

**INQUIRY INTO THE OPERATION AND MANAGEMENT OF THE
NORTHERN BEACHES HOSPITAL****Macquarie Room, Parliament House, Sydney****Monday 26 August 2019**

The Committee has asked NSW Health a number of questions that directly relate to the day-to-day operations of Northern Beaches Hospital. NSW Health is not responsible for these day-to-day operations. In the interest of timeliness and to assist the Committee, NSW Health has sought information from Northern Beaches Hospital. Where this is the case, the answer notes Northern Beaches Hospital as the source of advice. If the Committee requires further clarification on these questions, they should be directed to Northern Beaches Hospital.

QUESTION 1:

Ms CATE FAEHRMANN: We have heard that there is no longer public neurology and cardiology clinics at Northern Beaches Hospital. Is that correct?

Ms WILLCOX: We do purchase out-patients services as part of the Project Deed with the Northern Beaches Hospital. There are similar specialty groups, in fact more at the new Northern Beaches Hospital than previously provided at Manly and Mona Vale.

Ms CATE FAEHRMANN: So does that include public neurology and cardiology clinics?

Ms WILLCOX: There are a raft of out-patient clinics. If the Committee can just bear with me briefly, it may be worthwhile, to understand the nature of those.

The CHAIR: I think that was a very specific question.

Ms CATE FAEHRMANN: Maybe even to take it on notice.

The CHAIR: If you are not sure just take it on notice. It was a very specific question.

ANSWER:

Northern Beaches Hospital advises NSW Health that general practitioners may refer patients to specialist cardiologists (Northern Cardiology) located in rooms at Northern Beaches Hospital and patients may be bulk-billed at a general practitioner's request, at the discretion of the specialist cardiologist.

Northern Beaches Hospital advises NSW Health that general practitioners may refer patients to specialist neurologists at Northern Beaches Hospital and patients may be bulk-billed at a general practitioner's request. Outpatient neurology clinics are available after presentation to the Emergency Department or following inpatient admission.

QUESTION 2:

Ms CATE FAEHRMANN: Friends of Northern Beaches Maternity Services has made a submission to this enquiry. It says the targets and thresholds for maternity services have been redacted in the public copy of the Project Deed. Why is that?

Ms WILLCOX: I would have to take that on notice, I am sorry. I am not aware.

Ms CATE FAEHRMANN: Would the Committee be able to get the targets and thresholds if it has been redacted from the public copy?

Dr LYONS: As Ms Willcox said, we will take that on notice.

ANSWER:

Targets and thresholds have been redacted in line with commercial-in-confidence provisions of the Project Deed.

Can targets and thresholds be released?

In consultation with Healthscope, NSW Health releases this information to the Committee.

See Tab A

QUESTION 3:

The Hon. NATASHA MACLAREN-JONES: And more services. Earlier reference was made to the Friends of Northern Beaches Maternity which has stated in their submission that consumers were not directly involved, or should have been more involved, in planning and design of the hospital. Can you outline the community engagement and stakeholder engagement in establishing and designing this hospital?

Ms WILLCOX: I was not around for the building of the new Northern Beaches Hospital, unfortunately, so I am unable to directly answer that.

The Hon. NATASHA MACLAREN-JONES: I am happy for you to take that on notice.

Ms WILLCOX: Yes. If that is okay with you, I would like to.

ANSWER:

NSW Health undertook approximately 108 forums with numerous Northern Beaches community organisations as part of its community engagement. This included project briefings with local councils and community groups and specific engagement with community organisations such as Probus clubs, council community groups and Rotary and Lions Clubs.

NSW Health also:

- conducted numerous staff briefings between May 2018 and July 2018 and
- carried out comprehensive mail outs to community and stakeholder organisations in the months leading up to the NBH opening reiterating significant dates and the transformation of the Northern Beaches Health Service.

