

Concord Repatriation General Hospital Medical Staff Council AGM

June 29th, 2023

Present:

Abed Hany	Damodaran Omprakash	Katellaris Peter
Aitken Sarah	Davidson Fergus	Kaur Harleen
Albany Malcolm	Davie Huw	Kerdic Richard
Amos Michael	De Gzell Cecelia	Keshava Anil
Anandacoomarasamy Ananthila	Della Torre Paul	Kho Ping
Anastasius Malcolm	Djekovic Kate	Khoury Vincent
Archer Katherine	Doull Frances	Kim Orison
Arulanandam Abraham	Edwards Elliot	Kim Jae Hyon
Barnsley Les	Elias Nadine	Ko Raymond
Becerril Guillermo	Farnham Nell	Kol Mark
Benness Max	Fernando Therese Shelanah	Korb-Wells Cameron
Betts Charles	Fisher Christopher	Kormas Nic
Blinman Prunella	Foo Soo Wei	Krishnaswamy Mrudula
Boxer Miriam	Foote Celine	Kritharides Leonard
Brieger David	Freedman Ben	Kumar Kishore Raj
Brillante Ruby	Fuentes Erick	Lai Christina
Bui Kim Tam	Fung Kevin	Laks Leon
Burrell James	Gaden Susan	Le Shaun
Cameron Shanel	Giugni Elizabeth	Le Page Phil
Chan Renee	Gluch Laurence	Lee Edward
Chan Lewis	Goodwin Annabel	Leong Rupert
Chan Christine	Gottlieb Thomas	Lim Kar-Soon
Chan Michael	Gray Timothy	Limaye Sandhya
Chan Charles	Hallahan Andrew	Linton Anthony
Chandar Suchitra	Han Jason	Loneragan Robert
Chang Ya ting Alice	Handelsman David	Lowe Jessica
Chaudhuri Anupam	Hawthorne Ross	Lucy Morgan
Cheong Elaine	Hayes Michael	Ly Theresa
Cheung Winston	He Jing Ya Jianna	Malalasekera Ashanya
Cheung Henry	He Jianna	Marchant Dale
Chew Monica	Hill Kim	Markus Seibel
Chilov Michael	Hokin Belinda	Martin Rodney
Choit Rachel	Holland Richard	Martin David
Chow Vincent	Hong Winnie	McCarthy Robyn
Coombes Graham	Howson Pamela	Mckew Genevieve
cooper mark	Hurelbrink Carrie	Merani Rohan

CORKE PHILIP	Innes Donald	Merten Steve
Cottee Alice	Islam Sadia	Mittal Dipti
Cox Ian	JANU MARGARET	Mitterdorfer Andrew
Cross Rosalba	Janu Norman	Moi Callum
Csillag Andrew	Joseph David	Molland Gail
Cullen John	Joseph Mark	Yong Andy
Cunningham Ilona	Joseph David	Zicat Bernard
Dal Cortivo Benjamin	Kane Barry	Abed Hany
Morris Katrina	Kang Jin	Taylor Craig
Morris Stephen	Kanhere Tejas	He Emily
Motamedi Negin	Strong Claire	Taylor Craig
Naoum Christopher	SUEN MICHAEL	Spring Penelope
Ng Lisa	Sumpton Daniel	Stapledon Susan
Ng Austin	Sungaran Jai	Stewart Peter
Nielsen James	Suryawanshi Avinash	
O'Hara Justine	swaraj Soji	
Panis Anna	Tadros James	
Panis Anastasia	Tan Irene	
Paoloni Richard	Thanigasalam Ruban	
Pope Raoul	Tobin Michael	
Pudipeddi Aviv	Tohidi-Esfahani Ibrahim	
Quinn Liam	Trantalis John	
Quoye John	Trieu Lawrence	
Rai Rakesh	Trieu Joseph	
Raju Hariharan	Trotman Judith	
Raman Gowri	Tse Vincent	
Ramanathan Sudarshini	Turner Darmastuti	
Raykar Veena	Valentin Roumel	
Razavian Mona	Van der Linde Riana	
Reddel Stephen	Van Gelder James	
Ren Liwei	vardy Janette	
Rickard Matthew	Veitch Elizabeth	
Ridley Lloyd	Verner Emma	
Ritchie Angus	Visser Phil	
Ritchie Megan	Vucic Steve	
Rowe David	Vuong Tony	
Russo Robert	Wagh Atul	
Sacks Raymond	Waite Louise	
Santangelo Nicole	wakadevidyesh	
Sen Shaundeeep	Walker Peter	
Sengupta Catherine	Wechsler David	
SHAH ASIM	Wijewardene Ayanthi	
Shaheen Nargis	Wong Muh Geot	
Sher Doron	Wong Veronica	
Shetty Kavitha	Wong Doo Nicole	
Sidler Nicholas	Xiang Hao	
Sindone Andrew	Yahyavi Payam	
Sivasubramaniam Rahuram	YANG JESSICA	
Smith Amanda	Yeoh Thomas	
Spalding Natasha	Yeong Clarence	
Spencer Matthew		

