

Health outcomes and access to health and hospital services in rural, regional and remote New South Wales

Hearing - 17/06/2021

Questions on Notice

QUESTION 1 – Page 25-26

The Hon. WALT SECORD: Does it happen very often when Lismore goes into Code Black, when you reach capacity and there are no beds left?

Mr JONES: There certainly are occasions where we identify patients, an inability to address all the pressures in the emergency department, but I—

The Hon. WALT SECORD: Has it happened this year?

Mr JONES: I have not had a situation where we have not been able to ease that pressure—maybe not completely relinquish it.

The Hon. WALT SECORD: But that was not my question. My question was does it happen very often at Lismore hospital when you reach capacity, meaning that all the beds are full?

Mr JONES: No, because most of the time you are pre-planning, you are seeing that the patients are filling up in ED, you are seeing that your elective surgical activity is coming through, so you are already preparing for what comes through. We know on average how many patients come through our emergency department on any day. We know how many elective surgical patients are booked. So if we see there is a clash there, there are times where we need to cancel elective surgery because we need those beds. There are times when we need to look at facilitating discharges, so it varies.

The Hon. WALT SECORD: How many times since the beginning of this year—you would know as CEO—has Lismore hospital gone into Code Black, where you have reached capacity in beds?

Mr JONES: No, I don't know that number. I can tell you it is a small number but I am not sure of the exact number.

The Hon. WALT SECORD: Can you take it on notice for this year and for 2020 the number of times you have reached Code Black in relation to capacity of beds?

Mr JONES: We can certainly take that on notice and provide that.

ANSWER

Under the *NSW Health Protecting People and Property Manual*, a 'Code Black' refers to the emergency response where a staff member is facing a personal threat or physical attack (with or without a weapon involved) and is summoning assistance.

This is different from what the Hon. Walt Secord is asking regarding bed capacity. Under the NSW Health Demand Escalation Framework, all NSW public hospitals are required to have a Short Term Escalation Plan in place to address the four levels of demand escalation from business as usual through to extreme compromise (Level 3).

Lismore Base Hospitals Triggers for Level 3 include three of the following:

- \geq 10 unallocated admitted patient in the emergency department (ED)
- Predicted Admissions/discharges mismatch of >15 patients
- \geq 35 patients with a length of stay > nine days (ED accessible Wards)
- >five ED accessible wards impacted
- access and exit block to Coronary Care Unit and Intensive Care Unit beds and unable to admit patients with ≥ five patients requiring admission
- > eight nursing vacancies.



The Step levels can change regularly throughout any 24- hour period depending on capacity and demand. Each Step level in the escalation plan triggers an action plan to address any capacity issues.

QUESTION 2 – Page 35-36

The Hon. TREVOR KHAN: Yes, thank you. I will move on to another area because I am mindful of time. How many ear, nose and throat specialists are in the LHD?

Mr JONES: Off the top of my head, I do apologise, I think we have-

The Hon. TREVOR KHAN: You can take it on notice. This is not a guessing competition and it is certainly not a memory test.

Mr JONES: We have a roster at Tweed. They had a difficulty for a number of years in recruiting a complete roster for Lismore Base Hospital, so we are still reliant on locums coming forward. But I can certainly get that detail back to you.

ANSWER

Four Ear Nose and Throat specialists are employed at Tweed hospital.

One Ear Nose and Throat specialist is employed at Lismore Base Hospital.

QUESTION 3 – Page 39-40

Ms CATE FAEHRMANN: I wanted to touch on the Aboriginal Health Unit, if I can, Ms Duffy. I have the Aboriginal Health Unit page unit in front of me. How many Aboriginal workers within the LHD are there?

Ms DUFFY: I do not think I can answer that off the top of my head. We would have to take that on notice, unless Mr Jones has that figure to hand.

The CHAIR: Sure.

Mr JONES: It fluctuates. At this point in time we have a very low number. It is about 18. But that does fluctuate. We are happy to get the actual figure and bring it back to you and take it on notice.

Ms CATE FAEHRMANN: That would be great—the positions, if you like, and then the filled positions. I understand there are probably potentially some vacancies, like there seem to be in a lot of different areas.

ANSWER

Northern NSW Local Health District has a headcount of 249 Aboriginal staff.

Northern NSW Local Health District Aboriginal Health Unit Staffing as at 23 June 2021:

FTE	Number of staff	Vacant FTE
32.1	31	3.8

Northern NSW LHD Aboriginal Health Liaison Officers as at 23 June 2021:

FTE	Number of staff	Vacant FTE
4	4	0