DISTRIBUTION OF PRACTITIONERS

- 57. A major problem that arises in connection with medical services is that of ensuring an equitable distribution of medical practitioners throughout the Dominion. The trend has been towards larger centres, although lately there has been a tendency for practitioners to seek practices in the country. It is in the more remote areas that difficulty is still met in providing general practitioner services. Similarly, the shortage of specialist services is, in general, and with some exceptions more evident in the secondary centres than in the metropolitan areas.
- 58. The inauguration of general medical services benefits has already assisted considerably in bringing about a better distribution of general practitioners. Nevertheless, it is agreed that in some areas the only effective means of securing a doctor is by an appointment of a man on a salaried or subsidized basis, giving him an assured income at the outset. It is in these circumstances usually that special arrangements have been and are being made under section 82 of the Act. As is mentioned in paragraph 15, the Committee agreed that this procedure must still be followed, but that the policy should be to encourage general practice under uniform conditions throughout the Dominion and that the employment of medical practitioners to provide domiciliary care on a salaried basis should not be undertaken or continued except where it is the only means of providing medical services for a particular area.
- 59. The Committee recommends that the Department, through its Medical Officers of Health, with the assistance of the local divisions of the Association, maintain a continuous survey of the requirements of every area and that efforts be made to encourage general practitioners to establish themselves in practice in areas inadequately served. This procedure, with the necessary modifications, is recommended in order to ensure a better distribution of specialist services.
- 60. Closely related to this matter is the question of arrangements whereby practitioners may be available for night and week-end calls. The Committee was satisfied that the Association is actively pursuing several avenues to mitigate legitimate criticism, and has already, with the assistance of the Post Office, the Free Ambulances, and other agencies made a good deal of progress. If the Committee's recommendations as to the setting-up of Local Investigating Committees are put into operation, there will be a ready means of dealing with any well-grounded complaints which should result in the disappearance of genuine grievances.

SALARIED MEDICAL POSTS

- 61. Departmental representatives pointed out that grounds for dissatisfaction occasionally arise in connection with the selection of appointees to medical posts under Hospital Boards. Certain of the larger Boards have established Consultative Medical Committees to advise the Boards as to the professional qualifications, experience, and suitability of applicants. Smaller Boards have no ready means of obtaining competent advice of this nature. The Department has the duty of making recommendations to Boards, but is often at a disadvantage by reason of its limited knowledge of the applicants and inability, owing to staff shortage, to pursue adequate inquiry. With the amalgamation of hospital districts and thus with larger administrative areas the appointment of consultative committees should be made easier. In the meantime the Committee suggests that consideration should be given to the establishment of Regional Consultative Committees to assist those Hospital Boards who have no local consultative committee in the making of medical appointments.
- 62. In view of the growing importance of preventive medicine, the small number of New Zealand graduates attracted to the New Zealand Public Health Service of recent years or at present undergoing post-graduate training in specialist preventive medicine