Meeting opened by W. Cheung

Welcome to country.

R. Cross

Message from TA- TA informed me via email that she will not be present at the meeting but is happy to meet with clinicians to discuss issues and solutions.

Winston Cheung

Lewis, as the chair I've handed over the control to you.

I feel strongly that if you allow one person to speak, then you should allow everybody to speak but I'll leave that call to you. I don't think it's reasonable that you allow one or 2 people to speak and not others.

L. Chan

Yes

W. Cheung

So, I think, if you allow one person to speak, you need to allow everyone to speak.

I think the motion of votes against several people, and those 2 people should have the right to reply.

But I will hand over to you. I'll let you decide on who gets to speak.

L. Chan

Okay, okay. So, I think, procedurally, we had not added a meeting to discuss some of the comments that were put through on the email check group over the last week.

So, I think it would be again inappropriate to have long discussion on that.

We've already had the discussion last week already. We have excellent engagement with discussing the issues at hand.

So, no matter what the option of the motions tonight, that we need to have ongoing discussion and robust discussion moving forward. And I think Matthew, and many other colleagues have put fairly detailed thoughts on it, and I would encourage all MSC Members to be involved in ongoing discussion. The motions and the purpose of this meeting is to vote on 3 proposed motions. I think, if Matthew okay about this, then I think we should not have an extended discussion at this meeting. I'm going to go on mute for one moment, just to double check the roll call. If people are happy to stay on, and then I think, Winston, according to that agenda, you did have the opportunity to reply to the motion, so again, can I ask you to be brief and have a have a short reply and in the meantime, we're going to double check our room.

M. Rickard

Hello, Lewis! I'm still confused whether you're allowing me to speak or not.

L.Chan

No sorry, we have not had the structure nor the forum to have a discussion because it has been suggested that should be the subject of another meeting, because we need to work together as a group, and there are some very, very good suggestions about moving forward. There are 100 to 200 people who are online, and I think we cannot allow a prolonged discussion. As Winston said, there will be many other colleagues who would want to join discussion. We should leave that for another day. Sorry, Matt, but I think procedurally, that's how we should be done. From the rollcall purpose, Rosalba is going to call out a number of people who are logged on, not under the name.

(approx. 10 min of chat determining who unidentified mobile numbers and iPhones were occurred at this stage- nothing of relevance to the meeting)

F. Davidson

A short comment. I wondered if we could have a definition of what no confidence means.

L. Chan

I think it might be a very long discussion.

F. Davidson

That's fine. Thank you.

L.Chan

So, what I'm going to announce is that we are now closing our registration. So last call. If you have not added your name on to the chat group.

R. Cross

Lewis, there's a question whether administrative people are allowed to vote.

