ROYAL COLLEGE of NURSING Australia
ABN 69 004 271 103

National Office | 1 Napier Close, PO Box 219, DEAKIN WEST, ACT 2600
Tel: +61 (02) 6283 3400 | Fax: +61 (02) 6282 3565
E-mail: canberra@rcna.org.au | Web: www.rcna.org.au

8 August 2005

Ms Andrea Cullen
Secretary
Standing Committee on Public Accounts
Legislative Assembly for the ACT
GPO Box 1020
CANBERRA ACT 2601

Dear Ms Cullen

Inquiry into Auditor-General's Report No 8 of 2004: Waiting Lists for Elective Surgery and Medical Treatment

Thank you for inviting Royal College of Nursing, Australia to review the above-named document.

The College welcomes the Inquiry and sees it as an important opportunity to explore issues pertaining to waiting lists for elective surgery, especially those issues which cause dysfunction and inconvenience to health consumers, and circumvent smooth processes for the health system.

The College does not wish to make a submission but offers the following points and support for:

- More comprehensive waiting lists to include medical treatments, and clients who require an integration of surgical and non-surgical procedures.
- The need for a system which can be fair and transparent in determining priority clients and disallows for individual specialists being able to bring pressure to bear to have their clients priority rating changed.
- A review of the process of categorisation for different levels of priority leading to greater equity in the treatment of clients on the waiting list. This includes better evidence for changes to clients' priority category.
- An on-going process for a close working relationship between the staff managing the waiting list and nursing and medical staff management to ensure that planning includes known changes to workforce schedules. Waiting list

planning can not be attempted in isolation of the supply of the necessary workforce.

- Clear and regular communication of the waiting list status to medical personnel and affected clients.
- The implementation of the new ACT Health waiting list policy and especially the inclusion of social factors when clients are placed on the list. Health consumers often have to put in place a very complex set of plans in order to be able to accommodate surgery or other procedures requiring an absence from activities of normal life, for example care of other family members, pets and/or employment.

Essentially, the College acknowledges that the management of waiting lists involves a complex interplay of consideration for the availability of human and material resources of a health care facility, clinical need of the client, and personal circumstances of that client. The Auditor-General's report has highlighted many areas for improvement in the waiting list processes at The Canberra Hospital.

While there are obviously many changes which can be implemented to improve the system for both the staff and health consumers, it should be noted that the Chief Executive Officer makes a pertinent point when he says that *elective surgery is only one of a range of health services provided by the public health system. Other comprehensive services include ambulatory care, mental health services, community health services, aged care program and public health services. We need to balance elective surgical services with other demands*. With nurses forming the largest single component of the health care workforce in Australia, and practicing across all areas in which health care is delivered (such as those outlined by the CEO), our College is well aware of the competing demands within the health care system. It is therefore imperative that systems for improvement in one area – waiting lists – be undertaken in genuine consultation with all stakeholders across the system.

Nurses' primary concern is for the health and welfare of the community. RCNA, as the peak national professional organisation for nurses, looks forward to learning of the outcomes of this Inquiry.

Yours sincerely

Rosemary Bryant.

Rosemary Bryant FRCNA
EXECUTIVE DIRECTOR