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## **Relentless closure of Victorian rural obstetric units “of immense concern”**

**The growing closure of rural obstetric services across Victoria is “of immense concern” and is putting the lives of more and more rural mothers and their babies at risk, the Rural Doctors Association of Victoria (RDAV) warned today.**

“Approximately 35 rural obstetric units have been closed in the State in the past decade, and more are currently under threat” RDAV President, Dr Mike Moynihan, said. “The closure of these critical services across rural Victoria is already creating huge problems and it keeps on getting worse, with many existing units right on the brink of closure.

“It has always been dangerous for women to travel while in labour but in Victoria there has never been any attempt made by the Government or policy-makers to monitor adverse outcomes in relation to travel and distance, to make a State-based risk assessment with respect to obstetric unit closures and the distribution of remaining units, or to objectively plan for a future in which there are fewer maternity units available across rural Victoria.

“There has been a blithe assumption by politicians, bureaucrats and metropolitan-based specialists that ‘she’ll be right’—and despite research proving that rural obstetric units are very safe places to give birth, there seems to be a false assumption of ‘who would want to have a baby in the country anyway?’

“Because of the growing number of babies being born while in transit across rural Victoria, every small hospital now has to be ready to deliver the unexpected ‘drive through’ baby without qualified staff or adequate equipment, and every ambulance officer has to be prepared to deliver on the way, hoping that he or she will not be the one forced to manage a complicated birth or stillbirth.

“The obstetric crisis is only part of a wider malaise facing rural hospitals in a State which has been prepared to let the structure of rural health provision drift and decline for far too long. Rural hospitals have been allowed to self determine the clinical services they will provide but ironically they have been debarred from recruiting local clinicians to their Hospital Boards to enable them to make decisions regarding clinical services.

“Unlike other States, Victoria seems reluctant to take State-wide action to get more doctors and other health professionals to rural areas, and to preserve rural health services. This lack of action is tantamount to an ongoing policy of closure. Why hasn’t the obstetrics service been reopened in Seymour, a critically placed location?

“Are we prepared to let rural urgent care shrink to a few regional centres? The State Government has never taken responsibility for the provision of accident and emergency services in most rural locations. Doctors are expected to bill the Commonwealth, which currently refuses to pay more than one doctor involved in providing care during an emergency, even if two or three doctors are needed. Community doctors in most rural Victorian locations are expected to do all the recruitment to find the doctors necessary to maintain emergency, anaesthetic and obstetric rosters in their local hospitals.

“The State Government must stop hiding behind Commonwealth initiatives for rural health services. It must stand up and ensure these critical services are preserved and reinstated. The State has pinned a lot of its hopes on rural medical schools to produce its future doctors. These schools need active rural hospitals with experienced clinician-teachers in order to train their students, and future doctors also want to see a solid future for rural healthcare in Victoria before they decide to practise here.

“Failure to ensure all this will leave huge uncertainty as to the capacity of the State to protect the health of rural Victorians.”

**For interviews, contact Dr Mike Moynihan on tel: 0427 331 370.**