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## Submission

**Senate Standing Committee on Community Affairs** 

Re: Enquiry into "The factors affecting the supply of health services in medical professions in rural areas".

I am a consultant paediatrician who has lived and worked in Mackay for 31 years. In doing so I have provided paediatric services to children and adolescents in the Mackay region from Bowen through to Clermont. I am now the Director of Child and Adolescent Health Service District. Over the 31 years I have put considerable effort into developing services for patients in this region. This has involved not only providing paediatric general paediatric services to the smaller towns and communities but also bringing subspecialist paediatric services to the Mackay region via outreach and telehealth. I have facilitated paediatric telehealth services now for more than 15 years, both subspecialist as well as general paediatric services to the smaller rural towns.

In trying to provide subspecialist services a major block has been the lack of appropriate subspecialists. The major areas are paediatric orthopaedics, paediatric ophthalmology and ear, nose and throat (ENT) services. As evidence of the specialist needs in the Mackay region we have found that the greatest number of patient subsidy travel requests to Brisbane have been for paediatric orthopaedics and paediatric ophthalmology, with paediatric ENT a high level of request.

The problem essentially is an inadequate number of specialists being trained in these areas and employed in these areas, along with poor geographical distribution. This appears to be largely a specialist college block, restricting the number of trainees but also a block in regards to consultant positions provided through the health department. In the Mackay region we do not have a resident ENT consultant reflecting the difficulties in recruitment and retention to a regional area such as Mackay. This means a significant inconvenience for those patients without private health cover for example children with their families needing to spend two weeks post operatively in Brisbane after simple tonsillectomy and adenoidectomy.

I would urge the standing committee to look at those areas of specialist need in rural and regional areas in conjunction with the colleges to enable increased specialist trainees who may be encouraged to address those where there are poorly met needs.

Dr Michael Williams
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