The Friends of Northern Beaches Maternity first made contact with the Northern Sydney Local Health District (NSLHD) in April 2016 to discuss midwifery group practice at the Northern Beaches Hospital. On 7 June 2017, the then acting chief executive of NSLHD, Deb Willcox, met with a representative of Friends of Northern Beaches Community to discuss the midwifery group practice and public midwifery services more generally at NBH. NSLHD also facilitated a meeting between Friends of Northern Beaches Maternity and Deborah Latta, the Project Director for the NBH to discuss these issues.

QUESTION 4:

The CHAIR: I have a final question. You said in your opening statement, "To the reasonable satisfaction of the independent verifier". Can you please provide on notice the definition of "reasonable satisfaction"?

Ms WILCOX: Yes, I can provide that.

ANSWER:

In general, the term "reasonable satisfaction" should be given its plain and ordinary meaning. In our view, it means that the Independent Verifier must be reasonably satisfied in an objective sense that the Operational Readiness Criteria have been satisfied.

QUESTION 1.

Can you explain why the targets and thresholds for maternity services have been redacted in the public copy of the project deed?

ANSWER:

Please see our response to Question 2 on Notice.

QUESTION 2.

What are the targets and thresholds for maternity services?

ANSWER:

Please see our response to Question 2 on Notice.

QUESTION 3.

Can the NSW Ministry of Health guarantee that it will not have to buy the Northern Beaches Hospital back from the owner/operator?

ANSWER:

The Ministry of Health is the health system manager with responsibility for, amongst other things, the efficient and economic operation of the public health system. In this role, the Ministry works with Northern Sydney Local Health District to facilitate the proper administration of the Northern Beaches Hospital in line with the provisions of the Project Deed.

QUESTION 4.

What would be the financial ramifications for the state if the contract to operate the Northern Beaches Hospital was terminated by the NSW Government?

ANSWER:

The Project Deed includes provisions dealing with early termination. The financial implications of early termination will depend on the particular circumstances.

QUESTION 5.

In May this year, a cancer patient had the wrong side of his colon removed due to an error in his pathology report supplied by a privately contracted laboratory. Is the Northern Beaches Hospital still using this laboratory?

ANSWER:

Northern Beaches Hospital continues to use the privately contracted laboratory for pathology services.

- a. Has compensation been offered to this patient?

ANSWER:

The Northern Beaches Hospital advises NSW Health that it has followed the appropriate incident management procedures for all identified serious clinical incidents, including open disclosure with patient and family and formal root cause analysis investigations. NSW Health is unable to provide comment with respect to individual patient incidents.

QUESTION 6.

The investigation by the Health Education and Training Institute (HETI) showed there were inadequate staffing levels at the Northern Beaches Hospital. How many additional staff have been employed at the hospital since this report was made public?

ANSWER:

The investigation referred to in this question was conducted by the Prevocational Accreditation Committee (the Committee). The Health Education and Training Institute (HETI) convenes the Committee on behalf of the Australian Medical Council. The Committee conducts accreditation of NSW hospitals for the training of junior doctors in their first two years after graduation. The NSW Government does not manage the Committee processes.

The second Committee report found that there were significant improvements in staff levels both immediately and for the 2019 academic year.

Since the opening, in relation to junior medical staff, Northern Beaches Hospital advises NSW Health that it has employed 22 career medical officers and seven unaccredited registrars (not all full time), in addition to the 140 FTE of junior medical officers on rotation from the Northern Sydney Local Health District.

QUESTION 7.

The investigation by the Health Education and Training Institute (HETI) showed there were delays in delivering abnormal test results to patients. What has been done to address this?

ANSWER:

The second site visit report in January 2019 found that the notification of abnormal diagnostic results has improved with the provider having a greater on site presence.

The Northern Beaches Hospital advises NSW Health that this has largely been rectified with a combination of enhancements to the electronic medical record and clarification of the notification responsibilities for the diagnostic providers.

QUESTION 8.

The investigation by the Health Education and Training Institute (HETI) showed that the Northern Beaches Hospital had unreliable electronic records and paging systems. What steps have been taken to overcome these identified problems?

ANSWER:

The Northern Beaches Hospital advises NSW Health that the electronic medical record system is undergoing continuous improvement, with the development team on site being guided by a reference group of clinicians.