L. Chan

I think the convention has generally been that, certainly, from what I can remember, I think the previous chairs can sort of have an opinion to this, but from memory generally administrative, well, our medical administrators would normally not be voting as per by the bylaws. Medical

administrators are appointed as medical practitioners, and so they are a member of the MSC. Its only convention not written by the rule.

(Several minutes of discussion re people who did not receive the voting link and the resending of the link).

L. Chan

So, I really like to thank Cameron, John and Rosalba who have been working very hard and making sure that people are properly registered and to remind people to announce their presence in the chat to be included in the vote.

(Ten minutes of talking about ensuring people are registered to vote).

L.Chan

Thank you, everyone, for your patience with getting towards finishing, reconstructing our list. Just please be aware that I will announce when the links to vote will be sent out. But at the moment we're just finishing the list to be sent over to the Provider.

Okay. We've now closed the registration spreadsheet. So, we will send that across to the voting provider. And I'll let people know when the voting things are set up. Okay, just to confirm that we have sent this, the file now over to our voting provider. So, we have a few minutes, Winston, you have that opportunity to speak if you would wish to do so, because of the right to reply.

W. Cheung

Okay, thank you. Can you hear me?

Several members

Yes, we can.

W. Cheung

I start my right of reply to the motion by reading the article that was published in the Daily Telegraph this morning. It mirrors some of my concerns, and why we are here today, and it is a nice intro into what I have to say in my right of reply. I was sent the draft of this article yesterday, because a journalist, told me that I had the right to comment on the article, because it contained my name, but this article was not written by me from my conversation with the journalist it was obvious that she had been working on the story for a long time, and her sources of information were not from Concord Hospital. The release of this article in the Daily Telegraph today appeared to be coordinated with the release of another article in the Australian Financial Review, The Guardian and the ABC. This

demonstrates that there appears to be a coordinated approach to highlight public interest in healthcare, and these articles are likely to be precursors for others to come.

The article reads as follows, it's titled *Secret Ballot to Consider Future Sydney Local Health district, CEO Doctor Teresa Anderson*.

An alleged culture of bullying intimidation, silence and under reporting of adverse medical events at Sydney Local health district has led to a shock proposed vote of no confidence in its chief executive. Staff are understood to be rallying against the culture of fear and oppression that has stopped them from speaking up about what is going on inside hospitals. Complaints about the manipulation of waiting lists, being discouraged from reporting adverse events for patients and reprisals for people who do speak up have reached boiling point. In an unprecedented move, a secret ballot of all medical staff Council from the hospital will be held on Thursday night to consider the future of CEO, Dr. Teresa Anderson who oversees 5 hospitals. The vote of no confidence was proposed in a Medical Staff Council meeting last week, called by the Staff Council Chair. But it is understood, a proposed counter vote of no confidence against Professor Cheung, an intensive care specialist, was also proposed. The latest New South Wales government people matters survey for health revealed 17% of staff across the health system say they have been bullied in the past year and 23% of staff say they have witnessed bullying, 18 % reported being aware of the alleged misconduct and behaviour that is unethical or illegal in their organization, many had experienced threats or physical harm, 39% said they were confident in their organization that the organization would act on survey results. Just 37%, said senior managers listen to employees; A fall of 2%. It is understood staff want a parliamentary inquiry into the bullying and harassment they claim has gone on in New South Wales Health. Doctors say they have been stopped from revealing horrific stories affecting patient care. It stressed it is not the staff at fault, rather it is the underinvestment and staff departures, processes, quality, training and research. Staff fearful of speaking publicly, have said that the public would be extremely concerned if they knew what was going on with patient care. In some cases, they are also claims of favouritism for staff and even departments that are helpful to administrators, and the targeting of those who are not. Medical, nursing and Allied health members say their concerns about gross administration have been brushed off and attributed to covid conditions. But Staff say the problems began before Covid. Medical, nursing and Allied Health Staff are gagged from speaking publicly and are faced with the sack if they have been found to do so. The spokesman for the SLHD, said they take seriously the well-being of all its staff and acknowledges and greatly appreciates the critical work of our staff do, and the difference they make every day. Staff who raised concerns or complaints are supported to pursue these matters through their manager or more senior staff member using appropriate New South Wales health policies, the spokesman said.

