

In reply to your letter regarding the above I wish to advise that the problems we encounter that make it prohibitive to us to practice and also to encourage people such as Registrars to come to our practice are as follows:

- We are a solo practice 7 hours by road from Adelaide.
- When we have registrars we find it difficult to have the locum (replacement doctor) supervise our Registrar (qualified doctor under a training programme). We believe that having a Registrar and making the time they spend with us very beneficial in encouraging them to take up general practice in a remote area.
- The cost of travelling back and forth to Adelaide is prohibitive and also the timetabling of the plane flights makes plane travel difficult. The bus runs only a few days a week and takes all day to reach Adelaide.
- We currently have locum cover through the Rural Doctors Workforce Agency. They do a great job in providing us with locums free of charge. At present we are granted a weekend every two months (6/year). The weekend is from lunch time Friday to lunch time Monday. We are also covered for 6 weeks annual leave and 1 week extra leave to cover study time, able to be taken as annual leave if not used for CME etc. The weeks we are granted do not include the weekends, and the week starts Sunday night and finishes Saturday morning, so at times there is uncovered time, or you have to organise cover if available from neighbouring towns or return in time for on call from Saturday lunch time. This is the same for all country GPs eligible for this service. It has always seemed unfair that doctors 1.5 hours from Adelaide have the same covered time off as we do without any allowance for the distance from Adelaide. There is a remoteness index available and consider that this should be taken into account when locums are made available. It would be much better if a week's allowance included the weekend, and the weekend for areas such as ours had cover provided from Friday morning to Monday evening. We appreciate the weekends off, but it would also be better if there were more of them!
- Study –is difficult. Most study opportunities arise on weekends so we can attend without losing too much consulting time, however this means that we work for 5 days consulting, travel Friday afternoon/evening to the venue, spend the weekend studying and then return in time to consult again on Monday morning so no rest is enjoyed until the following weekend.
- Variety – originally country practice was a very varied job with lots of experiences available. The goal posts are constantly changing and this means that country hospitals are allowed to do less and less patient services. City hospitals also seem to think that we can't do very much out here and so keep patients in Adelaide for treatment when they could come back and live in the comfort of their own homes. An example of this is quite a few chemotherapy patients could have some of their treatment in Streaky Bay and we have staff trained to provide this service but not many patients in fact return for this continuing care service. We also used to provide birthing services at our hospital, but are no longer allowed to do so unless an emergency presents itself even though we have more than enough midwives available.

I still think country medicine is enjoyable and like being part of a small community. Even though we can't do as much as we did in the past we still see a variety of things and are able to utilise the hospital which also broadens the experience.

We have also found it very difficult to attract Registrars because their spouses are unable to work in our small town. Most couples are both professionals and in a small town such as ours the employment opportunities are very limited. I am not sure how this can be overcome, except perhaps by supplying grants or subsidies travel arrangements.....

DR Rob Oswald