



**Joint media release**

**15 April 2020**

## **Ticking time bombs – under-prepared hospitals could blow up under COVID pressure**

Rural medical organisations are warning that hospitals, particularly the smaller rural ones, need to gear up now, to prepare for COVID-19 emergencies.

The Australian College of Rural and Remote Medicine (ACRRM) and the Rural Doctors Association of Australia (RDAA) have said that good preparation will save lives.

“Encouraging progress has been made, but there remain many gaps in the preparations for some hospitals,” said RDAA President, Dr John Hall.

“There has been a really impressive amount of training going on, with many rural doctors and hospital staff participating in simulation activities right across Australia.

“It is essential that all State health departments support their rural hospitals with the appropriate supplies of PPE, critical care drugs, equipment and simulation training.

“If hospitals are left under-supported or under-prepared for a COVID-19 patient they quickly become a ticking time bomb, putting staff, patients and the community at risk of the fallout.

“For any small rural hospital which has not yet participated in simulation activities, or placed orders for the appropriate supplies, that clock is ticking.

“There needs to be sufficient stock of PPE on hand – BEFORE the first case presents,” Dr Hall said.

“This is more than masks. If you admit a patient that needs intubation or resuscitation, clinical guidelines state the doctor must wear a face shield. This is a key item of PPE and we are hearing reports that supplies are running short.

“Many rural hospitals have aged care residents onsite and there must be strategies in place to minimise the risks. This may include changes to rostering to minimise the crossover of staff between the services, continued education and review on staff wearing PPE, as well as fit-testing for masks.



“We are hearing that due to low stocks fit-tests aren’t happening, however it is a critical element of ensuring that the mask is being worn correctly.”



ACRRM President, Dr Ewen McPhee, said that current training of staff was essential to being able to provide quality care.

“Practice makes perfect. Keep running through simulations and ensure that all staff are fully across all the systems and processes from emergency to inpatient care of a COVID-19 patient,” Dr McPhee said.

“There are many great Rural Generalist Anaesthetists working in our communities, along with other Rural Generalists with excellent emergency skills.

“With support and expert advice via telehealth available, alongside retrieval options, rural patients can be assured of an excellent standard of care, should they need it.

“It is also essential that small rural hospitals have equitable access to critical care medications and equipment,” Dr McPhee said.

“Some states and districts are doing really well in regards to their ordering, preparation and simulation activities, but in other areas the preparedness of small hospitals has been very concerning.

“The problems in North West Tasmania serve as a strong reminder that if you are not prepared how quickly you can lose control of the situation.”

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**A high resolution photo of Dr John Hall is available here:**

<https://www.rdaa.com.au/documents/item/687>

**A high resolution photo of Dr Ewen McPhee is available here:**

<https://www.rdaa.com.au/documents/item/968>

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