

ABC Radio

On Drive with Piia Wirsu
Mon 9 Jul 2018, 4:00pm

Could a partnership improve Tasmania's health system?

In the past week industrial action at the Launceston General Hospital emergency department has ramped up, the hospital lost its emergency training accreditation earlier this year.

Queensland-based Emergency Medicine Foundation has an interest in developing a partnership with Tasmania, which it says will be of benefit to the Tasmanian health system.

Tegwen Howell, Manager of the Research and Support Network with the foundation and she spoke to Piia Wirsu.

Transcript

PW: What is the Emergency Medicine Foundation?

TH: Well the Emergency Medicine Foundation is a not for profit that was established back in 2007 from funding from Queensland Health with the purpose of supporting emergency medicine research across Queensland public hospitals. Over the last, well now eleven years, it's evolved and we're now working to expand our footprint nationally as well as continue to supply that support and leadership in Queensland, where Queensland is quite literally leading the country with emergency medicine research.

PW: So what's your interest in Tasmania?

TH: Well there are a number of things. First of all, for Tasmania the hospitals there have, in a lot of ways, similar issues to some of our regional and remote hospitals here in Queensland and yes the distances are different, but the challenges are surprisingly similar. And I believe, that particularly through our Research Support Network, which helps build to research and collaboration across Queensland, then there's the potential for some of the projects we've been involved with here to assist in Tasmania.

PW: So what contact and interest have you received from Tasmania about this possible partnership?

TH: Well along the way there's been a number of things: back in, about 12 months ago, our Director General wrote to his counterparts in all States, including Tasmania, indicating that we were interested in seeing if there was a way to work with them to build research capacity and facilitate broader research projects where the Emergency Medicine Foundation would administer the grant processes, but the money would go back to that local State, obviously including Tasmania. Then subsequently, I was in Hobart last year for the Australian Australasia COAG Social Work Conference where I met with researchers, collaborators, clinicians from across Tasmania as well as a bunch of people we dialled in from the Antarctic Division North West etc to discuss possible projects where we could work together rolling out or translating some of the projects we've already led here in Queensland into Tasmania.

PW: So what response have you had from the Government here?

TH: Look, when they first responded they indicated they were interested, but that the timing was not ideal, which you know tends to be the way. We, everyone is quite used to that particularly when it comes to research. Subsequently there's been a bit more conversation, but back in May is the last time we had correspondence with Michael Ferguson's office, yet they indicated they were looking at it, but again there were a range of other challenges that needed to be looked at for Tasmania.

PW: It's thirteen past five on ABC Northern Tasmania. You're hearing from Tegwen Howell, who is from the Emergency Medicine Foundation—a Queensland-based Foundation but interested in forming a partnership here in Tassie that might be able to help with Tasmania's health system and research in emergency medicine in Tasmania.

There are some pretty pressing issues in the Tasmanian health system at the moment Tegwen, as I'm sure you understand. What direct benefit would a partnership by to Tasmania's health system?

TH: Well look Pii can I give you a couple of examples? Maybe that's the best thing. So in Queensland, over the 11 years, we've funded 151 projects from 273 applications. Sixty-three of those are still active. But amongst those have been some pretty key projects and we've done some, you know some back-of-the-envelop economic analyses on some of them. And for six projects alone, if they were rolled out nationally, the benefits in terms of savings would be about \$35 million dollars. So with some small projects there is the potential to do a lot. With Tasmania, there are a couple that come to mind quite quickly. One is the use of lung ultrasound as point of care testing in the emergency department when people over 60 present with chest pain to determine whether that's a cardiac chest pain or a respiratory chest pain because the pathways they are going to go down are quite different, and it, you know, it has the potential to reduce patients' care but also their length of stay if it's determined to be respiratory rather than cardiac chest-related. On another note is one looking at headache presentations and quite literally there are some researchers in Launceston that I've been working with who, and in Hobart, who've got an interest in subarachnoid presentations and there was a project led out of the Royal Brisbane Hospital here looking at headache presentations and subarachnoid haemorrhages and what that project found was that a lot of those headache presentations could have actually gone to a GP or phoned in rather than come to an emergency department because, you know, what they needed was not an emergency situation, if that makes sense.

PW: Launceston General Hospital has lost its emergency medicine training accreditation. Would investing in this kind of research, which as you said just then does have all these positive flow on effects, would that help or go some way towards restoring it do you think?

TH: Look, I believe so. I think research, research is crucial for a whole range of reasons. It not only boosts staff morale and gives them an opportunity to invest in their own local hospital, but also it builds capacity, it leads to staff retention so you don't have that turn over of staff which is not good for anyone and from an accreditation point of view, one of the things the Australasian College of Emergency Medicine is, you know, encouraging is research. So if through the Emergency Medicine Foundation we could facilitate research in Tasmanian hospitals, particularly, Launceston, you know, North West Regional and Royal Hobart, because they're probably the ones where they're most likely to be done, I think there is the potential then to assist Launceston and Royal Hobart with their accreditation.

PW: So where is at now in terms of moving forward towards building a partnership? Is it reliant on the Government or is there another way to build it?

TH: Well, I so far haven't found another way. We're looking; EMF's doing all that we can to try and raise awareness both at, not only at a State level but also increasingly at a Commonwealth level. We're, I've had some conversations with a number of Federal Ministers trying to raise awareness that emergency medicine is crucial to the health system because most people when they come to hospital they come in to the emergency department and whether people like it or not, that's how hospitals are judged. So if we can improve that care and find ways to build that collaboration and for people like, people in Tasmania to benefit from not only access to not only the Emergency Medicine Foundation but our Research Support Network which has a range of skills and national and international networks then I think for Tasmanians would benefit considerably from it.

PW: What's to benefit on your side of the partnership? What's your interest in it?

TH: Um, well from the Foundation's perspective, one we'd like to, Queensland's developed this model we'd like everyone else to follow suit and see what can be done. But, in terms of engagement with Tasmania, the Foundation believes that we have a lot to offer and so that it's a two-way relationship. We can help facilitate that research in Tasmania, but equally there will be things in Tasmania which will be applicable to small sites here in Queensland that perhaps people haven't thought of, but if the project's led out of Tasmania there's potential to collaborate with sites here in Queensland. And I think that helps everyone. It builds research capacity outside of the major centres and, particularly in Queensland's case, outside of the metropolitan area. The more that we can do in rural and remote Queensland the better because at the end of the day, people travelling to a hospital, that in itself is a cost so if we can provide care at a more local facility then that in itself is a cost saving before we go further down the track.

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