CURRICULUM VITAE

ERIC PETER GUAZZO

MBBS, MD, FRACS, FRCS

January 2005

NAME:	ERIC PETER GUAZZO
DATE OF BIRTH:	
PLACE OF BIRTH:	Ingham, Queensland, Australia
NATIONALITY:	Australian
ADDRESS:	Professional: North Ward Clinic 65 Eyre Street North Ward Townsville Qld 4810 Phone: (07) Fax: (07) Email: Home: t Townsville Qld 4810 Phone / Fax: (07)
FAMILY:	Partner:

Children:

QUALIFICATIONS:

- MBBS, 1982, University of Queensland, Brisbane, Australia.
- Fellowship Royal Australasian College of Surgeons (Neurosurgery)
 - Part I examination March 1985
 - Part II examination May 1990
- Fellowship Royal College of Surgeons of England, March 1992
- Medical Doctorate, 2001, University of Queensland

AWARDS / RESEARCH GRANTS:

- Gordon Taylor Medai (Part I FRACS, March 1985)
- RACS Foundation Travelling Fellowship 1992
- MAIC RACS Trauma Fellowship 2001
- Rowan Nicks Fellowship / Supervision 2002 (RACS)
- Ray Phippard Fellow Award June 2003
 Lyons Medical Research Foundation

CURRENT APPOINTMENTS:

- <u>Senior Visiting Medical Officer in Neurosurgery:</u>
 (October 1994 current)
 North Queensland Regional Neuroscience Unit, The Townsville Hospital.
- Additional Visiting Appointments to:
 Mount Isa Base Hospital
 Cairns Base Hospital
 Mater Misericordiae Hospital, Townsville
- Academic Appointments:
 Associate Professor University of Queensland
 School of Medicine (May 1999 current) and
 James Cook University Medical School (May 2001 current)

MEMBERSHIP OF PROFESSIONAL BODIES:

- Australian Medical Association (1983 current)
- Neurosurgical Society of Australasia (1989 current)
- British Medical Association (1991 1994)
- Society of British Neurological Surgeons (1992 current)
- International Society of Paediatric Neurosurgeons (1992 2000)
- Member of St Catharine's College, Cambridge (1992 1994)
- Spine Society of Australia (1997 current)
- RACS Medico-Legal Section (May 2004 current)

POST GRADUATE APPOINTMENTS / COMMITTES:

- Executive of Neurosurgical Society of Australasia. September 1996 current. Treasurer of Neurosurgical Society of Australasia 1999 2002. Secretary of Neurosurgical Society of Australasia 2002 2004. Vice-President of Neurosurgical Society of Australasia 2004 current.
- Member of the Trauma Committee Neurosurgical Society of Australasia. September 1996 – Current.
- Chairman, Queensland Association of Neurosurgeons. 1996.
- Chairman, Medical Credentials and Advisory Committee, Mater Misericordiae Private Hospital, Townsville. 1997 2002.
- Member, Board of Management Mater Misericordiae Private Hospital, Townsville. 1998-2002.
- Member of Neurology / Neurosurgical Assessment Tribunal.
 WorkCover Queensland. 1 July 1998 current.
- Supervisor of Neurosurgical Training, The Townsville Hospital.
 August 2002 current.
- Member of Board of Neurosurgery RACS. July 2002 current.
- Member of Interim Board of Oral and Maxillo facial surgery RACS.
 July 2002 December 2004.
- Member Northern Zonal Clinical Advisory Group. January 2003 current.
- Member Trauma Review Committee, Townsville Hospital. January 2003 – current.
- Panel Member of Medical Services Advisory Committee of Commonwealth Department for Health and Aged Care. 2004 – current.

POST GRADUATE EXPERIENCE:

1983 Internship:

Townsville General Hospital, Queensland, Australia

Rotations: Casualty, Anaesthetics, Medicine, Surgery, Orthopaedics.

1984 Junior House Officer:

Townsville General Hospital

Rotations: Paediatrics, Surgery, Casualty, Anaesthetics, Obstetrics and

Gynaecology, Orthopaedics.

1985 Surgical Registrar:

Townsville General Hospital

Rotations: Neurosurgery, ENT, Plastics, Faciomaxillary Surgery.

1986 General Surgical Registrar:

Mater Hospital, Brisbane, Queensland, Australia.

Accredited advanced trainee in General Surgery.

Rotations: Urology, Plastics, Vascular, General Surgery.

1987-1988 Advanced Trainee in Neurosurgery:

Accredited post, Princess Alexandra Hospital, Brisbane, Australia.

