

NORTHAMPTON DISTRICT HOSPITAL

Grievance

MR J.P.D. EDWARDS (Greenough) [9.31 am]: My grievance is to the Minister for Health. I understand that there has been some confusion this morning in the minister's office; therefore, my grievance will be as presented to him. I understand the minister will make a response to the grievance at a later date but will make a short statement this morning.

My grievance is about the current contentious medical indemnity insurance issue that has arisen at the Northampton District Hospital in Northampton. I am aware that the visiting medical practitioner at Northampton hospital is seeking more remuneration than the board of the hospital is prepared to discuss. I am raising this matter because I want to put on record that Northampton District Hospital is the only hospital in a country area of the State that does not have a doctor operating. That is putting the people of Northampton at risk. The medical practitioner has not signed the current agreement. This situation has been bubbling around since July. I understand the hospital cannot treat patients legally without the presence of a general practitioner at a time when the Shire of Northampton is coming into the harvest, fishing and hay-making season.

I will give members a bit of background to the Northampton area. The shire comprises about 13 500 square kilometres and has a population of 3 100. The Kalbarri township is also situated in the Shire of Northampton which has about 1 300 permanent dwellers but averages between 3 000 and 5 000 during the tourist season at Christmas and new year. Some 220 kilometres of Highway 1 run through the Shire of Northampton, which carries everything from caravans, heavy haulage road trains, cars and motorbikes - you name it. Every vehicle that goes north up the coast goes through the Shire of Northampton. Northampton has an ambulance service: one ambulance at Port Gregory, which is one of the small fishing villages on the coast; another at Horrocks Beach, which is also a fishing village; and I think two in Kalbarri. There are two permanent private general practitioners in Northampton and one permanent private GP in Kalbarri. The Royal Flying Doctor Service operates from Kalbarri, but it is somewhat removed from the township of Northampton. In the event of an accident, it would take about one and a half hours to get to the airstrip at Kalbarri to airlift people; whereas Northampton District Hospital would be much closer by driving straight down the road. A number of children attend two schools in Northampton. One is a junior high school, which caters for students up to year 10, and the other is St Mary's Catholic School, which caters for primary schoolchildren. There is one high school in Kalbarri which currently educates students up to year 11.

I return to the highway, which is an issue that concerns people in the area. Geraldton is probably the closest major regional centre with a hospital that could handle a serious accident. About ninety-five per cent of people in the area travel through Northampton on Highway 1 and at any one time about 6 000 to 7 000 people are travelling on that arterial road. In the tourist season more people go north to Kalbarri and probably about 2 000 to 3 000 people are on that road during the week. As I said, Northampton is a good and very well known farming area. It is coming into the harvest season and all the factors that brings, such as accidents involving machinery that can happen on farms. The fishing season must also be borne in mind.

I raise this grievance with the minister to try to hustle along the prevailing situation and to give some hope to the people of Northampton that they are not being totally ignored. I must say in opposition to my National Party colleagues that I do not for one moment believe that the Government is trying to shut down Northampton District Hospital.

Mr J.A. McGinty: That is certainly the case.

Mr J.P.D. EDWARDS: I do not believe there is any sinister move behind this issue. I am aware that it has far more to do with coming to an agreement with the local doctor.

Northampton is a very popular retirement area. A lot of elderly people who need the sort of care and help that a doctor can give them live there. Those senior people having to go to Geraldton for assistance with their medical issues is a major problem. The Northampton District Hospital also services the neighbouring Shire of Chapman Valley, which is again an area where many retired people live. It also services the coastal areas. People from Horrocks Beach and Port Gregory also use the hospital. There are also a couple of mines in the Shire of Northampton. There is more industry than just farming, fishing and tourism. People injured in those mines would also be at risk. I ask the minister to take swift and decisive action on this matter to ensure that this agreement is signed off on as soon as possible.

