

**KING EDWARD MEMORIAL HOSPITAL INQUIRY IMPLEMENTATION GROUP**

*Statement by Minister for Health*

**MR R.C. KUCERA** (Yokine - Minister for Health) [12.22 pm]: Just over 12 months ago, I presented a report to Parliament outlining the actions that had taken place following the establishment of the King Edward Memorial Hospital inquiry implementation group. This group was established by the Director General of Health at KEMH to oversee the implementation of the 237 recommendations made in the report of the inquiry into obstetric and gynaecological services at King Edward Memorial Hospital in 1990-2000. Since that time, I have reported to Parliament every three months on the progress of the implementation group. Changes already implemented at KEMH include: the employment of additional clinical staff; increased senior clinical supervision; additional staff training programs; development and implementation of clinical policies and guidelines for high-risk situations and emergency procedures; improved reporting and review of processes for incidents and deaths; more comprehensive information for new patients; new organisational and governance committee structures; thorough performance review and reappointment processes for all medical staff; a comprehensive database of clinical credentialling for medical staff; and, the development of three new ultrasound scanning rooms.

I am pleased to inform the House today that the implementation group continues to work through the recommendations in a comprehensive and systematic way and has now signed off on 157 of the 237 recommendations. In the past three months, KEMH has appointed a new medical director of obstetrics and gynaecology, Dr Michael Humphrey. Following a comprehensive review, KEMH has published clinical practice guidelines based on the best available evidence, and distributed these widely; developed more rigorous appointments processes for directors of clinical care units, as well as nurses and midwives; improved performance management processes for nurses and midwives - the standards of satisfactory clinical performance are competencies set by national nursing and midwifery organisations; ensured obstetric patients deemed to be at medium or high-risk of complications have the attention of a consultant - the minimum level of attention is that each case is discussed with the consultant and a care plan approved; ensured medical staff do not perform procedures except in accordance with the credentialling list; and, reconstituted the medical advisory committee to monitor clinical outcomes.

Members are aware that the Medical Board of Western Australia has resolved to conduct inquiries into two of the nine matters referred to it from the Douglas inquiry. We expect these issues will be dealt with over the coming months. I place on the record my desire for the outcome of those inquiries to be made public.

I take this opportunity to reiterate the Government's commitment to King Edward Memorial Hospital. We have committed \$25 million over four years to substantially upgrade the hospital's physical and human capital. We are also committed to restoring public confidence in King Edward by thoroughly addressing the issues raised in the Douglas report.

Given the complexities of the task facing the hospital, I am very pleased that more than two-thirds of the recommendations of that report have now been addressed and signed off by the implementation group. I look forward to reporting to the Parliament in three months time with an update on further progress that has been made.

I also take this opportunity to note the release today of a review of statewide obstetric services, chaired by the eminent specialist obstetrician and gynaecologist Dr Harry Cohen. The Department of Health commissioned the review following the Douglas inquiry. It contains a number of recommendations, which were made by health professionals, to achieve the ongoing delivery of safe, high-quality standards of obstetric care in Western Australia. The review recommends changes to the current configuration of services. Therefore, careful consideration by health professionals, the community, and government is required. A statewide obstetrics support unit has now been established and its first task will be to canvas community attitudes to the review's recommendations over the next three months.