

WOMEN'S AND BABIES' HOSPITAL — RELOCATION

764. Ms L. METTAM to the Premier:

I refer to the Child and Adolescent Health Service position paper that was leaked yesterday about the location of the new women's and babies' hospital. Given the warnings from the government's own clinical experts at Western Australia's Child and Adolescent Health Service that the decision to build the hospital at the Murdoch site would pose "unacceptable clinical risks to women and babies, particularly neonates", will the Premier now reconsider his government's reckless decision?

Mr R.H. COOK replied:

I thank the member for Vasse for the question. It is a very important one because making sure that we have our health infrastructure in the best form, being delivered to the people of Western Australia, is an important goal for us. As we know, the women's and babies' hospital is something that has been envisaged to be redeveloped since 2004 when the Reid review was brought down. The Reid review made an important observation. It said that the women's and babies' hospital should be redeveloped at the QEII site as a matter of urgency. We roll forward many years and we still see that that scenario has not come to be because the previous Liberal–National government decided that it would redevelop the new children's hospital at the QEII site. We understand the political benefits that it accrued as result of doing that. It was a very politically popular decision but it was against the recommendations of the Reid review. We have to deal with the cards that we have been dealt and we will do so. That is, we understand that the development of the new women's and babies' hospital on top of Sir Charles Gairdner Hospital now represents a significant operational risk to the people in those hospitals because they are operating hospitals—both Sir Charles Gairdner and Perth Children's Hospital—it represents a significant risk to the current patients in that hospital and it will represent a significant delay to the redevelopment of a hospital that is already a hundred years old.

The doctors and nurses at King Edward Memorial Hospital for Women do an incredible job, which is the reason it has an internationally renowned reputation. However, we have to do more than simply cling to recommendations that were made in 2004. We have to make clear-eyed decisions, not with our hearts, but with our heads. I have the utmost respect for all our clinicians and I fully admire and appreciate the input they have to government policy, but we have to continue to make sure that we make decisions in the best interests of Western Australians. As a result of that, we have made the decision to redevelop the women's and babies' hospital at the Fiona Stanley Hospital site. That will mean that the hospital is delivered a good decade earlier than it would be if we developed it on top of Sir Charles Gairdner Hospital. That is the reality and that is what the expert advice in terms of the business case that has been put forward by Infrastructure WA tells us; that is, it would represent a significant delay in redeveloping that hospital and, as a result of that delay, that too represents a risk.

Ms A. Sanderson: A huge risk.

Mr R.H. COOK: It is a huge risk and we have to be cognisant of that as well. This is not a question of expense; this is a question of timeliness and a question of making sure that we can develop a world-class facility in a time that is acceptable. Already over 3 600 babies have been born at Fiona Stanley Hospital so we know it is a busy site and we know there will be a demand for neonatal services at that facility anyway. From that perspective, we will be able to continue to provide the backup that acute specialists and paediatricians will provide to at-risk births. However, the fact of the matter remains that we need to make decisions that are in the best interests of Western Australia. I fully respect and appreciate that for some of the clinicians and specialists this is confronting. I fully respect their input into the delivery of clinical services. But those views are not unanimous. We know that there is a range of views within the clinical community and that is the reason the Minister for Health and the director general of Health have taken the opportunity to ensure that we consult and understand the risks associated with any sort of rollout of obstetric and gynaecological services, right across the state. This is not simply about the move of the hospital from the King Edward Memorial Hospital site to the Fiona Stanley site; it is about the deployment of all the services. It is an important broad-based clinical consultation process and I urge all clinicians to be part of it. We are entering that with the genuine intent of understanding all the risks, all the opportunities and all the challenges, and moving forward.