SUPPLEMENTARY QUESTIONS

Associate Professor Miriam Levy – Liverpool Hospital Medical Staff Council

Thank you for the opportunity to provide answers to supplementary questions which I provide below and regard <u>Palliative Care</u>

1. Are the matters of the provision of palliative care and palliative care services in South- West Sydney formally dealt with at meetings of the Liverpool Hospital Medical Staff Council?

No they are not. Medical Staff Council MSC meets to discuss concerns which are then taken to the executive. The discussions revolve around barriers in the care for patients aiming to provide the executive of the hospital and the Local Health District (LHD) with advice relating to their impact upon provision of medical services. Over the last few years grave overall concerns about funding and the multitude of consequences felt across all services have been discussed at length. These are listed by example in our submission which I refer you to. The MSC has no decision making power beyond its ability to raise concerns, which we have done, within the facility, then the district, then the ministry and finally the minister. Palliative care was not specifically discussed.

2. Are you aware of any scoping or planning work that has been undertaken regarding the future needs of palliative care and palliative care services in South-West Sydney?

I have been advised that the district has done work in this area with the support of the clinicians.

- a. There has been significant planning work done and I don't want to duplicate here. I would point out that of the multitude of needs at Liverpool, palliative care is not the most urgent, as we do have an inpatient unit which is staffed. It is mostly completely full with some bed block and needs to expand, but compared to Campbelltown hospital, the palliative care service at Liverpool is reasonable.
- 3. How do you believe work can be best undertaken regarding the planning of the future needs of palliative care and palliative care services in South-West Sydney?
 - a. Its not the planning that is the problem, it is funding the plans.
- 4. What do you believe will be the best way of funding the future needs of palliative care and palliative care services in South-West Sydney?
 - a. Palliative care is critically important but what we don't want is that one area is funded at the expense of others utilizing general growth funds. To develop Campbelltown Hospital into one with all necessary specialist services of a tertiary hospital, significant special budgetary boost will be required. This cannot come out of the general growth budget of SWSLHD or every other service, that is relentlessly growing, will be put under further strain. This is why the major message of my submission and words at the hearing is to not trust the funding model, as it does not provide equity and this is screamingly obvious from the analysis of WESTIR and from the data about all the things our patients have to wait longer for or cannot get access to.