



Speech by

HOWARD HOBBS

MEMBER FOR WARREGO

Hansard 24 November 1999

HEALTH LEGISLATION AMENDMENT BILL

Mr HOBBS (Warrego—NPA) (12.07 p.m.): It is my pleasure to speak to this Health Legislation Amendment Bill. The aspect of this Bill that I wish to refer to is that part of it which relates to rural doctors.

Mrs Edmond: And I thank you for your support, too.

Mr HOBBS: It is a pleasure.

Mrs Edmond: I have seen it in the media as well.

Mr HOBBS: I think it is such a serious problem that it requires a bipartisan approach. Most Governments have not been able to resolve the issue. We have not fixed it yet, but I think that this Bill is a step in the right direction.

Mrs Edmond: It is a good start.

Mr HOBBS: It is a good start. For quite a long time, I have been involved with this issue as it relates to my electorate of Warrego. It has been very, very hard to attract doctors to remote regions. I can remember way back to the days when Mike Ahern was Minister for Health that there were enormous problems in just trying to put together a package to attract doctors to these areas. We felt that we did a pretty good job of putting those packages together, but we still could not get doctors to go out to the remote areas. Since then, we have heard of some coastal towns experiencing difficulty in attracting specialists. Of course, the AMA believes very strongly that there are too many doctors in Australia and it does not want increased numbers of people going through the education process and becoming qualified. I can see where the AMA is coming from, but the reality is that we are not getting the proper spread of doctors into the regional parts of Australia.

This package provides the opportunity for doctors from overseas to gain accreditation here. They first have to establish that they qualify. Then they will be given permanent residency status as well as a Medicare provider number. Provided they stay in the western regions for five years, that geographical limit can be lifted. However, they can continue to practise in those regions, if they wish. But they must go into an area of unmet need. I understand the Minister will determine the areas of unmet need. We need some clarification of that, because the Explanatory Notes state that the departmental officers will set this up and the Minister will have the final say. I hope that the Minister does have the final say.

Mrs Edmond: On the recommendation of a committee made up of rural people.

Mr HOBBS: That would be the way to go. We need to have our hands on the levers. We cannot allow the system to fall down.

For instance, a lady doctor came to Charleville from Wales. She loved the place. She came out on a working visa and decided to marry a local. She wanted to come back and set up her own practice. We tried to help her to do that. It took three or four years to achieve that. However, the proposed system would have been of more assistance to her. She is now providing a great service to that community and is well respected. That has been a welcome development.

There is a real need for Australian doctors to be treating the people in the west. In the past, we have had problems attracting Australian doctors to those areas. Obviously, one approach would be to

get people who grow up and live in the western areas of the State to gain a medical qualification and go back to those areas. In many instances they need help to get through postgraduate and undergraduate courses. A program was put together by the Federal Government. A lot of work was put into this by John Anderson. In this year's Federal Budget, about \$4m has been allocated to a scholarship program. That will be of great assistance in encouraging rural students to enter the medical field and practise in western areas.

Mrs Edmond: Queensland has a number of scholarships—not the Federal ones that are only partial at a later time. A significant number of scholarships are already available for rural doctors.

Mr HOBBS: What about the ones who stay on? Perhaps 30 might start studying under a scholarship. After six years, we might end up with about two. They tend to keep dropping off. That was the problem we had previously. The number almost halved. For example, if 20 started, 10 would stay on for the next year and in each successive year the number halved. They were not following the course through to completion. I ask the Minister to indicate whether that has been a problem.

Mrs Edmond: I don't know, but the ones who take scholarships are bonded. They have to serve the Government for a period of time, and we really rely on them very heavily out in the bush hospitals.

Mr HOBBS: That is good. However, the main focus should be on making sure that they get their qualification so that they can practise. That has been a problem in the past. Importantly, in this day and age, more emphasis is placed on ensuring that students complete their tertiary training. Those points were important to me. I welcome this announcement by the Government. Western Australia is progressing with this as well. I hope that other States in Australia also take up this program so that doctors are not confined by State borders. If they are prepared to live and work in those regions and look after the people there, they will certainly be very welcome.
