Appendix A

ENT Role Delineation Framework

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13 January, 2015

Chief Executive Officer
19 JAN 2015
TASMANIAN HEALTH ORGANISATION-NORTH WEST

MHG:mb

Mrs Karen Linegar
Acting CEO
THO North West
Alexandra Road Ulverstone 7315

Dear Karen,

Re: Delivering Safe and Sustainable Clinical Services Green Paper and ENT Services in the THO – North West.

I would like to take this opportunity to thank you for seeing me this morning to address some of my concerns regarding the Green Paper and ENT service in the North West Regional Hospital.

1. I would like to start by saying that in principle I agree with the aim of the Green Paper, mainly reducing the cost of health administration to Tasmanian patients to be equivalent to the national average. I noted that the green paper stated that the cost in Tasmania is much higher than the national average.

2. Safety administration of health service and patient safety. This is naturally paramount and I fully support the safety of patients and outcome of any surgical procedure. This naturally has to be evidence based.

3. Waiting period for surgery. I noted that the North West Regional Hospital as far as ENT surgery was within the national parameters for categories 1, 2 and 3. I noted that both Southern and Northern regions were outside the time limits for service provided.

I noted from the green paper as far the ENT service of the North West Regional Hospital, according to this it is proposed to be downgraded from Level 6 to Level 4. The issues I have are as follows:

1. There will be no saving by downgrading the service in the North West Regional Hospital. Indeed this will cost a lot more by having the patients and their families travelling to either the Northern Region or Southern Region for having their procedures performed. This will entail extra financial cost and burden on the families both in travelling and in time taken off work and absenteeism from work, disruption to the families, particularly both in the younger and older age population. The procedures still have to be performed in either of those 2 regions with the extra cost; hence I could see no saving as far as the aim of reducing the cost of services.

2. The patient will be waiting for a much longer waiting period.

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3. I noted that on safety issues to the patient that the complication of tonsillectomy and adenoidectomy in Tasmania was much higher than the rest of the State. I am not aware of any complications of such provision of this service in the North West. This means that the patient is put at risk by taking them from a proven area with low morbidities to another region with a higher incidence. This goes against the aim of the provision of service by the government and proposed green paper.

4. I could not understand the relationship between plastic surgery and ENT surgery to downgrade the service from Grade 5 to Grade 4 on the basis of availability of plastic surgeons. This can be meaningful in downgrade from Grade 6 to Grade 5 where plastic surgery service is required for certain head and neck reconstructive procedures and combined service between the head and neck surgeon and the plastic surgeon. This only applies to Level 6 and I can't see its application to Level 5.

In summary I see the green paper, as far as the ENT services are concerned, is politically driven. It is not based on facts. If it can be demonstrated to me and others where the costs are saved in downgrading the service I would be very happy to address the issue. I would also like to see the evidence base as to the safety and patient outcome between various departments to justify the downgrade of service.

I am concerned that this is ideologically driven with the final outcome being unsatisfactory and against the final aim of the green paper as far as reducing level of expenses, patient safety and quality of service. I would be grateful if you include my submission in your reply and address to the green paper response required by the government.

Yours sincerely,

Mr M. H. Ghali
Ear, Nose and Throat Consultant Surgeon

COPY: Mr Scott Fletcher – Chairman of Surgical Division
Jeremy Rockliffe – Liberal Member of Parliament

Author:
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Consultant Ear, Nose and Throat Surgeon

13 January 2015