I'll start my main reply. Last year before I decided to take on the role of MSC Chair, I knew that I would have a massive task ahead of me. We were a divided community. Smashed by covid and worn down by years of unjust and incompetent management practices, practices that were overseen by the Chief executive of the Sydney Local Health District. Management practices that pitch its departments and colleagues against each other in a fight for scraps of limited resources. But I knew that this could be fixed. All we needed to do was to unite. But the events of last Thursday were brutal, but I did not see a divided Concord. I saw a united Concord last Thursday.

Many of us at last Thursday's meeting were adamant, that there needed to be change, and there were many of us who are adamant that change would not be beneficial, and change would actually cause harm. All of us had very strong but differing views, but we were all actually united in the most important issues that actually mattered at our hospital; We were united in agreement that there was a serious problem with intimidation, bullying, and harassment. We were united in agreement that we

had colleagues that had been terribly mistreated. We were united in agreement that justice had to occur. We were united in agreement that the performance of the chief executive and management at Concord has been extremely poor. We were united in agreement that the chief executive on many occasions did not listen to our concerns and did not address our concerns in a fair and reasonable manner. We were united in agreement that some departments have been treated better than others. We knew that we needed to have more open discussions about problems. But most of all we were united in agreement that we all loved Concord Hospital, and that we were fully committed to this hospital, and we were united in agreement that our problems had to be fixed. All that I have been doing in the last year or so was to raise awareness of the issues at Concord, and to try to fix them. But last week there was a motion of no confidence moved against me. Now let me make this very clear, this vote against me was not a vote of no confidence; it was an act to censure and silence a person who revealed the disgraceful management practices at this hospital, under the watch of the Chief Executive. It was an act to silence. It was an act to intimidate. It was a clear message that if you speak up, or if we do not like what you have to say, we will use process against you just like they have used process against many of you previously. Now had I not being elected in the first place, we would not have had that discussion last week, and we would not have heard the stories that we were told, and we would not be here today. There's a simple but fundamental flaw in the way important decisions are made at this hospital at all levels. That fundamental flaw is the failure to listen. The failure to gather information and the failure to ascertain the facts, the failure to ascertain the facts before making an important decision. So as to the facts, you have to do your homework, and you have to listen. So, I sent an email and email that was perfectly lawful and followed process. I wanted a discussion. I wanted to hear the stories, and I wanted you to hear the stories I wanted to gather information, and from that I wanted to make an informed decision. And that's exactly what I did, I listened. That is what I have been doing for months, listening. Listening to not just those I agree with but listening to those who I disagree with because I wanted to ascertain the facts for making a very important decision, and that decision was whether or not to go ahead with the vote of no confidence in the chief executive of the LHD. You see, I wasn't going to go ahead with the vote. I wanted to hear from more people. And I wanted to ascertain more facts and I was happy to keep this conversation going as long as we need it to, for weeks, for months. But others acted instead. They had a preformed opinion. They had already ascertained the facts, and they did not want to hear any more facts. They had not heard from Belinda. They had not heard from Lloyd, and they did not want to hear from the nurses. They kicked the nurses out of last week's meeting.

L. Chan

Thank you, Winston.

W. Cheung

They just decided to move a vote of no confidence against me, and they did this because they were unhappy with process. If I put my proposal in the agenda, people still would have been outraged. It doesn't matter how I presented this proposal. People still would have been outraged, so they moved the motion. In the first few minutes of the meeting without significant debate, a motion to censure someone who would actually follow process, someone who's just trying to ascertain the facts if they do not support a motion against the Chief Executive, a person who has done immense damage to our hospital they do not support. A motion against the person who has damaged the departments at this hospital, who has fostered a cultural fear, intimidation, bullying, harassment, and silence what

happened last Thursday to me is a clear example of what I've been trying to stand up for in the last year. The use of intimidation, the use of process, the use of process to spread...