Two year appointment in a major Neurosurgery Department, dealing in all aspects of

general neurosurgery and spinal surgery.

1989-1991 Advanced Trainee in Neurosurgery:

Neurosurgery Registrar, Austin Hospital, Heidelberg, Victoria.

12 month appointment in General Neurosurgery with special interest of epilepsy

surgery (Australian Centre for Epilepsy Surgery).

Royal Children's Hospital, Melbourne, Victoria, Australia.

12 month appointment (major Australian Paediatric Neurosurgery Department).

1991-1994 <u>Senior Research Associate and Honorary Consultant Neurosurgeon:</u>

(July 1991 – August 1994)

University Department of Neurosurgery, University of Cambridge, Addenbrooke's

Hospital, Cambridge, UK.

1992-1994 <u>Visiting Scholar:</u>

(January 1992 - August 1994)

University of Cambridge, Department of Clinical Veterinary Medicine, UK.

Visiting Lecturer:

(January 1992 - August 1994)

Luton College of Higher Education Nursing Tutor, UK.

1995-1999 <u>Clinical Senior Lecturer in Surgery:</u>

University of Queensland, Brisbane, Queensland, Australia

and James Cook University, Townsville, Queensland, Australia.

PUBLICATIONS:

- 1. Guazzo, EP, Hicks BL, Keary PJ (1986). Hypothenar Hammer Syndrome. MJA August 4/18, Vol 145, No3/4: 174-175.
- 2. Guazzo, EP (1988). Neurosurgical Operating Theatre Manual. Princess Alexandra Hospital.
- 3. Redmond M, Guazzo, EP (1989). Head Injuries in Children. Textbook of Paediatric Practice: Chapter 25. Editor: Thong YN. Butterworths.
- 4. Guazzo EP, Atkinson RL, Weidmann MJ, Effeney DJ (1989). Management of Solitary Melanoma Metastases of the Brain. Aust NZ J Surg. 59:321-324.
- 5. Guazzo EP (1993). Recent Advances in Paediatric Neurosurgery. Arch Dis Childhood. 69:335-338.
- 6. Guazzo EP (1993). Hydrocephalus Current Management and Future Treatment. Link; No 145 April / May.
- 7. Guazzo EP (1993). Hydrocephalus Update. Hydrocephalus Network News. Spring.
- 8. Czosnyka M, Guazzo EP, Iyer V, Kirkpatrick PJ, Smielewski P, Whitehouse H, Pickard JD (1994). Testing of cerebral autoregulation in head injury by waveform analysis of blood flow velocity and cerebral perfusion pressure. Acta Neurodhir. (Suppl) 60: 468-471.
- 9. Guazzo EP (1994). Spontaneous migration of air gun pellet in the brain. J Neurol Neurosurg Psych. 404.
- 10. Guazzo EP, Xuereb JW (1994). Spontaneous thrombosis of an arteriovenous malformation. J Neurol Neurosurg Psych. 57: 1410-1412.
- 11. Guazzo EP, Franklin RJM (1995). A method for the continuous infusion of trophic factors into the rat subarachnoid space. J Neurol Neurosurg Psych, Vol 58, No. 3:385.
- 12. Guazzo EP, Franklin RJM (1995). The effects of continuous infusion of nerve growth factor in remyelination in a rat model of spinal cord demyelination. Preceding RACS ASC 1995.
- 13. Whitfield PC, Guazzo EP (1995). Intracranial pressure reduction following decompressive craniectomy. Stroke. 26(6). 1125-1126.
- 14. Whitfield PC, Guazzo EP, Pickard JD (1995). Safe removal of ventricular catheters using intra-luminal plexus coagulation. J Neurosurg. 83:1101-1102.
- 15. Guazzo EP, Franklin RJM, Blakemore WF (1995). A rat subarachnoid continuous infusion device. J Clin Neuroscience. 2 (4): 339-344.
- 16. Guazzo EP, Kirkpatrick P, Goodyer IM, Shiers HM, Herbert J (1996). Cortical, Dehydroepianosterone (DHEA) and DHEA sulphate in the cerebrospinal fluid of man: Relation to blood levels and the effects of age. J Clin Endo Met. 81 (11): 3951-3960.
- 17. Von Rosen F, Guazzo EP (1996). Increased intracranial pressure. Neurological disorders, causes and treatment. Academic Press, London. 521-530.
- 18. Guazzo EP, Bähr M (1996). Hydrocephalus Neurological disorders, courses and treatment. Academic Press London. 563-568.

