



# Trish Doyle MP

## Member for Blue Mountains



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### New South Wales Parliament Legislative Assembly

#### Public Hospitals

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I will speak about the New South Wales public hospital system. Before I detail my concerns I acknowledge the incredible work of staff in our hospitals. Recently I spent some time in hospital and I thank the incredible people who cared for me when I was not at my best, including doctors, nurses and cleaners. One thing that was clear to me during my time in the Blue Mountains District Anzac Memorial Hospital and the Nepean Hospital was that our hardworking medical staff, the amazing nurses, administrators and allied health workers, are absolutely run off their feet trying to provide the very best possible care that they can to their patients. The last thing these devoted healthcare workers need are cuts to the health budget and the increased pressure of being told by the Government to do more with less.

One ward I was in had cut boxes of tissues from their budget to try to save a few dollars. I am utterly appalled to learn about the \$250 million cut to our hospital and healthcare system. Due to the wide variety of medical and health procedures that are available at Nepean, which is a tertiary hospital, people must frequently be referred from the Blue Mountains District Anzac Memorial Hospital, as was the case for me. This often results in significant wait times in emergency. For most people who arrive at Nepean Hospital emergency it takes more than 10½ hours before they leave. This is not acceptable. I will talk about a few cases that represent the voices and stories of people in my electorate who come into my office thick and fast. I thank my staff for listening to these traumatic stories.

Nicole approached me after an experience in the Nepean emergency department in June following a cardiothoracic injury. She said, "I was pretty desperate as a result of the pain I was experiencing and the length of time I waited in the ED." She was very positive about the hospital and the care that she received, but when it was explained to her that the access to the specialist she needed for assessment meant she would have to be transferred, she was sent from one hospital after hours of waiting to another, where she remained in severe pain, sitting in a wheelchair in the corridor for eight hours. She was traumatised by this and has sought answers from the hospital, but she said that when staff are so overworked and under-resourced there is often not enough time to actually communicate and explain things to patients who are distressed.

Mrs MW came into my office in tears and explained to me she had had a miscarriage, which had been a traumatic experience. She said she was so shocked that after 4½ hours waiting at Nepean Hospital she had still not been seen. She said, "I am going through an awful time and this just made it worse. I have no mother, sister or female family members to help me through this. I just wanted you to hear about my ordeal." This is a crisis in our hospital

system, which needs more staff now. Mr SQ waited three days in the Nepean emergency department. He said, "I had a very frustrating time getting treatment. The situation was chaotic. Staff were doing their best, but they were faced with an overwhelming workload. There was not enough space in emergency. Something needs to be done."

I could talk for days about cataract surgery and the people who face waiting years with failing eyesight and its impact on their safety and mobility. I could talk about hip and joint replacements with a medium wait time of more than 12 months. I could talk about renal dialysis and the ability to treat only six patients three mornings a week in my community. I could talk about cardiac patients who wait for the implant of a defibrillator. One patient had waited since August last year. I could talk about the man who sat in my foyer and cried and asked me to do something. But I want to end as I began: by thanking those who do their very best in a tough system. I call for funding increases, not cuts to the hospital system.