This is a very remote and isolated part of the state, so it is not easy to try to provide those services for the

To try to address this tragic loss. We need to realise, of course, that this tragedy occurred about four weeks ago.

This issue. Of course, we would like to pass on the condolences of not only this house, but also the WA Country

Health Service on the loss of Connie Smith, who was well known and well liked not only in Nullagine and

Across the whole region, but also in the WA Country Health Service. Her loss was a great tragedy.

I was pleased to get back from the Minister for Health a letter indicating that his department was on the case and

that it was working through the various issues that had arisen as a result of this fatality. The health minister

pointed out that associated with this fatality, there was an immediate need to break in to the clinic where the

nurse was accommodated and that left a facility that had to be fixed. The clinic had to be broken into in order to

access medicine for the other victims caught up in not only the original accident from which they were being

ferried, but also another accident on the road. Of course, the transport vehicle at the remote clinic, which is

sometimes described as an ambulance, was effectively written off. The Department of Health had the task of

trying to simultaneously fix this facility and recruit staff. I was pleased that the minister eventually replied to me

on 2 August—two weeks after my email—with a letter indicating that the issue was being focused on and

attempts were being made to recruit staff.

The major headline on the front page of yesterday’s North West Telegraph highlights the concerns of the local

community. The medical fears of the Nullagine community have been clearly expressed to not only me, but also

the local journalist who has covered the concerns and preoccupations of the community. Members of this

community are traumatised by the loss of a friend and someone who has done quality work in the community.

They are now facing the additional problem of their medical needs not being responded to as quickly as they

should be by the health portfolio. My task is to robustly put to the health minister that, yes, this is a tragedy, but

even in the circumstances of a tragedy, there is no excuse for the portfolio to sit on its hands and not find ways to

position relief staff, even in a place such as Nullagine. There are significant health challenges in this community.

The base population of the community has chronic health needs that well and truly take up the time of a full-time

nurse, as can be seen in the work of Connie Smith and her predecessors, including nurse Kate Edwards, who has

also passed on. A health clinic is terribly important to the base population. Of course, there is the enormous

growth in population in the area around this town as a result of the various resource projects that have put

pressure on the town and the roads. There are also stations and significant communities that move in and around

that inland Pilbara area. There is also the pressure of the visiting public—the tourists and the grey nomads—

particularly at this time of year, who risk their lives by travelling on this road to that beautifully attractive part of

the inland Pilbara from Newman to Nullagine and on to Marble Bar. Their lives are at risk not only from the

road, but also because the health clinic has been unable to respond to a number of emergencies over the past four

weeks. People have had to find all manner and means to get themselves some healthcare attention. I fear that in

the minister’s portfolio, something similar to paralysis is going on, so that people do not respond as they should
to the needs that arise in circumstances such as these and quickly get in the needed relief staff; they wait for the

minister or the director general before they are prepared to breathe, let alone deliver the required responses. It

should not be dependent upon the minister simply saying that it should happen; it should have happened by now.

The department should have fixed it.

The WA Country Health Service staff who have responsibility for managing that region will be very
disappointed to hear the member’s comments about their response and what they have been doing in the region to

try to address this tragic loss. We need to realise, of course, that this tragedy occurred about four weeks ago.

This is a very remote and isolated part of the state, so it is not easy to try to provide those services for the
community, but the staff have done it. The member neglected to advise the house of some of the things that the WA Country Health Service has done to address the staff shortage, so I will place them on record.

There were a couple of issues to do with the building. Because they were unable to find the keys to access the building and the drug safe, the police were forced to break in to the building, which caused some damage. It should have been repaired by now, but the replacement door that was sent was not correct, so they are still in the process of repairing it. That is being sorted out. The vehicle that was destroyed was the transport vehicle for patients, and the WA Country Health Service has located a suitable replacement vehicle. The WA Country Health Service in the Kimberley has loaned the vehicle from its fleet. The Royal Flying Doctor Service has a general practitioner clinic charter on Tuesdays, so a GP goes to the community every Tuesday. That once-a-week service has continued. The WA Country Health Service in the Pilbara has provided an additional nurse from the Hedland Health Campus to assist with the running of that service. We have also chartered flights on 10 and 17 August to allow two nurses from the Hedland Health Campus to provide health services for the needs of those communities. Of course, in all remote communities, some of which do not have health clinics, we rely very heavily on the Royal Flying Doctor Service when someone needs urgent evacuation, as was the case when Connie Smith tragically died. She was transporting a patient who had been burnt to the Royal Flying Doctor Service to bring them to Perth.

The key issue is finding a replacement nurse. It is not an easy task to find someone who wants to live in a very remote part of the state where, as we all know, conditions can be harsh. It is very difficult to do that in many areas of this state in a lot of members’ electorates. We have secured a registered area nurse for Nullagine, and she will start work on Monday. I know that four weeks might seem like a long time for people in a community without daily access to health care.

Mr T.G. Stephens: It is closer to five weeks.

Dr K.D. HAMES: It may be five weeks, but the point is that it is not an excessive time when we have been able to provide a backup service, including the GP who goes to the community on Tuesdays to see people with healthcare needs. Farmers and people who live in remote parts of this state will be very familiar with the need to provide healthcare services when others are not available. It is not as though that country health service has said, “Oh, well, bad luck; we’re not going to worry about this.” It has been trying very hard to secure the services of someone to replace Connie, even on a temporary basis. It has now managed to do that, and it is anticipated that person will start work on Monday. As I understand it, she is not regarded as a permanent replacement, although I do not know that for certain. The important thing was to get someone in there to provide the service for that community and make sure that their health needs are catered for. The problem is that when we are in a community and we are not sick and we do not need to access a healthcare service, we do not necessarily know whether someone is there to provide the service because we do not ask. There may be a general community concern thinking no-one is there when the reality is that people have been going there on regular occasions providing a service for those who need it. I am very pleased now that someone will stay in there and replace the service that Connie provided. Of course, Connie did not provide just a health service; she was part of the community and part of the fabric of Nullagine and I am sure she will be greatly missed.