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**Transcript:** AMA President Dr Omar Khorshid talks to Leon Compton on ABC Radio Hobart Statewide Mornings. 17<sup>th</sup> March, 2022.

**Subject:** Tasmania's poor performance in the latest AMA public hospital report card and the AMA campaign to secure hospital funding from both state and federal governments in the lead-up to the federal election.

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**LEON COMPTON:** Too many people languishing in the ED in Tasmania waiting to be seen on time. We hear that story all too often. We know there are too few beds relative to the number of people that need to use them or is it that there are too few doctors and nurses to get those beds staffed? We also know, and this is no surprise to any of you who are regular listeners to Mornings, there are long and dangerous delays in getting elective surgery performed on time. None of it's new.

But here's a question, would a new funding model fix that? Because that's the pitch from the Australian Medical Association this federal election campaign. Dr Omar Khorshid is the President of the AMA. Dr Omar, Good morning to you.

**OMAR KHORSHID:** Good morning, Leon.

**LEON COMPTON:** Thanks for talking with us. You're here in Tasmania to focus on this, and particularly in the context of our hospitals. You want parties to commit to a 50-50 funding model for hospitals. How will that fix Tasmania's health system?

**OMAR KHORSHID:** Well, Leon, I'm here today in Launceston to launch the Tasmanian chapter of our public hospital report card, and it really outlines why this is so critical, with figures along the lines of what you've just suggested, showing that Tasmania's health system is actually delivering some of the worst results in the country, particularly on elective surgery, where Tasmania, unfortunately, and it's no surprise, as you said, is the bottom of the pile.

But most worryingly, if you turn up to hospital with the most urgent of conditions, with severe chest pain, what we call triage category two, you should be seen within 10 minutes. But you go to the Royal Hobart Hospital, only 46 per cent of people on our data, actually gets seen within 10 minutes. And that is - the consequence of that are measured in people's lives. So, we need to do something different.

And what the AMA is suggesting is that with all of our state's experiencing declines in their performance, that we actually have a national problem here. Too long, there's been a blame game. The Federal Government saying, well, look, running the hospital's the state's problem. They should sort it out that should lift their game. But when we have every state and territory struggling, every state and territory declining, we do have a national problem. And that's why the AMA is calling for a different funding model, which actually focuses on hospital performance that encourages states to lift the capacity of the system to grow it. Because, as you mentioned, we have seen declining beds. And in fact, for 28 years, we have seen beds decline compared with the number of people over the age of 65 [indistinct] ...

**LEON COMPTON:** [Interrupts] So how does changing- so how does changing where the funding actually comes from fix that problem? Isn't this about management and how states are prioritising the health care of their citizens?

**OMAR KHORSHID:** It's actually about money. At the end of the day, so much in our lives, and particularly health care, is about money. So along with changing the formula and the way it's designed to actually focus on hospital performance and access to hospital for Australians, we also want to increase the amount of funding directly going to public hospitals. And we've asked the Federal

Government and the opposition to lift their contribution from 45 per cent of public hospital funding to 50 per cent, but for the states to maintain their spending exactly where it is, which means five per cent more money into the system. That's 20 billion dollars over four years.

So, there's big price tag on that, but that will mean the state's actually have money; they can invest in new hospitals and growing them and employing more doctors and more nurses, so that ambulances aren't parked out the front of the emergency department anymore.

**LEON COMPTON:** And does that fix the problem? Does that get waiting times for category 1, 2 or 3 cases seen within the recommended guidelines? Does it get the elective surgery waiting list in Tasmania down to where it should be?

**OMAR KHORSHID:** It'll certainly help. But of course, health is complex, and that's why we've called a problem we have in public hospitals a log jam. And to clear the log jam, we actually have to look at our whole health system. Right now, you can't get your ambulance unloaded and your patient into the ED because the ED is full. You can't get patients out of ED into the hospital because the hospital hasn't got enough beds and hasn't grown to meet the needs of the population.

And states tell us very clearly that they can't get some of the patients out of the hospital and back into either aged care or disability care, because that system isn't working properly. So, the whole thing is jammed up, and we need to work on each of those parts, including on primary care, to improve the management of chronic diseases in the community in order to fix this problem. Now, these- these are numbers [indistinct] ...

