

OSBORNE PARK HOSPITAL — NEONATAL UNIT

172. Ms L. METTAM to the Minister for Health:

I refer to reports last year that the \$25 million neonatal unit at Osborne Park Hospital had sat idle for three years due to staffing issues.

- (1) Is the Osborne Park neonatal unit now operational; and, if so, is it operating at full staffing capacity?
- (2) Can the minister confirm whether or not there is always a full-time paediatric doctor, or paediatrician, working onsite at the neonatal unit, or is it exclusively staffed by midwives and paediatric nurses?

Several members interjected.

The SPEAKER: Order, please. I agree; that was not a well-written question. I am going to ask the minister to respond insofar as she can.

Ms A. SANDERSON replied:

- (1)–(2) It was an incomprehensible question. I will attempt to answer it as the minister, which is to say that we run the safest maternity services. Western Australia runs safe maternity services. The staffing profile of services is designed to be safe. We have very high standards in Western Australia for maternity services, including in regional services. We have well-staffed maternity hospitals. Can I tell the member who is on what roster at one hospital on any day? No, I cannot, because those rostering arrangements are done by clinicians, who are experts at doing that. That is their responsibility. Should politicians interfere in rostering in hospital services? No, they should not, and I do not intend to do that.

It is not true to say that the neonatal unit “sat idle”. It was used and used regularly. The North Metropolitan Health Service continues to recruit to the role. It has never sat idle. It has always been in use. It has always been intended to be shelved for future use as well, but it has never sat idle because there are babies in there regularly who, when they need to be transferred, are sent to that unit with the midwife to be transferred to King Edward Memorial Hospital for Women.