L. Chan

Thank you, Winston. I need to interrupt, just to let everyone know at the SMS are being sent. Winston...

W. Cheung

Lewis, I was not given a timeframe. I was not given any warning of a specific timeframe, so I will want to finish my speech.

L.Chan

Sorry. We said, I didn't say...

W. Cheung

I would like to finish my speech.

Now what we saw last Thursday was exactly what we see every time in the U.S.A after a mass shooting. We see the outpouring of grief. Everybody is shocked and horrified. We hear the condolences, we hear the sympathy, but just like in the US, nothing gets fixed. They have known about these problems at Concord for years, but no action. Only words to placate. Just another mass shooting at Concord Hospital, just some more unimportant victims. Do they support an independent external inquiry? Did anyone hear of them call for an inquiry? Did anyone hear a call for justice? No, because the chief executive told us at a previous meeting that there was no problem. There was not enough evidence to have investigation, But I expose the mass shootings at Concord, and they reprimand me for speaking out, for asking for transparency and to investigate the real reasons why these mass shootings at Concord occur. Now let me make it very clear so there's no illusion about what happened in our emergency department. The mass shootings in our emergency department were not an accident. I repeat, they were not an accident. They were an orchestrated plan to silence those who spoke out about the problems in the emergency department to punish the emergency department. The department was already broken, but they broke it even further just to prove a point that they should not be messed with, and they made life so intolerable...

L. Chan

Winston, you have gone on for 20 min, so I'm sorry I will need to stop.

W. Cheung

So intolerable that the senior staff left, so they could repopulate the emergency department with new staff, new staff who would be fearful for their futures. New staff, who would therefore stay silent. And then they targeted radiology, and they did exactly the same thing to that department. Making life so intolerable that people leave and repopulate with new people who you can control and who will stay silent. This was no accident. I made example of the emergency department, and radiology to demonstrate what happens when you speak up. They cause maximum damage to instill maximum fear, and they did it to the nurses.

L. Chan

Thank you, Winston. We will give you one more minute, and if you don't wrap up at that time, unfortunately, I will have to mute you. We are running an election at a moment. I want to let everyone know that the SMS have been set and we are voting on the first motion.

W. Cheung

Thank you. I will finish in one minute's time. Many of the old guard will retire soon. I won't be around for very long, but for those of you that have just started your career as a Concord, and you will be here for another 20 years, I see a bright future for you all, because tomorrow I see a fresh start. I see a hospital where everyone can tell their stories. I see a culture where everyone can speak openly and freely without fear of reprisals, without the use of intimidation to silence us. I see a future where there is no bullying and harassment, where we support our colleagues rather than fight them for resources. I see a hospital where we improve the working conditions for everyone, but, most importantly, the most vulnerable members of our Concord family create an environment that respects and nurtures staff so that they want to stay. We create this environment so that we have a workforce that is competent, happy, healthy, and sustainable. I see a hospital where we all act in the best interests of our patients, their families in the community. I see a hospital where we protect the health and well-being of staff, I see a hospital where everyone acts with integrity, and the highest ethical moral standards. I see a medical staff council that is allowed to engage in industrial issues. They can speak up to protect our nursing and Allied health colleagues. I see a hospital where everyone's not perfect, in a hospital where we every so often will make bad decisions. But I see a hospital that forgives people for their failings and gives people a chance to redeem themselves.

L. Chan

I'm sorry, but the minute is up. Thank you.

W. Cheung

A hospital that leaves no one in our family behind, and casts no one in our family site.

L. Chan

Winston. Thank you so much.

Okay. So, I'm just one thing to give an update. To the first motion that's being voted. At the moment we note that only 117 colleagues have voted. So, I'm going to keep the voting open for another minute or so. If you have not voted for motion one, please do so in the next minute.

