

Attachment #1 - Response to Interim Report Key Findings

The Government provided a public response to the Interim Report issued by the Inquiry on 21 December 2017. The below responses have been updated to reflect the current context and commitments being delivered as part of the 2018-19 Budget.

Key Finding #1

The Government has listened and taken action to strengthen local hospital decision-making.

On 17 December 2017, the Government announced that a re-elected Hodgman Liberal Government would introduce legislation to restructure the Tasmanian Health Service (THS) so that the THS would report direct to the Secretary of the Department of Health and Human Services (now the Department of Health).

With the passing of the *Tasmanian Health Service Act 2018* and the new arrangements coming into effect on 1 July 2018, the next stage of empowering and strengthening local leadership is being progressed. As part of this process, the Tasmanian Health Service is working to implement new operational structures as outlined in the document released by the Secretary of the Department of Health, in consultation with staff and key stakeholders.

Key Finding #2

The Government is committed to building a better health system, but there is no doubt that access block is regrettably a long-term issue for Tasmania.

The 2012 Legislative Council Inquiry into Labor's \$500 million health budget cut found that "Ward closures have increased the incidence of bed blockages within the major hospitals" and that "Patient outcomes have been adversely affected by the strategy".

The Government acknowledges that there is growing pressure from increasing demand and is taken action to respond.

Over the last four years the Government has opened more than 120 additional beds and treatment recliners, and increased frontline staffing by more than 600 FTE from March 2014 to March 2018 - including more than 375 FTE nurses and almost 90 FTE doctors.

The Government has now taken further action to provide immediate support – opening five more permanent beds on Ward 4D to take the total permanent beds on the ward to 24, providing \$1.5 million to recruit nurses and improve patient flow at the RHH and LGH emergency departments, and opening a brand new transit lounge at the LGH.

Over the next six years, the Government will roll out our \$757 million plan, of which key components are completing the Royal Hobart Hospital Redevelopment and opening almost 300 new hospital beds which will greatly assist with bed access.

The facts are that if former Governments had not mismanaged the RHH Redevelopment, bed capacity would be available to help Tasmanians today.

Key Finding #3

This is a long-term issue that the THS is working to address through a number of strategies. It is important to note that, as a Government, we have been willing to fund locums to ensure patients have access to needed services.

With certainty provided to the Mersey, and new services coming, it is becoming easier to recruit permanent medical staff, and we are already seeing some improvements with more permanent specialists taking up appointments.

Likewise in Burnie, there have been appointments to paediatric positions, obstetrics and gynaecology as a result of the new birthing service, and in other areas.

The Government has had recent success in recruiting to long-term vacancies experiencing national shortages, including two FTE permanent endocrinologists at the LGH for the first time ever, as well as in Psychiatry, Palliative Care and Oncology.

The THS will continue to work on recruiting to other key specialist positions in the North, including an additional Neurologist (to ensure the specialty can function as a unit), and in the Emergency Department. Once achieved, these recruitments will all help to bring down locum costs.

Key Finding #4

The former model of care for North West birthing put mothers and babies at risk. It was not supported by doctors, failed to provide ICU and paediatric care cover for mothers and babies at Latrobe and suffered from a permanent contract with the private hospital that had bound the government in perpetuity.

The establishment of an integrated North-West maternity service was based on best the clinical advice from specialists, and is first and foremost about improving the safety of North-West mothers and babies. This required an additional \$3 million investment by the Hodgman Government to ensure the service was appropriately resourced.

The reason clinicians called for the new model was to deal with unacceptable risks to patient safety in the region and the reliance on locums.

The consolidation of birthing services has allowed strengthening of the Obstetrics and Gynaecology medical workforce with a complement of permanent consultants recruited. Previously, with the service split over the two (2) sites the North West were unable to recruit to the service, resulting in long term locum requirements. There have been more than 1600 births since the service commenced.

We have received exceptional support from health experts and clinicians for these changes, which are part of the universally endorsed White Paper.

