

**PERTH CHILDREN'S HOSPITAL — AISHWARYA ASWATH**

*Standing Orders Suspension — Motion*

**MS L. METTAM (Vasse — Deputy Leader of the Liberal Party)** [3.11 pm] — without notice: I move —

That so much of standing orders be suspended as is necessary to enable the following motion to be debated forthwith —

That this house calls on the Premier to immediately commit to an independent inquiry into the tragic circumstances of Aishwarya Aswath's death and other severity assessment code category 1 incidents that have or could have resulted in death or serious harm at Perth Children's Hospital.

I understand an agreement has been reached with the government.

*Standing Orders Suspension — Amendment to Motion*

**MR D.A. TEMPLEMAN (Mandurah — Leader of the House)** [3.11 pm]: I move —

To insert after "forthwith" the following —

, subject to the debate being limited to 10 minutes for government members and 10 minutes for non-government members

In speaking to this motion to suspend standings orders, I highlight that inaugural speeches will be given precedence this week. I remind the opposition that families and loved ones will come to those speeches. Of course, the motion is a serious and important one and, therefore, we agree to suspend standing orders to debate it. However, of course, the opposition has the opportunity to move amendments to the Governor's speech, and that would be the other opportunity to pursue issues such as this. It is a serious matter, so we are happy to support this motion.

Amendment put and passed.

*Standing Orders Suspension — Motion, as Amended*

**The SPEAKER:** Members, as this is a motion without notice to suspend standing orders, it will require an absolute majority to proceed. If I hear a dissentient voice, I will be required to divide the Assembly.

Question put and passed with an absolute majority.

*Motion*

**MS L. METTAM (Vasse — Deputy Leader of the Liberal Party)** [3.13 pm]: I move the motion.

I would like to thank the Leader of the House and the government for their support for this motion. I understand that it is extraordinary to move to suspend standing orders at this time, but this is the first opportunity for the opposition to raise these matters on behalf of the family of Aishwarya Aswath. I have been liaising with the advocate and in particular I have spoken to the father regarding this matter.

We are not seeking to interfere with the internal inquiry that is being undertaken into Aishwarya's death. We are seeking an independent inquiry into this matter. It is with a heavy heart that in 2021, in a state such as Western Australia with a first-class health system, we need to call on the government to initiate an independent inquiry into the death of a girl who was left to deteriorate in our state's premium children's hospital. The fact that she had to wait for two hours while her parents pleaded with the nursing station in the emergency department four to five times is an extraordinary set of circumstances. It is fair to say that the family feels let down by the McGowan government in relation to not only how this happened, but also the initial response to their call for an independent inquiry.

I originally supported their call for an independent inquiry in direct response to the circumstances of this tragedy, but this motion also asks for support for the broader context to look at other code 1 events. The family specifically asked for that. We cannot have the Department of Health investigating its own system and expect objectivity in a case such as this. We cannot allow an investigation through the lens of what is an obviously broken Department of Health if it can allow a seven-year-old girl to languish in an emergency department waiting room until it is too late to help her.

Four weeks ago, on Easter Saturday, Aishwarya's parents, Aswath and Praseetha, took her to Perth Children's Hospital emergency department. We know that she had a fever and a high temperature; her heart rate was high; her blood pressure was low; and the triage nurse was unable to take her oxygen levels because her hands were so cold. We do not know, and the family is trying to find out, the circumstances in which she died and what the cause was. Four weeks on, this grieving couple are still seeking answers and that is why on the weekend they took the extraordinary steps—steps that we certainly do not endorse—to stage a protest. They were desperate for answers from the department about where things were at and for an independent inquiry, which is what we are seeking. Praseetha said it was gut-wrenching to be back at Perth Children's Hospital, but she felt that that was all that they could do in an effort to try to get some answers. They have been told this internal inquiry and the response from the

department will take four to six weeks, which is no different from the Premier's statement that he made yesterday. However, they have also been told by others who have suffered similar losses in our health system that it could be much longer and even months for them to get specific answers, so I would like some clarity on that.

