

1996

OPENING OF THE NEW CRITICAL CARE FACILITIES
SYDNEY ADVENTIST HOSPITAL
1 MAY 1996



Critical Care committed to community



The opening of the new Critical Care facilities "further enhances the SAN's well deserved reputation as a flagship of the private hospitals industry" ...

Sydney Adventist Hospital consolidated its position as a leading private health provider with the opening of North Shore Sydney's first private Emergency Care.

Emergency Care was officially opened at Sydney Adventist Hospital on "May Day" by His Excellency the Honourable Gordon Samuels AC, Governor of New South Wales. The Honourable Justice Michael Kirby AC, Justice of the High Court of Australia, opened Intensive Care, Coronary Care and Cardiac Catheterisation Laboratory on the same day, May 1.

Guest speakers at the official openings included three former patients of the Hospital, the Reverend Dr Gordon Moyes, Superintendent of The Wesley Mission and radio personality, world renowned author Mr Morris West, and entertainer Mr Russ Huggins.

The tragedy of the preceding weekend, the Tasmanian massacre, was not forgotten during the opening celebrations. Several speakers made reference to the event, including Justice Michael Kirby who emphasised the need for a strengthening of gun law.

Another common thread among the speeches observed by Chief Executive Officer Ian Chalmers was the appreciation of further efforts for the professionalism, quality and dedication of SANH workers.

Justice Michael Kirby and Mr Morris West open Critical Care in the presence of Mr Ian Chalmers, Mr Ian Chalmers and Dr Brian Ball.

new installations are a tribute to your partnership with the Adventist Church in community service," he said.

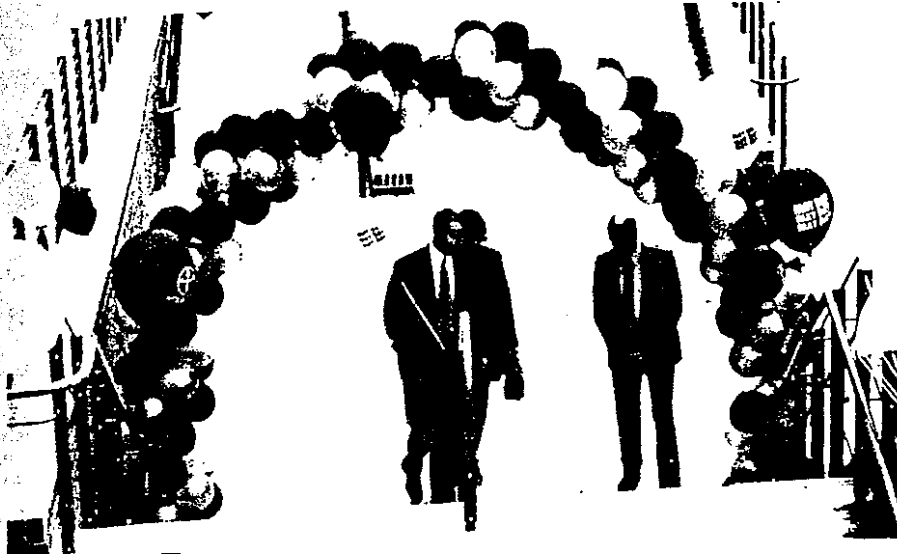
Among the hundreds of people who attended the three official opening functions were government dignitaries, doctors accredited to practice at the Hospital, sponsors, members of the clergy, police and emergency service personnel, business and community leaders, and staff.

The new facilities cost \$3 million to build and form the second phase of a major extension program to the Hospital which has included a new operating theatre suite, day surgery and endoscopy units, a renal dialysis unit, the Avondale College School of Nursing, a conference room and a professional hospital library.

The opening of the new Critical Care facilities "further enhances the SAN's well deserved reputation as a flagship of the private hospitals industry," according to Mr Ian Chalmers, Executive Director of the Australian Private Hospitals Association.

Opening of Critical Care

WEDNESDAY, MAY 1, 2 PM OPENING



Pictured above: burgundy balloons direct guests to the Level 2 Conference Room for the opening celebrations.

Right top: The Nigel Hanley Trio provided musical entertainment at each of the openings.

Right: Justice Kirby and Mr Morris West cut the ribbon leading into Intensive Care Unit Coronary Care with Dr Heather Lou & Christopher Wolfe



Former Catheterisation Lab patient Mr. Morris West joins Bev Lou and Justice Kirby in opening the new department

Opening celebrations for phase two of our Hospital's redevelopment plan were just that - celebrations.

Guests to all three official openings were met by archways of silver and burgundy balloons and strains of music.

The Nigel Hanley trio played for guests as they mingled before and after the opening ceremonies. Intricate hors d'oeuvre and a selection of drinks were served by members of the Food Services team at each of the functions.

This first occasion marked the opening of the Critical Care facilities; the refurbished Intensive Care and Coronary Catheterisation Laboratories and the newly created Coronary Care Unit.

Local government dignitaries, the media and hospital representatives attended the function at which Justice Michael Kirby opened the facilities with assistance from former patient and author Mr Morris West.

A selection of speeches have been transcribed for your interest.



Mr Ray Hollings

Senior General Surgeon
Sydney Adventist
Hospital Medical
Advisory Committee
Representative to the
Board of Trustees

*Excerpts from his speech
"Making Critical Decisions
in a Hospital"*

This is an emergency unit and every patient with his or her retinue of family and friends come to it with a sense of urgency with an acute problem of concern, whether the underlying problem is serious medically or not. So the front door is vital. The reception area where people are first introduced to the unit needs to work with efficiency to attend to details with kindness, with explanation and sympathy. Then comes the sorting, or triage, an assessment centre where skilled professionals decide upon a priority rating based on immediate needs.

