

Hon Natasha Fyles MLA – Minister for Health

Department of Health

Mr GUYULA: You mentioned community-controlled health organisations in your opening statement. In my region communities have been calling for a greater response to homeland health services. Since 2017 I have been having discussions with your office about emergency patient retrieval from homelands. I am saddened to hear about another loss of life in our homelands. Last week a young man had a heart attack at a funeral in Gurrumuru homeland. I have been contacted by a senior elder, who is upset about the lack of emergency response for this young man, who was his close family.

What is happening to address emergency patient retrieval in our homelands? Why was this young man, and many other people, left to die without proper health support? Will there be an emergency patient retrieval aircraft for our region, and when will that happen?

Ms FYLES: Thank you for the question. I pass my condolences to the family and to your community. I have a declared a conflict of interest with aeromedical, so I will exit the conversation and hand to the chief executive. If you wish to raise these matters away from this forum, Minister Lawler is the minister who manages it.

Dr BRICENO: I know the challenges in the emergency response and aeromedical retrievals in the homelands in Arnhem Land, having worked there for many years. The challenges we face are that the airstrips in those communities, particularly in Gurrumuru and others in the Laynhapuy area, are not fit for the CareFlight assets to land on after hours and, some of them, even during the day. Most of these communities are outside the area of the St John Ambulance contract, which is normally a 150km radius from the bays in Nhulunbuy. As these calls are infrequent, it is difficult to establish a system. We work together with the aeromedical retrieval service, the ambulance service, the Gove District Hospital and Laynhapuy Health to coordinate a response in these instances. I want you to know that the Top End Medical Retrieval Service is currently being reviewed in order to design a model in the future that will have a better answer to respond to homelands.

Mr GUYULA: Almost halfway through last term, I had a look at a single-engine Mission Aviation Fellowship airplane that was able to fit a bed for retrievals. That is about all I have seen. I have not heard any more. What happened to that particular process?

Dr BRICENO: I have not followed that up in the last year or so, but my understanding is that asset is available to be used by St John paramedics, CareFlight staff, Gove Hospital staff or Laynhapuy staff to respond to emergencies in the homelands. That, and other assets that may not be as well equipped as that one, are used regularly to respond to these cases.

Mr GUYULA: I have been raising the issue of an emergency patient retrieval aircraft for north-east Arnhem Land since 2017. Could you advise if there are funds in this budget to make this happen?

Dr BRICENO: In this budget we have increased the funding to CareFlight and St John to meet the demands of the service and that will have a flow-on effect into the capacity and capability in Arnhem Land. However, as I mentioned before, the reach of those two services into the homelands is a challenging issue, given the distance and remoteness and also the volume of cases. That is being reviewed at the moment in the design of a new aeromedical retrieval and ambulance services contract in 2025.

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