

## Noora Hijazi

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**From:** Carolina Simpson  
**Sent:** Thursday, 19 September 2019 7:56 PM  
**To:** Portfolio Committee 2  
**Cc:** Andrew Holland  
**Subject:** RE: Portfolio Committee No.2 - Health - Northern Beaches Hospital - Post-hearing responses - 26 August 2019  
**Attachments:** Australian Salaried Medical Officers Federation of NSW - Transcript - Northern Beaches Hospital - Portfolio Committee No 2 - Hearing 26TS.pdf; 181116\_Koff\_NBH-MO.pdf

Dear Noora,

Thanks for your email. I have attached a transcript with some minor corrections noted in the comments throughout.

In regards to the questions on notice:

ASMOF have 27 senior members and 20 junior members working at Northern Beaches Hospital. It is a little difficult to get firm numbers on the number of juniors due to the frequency of their rotations between hospitals, so that figure is likely to be an underestimate!

In regards to NBH policies- we are unable to access their clinical policies as they are not available publicly, and therefore we suggest that this request may be made directly to Healthscope. Dr Tony Sara has suggested that you may seek a comprehensive list with content, and it may be worthwhile asking an independent expert MP for an opinion e.g. Dr Joe McGirr.

Additionally, on page 53, The Hon Walt Secord asked for a copy of our letter, which I have attached to this e-mail.

Please let Andrew Holland, Executive Director (cc'd in) know if there is any further information that may be useful the deliberations of the Committee, as we will be happy to assist.

Warm regards,

**Carolina Simpson**  
**Policy and Strategic Communications Officer**  
**Australian Salaried Medical Officers' Federation (NSW)**



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In reply please quote:

Elizabeth Koff  
Secretary, NSW Health

By Email:

**WITHOUT PREJUDICE**

Dear Ms Koff,

**Northern Beaches Hospital: Medical Officers**

ASMOF has been contacted by Junior Medical Officers who are currently rotated to the new Northern Beaches Hospital, and who have expressed the most serious concerns regarding patient safety, JMO wellbeing, their employment conditions, the expectations of Northern Beaches Hospital management/ executive, significant medico legal concerns and many other operational matters.

These matters which have been described by JMOs employed at Northern Beaches Hospital give rise to grave apprehension that the terms of the Project Deed between the operators of Northern Beaches Hospital and NSW Health and the Government of NSW are not being complied with. Those provisions include:

- 59.5.c.i: JMO Positions must be directly associated with the treatment of Public Patients;
- 59.5.d.iii: Operator must provide JMOs with appropriate and adequate supervision at all times.
- 59.5.d.iv: Operator responsible for providing safe working environment for JMOs at all times.
- 59.5.d.v: Operator responsible for managing attendance of JMOs...including rostering and covering absences.

The JMOs who have contacted ASMOF have been very specific in the serious matters that they have raised, and which they have no confidence that the management of Northern Beaches Hospital considers it a priority to address .

Below is an incomplete list as an indication of the matters which have been raised with ASMOF by JMOs employed at Northern Beaches Hospital:

**Staffing:** JMOs advise that staffing is totally inadequate. Some examples:

- JMOs working unsafe hours, frequently doing up to 6 hours (usually unpaid) overtime a day. It has been reported that some JMOs have worked up to 110 hours a week, with some interns doing 80 hours a week;
- 1 intern has been responsible for up to 60 patients;
- There are no CMOs on night shift. CMOs are essentially non-existent. Those that are rostered on frequently do just one shift and leave &/or provide an inadequate handover to JMOs
- That there is routinely no Medical Registrar in the Emergency Department.

- Northern Beaches Hospital Management have indicated that there are not enough patients to employ additional staff, and that there is no funding for additional staff.
- Inadequate nursing staff: not enough nursing staff, and there is a high proportion of locum nurses who are not appropriately orientated.
- Relief component not built into rosters.
- No night shift cover for surgical.
- All of these factors result in extraordinary JMO fatigue.