Then the patients are directed to medical and nursing staff, who carry out the more detailed examinations, call for tests, make diagnoses and initiate treatment. For many this will suffice and they will go home at the appropriate time. All the above will take place with the highest priority and minimum waiting time - the perennial problem in emergency units.

For others, the services of specialist consultants, particularly those with skills in trauma management will be required. Thus x-ray facilities and plaster rooms are provided. Special facilities for children, even the most vulnerable of our patients, are available.

Transfer to the main hospital unit and facilities may be the fate of some, while others will be held in special observation areas.

The really critical cases are those brought by incoming ambulances and a special area with all resuscitation equipment and space has to be available to deal with such cases prior to their admission to the main hospital.

decisions in all these areas I mentioned, they must be provided with places for rest, relaxation, discussion and review, all provided for in the facility.

Then for some, the sadness and tragedy of death will be their fate - the back door exit. Here, the provision of special areas for counselling, comfort, tears, anger, support and explanation are essential.



Mr Ian Chalmers

Executive Director
Australian Private
Hospitals Association

*Excerpts from his speech
"The Role of Private
Emergency Facilities in
Australia"*

There are 330 private hospitals in Australia, and, together with the 140 private day surgeries, our industry now

provides in-patient hospital care for over 1.5 million Australians every year.

This means that more than 30 per cent of all hospital admissions in this country take place in private facilities such as here at Sydney Adventist Hospital ...

Well over 50 private hospitals around the country now have the capability to provide accidents and emergency care ...

Since November 1994, there has been a 264 per cent increase in the number of patients admitted to private A&E facilities. This means that over 230,000 accident and emergency patients are now treated in private A&E centres each year.

The opening of these new facilities today is a tangible, indeed pace setting, example of the maturity of Australia's private hospitals.

This commitment by the SAN reflects a new culture in our industry.

It points to a sense of urgency and excitement, arising from the ability to deliver the full range of hospital services to the community 24 hours a day.

It underscores the strength of our industry's partnership with the medical profession and enables us to attract the most highly qualified and highly motivated staff, both clinicians and administrators, who previously saw their careers tied firmly to the public sector.

The SAN today reinforces the role of the private hospitals industry as an indispensable component of Australia's health care system. And it has focused the spotlight on a trend that will continue.

By bringing to the emergency and critical care facilities the same high standards of care and well deserved reputation as a major part of the private hospital industry.



Mr Morris West

Author

Mr Chairman, distinguished guests - I am honoured and I am grateful to be with you on this most important occasion. I have been a patient in this hospital. I am here today because of the skill and care of its Coronary Care Unit. I am delighted that its new facilities will extend and refine that care and make it more available to more Australians. Its excellence will set a benchmark for facility and importance in this sector of medical and surgical care.

What I should like to emphasise, however is that my most enduring memory of this hospital is the essential humanity of its dealings with its patients. All illness, all surgical intervention deprive the patient of an essential element of personal dignity. He or she becomes totally dependent upon the skill of the surgeon and the skill and compassion of medical and nursing care.

It is the demonstration of both skill and compassion which is my most vivid memory of my sojourn in this hospital.

I have always tried to transmit that memory to others. I have celebrated it in books and articles which have been published around the world. I have recalled them in letters to people who are waiting for treatment.

One of the great dangers of the age in which we live is the desensitisation of the individual to the pain and suffering of others. There is a conscious exploitation of the individual's capacity to feel sympathy and

against the human person. Film, television, the press, all make their own sinister contribution. Children find their entertainment simulated violence. The Tasman tragedy, which has cast a black shadow over the whole nation demonstrates in all sorts of ways the culture of desecration.

This hospital, this institution, on the other hand, does exactly the opposite. It affirms the sacredness of the human person, the sacredness of creation itself. It doesn't violate, it cures. Even when it does not cure, it palliates, it renders more tolerable the inevitable burden of human suffering.

In a litigious society, medical practitioners are becoming more and more vulnerable to lawsuits

and the cost of insuring themselves is inevitably added to the cost of medical treatment for every individual, whether that individual is in Medicare or in a contributory scheme. So, the trust between patients and medical institutions, like this one, is a matter of vital importance to us.

Very soon the whole community will be involved in a public political debate on the question of legalising euthanasia. This debate will be, an emotive issue. Experience in other places has shown that legislation can raise more problems than it solves. The important thing is that the inevitable debate be conducted with wisdom, moderation and the respect which this institution demonstrates for the human person.

The more the work of this hospital is made known, the more trust it will engender in the public, and the more hope in the continued dignity of the healing arts, the more trust in the ability of the healers to deter and relieve pain and suffering.

Set what you will see here today, set what some of you have experienced here, against what you see all too often on your television screens and in the pages of the daily press, and you'll realise what you are witnessing: a lamp of hope, a light held high in what is often a terror of darkness.

From top: Dr Ball & Miss Radley with Mr Morris West and Justice Kirby in the Paediatric room in Emergency Care. Justice Kirby and Mr West check the Cardiac Cath Lab lead aprons for size; Mr. Robert Ball in the Johnson and Johnson display booth. Mr. Morris West with Karen Oitzinger from Select Sewing. Mr. Barr O'Leary Member for Northcott with Mrs and Dr. Ball in Emergency Care.