

Funding crisis forces hospital emergency closures in Western Australia

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Media reports have exposed the regular closure of accident/emergency departments at Perth's major public hospitals, cancellations of elective surgery, nursing shortages and funding problems, revealing a major crisis developing in Western Australia's health system.

One day last October, Perth's three major hospital emergency departments, at Royal Perth, Sir Charles Gardiner and Fremantle, as well as the privately-owned St. John of God Murdoch, in Perth's southern suburbs, and the smaller Armadale public hospital announced they were on "ambulance bypass" because of bed shortages.

When an ambulance bypass is declared, hospitals refuse to accept emergency patients, including those arriving by ambulances. Only cases considered to be life-threatening are admitted. Elective surgery cases are also cancelled, endangering the health and well-being of patients.

As is usually the case, state Health Minister John Day blamed winter illnesses for the lack of beds. "There is absolutely no health crisis in WA at all," he insisted. "What we do have is a very well-funded hospital system which, in almost every case, is providing excellent, high standard treatment to patients."

Australian Medical Association (AMA) state president Dr Rosanna Capolingua-Host told the press it was no longer possible for the government to blame winter ills for ambulance bypasses. Such occurrences were evidence of major problems, she said.

Earlier in the year, Dr Capolingua-Host publicly warned the government that the health system was seriously underfunded. "As our population grows and technology improves, costs will inevitably rise and we want to see the government making a long-term financial commitment for the benefit of all West Australians," she said.

The AMA commissioned a survey of 300 doctors on the state of the public health system. Almost 60 percent said hospital equipment was inadequate and the same proportion pointed to shortages of nurses and doctors. No less than 96 percent said they could not achieve "best practice," that is, they could not provide high standard medical care.

Written comments included: "Excessive waiting time for patients", "Being over budget constantly being used as the excuse not to buy new equipment" and "Constant pressure being applied to use the cheapest drugs".

Nurses are equally concerned. A recent survey undertaken by the Australian Nurses Federation involving 2,300 registered nurses revealed that 99 percent were not satisfied with the government's handling of the health crisis and 90 percent indicated that staffing levels were not adequate.

According to hospital staff, hospitals are frequently imposing ambulance bypasses because of insufficient staff. Booked admissions and elective surgery are cancelled regularly as well, with operating theatre personnel then used to cover staffing shortages in wards.

Nursing shortages are also having a serious impact on patient care. In a recent report, Professor Mike Stacey, a vascular surgeon from Fremantle Hospital, stated that 25 percent of patients in public teaching hospitals had pressure ulcers, more than double the prediction rate. Pressure ulcers, or bedsores, are caused by excessive or prolonged pressure on the skin. They can be superficial or very deep, extending to the bone.

Stacey blamed shortages of staff, which resulted in patients not being adequately attended to. "Most hospitals are having difficulty getting nurses," he explained. "When you have a staff shortage it means you have less time to do things like this and they are the easiest things that get dropped off."

Because of poor pay and conditions, nurses are resigning and seeking casual work with private agencies that pay higher wages. In many hospitals, half or more of the nurses on duty are now temporary agency staff, usually employed for less time per shift than permanent staff, affecting the quality of care and, in particular, continuity and familiarity with patients' needs.

Sir Charles Gardiner Hospital, for example, has since June been short 400 to 500 nurses per fortnight and the same is said to be the case at Royal Perth. These shortages are invariably filled by casual agency staff and at times the

agencies cannot provide the required nurses, so wards and other departments are under-resourced.

In the lead up to the state election, due before March 2001, the government of Premier Richard Court has announced a funding increase of \$40 million, to be generated from the \$550 million sale of the public gas utility, Alinta Gas. This represents a drop in the ocean, given that the state's annual health budget is in the order of \$2 billion.

John, a patient care assistant in the accident/emergency department at Royal Perth Hospital, told the *WSWS*: “Ambulance bypass is a measure available to the shift coordinator. It is implemented because the accident/emergency department is working at full capacity and therefore it represents a danger to the staff and the public.

“I would say that it is undertaken at least four times a week. During my last four shifts, bypass was imposed for two consecutive days, the first for about two and half-hours and the second time for about five hours. Certainly this is not just a winter problem.”

John rejected the Court government's argument that some hospitals are not operating at full capacity because of a nursing shortage, not a funding crisis. Nurses had resigned because of poor pay and conditions, he explained.

“There is a nursing shortage—that is a reality. A great number of nurses have decided to quit their jobs as part of the permanent staff and instead have joined private nursing agencies, where they get paid a higher hourly rate for their work. Although this means they are not entitled to sick leave or holiday leave they can at least choose their rosters and take leave when they want.

“It must be also said that some nurses who work for the private agencies, work extra shifts with only a few hours gap in between to rest, a fact that sooner or later will have an impact on the quality of care they can provide.”

Private nursing agencies are becoming a growth industry as governments cut health budgets, creating staff shortages that have become highly profitable to fill. Recognising the lucrative opening, the giant security firm Chubb has recently purchased the AAA Nurses Agency, one of the leading suppliers of staff to Perth's public hospitals.

A senior Registered Nurse, who has worked in the public hospital system for over 17 years, told the *WSWS*:

“The hospital goes on to ambulance bypass on a regular basis because of insufficient staff to look after the patients. Booked admissions get cancelled regularly along with elective surgery.

“There is currently a funding shortage in the health system where the health department puts restrictions on the type of personnel that can be involved. This is not just placed on senior positions but also on others. For example, I have

known the hospital being unable to employ patient care assistants without Health Department approval. There is also a nursing shortage with 21,000 nurses registered with the Nurses Board, but only 15,000 currently working.

“Most of this I believe is due to the working conditions and the pay. We currently have no say over our nurse-to-patient ratio and no reliable measure of this. This means that on a daily basis our staffing levels are negotiated by the people on the floor having to justify their needs and at times reminding administration of safety. At the present time, even when you agree with administration on the numbers required, we face the dilemma that no more staff are available. Thus, we end up with a nursing assistant instead of a trained nurse.

“My experiences in the staffing shortage and funding crisis include asking for equipment that we believe is necessary and being refused as insufficient funds are available. This has been the case with our request for an electric hoist and we continue to use our antiquated ones. I thought the hospital had a duty of care to its staff.

“The staffing shortage increases your stress and makes you reluctant to take sick time off, even if you are sick, as you know it leaves everyone else short-staffed. Staff have to work over their rostered time, as they are unable to finish their work in the allocated time. Some staff are being asked to do double shifts and I know the part-time staff get asked on a regular basis to come in on their days off.”

The state Opposition leader Geoff Gallup has announced that an incoming Labor government would also utilise \$40 million from the Alinta Gas sale to increase health spending. No other increases to the health budget have been announced in the lead up to next year's election, however. In fact, Gallup has made it clear that a Labor government would be “fiscally responsible”. In other words, Labor will not increase spending on health and other critically needed social services.



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