A number of issues surround this case, including the distress around liaising with the coroner's department. The parents feel that an internal inquiry into the Department of Health will not reveal those issues. Their grief was compounded by the fact that it took from Saturday until Wednesday for them to have a definitive idea of where Aishwarya's body was, which prevented this family from holding a traditional Hindu farewell on the night of her passing and in her presence. The breakdown of communication between the coroner's office and the Department of Health whereby each said that the other was aware of this information was very distressing. They feel that they have been left in the dark and are struggling to find answers. The Department of Health's handling of the press conference following this incident was brought into public view, along with the Minister for Health's comments at the time that WA's health system was performing magnificently.

There are obviously issues with how four out of 18 doctors on this evening had called in sick and could not be replaced. That is almost a quarter of the doctors who should have been rostered on for that evening. We ask why she was triaged as a category 4 patient despite the pleas from the parents. There are also significant issues about staffing and what was done in response to the issues raised by nurses in December about staffing and the impact on patient safety. We know that Mark Olson from the Australian Nursing Federation has produced correspondence from the emergency department nurses that expresses the grave concerns about the staffing levels and safety within their department. What responses were made? Importantly, there are some cultural issues, and the challenges with those cultural issues have been highlighted by the advocates of the family, who feel that perhaps they were too polite. As a cultural issue for this Indian family, they noticed that there was a bold sign behind the nurses' station that asked people not to raise their voice. There is a genuine concern that lessons be learnt for the multicultural community. Aishwarya's dream was to become a teacher. The family hopes that some real lessons can be learnt from this particular case.

**MS M.J. DAVIES (Central Wheatbelt — Leader of the Opposition)** [3.20 pm]: We stand here today to offer the Premier and the Minister for Health an opportunity to do the right thing for these grieving parents. It is with a heavy heart that we bring this motion to Parliament today, but we do so in an effort to seek to ease the pain of this family, as it is an utter tragedy when a child dies, as I know everyone in this house agrees. It is an utter tragedy when we know that the family was in exactly the right place they needed to be to seek assistance for their child. Aishwarya's parents deserve to know what happened. We are not asking the government to intervene in the inquiry that is being undertaken by the Department of Health; that is an important process that the department needs to go through. We are asking the government to listen to the heartfelt pleas from Aishwarya's parents and the community for an independent inquiry to be announced. That could be announced today and it could get underway. It would bring such great comfort to the parents, who are grieving and whose pain is so raw that, as the member for Vasse outlined, they staged a hunger strike over the weekend in an effort to get answers.

Let us in this Parliament today demonstrate that we are here for every Western Australian. Listen to the pleas of this family and let us start on the path to restoring confidence in a system that is in crisis. It has been very difficult to get the minister to admit that over the last three to four months, but there are signals across our system that it is indeed in crisis. We need to start to listen to the experts, the staff on the front line and the patients, and not hide this information behind closed doors. The member for Vasse has made a compelling argument for an independent inquiry. Can you imagine the grief and distress from having to fight for answers at the same time as grieving for your child? Her parents did all the right things. They have been left waiting and wondering, as have many other parents in the broader community. This government can provide those answers and give them the confidence they need in the system that we rely on. This system is stretched at the seams. It is full of wonderful people who are doing the best they possibly can, but we need to listen to the experts and we need to peel back the layers of what is happening in our health system. It is a fundamental part of what government does to deliver safe health services.

**MR M. McGOWAN (Rockingham — Premier)** [3.22 pm]: I thank the members for their comments. Obviously, as I said during question time, it is a very tragic set of circumstances. A very tragic event occurred at the hospital when a little girl passed away. We cannot really know how difficult that is for the family of Aishwarya.

