

Wudinna Residents Delegation attempt to meet Minister 20 December 2004

A delegation of representatives from Wudinna have driven to Adelaide and will stake out the Minister for Health Lea Steven's office today in a last ditch effort to meet with her and persuade her to keep their beloved doctor in their community.

The Minister has refused to meet with concerned members from the Wudinna district despite concerted efforts to arrange a meeting after the mid west board refused to reinstate the doctor at their meeting in Streaky Bay last Thursday.

"550 signatures on a petition, a public meeting with around 300 people in attendance all calling for the doctor to be reinstated, together with numerous letters, phone calls to the Minister's office and text messages to the Premier have been fruitless so far," said Suzanne Waters from the concerned Wudinna residents group.

"We have been told the Minister has meetings and functions in this 'stupid' week leading up to Christmas".

"The Wudinna community are in danger of losing their much loved and extremely competent doctor, while the Minister attends Christmas functions."

The Minister has the authority under Part 5, Section 58 of the Health Act to overturn the decision by the Mid West Health Board to reinstate the doctor.

Shadow Minister for Health Dean Brown and Member for Flinders Liz Penfold will be meeting with the delegation at 12 o'clock today in the Plaza area at the Minister's office building, 45 Pirie Street Adelaide.

Contact: Suzanne Waters 0429 094 755 Contact: Liz Penfold 0428 830 722

Wudinna Hospital Crisis 18 November 2004

Member for Flinders Liz Penfold described a review of the Wudinna hospital as a whitewash.

Unremitting pressure eventually obtained a reply from the Minister.

"Her advice confirms that a review of only clinical practices at the hospital will be undertaken by the Mid West Health Board," Mrs. Penfold said.

"In effect, the Board is reviewing itself. The advice just received states that 'It is not a public review and is focused on clinical issues – medical and nursing, quality and safety, and communication between the nursing staff, management and doctor'," she said.

"The guidelines state that input will be received from 'GP, nursing staff, administration staff (contingent upon the review team agreeing to this)'.

"The public, with personal stories to tell and who can't be so easily intimidated, is being specifically excluded," she said.

Mrs. Penfold in Parliament recently called on the Minister for Health to reassure the community that the review would be independent of the department of health and that people wanting to have input would be protected under the Whistleblower's Protection Act.

She asked that the guidelines be widened to include local management practices and the chief executive officers' interaction with the regional and local boards.

"Concerns including intimidation and harassment, not just accusations of unsafe patient care, have already been raised with the Ombudsman and the Commissioner for Equal Opportunity.

"These matters must be included in this or a separate wider review that also looks at communication between chief executive officers and their regional and local boards," Mrs. Penfold said.

However the response finally received from the Minster indicates that this review will be very limited and begs the question, What is being hidden?

"It is vital that people can come forward with their stories and evidence to ensure that all clinical procedures and also management procedures – including communication with and between the boards - are examined and that best practice returns to the hospital and the region as quickly as possible," she said.

"I understand that the Regional Health Board has not been informed of the serious allegations associated with the call for a wide ranging review."

The Commissioner for Equal Opportunity has advised that anyone making disclosure in the public interest to 'relevant persons' is protected under the Whistleblower's Act.

Mrs Penfold said she had been advised that she could present concerns or issues on behalf of people who are worried about local victimisation and intimidation and who are worried that they may not be protected by the Act even though first hand accounts have more credibility.

"I am able to present concerns independently, representing people 'as Person A or Person B', to ensure that evidence is completely confidential without ramifications.

"I encourage people to contact me if they would prefer this option," she said.

Nevertheless Mrs Penfold said the limited nature of the inquiry guidelines may abort even this option as

- the guidelines mention input will only be received from 'GP, nursing staff, administration staff (contingent upon the review team agreeing to this)', and
- only on the two days specified, and
- the inquiry will not be advertised

Health Minister Lea Stevens advised in Parliament that the principles of 'natural justice' will apply to people giving evidence to the inquiry. Ms Stevens did not elaborate on what 'natural justice' entails.

Mrs Penfold said she has grave concern that what is considered 'natural justice' in both the health and education departments at present would be considered by most honest people as being very unnatural.

"If people are not able to present relevant information, I will present it in parliament," she said.

PETITION

A petition is being circulated by people concerned about the local doctor's resignation and local and regional management issues.

The petition calls on the Minister to advise the Mid West Health Board to reject Dr. du Toit's resignation and "to have an independent body investigate, and report to parliament on, problems associated with the Central Eyre Peninsula Hospital, associated boards and agencies" and finally that she address harassment and intimidation issues within her department.

Mrs. Penfold was disturbed that a petition had been destroyed and that lobbying is going on to stop people from signing.

"I am most concerned that this kind of pressure is operating in the Wudinna district and I encourage people to sign the petition if they want to."

She said that a petition is a democratic right of the people and an instrument of the parliament.

"The Wudinna Hospital has a long and proud history of acute care in the district and it is very important that the problems that have arisen are addressed now to ensure best practice in the health services and in the region are resumed in the future" she said.

ENDS