- 19. Czosnyka M, Guazzo EP, Whitehouse H, Smielewski P, Czosnyka Z, Kirkpatrick P, Piechnik S, Pickard J (1996). Significance of intracranial pressure waveform analysis after head injury. Acta Neurochir. 138:531-542.
- 20. Guazzo EP (1997). A review of the use of anticonvulsants in neurosurgery. ANZ J Surg. 67 Suppl. A57.
- 21. Guazzo EP, Pickard JD (1998). *Hydrocephalus in*. In Atwell Paediatric Surgery: Chapter 28, 260-269 Arnold.
- 22. Gurgo RD, Guazzo EP (1998). Neurosurgical management of metastatic spinal neoplasia; A Review. Aust NZ J Surg 68 (Supp) A105.
- 23. Gurgo RD, Turkiewicz DB, Guazzo EP, Midyett FA, Maguire EJ (2000). A cerebrospinal Fluid Collection presenting as an abdominal mass following lumbar vertebrectomy for trauma. Aust NZ J Surg 70. 140-141.
- 24. Shelley M, Henning M, Bidstrup B, Guazzo EP (2000). The Effectiveness of a Psychological Intervention, gender and attribution psychological adjustment and health for surgical / medical patients. International Journal of Behavioural Medicine 7 (1) 56.
- 25. Shelly M, Henning M, Bidstrup B, Guazzo E, Pakenban K (2000). The effectiveness of a psychological intervention, gender and attribution Immune meaning an Inverse Measure. Integrating Psychology and Medicine. Auckland 54.
- 26. Olson S, Rossato R, Guazzo E (2002). Acute Subdural Haematomas and Enoxaprin. Journal of Clinical Neuroscience 9 (3) 256-259.
- 27. Olson S, Rossato R, Guazzo E (2002) Spinal Schistosomasis. Journal of Clinical Neuroscience 9 (3) 317-320.
- 28. Bryant M, McEniery J, Guazzo E, Walker D, Campbell R, Lister B, Sargent P, Withers T, Baker J, Rossato R, Anderson D and Tomlinson F (2003). Preliminary Study of Shunt Related Death in Paediatric Patients in Queensland. Journal of Clinical Neuroscience 11 (6) 614-615.
- 29. Guazzo EP (2005). A technique for producing demyelination in the rat optic nerves. Journal of Clinical Neuroscience 12 (1) 54-58.

R. RENO G. ROSSATO O.A.M. K.H.S.

M.B., B.S., F.R.C.S., F.R.A.C.S., F.A.C.S. NEUROSURGEON MEDICAL DIRECTOR A.C.N. 010 437 279

JCU HOUSE, 7/57 MITCHELL STREET, NORTH WARD, TOWNSVILLE, Q. 4810 PHONE: [07] 47716243 FAX: [07] 47712014 rossato@ozemail.com.au

CALVARY HOSPITAL CAIRNS, Q.4870 PHONE (07) 40525111

12 January 2000

Mr EP Guazzo 65 Eyre St NORTH WARD 4810

Dear Eric

re: FRAMELESS SYSTEMS

Unless you have some cogent and powerful reasons against this decision I have on balance decided to opt for the Radionics system. I have used this without any company representative and it is indeed very simple, reliable and very straightforward.

I am happy to accept Michael Bryant's reassurances regarding Radionics' place in the marketplace and I find the system itself to be smaller, neater and less obtrusive.

We are essentially getting a system for the same as the Stealth and I have confirmed with Picker that nobody can get MRI data for frameless stereotaxy from our machine but that is indeed a factor of our MRI.

I also note that Taylor Bryant will give us a headlight that we have trialled at a very substantial discount and that all warranties offered by Sofamor Danek have been matched by Radionics.

If you have forceful objection to this could you let me know.

With good wishes,

R.G. ROSSATO

Clinical Director Neurosciences

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SPECIALISTMEDICALCENTRE, 207 LAKE STREET, CAIRNS, Q. 4870

Letters\FSL.181

27 January 2000

Mr R G Rossato 7/57 Mitchell Street NORTH WARD QLD 4810

Dear Reno

RE: FRAMELESS SYSTEMS

This is in response to your letter of 12 January 2000 in which your decision to opt for the Radionics system is stated. Your reasons being that it is "simple, reliable and straight forward" and also I note you have found it "smaller, neater and less obtrusive". I am sure I would have taken the opportunity to discuss this with you before my response arrives in letter form.