I outlined during question time that the normal process when these things occur is to undertake one of these inquiries involving a range of experts. That is a longstanding practice that has been in place under successive governments over many years, and that is what is currently being undertaken. A range of independent experts are involved in the inquiry. It involves someone with a multicultural background and people involved in the system, if you like. We commissioned the inquiry after the passing of Aishwarya and it is due to report by 12 May.

I have queried this with our health experts; the report will go to the family in question and we will consult them about what they want to do with it. Based on that consultation, my expectation is that the report will be released. That is the normal process and that has been going on for a long time. The severity assessment code 1 assessments have been going on for many years so that we can work out what happened when something has occurred and the

cause is not immediately apparent from the patient's condition. This is a tool that the health system uses to make sure it can improve if anything occurs. Our health system is based upon people working with people, so there are many variables involved. We need to make sure that we inquire into these things so that if we can improve the system, we do, and that is what this process aims to do.

As I said during question time, and the Minister for Health will speak in a moment, I do not want to interrupt or interfere with the inquiry that is underway. I do not accept that the existing inquiry is inappropriate in any way. This has been a longstanding practice under governments of all persuasions and I do not think it should be interfered with by establishing any other process prior to its conclusion. I understand that the coroner will look at this matter in due course.

I reiterate that we have the greatest of sympathy for the mother and father and broader family of Aishwarya and obviously for the little girl whose life was tragically ended at seven years of age.

*Amendment to Motion*

**Mr M. McGOWAN:** I move —

To delete all words after "That this house" and insert —

notes an inquiry is underway regarding the tragic death of Aishwarya Aswath and it is important this inquiry is concluded before any further actions may be taken

**MR R.H. COOK (Kwinana — Minister for Health)** [3.25 pm]: I rise to speak on this motion and to support the amendment moved by the Premier. Obviously, we have all been affected by Aishwarya's death. I cannot imagine the untold pain for the family, who are grieving the loss of life of their seven-year-old daughter. I personally promised Aishwarya's father that we would get them the answers they need about what happened to their daughter. I promised that there would be a thorough and robust investigation with the highest priority, and that is exactly what is happening.

Emergency departments are difficult environments to work in, with people making decisions time and again that impact on people's health outcomes. I have enormous respect for the professionalism, courage and strength of all our ED doctors and nurses. I know they are feeling devastated, because I have spoken to them about this situation. That is what I was referring to when I talked about performing magnificently—the courage, strength and professionalism of our frontline health workers and the work they are doing. They have my utmost respect and admiration.

It is important that we get to the bottom of these matters, and the severity assessment code 1 inquiry is exactly what is required in these circumstances. The SAC 1 inquiry involves a panel of 10 people, four of whom are independent from the Child and Adolescent Health Service, including the chair. The first assertion from the opposition was that this will not be an independent inquiry. It will be an independent inquiry. The panel is chaired by Dr Janine Spencer, who is an external paediatrician. In addition, we have an emergency department nurse from another public hospital, an external multicultural expert, a paediatric consultant from the private sector, a CAHS consumer representative, a CAHS safety and quality representative, a Perth Children's Hospital intensive care consultant and a PCH critical care nurse. The work of this panel is crucial, because on the basis of this report, other people will make decisions and form views, and potentially the coroner. That is why it is so important that the panel be allowed to undertake its work, in consultation with Aishwarya's family, to make sure that it gets to the bottom of what went on and can inform that process going forward, in particular how we can continue to make sure that we always take the opportunity to improve clinical services in our hospital system.

The opposition has made a range of claims, aspersions and premises about this matter. I implore all members to please not do that. We cannot prejudge the outcome of the inquiry. We do not know what happened that night. We were not there. We were not the doctors and nurses making the decisions. We were not the family trying to get attention for their daughter. We should all be careful to make sure that we do not prejudge this inquiry and that we make sure that it has an opportunity to properly investigate these matters and, in that process, inform other decision-making processes. We need to make sure that we can have confidence in this inquiry.

