Welcome Speech

Thank you very much indeed Rohan.

May I start by acknowledging the traditional owners of the land and pay my respect to elders past and present.

I also wish to acknowledge my Parliamentary colleague the Hon. Kevin Humphries, the Director General Mary Foley, Board Chairs, Board Members, as well a Chief Executives and other staff from the Local Health Districts, representatives of the Pillars, of Medicare locals, of medical colleges and universities and many other organisations.

It took a while for me to walk from the stairs to here because there were so many fantastic people that I wanted to greet.

So hello to all of those that I haven’t met and thank you very much for coming. I think it’s absolutely wonderful to see so many people here today and it’s such a great pleasure for me to join with you in the second NSW Health Symposium.

I will remember the energy and ideas that you brought to last year’s inaugural forum, which really was focussing on the funding reform. This year’s theme is Improving Patient Care and there can be nothing more important to what we do. But, while I might focus on what we’ve done in the past, really, it’s time to look forward and it’s time to think boldly.
We have a strong hospital system - two hundred and thirty six hospitals and other health services in the state in which we know that patients receive high quality care.

Now is the time to broaden our thinking, to evolve by harnessing new ideas and new technology, to strive to deliver the right care, in the right place at the right time. We cannot continue to see acute hospitals as the absolute centre of our health system.

Everyone I talk to, and this is, by the way, across the country and also overseas, talks about the importance of devolution and some are talking about doing things about it and I hope that you will see that we’re really doing something about it.

Instead acute hospitals must become a key part of a network of services that provide more appropriate health settings to serve the diverse and growing needs of the people of New South Wales. In short, we must reform the way we work to meet changing demographic needs and demands.

So, how can we do this?

We can do it by building closer links from the NSW hospital system to community health, GPs and Medicare locals, then to the community.

We can do it through further devolution - ensuring decision making is made locally, where local clinicians and managers are best placed to implement changes to serve the particular needs of their community.

We can do it through a whole-of-hospital-approach by acknowledging, understanding and working on the situation where emergency department blockages, for example, are not necessarily about problems in the emergency department, they’re problems relating to patient pathway issues.
We can do better things by integration of services across acute and primary settings, and acute to subacute, and even medihotels, the hub-and-spoke model.

We can do it by better collaboration through all health providers, including not for profit and private but also other government agencies such as the Department of Community Services, Aboriginal Affairs – they’re already doing some work in that space.

Just going back to the not for profit and private sector, you will know that we announced that we were seeking expressions of interest from the not for profit and private sectors to build the new Northern Beaches Hospital and . I’m very pleased to advise you that the industry briefing that was held yesterday was standing room only by many genuinely interested parties, not just observers, and the response has been absolutely fantastic - a very good example of thinking outside the square.

We can do more through new models of care, hospital in the home and ambulatory care. Let me give you three examples of some of the great work I have seen in this regard.

At Orange Hospital, the **Structured Interdisciplinary Bedside Rounds** - I was blown away by this approach. I know it’s true in other hospitals, but at Orange, in a medical ward, senior clinicians on a rotation basis do rounds with nurses, with the pharmacists, with the junior doctors, with the students, and everyone involved in the patient’s care, including the patient and the patient’s family, twice a day. So that the outcome of that was a shorter length of stay, fewer unexpected readmissions, and really importantly, fewer buzzers ringing through the day. A real telling point as to how patients regarded that program.
At Hornsby Hospital, the Grace Program - a program which, again in many other hospitals, is focussing on geriatric care - keeping older people who are residents of aged care facilities out of unnecessary attendance at emergency departments.

And at a number of hospitals, including Wyong and Fairfield, where I was just last week, ambulatory paediatric care, where when I was at Wyong and sitting around a table with Heads of the departments there, the NUM from the paediatric ward there told me a year ago, and again just recently, when we were talking about wish lists, ‘Please don’t give me any paediatric beds. We do better by treating our patients as ambulatory patients with the wonderful support of the emergency department and others in the Hospital.’ These are new models of care that are really transforming the way that we do business, and I think are improving patient care.

We need to harness emerging technologies and health informatics. Understanding what we know from research or through new models of care, how we can best treat patients and get a better patient outcome, but also, to most usefully use our resources.

We need to value research. As you know, I believe that research is not just an afterthought. I am the Minister for Medical Research, as well as the Minister for Health, and I am blown away when I attend research functions where I hear about the wonderful work, particularly the translational work, that is improving patient care.

We need to stress prevention by looking at tackling risk factors, this is an area that we’re looking at building across government, the Ministerial Preventive Committee has already had a meeting with the Minister for Planning, for example, and in the new Planning White Paper there is a reference to health and wellbeing. Those are
really important initiatives when you’re looking at addressing risk factors.

We need to strive to reduce clinical variation and I’m sure Brian McCaughan will talk about this further, where outcomes for rare and complex surgeries, for example, vary so much and in more common conditions where we can learn from each other - treatment of people with cardiac disease, with strokes. And I’m thrilled with the work that ACI is doing in this regard and the willing participation of specialists and hospital managers in coming to workshops to discuss these issues and a genuine interest in learning how to do things better.

As Health Minister I am proud of what we are doing in recruiting, rebuilding and reforming health. In the area of recruiting we’ve employed 4,000 extra nurses, about 2,000 of them in rural and regional hospitals, since coming to office, taking the nursing workforce to over forty seven and a half thousand by head count and we have over 900 more doctors FTE plus more paramedics. We have a record this year, 925 medical interns employed throughout New South Wales.

We’re rebuilding by spending nearly $5 billion in rebuilding and investing in new hospitals across the state and reforming in a variety of ways. Reforming NSW Ambulance to improve paramedic response times, eliminating smoking in public places and outdoor areas, increasing organ donation, targeting an 80% reduction in HIV transmission by 2020, increasing access to palliative care across the state, planning for our future health workforce, fine tuning the intern recruitment position, eliminating bullying from our hospitals and supporting Freedom of Association legislation allowing junior doctors and paramedics to join the union of their choice.
We’re also proud of the fact that we’re trying to, and working towards, reducing the lifestyle related risk factors which lead to chronic disease through the establishment of the Office of Preventative Health at Liverpool and easing the burden of chronic pain through the NSW Pain Management Plan to improve quality of life for patients. We’re devoting record funding for medical research, more than $200 million this year to ensure cutting edge treatments and technologies are utilised in our health system for the benefit of patients.

Ladies and gentlemen, NSW Health is one of the greatest health care system providers in the world, I believe.

We’re rightly proud of what we do, but it is time to be bold. The challenge for each of us in this room is to continue leading the NSW health system in the exciting directions which the times demand.

I am with you. I wish you well as you spend today sharing ideas and laying the foundation for the year ahead.

Have a fantastic day.