You will recall that the trialing of frameless stereotactic systems at the Townsville General Hospital was arranged by myself. We trialed the Radionics optical tracking system and the Stealth system from Sofamor Danek. As you are aware, the systems trialed are "demonstrator" models of first generation and hence they are being offered at a significant discount.

My preference is for the Stealth, provided by Sofamor Danek. The reasons are as follows.

The Radionics and Stealth systems I think have equal cranial packages. I find no difference in their "size, neatness or obtrusiveness". They are equally as easy to use and indeed in wider enquiry amongst nursing staff at other units, most find the Sofamor Danek easier to operate and maintain. Sofamor Danek have a NQ based service engineer. The Stealth system has a significant advantage in its spinal package and it has the major advantage in its potential to be upgraded for use with fluoronavigation.

My understanding, though I have not been included in these discussions, is that the price is similar. I note that you had indicated Radionics are offering an operating headlight at reduced price as part of the package. I recognise the current headlight is sub-standard and desperately needs replacing.

The Stealth system is the market leader world wide. I am only aware of one Radionics machine functioning in Queensland purchased 3-4 years ago by the Holy Spirit Hospital in Brisbane Since then, from my understanding, all machines purchased or currently intending to be purchased are of the Stealth type.

I am not sure about your statement that our current MRI is not compatible with either frameless system. From my inquiry, this Stealth system is compatible with our current Picker MRI by utilising interface technology which would be available within two weeks. I have not been able to get such a guarantee from Radionics.

I therefore ask you to consider these points before a final decision is made.

Yours sinogrely

ERIC P. GUAZZO

Copy: Dr C Kennedy, District Manager, Townsville District Health Service.



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SPECIALISTMEDICALCENTRE, 207 LAKE STREET, CAIRNS, Q. 4870

Letters\RR64.00

6 April 2000

Mr Reno Rossato Neurosurgeon 57 Mitchell Street NORTH WARD QLD 4810

Dear Reno

I write regarding two issues which have important significance in the provision of neurosurgery at the Townsville General Hospital.

1. Frameless Stereotactic System

You will recall I wrote, and discussed in person with you, my thoughts on this subject. I am uncertain where this issue currently stands, as you have not discussed this matter further with me.

I strongly encouraged the Townsville General Hospital to invest in this technology. However, as one of the two who will be using any equipment purchased, I expect and hope to be involved in any discussions regarding this decision before it is finalised.

As a major "stakeholder", I think this is the correct current bureaucratic jargon, I would expect to be involved in any major decision pertaining to neurosurgery, particularly the purchase of expensive equipment which I will be using on an equal and regular basis at the Townsville General Hospital.

2. Neurosurgical Manpower

You will have, like I, recently received a survey from the Australian Medical Workforce Advisory Committee (AMWAC) regarding neurosurgical manpower, addressing the issue of current and projected needs in our specialty. This topic is made more relevant by our recent discussions with a recent graduate from the Australasian Training Program, who expressed an interest in establishing a practice in Townsville in the next 2-3 years. If I understand our subsequent discussion correctly, you have informed this individual that there is no prospect of a VMO position within this time frame here in Townsville. I am not certain if this is a personal position of yours or one held by the zonal/district health service administrators.

It is my opinion that there is a strong case and need to attract such an individual to the North.

During my five years in Townsville the volume of neurosurgery performed, measured by surgical procedures, outpatient attendances or any other measures, has more than doubled, yet there remains a significant unmet demand before we can justifiably say that we are providing equal access to public and private patients at a level that is achieved in capital city centres.

- On current manpower recommendations, the northern zone now requires three Neurosurgeons (current recommendation one Neurosurgeon per 175,000 population).
- Our on-call commitments are, as you know, becoming more demanding. A one in two rota means a considerable amount of one in one to cover leave and other entitlements. We do not have an experienced Registrar and hence the on-call commitment is significantly more onerous than would be experienced in other units around the country who have this luxury. We provide a much higher level of commitment and involvement, particularly for after hours operating.
- There are other commitments on our time, which will increase. They include the administrative and educational requirements required as the regional and tertiary nature of medicine in Townsville expands. There is also the requirement to ensure that there will be a continuing service, as staff will eventually change over time.

We should discuss these matters further, particularly the second, with the hospital administrators. The person who did express an interest may now have looked elsewhere, but I am sure we can attract other recent graduates from the Australasian program as the lifestyle and practice of neurosurgery in North Queensland would be attractive to many.

