

NEWS

## **South Taranaki needs focus on retaining GPs not an urgent care clinic, says Hawera doc**

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South Taranaki rural areas and townships need “innovative models of care”, says Taranaki DHB

Hawera GP Keith Blayney says a DHB-planned primary and urgent care health service for South Taranaki would be a top-down fix for a non-existent problem.

The urgent care clinic proposed for Hawera is not the best option, Dr Blayney says.

Taranaki DHB is ignoring the real issue, and that is retention of long-term GPs in South Taranaki, the country's worst region in this regard, he says.

DHB planning and funding general manager Becky Jenkins says the proposal is in response to community and health sector concerns, including from GPs, about the capacity of primary care to respond to changing and growing demand.

The DHB has called for registrations of interest from providers to run an integrated health service based in South Taranaki. The aim is to increase access and support continuity of care and the management of acute demand. The ROI closed last month.

The proposed service, to be set up this winter, will operate seven days a week between 8am and 9pm. As well as the Hawera urgent care clinic, an enrolled GP service and “innovative models of care”(such as a virtual healthcare and “hub-and-spoke” model) are planned to support South Taranaki rural areas and townships.

In a statement, Ms Jenkins says a range of issues affects the sustainability of services in the area.

“At times, the DHB is aware of difficulty in accessing GP appointments, long waiting times for GP appointments, a population who are not enrolled with a PHO, a low number of GPs on a per-capita basis, and GP recruitment challenges throughout the area, with high reliance on short-term locum cover,” she says in the statement.

Hawera Hospital’s emergency department has, at times, a large number of low-acuity attendances and high presentation rates, she says.

But Dr Blayney says this is actually an indication of the area’s chronic GP shortage.

“The problem isn’t after hours – it’s accessing doctors during the day. There are only five people turning up on average each night at the ED. It’s not like it’s a huge problem. ED doesn’t see huge numbers of GP-type cases.”

An after-hours system worked well in the past, with GPs taking turns on call. But it has become increasingly difficult to get GPs to stay in South Taranaki, and “impossible to get them to do after hours”.

Dr Blayney says the GP shortage has resulted in waiting times of two to three weeks on occasion. Short-term, overseas-trained locums and telemedicine are, he says, Band- Aids that don’t address the reasons GPs feel “overworked and undervalued by the DHB”.

It is intended the new service will have an enrolled patient population, but Ms Jenkins stresses it is still only at the stage of requesting proposals.

But Dr Blayney says this will undermine neighbouring practices. “These practices will lose capitation and become less sustainable financially. That creates an even bigger problem. I know one who would want to walk if that happened.”

Dr Blayney says he's not opposed to an accident and medical clinic, but he questions why it should have an enrolled population.

"It's very, very frustrating for GPs to see something like that, with all the facilities and support from the DHB other GPs don't get."

He says there are many reasons GPs don't stay: "[There's] so much bureaucracy, you can't look after patients, it's over-managed – they are not spending where they should. We are frustrated by the whole thing."

Ms Jenkins says the DHB has received two responses to its ROI. Asked if it is feasible to get the service up and running by winter, she says this will be reviewed once the responses have been evaluated.

*New Zealand Doctor* tried to contact GPs in two other Hawera practices but did not receive a response before deadline.



Hawera GP Keith Blayney says a DHB-run urgent care clinic in Hawera is not the answer to South Taranaki's primary care access problems

## **Taranaki's ED problem taken to board**



Taranaki DHB has the country's highest rate of emergency department attendances per 1000 population, the DHB's chief executive told board members last December.

Rosemary Clements' presentation to the board said:

- Hawera ED has a very high rate of ED attendances for low-acuity urgent care.
- South Taranaki practices have the highest ED attendance rates in the region.
- Hawera Hospital has a very low admission rate from ED.

GP Keith Blayney says most of the attendance has been during the day, and represents lack of access during office hours, reflecting the shortage of GPs in South Taranaki.

He says Ms Clements has acknowledged to him the attendance problem at Hawera ED is not an after-hours problem and that, on average, it equated to five low-acuity cases per night.

Taranaki DHB chief operating officer Gillian Campbell confirms this figure but says this does not capture all presentations over the hours GP services are not open.

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