

WARREN DISTRICT HOSPITAL, DOWNGRADING OF AFTER-HOURS MEDICAL SERVICES

245. Mr P.D. OMODEI to the Minister for Health:

I refer the minister to the urgent letter sent to him on 21 October by the president of the Manjimup St John Ambulance subcentre referring to the downgrading of after-hours medical services at Warren District Hospital.

- (1) Does the minister agree with the statement by the president of the subcentre that the after-hours medical service in Manjimup will be seriously compromised by recent contractual arrangements with the Health Department, and his concern that this compromise may lead to the death of critically ill patients?
- (2) Is the minister aware that as a result of these recent contractual arrangements, doctors will be providing services only on one night in three per doctor and one weekend in three per doctor?
- (3) Does the minister acknowledge that the new contractual arrangements between rural doctors and the Department of Health are in fact dissuading doctors from practising in the country and are compromising patient care?

Mr R.C. KUCERA replied:

- (1)-(3) I thank the member for an opportunity to explain some of the issues in the Manjimup area. It is a contractual arrangement, and some negotiation is taking place at the moment about the relationship between the Department of Health and the two doctors in Manjimup. I need to explain this, because this issue came up yesterday. The reality is that most country towns have private practices that usually draw about 70 per cent of their funding from the rebates that they receive under the Medicare Agreement with the federal Government. The other 30 per cent of their funding comes from what is called visiting medical practitioner fees, whereby they contract with us to provide emergency and other services within the public hospital system. In most instances, it is private practitioners acting as private business people, under the arrangements in place under the Medicare Agreement that was signed by the previous Government, who are supplying the medical services for these towns. I do not have any problem -

Mr P.D. Omodei: Those contracts will not attract any doctors to country WA.

Mr R.C. KUCERA: The member should let me finish, because he needs to understand. It is important that under these arrangements, we support private practice and private medicine in our country towns, because at the end of the day it is the long-term viability of these practices that allows a relationship to be built up with the community. That is exactly what we are doing. In Manjimup there is a discussion, negotiation and argument between the two doctors and the Department of Health, because the two doctors have decided, whether it be for lifestyle or the payment of money, that they do not want to remain on the emergency roster at the hospital. I understand that the current situation is that these two doctors have been offered a \$52 000 up-front fee simply for agreeing to remain on the roster, without having to lift their stethoscopes. They will be paid each time they go to the hospital to carry out an emergency service. That system has been in place for 100 odd years in this State and has worked exceptionally well. The problem is that the current attack on Medicare and private practices in the country areas in an effort to make country practices unviable is seriously threatening the future of viable country practices in this State. If we want our doctors to stay in rural areas, we must support them in the public hospital systems and through federal government payments. If a private practice withdrew from a town and the provision of services fell back to the State, the 70 per cent of federal government funding for the Medicare agreements would immediately stop and the State would be under pressure to provide the services. Country people who pay their taxes for the Medicare agreements and who get a 30 per cent tax rebate to ensure that they get federally funded medical services would then be precluded from receiving federal government funding. Members who want to argue about private practices in this State and who want to be part of the death of private practices are doing a disservice to the people of their towns and electorates. We will continue to negotiate with the doctors at Manjimup in good faith to make sure that a proper agreement is put in place. The majority of country doctors have now signed the new visiting medical practitioner agreement. We are happy to negotiate variations of that agreement in each town. If yesterday's comments by Wilson Tuckey were taken literally, it would mean the death of country practices and the death of Medicare in the country regions of this State.