

RURAL DOCTORS ASSOCIATION (NSW) INC

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Patient safety at risk as Coolah Hospital bypassed

The Rural Doctors Association of NSW (RDA NSW) is warning that the Greater Western Area Health Service's decision to place Coolah Hospital on bypass indefinitely, effectively shutting down the hospital's emergency department, will put lives at risk.

The Association is calling on the Area Health Service to work urgently to recruit more nurses at the hospital—including by recruiting temporary nurses through locum agencies—to ensure the hospital can remain open.

This is the first time in 100 years that the hospital has been placed on bypass, meaning that emergency, critical care and acute care patients will now have to travel or be transported to distant hospitals for treatment.

Coolah is an isolated, single doctor town in north-west NSW. It is 1.5 hours drive from Dubbo Base Hospital and 2 hours drive from Tamworth Base Hospital. Coolah Hospital services a population of over 2000 people, and from July to October an average of 125 emergency patients presented at the hospital each month.

Vice President of RDA NSW, Dr Tilak Dissanayake, has been Coolah's solo doctor for the past 8 years, providing emergency care and other inpatient care at the hospital as well as operating a bulk-billed general practice in the town.

"As the hospital's doctor for the past 8 years, I was extremely surprised to be given only 24 hours verbal notice that the hospital was to be bypassed due to a lack of nursing staff. I was told that all acute care beds and the emergency department would be closed indefinitely" he said.

"There was no prior consultation with me before the decision was made, and it is also of significant concern that there has been no public notification process. In effect, the bypass is putting patients' lives at risk, particularly given they must now be sent either to Dubbo or Tamworth. I also understand that Dubbo Base Hospital has now been put on bypass for emergency patients!

"It surprised me that Coolah Hospital has been placed on bypass due to a nursing shortage, while Dunedoo Hospital remains operating without full-time doctor cover.

"Putting Coolah Hospital on bypass causes great difficulty for many local patients—particularly those who are aged and have limited resources—in getting to distant hospitals. Even the closest general hospital at Dunedoo is around 60 kilometres away, a trip you don't want to have to make late at night when you have chest pain or breathing difficulties, let alone if you are 80 years old and don't drive any more.

"This latest development is the next in a long line of poor decisions that have been made around Coolah Hospital:

- For 100 years, the hospital provided a wide range of much-needed local services including obstetrics and surgery, but over the past 15 years its services have been cut back relentlessly.
- Internal phone lines between the hospital and my surgery have been disconnected without any prior notice, with no other arrangements put in place, despite these phone lines being important in ensuring contact between both sites. The same situation has occurred at Dunedoo.

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- While for many decades Coolah Hospital had x-ray capability, there is no longer anybody credentialed to operate the hospital's x-ray unit. Despite repeated requests over a number of years to the Area Health Service that I be trained in the use of this equipment so x-ray capability could again be returned to Coolah, this request has fallen on deaf ears.

"I am currently awaiting a response from the Greater Western Area Health Service for clarification on the bypass issue. I have requested that the Area Health Service take urgent action to ensure adequate numbers of nurses are available at Coolah Hospital, including by utilising nursing agencies to bring more nurses into town on short-term placements.

"Given its isolation, Coolah Hospital is one rural NSW hospital that should never be allowed to get into a situation where it is placed on bypass—given the long distances to the next nearest hospitals, it simply results in much greater patient risk and could quite possibly lead to otherwise avoidable patient deaths."

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