#### **JMOs responsibility for Private Patients:**

- JMOs have been instructed to look after private patients in the private hospital (as opposed to privately insured patients in the “public” hospital) from on or about Thursday 15<sup>th</sup> November 2018.
- JMOs have been advised by the managers of Northern Beaches Hospital that it was uneconomic for them to employ CMOs or other staff to treat and provide medical cover for these patients.
- There is no supervision of JMOs treating private patients in the private hospital leaving them medico-legally and professionally exposed.
- JMOs are required to ward round for private patients in the private hospital on weekends in addition to their Public ward responsibilities.

#### **Systemic Problems:**

- Equipment and medication shortages. Insufficient hand hygiene pumps.
- No safety cannulae.
- Resuscitation trolleys not stocked.
- The Health IT system to provide a view into the NSLHD Cerner EMR does not work. EMR reports are difficult to view, and in many cases appear as blank pages.
- Delays with blood tests with resultant complaints by consultants to JMOs.
- No fax or internet to follow up requests;
- JMOs are called on their personal mobile rather than the work mobile/pager which has been variously explained as a technology or cost issue.
- Patients admitted under Emergency Physicians are not placed under a formal team. JMOs have to manage these patients with inadequate information.
- No access to on-call rooms- security will not permit access.
- No surgical handover due to Registrar still working.
- Poor orientation: ASMOF is instructed that very few employees are familiar with equipment and processes. An example was difficulty and delay in obtaining blood for a patient suffering from post-partum haemorrhage due to staff not being familiar with the process to obtain the necessary probably life-saving blood product.
- The lack of a complete on-site blood bank.
- A complete lack of Policies &/or Guidelines e.g.: no separate forms for insulin administration exist; no emergency management plan for hypoglycaemia to allow nurses to administer urgent medication; no forms for heparin infusion; no stroke calls; no tiered escalation of deteriorating patients as required by MoH/CeC Policy Directive and guidelines regarding deteriorating patients.

**Medico-legal issues:**

- Uncertainty relating to the indemnity cover provided by TMF &/or Northern Beaches Hospital management for JMOs treating purely private patients;
- Inadequate supervision of JMOs treating purely private patients places an unreasonable medico-legal and professional risk burden on them.

**Training:**

- Lack of education: JMOs are too busy to receive formal education.
- Difficulty taking study leave. Relief of staff would not be provided if study leave taken.
- Inadequate and unsafe supervision.

JMOs have advised ASMOF that they understood that a certain degree of flexibility may have been necessary to accommodate “teething problems” at the new Northern Beaches Hospital at the initial stage. However the scale of the problems as described above coupled with the apparent indifference of the management of Northern Beaches Hospital to resolving those problems, and the unreasonable burden that places on JMOs is untenable in even the short term.

ASMOF requires the Ministry to immediately address these issues with the Management of Northern Beaches Hospital to ensure that they are resolved and the terms of the Project Deed to be complied with as a matter of the utmost urgency.


In the interim, until all these matters regarding fully private patients are completely resolved, ASMOF’s unequivocal view is that it will fully support any of its members that decline to be involved with the care and management of fully private patients, the normal provisions relating to Good Samaritan acts for patients in extremis aside.

ASMOF has grave concerns about the adequacy, the safety, the employment and supervision of the PGY terms as currently being experienced and so have provided a copy of this letter to HETI.

Unless the Ministry is able to provide an assurance that all of the matters identified in this letter are addressed by mid-day Monday 19<sup>th</sup> November 2018, ASMOF will notify the Industrial Registrar of the existence of a dispute relating to the failure of NSW Health or its deputised organisations to adequately ensure the conditions of employment to which JMOs are entitled and the level of supervision necessary to ensure patient safety, safe practice by the JMOs, proper access to training and supervision required for JMOs and their general wellbeing which are required under the Project Deed.

Please contact ASMOF Executive Director Andrew Holland if you wish to discuss any aspect of these matters.

Yours faithfully,

 Dr Tom Karplus  
Secretary

16<sup>th</sup> November 2018

C.c: Debra Wilcox: NSLHD:  
Deb Latta: Healthscope:  
Annette Solman: HETI