The second site visit report in January 2019 found that the paging system has been addressed and is working well. The Northern Beaches Hospital advises NSW Health that the paging system has been augmented with the use of iPhones for junior medical staff, but that as the paging system is working well, these will be progressively withdrawn on a case-by-case basis.

QUESTION 9.

The NSW Auditor-General said in her annual report on the NSW Health cluster dated 12th December 2018:

“Put simply, the Auditor-General wants the power to lift the cloak of secrecy surrounding the Northern Beaches Hospital. We are talking about \$2.64 billion in taxpayers' funds and the Auditor-General is unable to look at any of that. The privatised Northern Beaches Hospital must be subject to the same scrutiny and held to the same standards as all other New South Wales hospitals.”

Does the NSW Ministry of Health agree with this statement of the Auditor-General?

ANSWER:

Question withdrawn as per email from Committee secretariat on 11 September 2019.

QUESTION 10.

GPs on the Northern Beaches were previously able to refer patients to outpatient clinics for cardiology and neurology which were available at Manly and Mona Vale Hospitals. Why are these services no longer available?

ANSWER:

Please see our response to Question 1 on Notice

QUESTION 11.

Are you aware that the company Clinical Labs has been sending invoices to patients rather than Private Health Insurers due to poor communications from the Northern Beaches Hospital?

ANSWER:

Yes, Northern Beaches Hospital advises NSW Health that a number of invoicing errors have been identified. These errors occurred as the Patient Administration System and the Pathology System interface was not updating as frequently as needed. Northern Beaches Hospital advises

NSW Health that the systems interface issue has been resolved and this error should not occur again. If any patients are concerned about incorrect invoices, they can contact the hospital directly on (02) 9105 5000.

QUESTION 12.

GPs on the Northern Beaches have complained about poor discharge summaries from the Northern Beaches Hospital. Why is there a problem with getting discharge summaries from the Northern Beaches Hospital issued to GPs as is common practice from other hospitals?

ANSWER:

The Northern Beaches Hospital advises NSW Health that its patient administration system was initially configured to require the patient to “opt in” for their general practitioner to receive the discharge summary. This setting has been reconfigured so that the discharge summary is sent to the general practitioner by default. A patient may elect to “opt out”, if they would prefer the hospital not to send the discharge summary.

This change will increase the number of discharge summaries being sent. NSW Health and Healthscope are monitoring the discharge summary process and will make further improvements to the process as needed.

QUESTION 13.

In relation to the discharge summaries, GPs have been advised that the ‘opt in’ for discharge summaries to be sent to GPs would be altered to an ‘opt out’ arrangement. Has this change been implemented?

ANSWER:

Yes – see the answer immediately above.

QUESTION 14.

Dee Why General Practice was incorrectly sent hundreds of discharge summaries from the Northern Beaches Hospital. Were the effected patients notified of the data breach?

- a. If so, when were they notified after the data breach?
- b. If not, why not?

ANSWER:

The Northern Beaches Hospital advises NSW Health that this issue was related to human error. After identifying the issues related to discharge summaries noted above (“opt in / opt out”), Northern Beaches Hospital manually extracted discharge summaries to provide these to individual medical practices. Northern Beaches Hospital further advises NSW Health that, as soon as it was made aware of the release of incorrect discharge summaries, it collected the discharge summaries from the practice.

Northern Beaches Hospital advises NSW Health that as the incorrect patient data was not publicly available, and the error was able to be rectified, the incident was not assessed to be a notifiable breach of data.

QUESTION 15.

On 5th November 2018 a new mother came close to dying from a preventable error in ICU when her airways were compromised and her oxygen levels dropped dangerously low after an emergency caesarean section operation. Has an apology been given to this patient?

- a. Has this patient taken any steps to obtain compensation?

ANSWER:

The Northern Beaches Hospital advises NSW Health that it has followed the appropriate incident management procedures for all identified serious clinical incidents, including open disclosure with patient and family and formal root cause analysis investigations. NSW Health is unable to provide comment with respect to individual patient incidents.

