

Submission
No 2

**INQUIRY INTO OPERATION AND MANAGEMENT OF
THE NORTHERN BEACHES HOSPITAL**

Name: Name suppressed

Date Received: 16 June 2019

Partially
Confidential

I have attached a constructive complaint I placed to Northern Beaches Hospital after my mother's 3rd submission to hospital between February and May 2019. I have also attached the response I received from the hospital which in my eyes basically dismisses most of my complaint. I note that some of the simple recommendations I made were enacted, but the critical issues that I felt were appalling and bordering on totally ineffective and dangerous care were simply not addressed. I find this most disappointing and extremely upsetting when I know that I will be returning to Northern Beaches Hospital given my mother's diagnosis.

A response saying that they have reinforced policy with the team on a number of issues is I suppose all they can say, however it is evident to me that there is clearly systematic failures of basic provision of care in the hospital, to the point that I would be extremely concerned in leaving my mother unsupervised in hospital for any extended period of time (in my case 6 hrs max) when we have to return to the hospital.

The key issues that the hospital did not address in their response and/or misrepresented the situation were:

a) they claim that there were no single rooms available - there were. I saw them. Most of the patients in those rooms were people recovering from surgery. My mother was borderline neutropenic (i.e. extremely close to this status) and the person they insisted my mother shared a room with had a cold and this exposed my mother to unnecessary infection when she was already fighting a significant infection that meant she was seen by the infectious diseases specialist in the hospital. I fail to believe that there was not another patient that could have been placed in a shared room to ensure that my mother was put into a single room to maintain her health status.

b) the positioning that the inexperienced Dr using techniques they have within their skillset was the justification for the bullying behaviour to try and have my mother have bloods taken from her only available vein in her arm, as opposed to the port that had been accessed. Quite simply they should have sufficiently trained staff to do basic procedures such as using a port when there is one available and already accessed. If the Dr didn't have the skills then there should have been another trained person on hand. These devices are extremely common and getting timely access to skilled personnel in NBH is simply appalling. It shouldn't take 6 months to upskill the appropriate staff.

c) I find it appalling that it was only when I followed up over a month after making a complaint that suddenly I received a response.

d) the hospital claims that they relevantly reviewed my mother on Saturday 4th May when I arrived to find her significantly worse. I note that this did not include looking at the location of the infection. They only took Blood pressure, Oxygen and temperature. No one had actually looked at my mother's legs - this is just simply so basic. My discussions to get a Dr to see my mother were not as they positioned in their response - they actively tried to bully me into not having a Dr review her condition. This is unacceptable. I will acknowledge when they realised I was not going to back down, they did eventually arrange for a Dr to see my mother. The fact that my Plan B in my mind was to deliver my mother on her hospital bed to the emergency department simply because I knew there would be a Dr there, crossed my mind, means that I was so desperate and felt I wasn't been listened to.

e) Finally the issues we had with my mother receiving the appropriate medications at the right time &/or the pharmacy being able to appropriately source (where they did not have the medications at hand) caused unnecessary distress for both my mother and myself.

Finally, I am thankful that my mother has people in her family that will actively advocate for appropriate care and whilst we were clearly unable to get satisfactory outcomes, we did not give up until we ultimately received appropriate care for my mother. I was so distraught in this process (and I

am not normally an overly emotional person and deal with stress well) that my brother felt he needed to travel to Sydney from Bellingen to support me given the experiences we were having. I feel for any patient, in particular elderly patients who are on their own and may be disoriented by their condition.

Put simply I feel that the hospital unnecessarily exposed my mother to further infection, failed to meet basic care needs (eg. reviewing her basic condition appropriately and/or delivering medication on time) and could have caused serious implications for my mother. I felt dismissed, brushed aside and this unfortunately has continued beyond Mum's discharge when I have constructively tried to deliver my complaint. Honestly the care we received was bordering on incompetent at so many stages, that I will consider ensuring that Mum goes to Royal North Shore instead of Northern Beaches, even though this will mean that she is not going to be seen by her own oncologist. Clearly NBH needs help. I am no expert in Medical issues, but my extensive experiences in Executive roles for ASX 100 companies in transformation and process improvement indicated to me that there are numerous significant areas for improvement that need to be made. Until action is taken, patients are at significant risk and the government has a responsibility and accountability to address these concerns quickly. Investment will need to be made quickly and implementation timeframes for improvements can not wait 6-12 months, as this exposes the citizens of Northern Beaches Hospital to potentially life threatening situations.

I am not looking forward to our next experience in the hospital. I do hope that I don't have to fight to basic care like I did last time I was there.

My mother deserves better.