

Submission  
No 623

**INQUIRY INTO HEALTH OUTCOMES AND ACCESS TO  
HEALTH AND HOSPITAL SERVICES IN RURAL,  
REGIONAL AND REMOTE NEW SOUTH WALES**

**Name:** Ms Menaka Wickramasinghe

**Date Received:** 14 January 2021

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Partially  
Confidential

My complaint relates to Lourdes Rehabilitation Hospital, Dubbo. My mother, aged 88, was admitted to Lourdes on . She had suffered a cardiac episode in late 2018 from which she recovered well (medical records such as echocardiograms bear this out) but having been bedridden for sometime during recovery my mother had lost mobility. Having been deemed medically fit for rehabilitation by her cardiologist, she was admitted to Lourdes for physiotherapy.

Although walking unassisted with a stroller as at date of admission, over subsequent weeks, my mother became weaker, less able to walk and began complaining of breathlessness and requesting oxygen. I raised these complaints with her doctor, Dr , who dismissed my concerns and told me that her breathlessness was probably caused by anxiety. Similarly, my concerns about my mother's swollen legs and cheeks were dismissed by Dr who recommended afternoon bed rest with regard to the swelling in her legs.

My mother eventually declined to such a point that she could no longer stand up, eat or even stay awake when put in a chair. On when my mother had a life threatening hypotensive emergency, instead of rushing her to a medical hospital, , phoned me to ask if my mother should be taken to Dubbo Base Hospital or left to die where she was.

At my request, my mother was taken to ED at Dubbo Base and stabilised. That evening a doctor from ED phoned me and asked if my mother should be returned to Lourdes. As Dr had advised me on the phone earlier that day that he did not know what was wrong with my mother but it was unlikely to be serious, I asked the doctor from ED to return my mother to Lourdes. Dr had therefore neatly placed on me the responsibility for a life-or-death medical decision after having given me false information as to the gravity of her condition. I was advised later by my mother's GP that I had made the wrong decision on that day and that my mother should definitely have not been returned to Lourdes.

As my mother was now no longer able to rehabilitate, Lourdes advised me that she would have to be transferred to another hospital. I was asked to choose between Dubbo Base Hospital and Mudgee Hospital without being told that my mother's only chance for survival now was treatment at a Base Hospital. I chose Mudgee Hospital as it was close to home. Mudgee Hospital refused to accept my mother saying she had no acute medical condition. I therefore phoned my mother's GP at Mudgee seeking her assistance. When I told Mudgee Hospital's reason for rejecting my mother, the GP told me that my mother does have an acute condition, that she has pneumonia. Dubbo Base ED had sent her a copy of an Xray report which indicated pneumonia already pre existing as at . I learnt then for the first time that my mother had pneumonia, not from the doctor in charge of her care at Lourdes but from a doctor 150km away in Mudgee.

I was distressed but both Dr and insisted that my mother did not have pneumonia. I was confused but I accepted their word. went as far as to show me the Xray report of pointing out that it made no reference to "pneumonia". The report referred instead to "consolidation "

My mother was transferred to Mudgee Hospital on \_\_\_\_\_ and it was only then that I learnt that pneumonia had caused irreversible gross heart failure in my mother and that she would not leave hospital alive. My mother died on \_\_\_\_\_.

My mother was admitted to Lourdes with no life threatening or even acute medical condition. She was admitted for physiotherapy. My mother was discharged from Lourdes in terminal condition. During her rapid decline while at Lourdes, at no stage was she transferred to a medical hospital more suited to her care. On the day she actually reached the ED of such a medical hospital, she was brought back to Lourdes the same day. My mother and I were both kept in the dark \_\_\_\_\_ about her true condition and therefore we were unable to participate in any meaningful way in making decisions as to her care.

In \_\_\_\_\_, I wrote to Mr \_\_\_\_\_ of Catholic Healthcare raising concerns as to my mother's care. Mr \_\_\_\_\_ ignored my letter. I know the letter was received because I tracked it through Australia Post. I also checked with his PA at the time who confirmed receipt. However, when later questioned by the NSW Ombudsman as to why he did not respond to my letter, Mr \_\_\_\_\_ responded that he had not received it.

I wish to conclude by saying that anyone who is at all serious about the low standards of medical care at NSW regional hospitals needs to look closely at the organisation which is helping to foster those low standards by shielding such hospitals from scrutiny. I refer of course to the HCCC. The HCCC 's supposed investigation of this matter \_\_\_\_\_ did not even attempt to hide its bias toward NSW Health. Nearly two years after my mother's death and even after intervention of the NSW Ombudsman, the HCCC has failed to answer the most basic question as to why my mother was not transferred by Lourdes to a medical hospital when she was obviously very ill. There is simply no way of answering this question without implicating Lourdes so the HCCC chooses not to answer it at all.

I have raised these matters with the Hon Brad Hazzard, the NSW Ombudsman, my local MP Dugald Saunders and the Parliamentary Committee to which the HCCC reports.