

18th September, 2011

Committee Secretary
Senate Standing Committee on Community Affairs
Email: community.affairs.sen@aph.gov.au

Dear Committee members,

I visited my GP a few days ago, and in speaking with her about the extraordinary effectiveness of a traditional remedy which she had recommended to me, she revealed that she was being audited for having too many long consultations with her patients. She and I discussed this further, I found out she is a member of the Australian Integrative Medicine Association (AIMA) and she provided me with a copy of their submission to your inquiry.

It took until I was a little over 50 years of age to find a GP that I cannot recommend more highly. She provides wholistic care which necessarily involves taking the time to listen to her patients and joining the dots on different symptoms. So many others think the same that she has had to close her books to new patients.

I contrast the treatment I get from her with that of my father's GP. As his Guardian, I take my father to visit his GP on average once a month, and we go there because of continuity of his medical history and my father's need for familiarity. My father's GP bulk bills, he gives the requisite ten minutes of time, is not at all interested in my father's welfare, and is dependent on me taking the initiative in asking questions of him and prompting him about actions that might be taken to maintain my father's help. I am certain this GP will never be audited as he does nothing that would make him stand out from the pack. And every time I depart from that medical centre I metaphorically roll my eyes and hold my counsel, because my father would not understand what very ordinary treatment he is receiving and what good care can be like.

My GP is my partner-in-health. Despite my symptoms of glucose intolerance and insulin resistance, for almost a decade she has kept me **pre**-diabetic. I 'failed' my very first cholesterol test in 1975 and despite drastic reductions of all foods that might contribute to the problem, over decades my cholesterol levels remained above the recommended levels, that is until my GP suggested a traditional Chinese remedy. From one three month period to the next and for the first time, my cholesterol levels dropped to fit within the guidelines. When I had depression my GP and I worked together to resolve the problem and the issues behind it, rather than refer to a psychiatrist as most other GPs would do. Yes, it meant longer consultations, but she saved taxpayer dollars without such a referral – and between us we got the results.

While I appreciate the need to reduce over-servicing, it is clear to me that auditing on the basis of the length of consultations, or numbers of particular pathology tests which a GP orders, is a bean-counters' solution that might solve a problem, but not the right problem. Rather, any auditing should be based on a comparison of peers (e.g. other members of AIMA, or all GPs who bulkbill), and not an average across all GPs.

Yours sincerely