INQUIRY INTO OPERATION AND MANAGEMENT OF THE NORTHERN BEACHES HOSPITAL

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I have lived and worked in the Northern Beaches for more than 45 years, and Mona Vale Hospital has served myself, my family of three generations and our community well.

Access is my major issue with the new Northern Beaches Hospital at Frenchs Forest.

Mona Vale Hospital was located at Mona Vale to serve the growing population in the 1960s on land designated for a public hospital. This certainly provided a good service as a Level 3 hospital with emergency, intensive care, maternity, paediatric and a range of surgeries, to a geographic area up to 20 minutes travelling time by road for more than 50 years. Manly and RNSH are both at least 60 minutes travelling time from the northern peninsula by car and not directly accessible by public transport. Mona Vale Hospital has public bus access from all areas north, south and west. Parking is available and with no parking fee. Our family has had many emergency visits to outpatients as well as inpatient stays that all had good outcomes at MVH. On at least two occasions life saving emergency action was required to save lives of my family members. On several other occasions the professionalism of the staff with the adequate availability of resources reassured us that what had been an emergency could be, and was, resolved at Mona Vale Hospital as is the mission of a hospital.

Ambulance services are problematic on the Northern Beaches. As a local school teacher I had several involvements with calling an ambulance for a student. On one occasion I called 000 for a student with an asthma attack on Sports afternoon in Dunbar Park Avalon. I was the only responsible adult and we waited over 40 minutes even though we were 50 metres from Avalon Ambulance Station. I was told the ambulance was coming from Belrose. The student was taken to MVH which was reassuring after the lengthy wait. I had even resorted to sending a student to knock on the ambulance door but it was unmanned on this Wednesday afternoon. The feedback about ambulances is that they are being overextended with extra travelling time to take emergency patients to NBH at Frenchs Forest rather than Mona Vale Hospital. Another incident I know of occurred in March this year when an elderly person fell in Avalon shopping centre and my cousin, a passerby, called an ambulance. There was a long wait and finally when the ambulance arrived the ambos said they"d been directed to Palm Beach at least 10 minutes further north as they were unfamiliar with the area. There is lack of local knowledge when ambulances operate throughout Sydney.

Ambos do a wonderful job and they are also, like members of the public, subject to physical barriers of floods, fires and accidents blocking Wakehurst Parkway the direct link from the coastal suburbs to the inland NBH. As I understand from media reports all serious emergencies requiring helicopter transfer or high level trauma eg. TBIs are bypassing NBH for RNSH, as happened when MVH functioned as a Level-3 hospital.

The issue of ambulance access is that the cost of the ambulance is greatly increased because of longer journeys to hospital for us on the northern beaches. \$500 for the journey from Avalon to Frenchs Forest. For the individual this is an extra health cost. If paid by a private health fund or the government it still requires a greater outlay than when a patient was taken to a closer hospital eg MVH. Is there a cost breakdown on this since the closure of MVH?

The argument presented by Robert Stokes MLA that MVH would not close has failed. The buildings at MVH have been in various stages of neglect over the last 20 years from my observations attending physio and Healthy Lifestyle classes in the pool. There have been some upgrades also, yet it seems demolition is to take place. Why? All our built structures require maintenance and if this does not occur we can see the outcome. The present Liberal/National government had 8 years to rectify building safety issues yet has allowed the public asset to

deteriorate, This left staff working in less than satisfactory conditions as well as making the patient experience less satisfactory, than the brand new hospital should provide. Money well spent can produce better outcomes. The access issues I've raised remain with the loss of a Level-3 hospital at Mona Vale.

NBH has had record numbers attending emergency. Can we see the breakdown of where people are coming from and if there is a larger drawing circle than when MVH and Manly Hospital had emergency departments? We are very aware of the population growth in all of NSHS and that Hornsby and Ryde Hospitals, both older than MVH, are being upgraded. Why did MVH not have a similar upgrade to keep it functioning at the required level for the increasing population, notably an aging population and a continuing need for maternity and paediatrics?

I understand that the government saw a solution to the need to spend on our hospital system to keep it functioning by signing a public/private agreement with a non-government entity, Healthscope, to take up some of this cost for public benefit. Some issues with this partnership have already happened when the opening of the NBH showed a lack of understanding of how a busy emergency department should work and was not scoped with staff and working equipment and supplies in the wards. Staff resignations indicated all was not well. Staff are in the invidious position of working for an employer whose bottom line is profit. The car parking fee, minimum \$6:70 per hour to \$19:20 for 12 hours is another cost to patients and visitors that did not exist at MVH. Coming from Avalon car is the option as it would involve three buses from my home address and travelling via Dee Why to NBH. Healthscope's lack of experience in running a busy stand alone emergency department was evident from the outset. Much has been said of lack of supplies and equipment and staff not trained adequately.

Healthscope has now changed ownership to entitiies overseas, some of whom are based in the Bahamas. This could present risk in the future if financial or probity issues need to be addressed. The failure to have the road system completed around the hospital adds to the woes when trying to visit

All of this does not justify why MVH Level-3 was closed.

As a constituent in Pittwater I have seen a diminishing of health services. We have a shortage of GPs in our area at a time when our local population is aging and the decisions about when and what health services to access has become more problematic. We are part of the Sydney metropolis and not in rural or regional NSW where distance and density make health provision more complex. As a part of the city that has residents who expect similar services to other Sydneysiders why did we have a well located hospital lose its essential functions, and why is it expected that the local population should accept NBH as an improvement in health services?

The access to NBH and other issues I have addressed present my concerns for the closure of MVH Level-3 and its impact now and in the future for my community.