



MEDIA COMMENT

Tuesday 28th May 2019

AUDITOR GENERAL'S REPORT CONFIRMS CRISIS ACROSS ALL TASMANIA'S MAJOR HOSPITALS

Today's release of the Auditor General's Report into the delivery of Emergency Department Services provides the independent evidence of the crisis in our hospitals the AMA has been raising publicly for some time.

AMA Tasmania spokesperson, Dr. John Saul said that the report was damning, and that action was required across the hospital system from more funding to better governance.

"What this report confirms is that extraordinary blowouts in ambulance ramping times, overcrowding in our EDs and bed block on our wards, is affecting patient care.

"Alarmingly, this report shows that the problem of overcrowding and bed-block in our emergency departments is leading to more patients being harmed with a 60% increase in ED adverse events across all four major hospitals.

"Knowing patients are being harmed and not being able to do anything more to prevent this harm from occurring because of lack of beds and staff, is at best causing low morale among our doctors and at worst causing significant stress, with some doctors leaving the ED as a consequence.

"The fact is at the Royal Hobart Hospital and the Launceston General Hospital it is more a matter of when are the hospitals not in crisis mode, with the LGH in gridlock for 70% of the time and the RHH 93% of the time.

"In simple terms, we need more beds opened across all hospitals to deal with the growing number of patients requiring hospital care.

"It is simply not good enough that we have around 50% of Emergency Department cubicles filled with people who should be on a ward.

"As a matter of the highest urgency, AMA calls for the immediate recruitment to commence of extra nursing and other clinical support staff required to open additional beds."

Dr. Saul said that it was time that the Government got rid of the Tasmanian Health Service and brought leadership and accountability for decision-making back to the hospitals and the Department.

"The Auditor's report identifies problems with governance, process, and accountability within the THS and DHS, and again AMA calls on the Government to empower hospitals to reform patient flow and patient care through effective local hospital governance

"The THS model is failing, and this is reflected in its inability to construct effective plans and adequately fund their delivery. A prime example highlighted by the Auditor's report is the failure of the THS' Patient Flow Escalation Management Plan released in 2017 that was meant to deal with bed block and the emerging crisis."



Dr. Saul reaffirmed that the AMA looked forward to participating in the forthcoming ED access block summit being organised by the Health Minister.

“We will do what we can to work with the government to provide advice as to how doctors believe systems and governance can be improved that will also help to build a positive culture.”

Dr. Saul also said that last week’s budget would not help to end the crisis.

“For a start, the Government should cease the efficiency dividend that will see a \$14m cut to the health budget. This inevitably will mean around 130 backline staff will go, making it even harder for the frontline to do their job or frontline staff not being employed fast enough to end the crisis.

“While the AMA welcomes the \$30m that has been allocated to the RHH from the 1st of July to help with overcrowding and access flow problems, we are concerned that this will not be enough and does nothing to help the LGH or the NWRH.

“In addition, the Government needs to look at these issues as more than just the ED or even the hospital. Underfunded Mental Health Services, Drug and Alcohol Services, palliative care as well as other primary health services also mean that patients that should be cared for within the community are ending up in our hospitals.

“The AMA has called on the Government to conduct a system-wide review of services that are being delivered across the health sector to see what is working and where the gaps are, which will require further investment.

“This review should involve the public sector across acute, primary and preventative care as well as the private sector from the general practitioners to the private hospitals and insurers and result in a properly funded plan for Tasmania.”

ENDS

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