify your intentions regarding the future of these health services in country South Australia.

Yours sincerely



Dr Steve Holmes
President
Rural Doctors Association of South Australia



Dr Peter Rischbieth
Vice President
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