KPI Category	Area	KPI No.	ACHS Indicator Set or NSLHD Agreement Area	KPI/Indicator Name	Descriptor	Target	Performance Threshold	Failure Period	Monitoring Method
Non-Service Measures	Service Specific	17	Anaesthesia and Perioperative Care	Obstetric Patients with risks and benefits of analgesia documented. (CI No. 6.2)	Number of obstetric Patients for whom there is a documentation that the risks and benefits of spinal/epidural analgesia have been communicated during the 6 month reporting period.	75th Percentile of ACHS peer Hospitals	60th Percentile of ACHS peer Hospitals	6 months	6 month ACHS Clinical Indicator Report
Non-Service Measures	Service Specific	29	Maternity	Selected primipara - surgical repair of perineum for fourth degree tear	Number of selected primipara undergoing surgical repair of the perineum for fourth degree tear	25th Percentile of ACHS peer Hospitals	40th Percentile of ACHS peer Hospitals	6 months	6 month ACHS Clinical Indicator Report
Non-Service Measures	Service Specific	30	Maternity	Vaginal birth - blood transfusion	Number of women who give birth vaginally who receive a blood transfusion during the same admission, during the 6 month reporting period.	25th Percentile of ACHS peer Hospitals	40th Percentile of ACHS peer Hospitals	6 months	6 month ACHS Clinical Indicator Report
Non-Service Measures	Service Specific	31	Maternity	Babies - birth weight < 2750 g at 40 weeks gestation or beyond	Number of babies born with birth weight less than 2750g at 40 weeks gestation or greater	25th Percentile of ACHS peer Hospitals	40th Percentile of ACHS peer Hospitals	6 months	6 month ACHS Clinical Indicator Report
Non-Service Measures	Service Specific	32	Maternity	Term neonates Apgar score of <7 at 5 minutes post-delivery (CI No. 9.1)	Number of live born term neonates with an Apgar score of less than 7 at 5 five minutes post delivery, during the 6 month reporting period.	25th Percentile of ACHS peer Hospitals	40th Percentile of ACHS peer Hospitals	6 months	6 month ACHS Clinical Indicator Report
Non-Service Measures	Service Specific	33	Maternity	General anaesthetic for caesarean section	Number of women who had a general anaesthetic for a caesarean section	25th Percentile of ACHS peer Hospitals	40th Percentile of ACHS peer Hospitals	6 months	6 month ACHS Clinical Indicator Report
Non-Service Measures	Service Specific	34	Maternity	Appropriate prophylactic antibiotic at time of caesarean section	Number of women who receive an appropriate prophylactic antibiotic at the time of caesarean section	75th Percentile of ACHS peer Hospitals	60th Percentile of ACHS peer Hospitals	6 months	6 month ACHS Clinical Indicator Report
Service Measure	Service Specific	26	Maternity	Selected primipara - spontaneous vaginal birth (CI No. 1.1)	Number of selected primipara who have a spontaneous vaginal birth	N/A	Service Measure	N/A	6 month ACHS Clinical Indicator Report
Service Measure	Service Specific	27	Maternity	Percentage of vaginal births	Percentage of vaginal births, from the total number of births	N/A	Service Measure	N/A	6 monthly report
Service Measure	Service Specific	28	Maternity	Vaginal delivery following previous birth of caesarean section (CI No. 2.1)	Number of women delivering vaginally who have had only one previous birth >=20.0 weeks gestation and that birth was by caesarean section	N/A	Service Measure	N/A	6 month ACHS Clinical Indicator Report
Service Measure	Service Specific	29	Gynaecology	Ectopic pregnancy managed laparoscopically (CI No. 3.1)	Number of Patients who have an ectopic pregnancy managed laparoscopically	N/A	Service Measure	N/A	6 month ACHS Clinical Indicator Report
Service Measure	Service Specific	30	Population Health	First antenatal visit provided <14 weeks of gestation	Patient receives first antenatal visit <14 weeks of gestation for all women identified baby as non-aboriginal	N/A	Service Measure	N/A	Monthly Report