Voting one is to release the breakdown of the subsequent votes of no confidence to all members. In other words, we will tell how many were for and how many were against on the 2 subsequent motions. So, it's the transparency of announcing that breakup. We will move on to motion 2 and motion 3. But it's just whether colleagues would like to see the exact break down.

Okay. We have now got the results of the first motion. And it's 88% for the motion. In other words, the breakup of the 2 subsequent motions of no confidence will be released to all Medical Staff Council member.

I will now ask the voting provider to open motion 2, which is to be clear, the vote of no confidence in the Chief Executive of Sydney local health districts. This is the second motion that will be opened up, and we're open on the voting link that you have open on your devices. Use the same voting link that you had just voted on the first motion. It's the same SMS that you received previously.

(Five minutes of discussion involving people not receiving link and how to open link).

L. Chan

If anyone's having an issue, seeing subsequent motions just click on the original link you received again, and that'll reopen the link, and you'll make sure to have the current version.

So, we'll keep the voting open for about 2 more minutes.

This is an external voting provider, so you should check your email because that is the other way of notified. We are relying predominantly on SMS, but also on email so check email lists. If anyone hasn't received it at all.

Just an update that they are still more registered voters pending for motion 2, so we will now open motion. 3.

As we are wrapping up the voting, I just like to let everyone know that there's about 25 members who had attended, and also preregistered, who had not yet voted. So, a couple more minutes, and then I will close the voting.

Okay. Just so that everyone knows that I'm close the voting, and I will now advance the results of the motion 2, and motion 3.

For motion 2 which is the vote of no confidence in the chief executive.

They were 109 votes for the motion and 73 votes against the motion, so the motion is carried with a majority of 60%.

Now for those who had not had the opportunity to vote, I think this would not have made a difference on the majority decision. So, motion to the vote of no confidence is passed.

The results of the motion 3, which is a vote of no confidence in the chair of the MSC.

They were 37 votes for the motion and 151 votes against. So, the breakup is 80% against that motion. So, the motion is not carried.

I will hand that back to Winston again. But from the those of us here in the control room I would really like to thank Cameron, Rosalba, and John for helping me, and I'd like to thank Vera voting who have done a fantastic job helping us maintain an independent secret ballot. Thank you. I'll hand it over to you.

W. Cheung

Thank you, Lewis. And once again a big thank you to Rosalba, John, Lewis and Cameron for doing this vote. I want to thank 2 very courageous people who spoke up last week. I want to thank Belinda and thank Lloyd. I think their words really resonated with us last week, and what I hope that they have achieved is that we hear from more people over the next days, weeks and months.

There were a lot of things I didn't talk about in my speech, but there were 2 particular people that I wanted to mention in my speech, which I didn't get a chance to. The first is, an emergency physician, who I will not name. But this emergency physician lost his job in the emergency department, and he has been unable to get another job in Sydney. He's been put on the blacklist, which is, in other words, is a service check register. If your name is on this list, you cannot get a job in New South Wales, and the use of this list was highlighted in the recent parliamentary inquiry, and the Rural Health Services. This is a blight on our system, and as a blight on our colleagues, and it's absolutely unacceptable. Now this ED Physician lives in Sydney, but he has to fly to other places to work, so at least he has a job. The second person I want to mention is Graham Dunn. You all know him as one of the nicest guys you could ever meet from radiology. Now what they did to him was absolutely disgraceful. They made an example of him, just like all the others, and he is no longer working here. Now this behaviour has to stop, and it must stop and it's going to stop on my watch. There will be no more intimidation. There'll be no more bullying, and there'll be no more harassment of our staff. I see a new beginning. Today I see a new beginning and I don't think we should be number 2. We will be number one, and I want everyone to work together towards that goal. We need to start looking after each other. We just help each other, and we must not cast nobody aside. This battle has been brutal, but today we unite for our future. Now some of us may have made mistakes. We might have made bad decisions. We forgive, we reflect, and we look at ourselves. If we work towards the future, the future of Concord Hospital, and I see a really bright future ahead. What I want is all the new guys here to become engaged in the MSC because you are our future. Us old guys will be gone soon, but we need fresh blood to come and invigorate this place and raise this hospital to where it deserves. We should be number one. Our patients deserve it, their families deserve it. Our community deserves it. I'm going to finish by reading 2 paragraphs from the letter that I sent to you all in February of 2022. I think these 2 paragraphs summarize exactly how I feel. So please, Lewis, don't cut me off. And if anyone wants to take off and get to dinner that you can do so but I'm just going to read these 2 excerpts from my letter. The first part is about public service.

