



Rural Doctors Association
of Queensland
“Caring for the Country”

Media Release

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Cyclone health care relief a “model” operation

President of the Rural Doctors Association of Queensland, Dr Dan Halliday today praised Queensland Health’s response to health care delivery in communities hit by Cyclone Yasi.

“Three of our members have been tasked to go to North Queensland to ensure continuity of health services in affected towns,” Dr Halliday said. “Two things are good about this: one is that health managers have been very efficient by choosing to engage rural generalists and the second is that they will be supporting both private and public practice.”

All doctors in cyclone-affected areas need time off work with their families to clean up and secure their properties but need to know that patient care can continue while they’re away.

“To prop up these small towns with city-style specialists would have needed complex teams who would have been under-utilised,” Dr Halliday said. “Rural generalists are specialists with the range of skills to manage the unpredictable like accidents, injuries, and births, but also to provide ongoing health care for chronic illness, child vaccinations, whatever comes along.”

Queensland has the only significant training scheme in the nation to specifically produce specialists of this type and has been the envy of country doctors around Australia.

“This summer’s extreme weather has shown the value of having true generalist doctors on the ground,” Dr Halliday said. “When roads and airstrips are flooded and helicopters are too stretched or can’t fly, Queenslanders need to know they can get the care they need locally. Rural generalists can provide that care.

RDAQ is pleased that Queensland Health has seen the value of supporting private GPs as well. “If general practices are closed, hospitals will be inundated with people needing long-term problems treated, and emergency departments aren’t good places for that,” said former RDAQ President Dr John Hall. “That’s why there’s relief is going into to local practices as well as hospitals and that’s why generalist doctors are so essential.”

“RDAQ has known for a long time that public-private collaboration is essential for good health outcomes in the bush,” Dr Halliday said. “We had stories from the floods of hospitals and GP practices working together *ad hoc* and now we’re heartened to see Queensland Health making formal arrangements to deal with this latest crisis.”

The scheme is believed to have been conceived in Innisfail, supported by Queensland Health managers in central office, and delivered by Darling Downs-West Moreton Health Service District. “We give Queensland Health full marks for this one,” Dr Halliday said. “It’s a model for a cooperative future in rural health.”

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