**LEON COMPTON:** Dr Omar Khorshid, how do you make sure we - so, Dr Martin Goddard is a respected health policy analyst in Tasmania. He's been saying for a decade that Tasmania already gets more money for health given to it each and every year. And he alleges the Tasmanian Government take that money and spend it on roads or offering tax cuts to the Farrell family, who run the poker machines in the state.

**OMAR KHORSHID:** We can track health spending. And, of course, the federal government, if it is going to give more money to the states, is going to want to see that money going into hospitals and not into general revenue. That's why we have asked every state health minister to commit that if we can get more money for public hospitals out of the federal government, that they will not redirect that funding, but they will keep it in health so that they can actually grow ...

**LEON COMPTON:** [Interrupts] How? How do you make them stick to that?

**OMAR KHORSHID:** Well, we've got a written commitment from South Australia. I was there in Adelaide yesterday, and an election a couple of days away, I've got a written commitment from the health minister and a verbal one from the Opposition Leader that they would do the right thing if extra funding comes from the Commonwealth.

So we're going around the country trying to get that commitment from every health minister, and we know the health ministers are keen on this because they have also written to the Federal Government formally asking for the same thing. So this isn't the AMA out on a limb. We're actually on the same page as all the health ministers around the country.

But the number one fear the federal government has is that the states will pocket the money. So we've got to take that off the table. We've got to get those states to make a firm commitment. And, of course, these are complex financial arrangements with very large multibillion dollar price tags; I'm sure the federal government can design a contract with the states that actually holds them to account when it comes to the spending of the money.

And we need to do that because, as I said, these numbers are scary. But behind each of these numbers is a tragic health outcome. There's someone whose life is ended when it shouldn't be, or someone who

is living with chronic pain, and in Tasmania you've got to- you need a hip or a knee replacement, you're going to be waiting an awfully long time in pain if you don't have private health insurance ...

**LEON COMPTON:** [Talks over] Can we ask our audience about that right now? If you're waiting for a hip or a knee replacement in the Tasmanian public health care system, what are you being told about the level of time it will take? I'd love to hear from you this morning. 1-300-222-936 is the number. You're waiting for a knee or a hip as an example, how much time have you been told you'll need to wait before you get that done? Dr Omar Khorshid is my guest this morning, the president of the Australian Medical Association. As you say, you're in Launceston this morning. Who are you talking to in the federal political realm?

**OMAR KHORSHID:** So we've come here not just to release the report card, but to talk to the candidates from both sides for the seats of Bass and Braddon, which are so famous on the national stage for being marginal seats.

And we know that the outcome of this federal election will be determined by the outcomes in these marginal seats. So we're here to talk to those candidates and hear their views on hospital funding in general and what commitments they'll be seeking from their leaders as we go into this election. The problem we have at the moment is that neither side think that public hospitals are an election issue for them, this federal election.

Neither Labor nor Liberal want to talk about hospitals. We want to change that because we think the hospitals are important to Australians. We're seeing that right now in the South Australian election where hospitals are one of the absolute top issues. And although we do have a war in Ukraine and other things going on that affect our lives, at the end of the day, COVID has shown us we value our health. We don't want our elderly relatives to live in pain or without appropriate care simply because our system doesn't work. [Indistinct] ...

**LEON COMPTON:** [Talks over] So you want, for example, Bridget Archer and Ross Hart, [describing the incumbent and the challenger in the seat of Bass], to come out and say they want their party to commit to a 5 per cent increase in annual funding for Tasmania's hospital system and that the state doesn't withdraw a similar amount of money?

**OMAR KHORSHID:** That's exactly right. We'll be seeking that commitment from each of the candidates and we'll see what they've got to say today.

**LEON COMPTON:** Appreciate you talking with us this morning. Dr Omar Khorshid, president of the Australian Medical Association. Good idea. What do you think? [To listeners] And if you come up with a deal like that, how do you get the state governments to stick with it? The doctor there saying he's in South Australia- secured that pledge. Do you think it would work here?

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