MR J.A. MCGINTY (Fremantle - Minister for Health) [9.37 am]: I thank the member for Greenough for the issue he has raised. The future of the Northampton District Hospital is very important. As the member has correctly identified, the problem involves the refusal to date by the doctors who reside in the area to sign a medical indemnity agreement, which would give them practising rights at the hospital. Doctors who do not have

the required indemnity cannot practise medicine at the hospital. The last information I have, which is as at last night, is that negotiations with the doctors in the town of Northampton are proceeding. The Department of Health is optimistic. I think that is the best way to describe it. The principal doctor of the medical practice took the agreement home with him last night to consider and I understand he plans to contact the Department of Health this morning to indicate whether he is prepared to sign it. If he signs the agreement, all is well. The issue is simply whether the two doctors in the town are prepared to sign the medical indemnity agreement, in which case medical services to the Northampton hospital will resume. The indemnity issue and the refusal of the doctors to sign the agreement are the sticking points.

I said in answer to a question earlier in the week on the medical indemnity issue that approximately 1 500 visiting medical officers practising mainly in country and outer metropolitan hospitals were required to sign the indemnity agreement as a condition of continuing to practise. The overwhelming bulk - more than 95 per cent - of those doctors have signed those agreements and continued practising medicine on the basis they always have; that is, as visiting medical officers in those hospitals. A small number, including the two at Northampton, have to date refused to sign the indemnity agreement. As I said, we are hopeful that we will be able to reinstate services at Northampton very soon, but that rests with the preparedness of the two doctors to sign the medical indemnity agreement. I will obviously let the member know immediately there is any news on this matter. He may well hear before I do. Hopefully we can liaise if any news about the medical indemnity agreement comes through today. It is important for the people of Northampton that their hospital continue to operate.

I take this opportunity to mention some of the relevant statistics in relation to Northampton District Hospital. Since 1 August, when the doctors ceased to provide services to the Northampton hospital, the hospital has been left with no choice but to offer a nursing-only emergency service locally. People seeking a service have the option of attending the general practitioner surgery or presenting at the emergency hospital department for assessment, triage and treatment or referral or transfer to the Geraldton Regional Hospital emergency department. There have been no admitted patient services for acute admissions as there is no doctor to admit the patient and provide the necessary medical care; therefore, since 1 August until the matter is resolved, persons requiring admission whose needs might normally be catered for at Northampton District Hospital can be admitted to only Geraldton Regional Hospital or, if they prefer and have private health insurance, the St John of God Health Care private hospital in Geraldton. It is regrettable that the local people have had to be inconvenienced in this way, especially as our policy is that the emergency medical services in the small country hospitals are the cornerstone of the services the State Government provides. I also report that there has been a 15.2 per cent decline in emergency department activity at Northampton District Hospital in the past three years. There were 731 presentations in 2002-03. Of this number, 143 were in triage categories 1 to 3, with the remaining 588 in triage categories 4 to 5. Of the 731 presentations, 120 resulted in hospital admissions. Sixty-six per cent of those requiring admission were cared for in Northampton, 28.5 per cent were transferred to Geraldton Regional Hospital, 3.4 per cent were admitted to St John of God Health Care in Geraldton and 1.6 per cent were transferred to Royal Perth Hospital. The number of ED attendances requiring medical attention has decreased. In 2000-01, there were 211 instances in which an attending person required medical attention, and in 2002-03, 157 persons attending required medical attention. This equates to an average of one doctor attendance every 2.32 days. Overall numbers of nurse-initiated doctor telephone consultations about attending persons in the emergency department have been steady over the past three years, with an average of one telephone consultation every 1.77 days. There has been a 34 per cent decline in admitted acute in-patient separations from Northampton over the past three years, with a total of 176 last financial year. The number of bed days declined by 43 per cent over the same three years. In the previous financial year, bed days totalled 663. The average bed occupancy is 3.76, but I caution that this figure includes boarders and respite cases as well as acute-care cases. Medical admissions of people with a Northampton postcode into the Northampton hospital decreased by 50 per cent but at the same time the equivalent admissions increased at Geraldton Regional Hospital by 30 per cent.

The picture of residential aged care activity could not be more different. The facility experienced 100 per cent bed occupancy for aged residents during the three-year period, and the care-awaiting-placement bed was also fully occupied during that time.

I will certainly let the member know if any information on the doctors at Northampton comes to hand.