Times are tough for public service. But when I think about what defines us as public servants, and what we, as public servants, stand for, I look no further to the events that unfolded in the U.S.A in 2020. These were defining moments for public service. Protests had erupted across the country following the killing of a man by police officers. There was an election, followed by an attack on the capital. It was the actions of the public servants which prevented the country from being torn apart. It was the public servants who kept the community safe. It was the public servants who stood up to the abuse of authority. A prominent public servant noted that the protest defined by tens of thousands of people of conscience who are insisting that we live up to our values our values as people and our values as a nation, he went on to contrast the American ethos with another ideology the pervasive during world war 2 that was destroying us was to divide and conquer. The former defence secretaries wrote a letter that stated, each of us swore an oath to support and defend the Constitution. We did not swear it to an individual, and we did not swear it to a party. The events in the U.S.A hold important lessons for us in Australia. We too, are public servants. We are here to serve the people, and we serve the community, we must always act in the best interests of the people. We have leaders, but they too are public servants. They are here to serve the people and the community. Our leaders are accountable to the people for the regular actions and inactions. They too must always act in the best interest of the people. I finish off with the final paragraph of my letter from February last year.

The suburb of Concord was named after the town of Concord in Massachusetts. 1775 was one of the first military engagements in the American Revolutionary War. It heralded the outbreak of war between the British Empire and its colonies in America. The battle was in response to changes made

to the colonial Government by the British Parliament. Changes which the Colonials disagreed with and formed a patriot provisional government and local militia, prepared for hostilities. The British Government declared the State to be in rebellion. It was they who attacked, fired the first shot, fired by the patriots was known as the shots heard around the world. The ensuing battles led to the Declaration of Independence. Now our suburb of Concord, was named after its American counterpart, and the spirit of trying to encourage harmonious settlement between soldiers and settlers in Sydney. The word Concord is French translates to harmony, agreement, peace, and unity in English. Our hospital serves in Concord with our community. We serve the community, we serve the people, we act in their best interests. Our hospital should be in Concord with our staff. The community expects our healthcare workforce to be competent to be happy and expect it to be sustainable. Why? Because the community expects us to look after them. We have problems at Concord, the culmination of years of underinvestment and lack of empathy but they can be overcome. We must stop saying it's too hard. We must stop saying it can't be done. Our patients expect us to be their voice and to act on their behalf. It is not too hard; it can be done. We can make it happen. We must act. The soft approach is a mere excuse for inaction, and the time for inaction has passed. It is time to reform our great hospital. It is time to rebuild our great hospital. It is time to change, and we all must be that change. We must decide our destiny. We must not let others do this for us. I've articulated my vision for Concord, and this is what I said in February last year. So, I thank you all for attending the MSC meeting. My plans now are to arrange a meeting, either next week or the week after, with all of you and with the Sydney Local Health District Board. But I want all the nurses, all the allied health staff, and all the consumers of the area to be involved with this meeting. And I want the Sydney Local Health District Board to hear about the problems that we have suffered over the last decade. And from that meeting we will heal. We will continue to hear the stories, and from that meeting we will rebuild.

So, I thank you all I look forward to meeting you over the next few days, and I'll be in touch again.

Thank you.

Meeting closed 1825