This inquiry will be independent. These inquiries go on all the time as part of a constant improvement process in our health services. I am very proud of our emergency departments in Western Australia. They are the best in the country in terms of the four-hour rule. They are the best in the country in ambulance response times and they are the best in the country in terms of the length of stay. But it is true, Madam Speaker, that all our hospitals are under pressure at the moment. This is being felt around Australia. In this period after COVID-19, we have seen a step change in the volume of people presenting to hospitals—in the number of mental health cases presenting to our hospitals; in the acuity of cases, in particular emergency surgeries that require immediate attention; and in the number of long-stay patients who are struggling to find a bed in the community, particularly those awaiting a National Disability Insurance Scheme assessment. This is a challenge that all our hospital systems right across the country are facing at the moment. I know this because I spoke with all the other health ministers at the health ministers' conference in Melbourne on Friday. All of them expressed the distress that they are having in meeting this challenge. In addition, they all expressed their concern about the wellbeing of staff working on the front line. These are tough times. We are doing

Ms Libby Mettam; Mr David Templeman; Ms Mia Davies; Mr Mark McGowan; Mr Roger Cook

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our best to expand the number of beds and the hospital workforce to make sure that we have the resources necessary to ensure that our health system can continue to provide outstanding world-class health care.

I repeat: we do not know what happened that night. People have to have the opportunity to undertake that inquiry and to make sure that everyone receives procedural fairness in that process and that everyone feels that they are being heard and supported, in particular the family in this case.

I know that Minister Sanderson, the member for Morley, has offered to meet with the family to assist them in that process. I have done that as well. Of course, all our hospital leaders, as well as the panel chair, are available to meet with the family to ensure that they can feel confident in this process.

I support the amendment moved by the Premier. It is a sensible approach. However, we need to make sure that this inquiry has the opportunity to complete its work so that we can get to the bottom of what happened that night in relation to the death of little Aishwarya.

*Division*

Amendment (deletion of words) put and a division taken with the following result —

Ayes (49)

Mr S.N. Aubrey	Ms J.L. Hanns	Mr S.A. Millman	Ms R.S. Stephens
Mr G. Baker	Mr T.J. Healy	Mr Y. Mubarakai	Mrs J.M.C. Stojkovski
Ms H.M. Beazley	Mr M. Hughes	Ms L.A. Munday	Dr K. Stratton
Dr A.D. Buti	Mr W.J. Johnston	Mrs L.M. O'Malley	Mr C.J. Tallentire
Mr J.N. Carey	Mr H.T. Jones	Mr P. Papalia	Mr D.A. Templeman
Mrs R.M.J. Clarke	Mr D.J. Kelly	Mr S.J. Price	Mr P.C. Tinley
Ms C.M. Collins	Ms E.J. Kelsbie	Mr D.T. Punch	Ms C.M. Tonkin
Mr R.H. Cook	Ms A.E. Kent	Mr J.R. Quigley	Mr R.R. Whitby
Ms L. Dalton	Dr J. Krishnan	Ms M.M. Quirk	Ms S.E. Winton
Ms D.G. D'Anna	Mr P. Lilburne	Ms R. Saffioti	Ms E.L. Hamilton ( <i>Teller</i> )
Mr M.J. Folkard	Mr M. McGowan	Ms A. Sanderson	
Ms K.E. Giddens	Ms S.F. McGurk	Mr D.A.E. Scaife	
Ms M.J. Hammat	Mr D.R. Michael	Ms J.J. Shaw	

Noes (6)

Mr V.A. Catania	Dr D.J. Honey	Ms L. Mettam
Ms M.J. Davies	Mr R.S. Love	Mr P.J. Rundle ( <i>Teller</i> )

Amendment thus passed.

Amendment (insertion of words) put and passed.

*Motion, as Amended*

Question put and passed.