The Government is undertaking a review of the new birthing services in the North-West, which demonstrates our commitment to constantly improving patient care.

I welcome comments from the ANMF that progress was being made in relation to a number of the issues they have raised and ANMF members have made a concerted effort to work with the THS to achieve a positive resolution. This includes a better staffing model, and provision of additional space for antenatal clinics.

The new antenatal clinic at the Mersey Community Hospital, funded by the Tasmanian Government at a cost of \$1.6 million, has been operational for some months now, and the Government has provided \$2.2 million to construct a new antenatal clinic at the NWRH in the 2018-19 Budget, in line with the commitment made during the 2018 State Election.

Key Finding #5

Building a new hospital in a working hospital was never going to be easy, and the Government has worked to address challenges throughout this process.

The decant plan and 54-bed temporary building was far preferable to the former Labor Government's unsafe and unsupported (by clinicians) decant plan of sending sick patients to community health facilities away from the city, including mental health patients.

There can be no doubt that last year Tasmania did see a severe flu season, but the Government commends the nurses, doctors, allied health and other hospital staff who did a fantastic job ensuring patients received the care they need.

The Government has now opened the new 22-bed ward at the Repatriation Hospital, which is providing much-needed support and improved patient flow at the RHH.

The Royal Hobart Hospital Redevelopment remains on track for practical completion in mid-2019, after which the Government has allocated \$28.1 million to undertake refurbishments as part of the process to open 250 new hospital beds.

The Government has provided funding for 25 new mental health beds as part of the 2018-19 Budget, once the construction of the facilities is completed, and within two years Tasmania will have access to fully funded inpatient child and adolescent mental health facilities in both the North and the South for the first time.

The Government is progressing significant planning work for the future of the RHH and southern health services, as part of the site masterplanning work, the Clinical Planning Taskforce, and the Mental Health Integration Taskforce.

The facts are that if Labor had not mismanaged the RHH Redevelopment, bed capacity would be available to help Tasmanians today.

Key Finding #6

We will continue to work hard to improve mental health care in Tasmania, in line with the long term direction outlined in the Rethink Mental Health Plan that enjoys the overwhelming support of clinicians, stakeholders and political parties.

Over the last four years the Hodgman Liberal Government has delivered more than \$25 million of additional funding for facilities and community-based mental health services, including six more beds at Tolosa and over \$11 million for individual packages of care to reduce pressure on acute services.

The Government is now focused on rolling out our six year, \$95 million plan to improve mental health care in Tasmania, to ensure that Tasmanians are able to access the care and support they need in the right place and at the right time.

Key initiatives under the plan include 25 new mental health beds, more community-based support, specialist inpatient child and adolescent mental health facilities for the very first time and suicide prevention support for rural and regional communities.

The Mental Health Integration Taskforce is well progressed on work to make recommendations for mental health services to provide more seamless care. The Taskforce features key mental health stakeholders such as Mental Health Services staff, the Mental Health Council of Tasmania and consumers.

Key Finding #7

Regrettably, the sub-committee failed to acknowledge that the Government is currently building these facilities, with Ward 4K especially well progressed.

There has never been dedicated child and adolescent inpatient mental health facilities in Tasmania, but the Government recognised the growing need and within the next two years the following facilities will be coming online – fully funded and strongly supported:

- The redevelopment of the Royal Hobart Hospital includes a 16-bed adolescent unit in K-Block, which is on track for completion in 2019.
- The upgrade of the Children's Ward 4K at the LGH will also include specialist facilities for child and adolescents with mental health issues.

The Government has also increased funding for the Child and Adolescent Mental Health Service (CAMHS), which enabled CAMHS to hire much-needed additional staff and provide more care.

Key Finding #8

The Government strongly supports services for new mothers and babies and will continue to do so.

There can be no doubt the Government has a strong commitment to providing better services for mothers and babies, having established the integrated North West maternity service at Burnie which offers many benefits to expectant mothers, including better access to specialised services such as paediatrics, an expansion of antenatal and postnatal care, greater levels of midwife led outreach and home visits after the birth.

