

PERTH CHILDREN'S HOSPITAL — EMERGENCY DEPARTMENT — RESUSCITATION TEAM

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

I refer to the minister's comments in this house in September last year, stating that the supernumerary resuscitation team had been delivered at Perth Children's Hospital when it clearly had not.

- (1) Will the minister provide a correction to the house for misleading it?
- (2) Can the minister confirm whether this critical recommendation for a dedicated resuscitation team is now in place on every roster above and beyond the normal rostered staff; and, if not, why not?

Ms A. SANDERSON replied:

- (1)–(2) The Australian Nursing Federation's 10-point plan was presented to the government in 2021 and contained 10 quite sensible recommendations around managing the workload for nursing staff in the wake of Aishwarya's death. Last year, the information that I had was that the Child and Adolescent Health Service and the government had accepted that 10-point plan, with the exception of the ratios, because the government did not have a position at that time around staff to patient ratios. Point 3 of that 10-point plan was that a supernumerary resuscitation team, which is four senior experienced nurses, would be available on every single roster to assist in other areas of patient support when not required for resuscitation. That is what is called a dedicated resuscitation team.

In 2021, the state government provided a significant funding uplift to CAHS. CAHS also reconfigured internal funding, which resulted in a very large uplift of staff for the emergency department. That was around 48 FTE nursing staff. There was an uplift of over 10 emergency department paediatric consultants, which is an increase, and an increase of 12 junior medical staff to a total of 58.25. That is an uplift of around 73 per cent of staffing for that emergency department, with that funding and the CAHS funding.

The information that I had was that the resuscitation team was in place and operating as per the ANF's 10-point plan. I have based my comments in this place and in public on that information. The advice was then confirmed to me in writing in response to the release of the coroner's report into Aishwarya's death. Shortly after receiving that advice, I then received further advice from CAHS that that was not the case. Although the team was dedicated to resuscitation, it was not supernumerary to the roster, and I immediately moved to correct the public record on that issue. Of course I regret that. It is disappointing and it is frustrating that that was the advice that I received.

I will be clear: there are always four dedicated resuscitation nurses on the roster at Perth Children's Hospital for morning, afternoon and night shifts. The chief executive has sent a directive to the emergency department clarifying the definition of supernumerary and made it very clear that there is to be significant recruitment of senior nurses into the roster to allow for those resuscitation nurses to be made supernumerary.

To provide some context, paediatric nursing is a specialty area, and all specialty nursing areas are under pressure. Nursing across the world is under pressure. Currently, around 11 per cent of the cohort in the emergency department have the skills for paediatric resuscitation. CAHS is working to rapidly recruit and upskill paediatric nurses to fill those roles. Currently, around 60 junior paediatric nurses are on various stages of that pathway. It takes about 18 months to two years to complete that particular competency. That is a very specific skill. I have asked CAHS to present me with a plan of rapidly upskilling those already on the pathway, providing them with more professional development to allow them to upskill quicker and to fill those supernumerary roles. I expect that plan to be with me very soon and for that to be put in place.

There has been a significant staffing uplift. Members will recall that we have had COVID in our community since January of last year, including the second wave, which took us right up to December. All last year we had high levels of furlough numbers across every single health service. That put a strain on staffing. Paediatric staffing is a specialty. We cannot just call on agency staff from anywhere and put too many general nurses into those roles because keeping that skills mix is central to the safety of the ward. That is why it has been challenging to fill those roles.

I will say that the government funded CAHS for an uplift. It was our expectation that they are supernumerary. I have a commitment from CAHS that they will be supernumerary. I assure the community that there are always four skilled resuscitation nurses on the roster every day.