

Public Submission Cover Sheet

Please complete this sheet and submit with any attachments to the Sustainable Health Review Secretariat

Your Personal Details

This information will be used only for contacting you in relation to this submission

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|-----------------|------------|
| Title | [REDACTED] |
| Organisation | [REDACTED] |
| First Name(s) | [REDACTED] |
| Surname | [REDACTED] |
| Contact Details | [REDACTED] |

Publication of Submissions

Please note all Public Submissions will be published unless otherwise selected below

- I do not want my submission published
- I would like my submission to be published but remain anonymous

Submission Guidance

You are encouraged to address the following question:

In the context of the Sustainable Health Review Terms of Reference listed below, what is needed to develop a more sustainable, patient centred health system in WA?

- Leveraging existing investment in Primary, Secondary and Tertiary healthcare, as well as new initiatives to improve patient centred service delivery, pathways and transition;
- The mix of services provided across the system, including gaps in service provision, sub-acute, step-down, community and other out-of-hospital services across WA to deliver care in the most appropriate setting and to maximise health outcomes and value to the public;
- Ways to encourage and drive digital innovation, the use of new technology, research and data to support patient centred care and improved performance;
- Opportunities to drive partnerships across sectors and all levels of government to reduce duplication and to deliver integrated and coordinated care;
- Ways to drive improvements in safety and quality for patients, value and financial sustainability, including cost drivers, allocative and technical efficiencies;
- The key enablers of new efficiencies and change, including, research, productivity, teaching and training, culture, leadership development, procurement and improved performance monitoring;
- Any further opportunities concerning patient centred service delivery and the sustainability of the WA health system.

Submissions Response Field

Please type your response into the field below. Alternatively you may provide your submissions as a separate attachment (Suggested Maximum 5 pages).

My submission relates to Obstetrics and Gynaecology.

Fiona Stanley Hospital is the only hospital in WA where Obstetrics and Gynaecology services are co-located with other tertiary medical and surgical specialities, ICU, CCU, Medical Oncology and Interventional radiology. Hence expanding Obstetrics and Gynaecology services to encompass all the aforementioned facilities is sustainable and cost effective. The 2 areas where this aspect is particularly applicable are as follows:

1. **Gynaecological Oncology:** Currently Gynaecological oncology is based at KEMH; however women with multiple co-morbidities are being transferred to FSH in addition to women needing brachytherapy as the facilities needed to manage such women do not exist at KEMH. Hence in future, the gynaecological oncology should be developed at FSH. The complicated cases may be managed at FSH but the straight forward operations for gynaecological cancer in patients without co-morbidities can be managed at Fremantle Hospital where the department routinely does elective gynaecology.
2. **Maternal Medicine:** Owing to the fact that FSH has facilities mentioned above, pregnant women with complex medical and surgical problems can get comprehensive care at FSH without separating the baby from the mother. Hence FSH should become the centre for maternal medicine without any restrictions on gestational age for the fetus owing to the need for iatrogenic preterm delivery in sick mothers. In addition, it would allow the development of fellowship training in the department.
3. **Family Birth Centre and Midwifery Group Practice:** These issues are being explored at FSH. This will allow low risk pregnant women to be managed in the midwifery led birth centre allowing the medical team to focus mainly on complex pregnant patients. This would not only contribute to successful recruitment and retention of midwives, it would also be cost effective in focussing medical resources where needed.