I look forward to discussing these matters further with you and may I suggest that we arrange a meeting with Chris Kennedy, to whom I have sent a copy of this letter.

Yours sincerely

ERIC P. GUAZZO

Copy: Dr C Kennedy

MERIC P. GUAZZO M.B.,B.S.,F.R.C.S.,F.R.A.C.S. NEUROSURGEON

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Letters\CK64.00

6 April 2000

Dr Chris Kennedy District Manager Townsville District Health Services PO Box 671 TOWNSVILLE QLD 4810

Dear Chris

You will find enclosed a copy of a letter I have recently written to Reno, regarding two important issues, being the purchase of expensive frameless stereotactic equipment and secondly neurosurgical manpower in our tertiary referral unit.

I think the points I have made are relatively clear and I look forward to discussing them further with you and Reno.

Yours sincerely

ERIC P. GUAZZO

Enc: Copy of Letter to Mr R Rossato

MR.ERIC P. GUAZZO
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SPECIALISTMEDICALCENTRE, 207 LAKE STREET, CAIRNS, Q. 4870

Letters\CK66.00

6 June 2000

Dr Chris Kennedy District Manager Townsville District Health Services PO Box 671 TOWNSVILLE QLD 4810

Dear Chris

Re: 1) Purchase of Neurosurgical Equipment - Frameless Stereotactic System

(

2) Neurosurgical Manpower

You will recall I wrote to you on the 6th of April regarding these two important matters. I subsequently telephoned you in early May and you kindly returned my call. My understanding was that you were to arrange a meeting between yourself, Reno Rossato and myself to discuss these important issues. I understand that this meeting was to be in the near future and you indicated that you would arrange it before you went on leave.

The two issues to be discussed are very important. I had the opportunity to hear Mr Terry Meehan about tertiary services within the zone. He outlined the importance of manpower planning, particularly in what he described as "high risk" services. High risk, in that the services are dependent on one or two individuals for there continuation. I will not reiterate the points I made in the letter I copied to you of the 6th of April, but the issues remain extremely relevant and need addressing.

I look forward to hearing further from you about how these matters can be advanced by discussion.

Yours sincerely

ERIC P. GUAZZO

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WPDOC\LETTERS\KENN 31st July, 2000.

Dr. Chris Kennedy, District Manager, Townsville General Hospital, Eyre Street, NORTH WARD. Q. 4810.

Dear Chris,

I have taken the opportunity to write to you to confirm the decisions we made at a meeting on Monday the 26th June, 2000.

From my understanding, if the Townsville District Health Service decides to proceed with the purchase of frameless stereotaxic equipment, that this would be put to tender. My understanding is that I would be asked to contribute in this process by describing what I believe to be the necessary requirements for such equipment, and that I would be part of the final process at determining which particular equipment was purchased. This would include involvement in the development of a suitable business case if this was required.

The other important issue raised at this meeting was that of neurosurgical manpower. I felt the final outcome was rather vague. My understanding is that the Neurosurgery Business Manager would be asked to develop a business plan supporting the appointment of a further Neurosurgeon to the Northern Zone neurosurgery service based in Townsville.

I look forward to your confirmation of this, and to my participation at all stages in these processes.

Yours sincerely,

ERIC P. GUAZZO. cc Mr. Reno Rossato, 57 Mitchell Street, North Ward ERIC P. GUAZZO M.B.B.S.,F.R.C.S.,F.R.A.C.S. NEUROSURGEON

Associate Professor School of Medicine University of Queensland

6th December 2000

Dr. Andrew Johnson,
Executive Director of Medical Services,
Townsville General Hospital,
PO Box 670,
TOWNSVILLE QLD 4810.

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> eg:mp letters\stereo.joh

Dear Andrew,

Further to our discussions regarding frameless stereotaxy and other matters relating to neurosurgery at the Townsville General Hospital.

As we have discussed on two occasions, the frameless stereotaxy trial at the Townsville General Hospital was initiated by myself in November of 1999. Frameless stereotaxis should be available to patients receiving neurosurgery in North Queensland and this strong conviction of mine has not altered. I have written to and discussed this with Chris Kennedy the issues regarding the frameless stereotaxy. This matter came to a head when it seemed that a decision had been made regarding the purchase of equipment without any involvement by myself. At a meeting (26.6.00) which was attended by Chris Kennedy and Reno Rossato, I was given the undertaking that I would be involved in the subsequent decisions regarding this equipment. This seems not to be the case, and I refer you the Minutes of the Neurosurgery Business Unit of 13th October 2000. I was of course surprised to read this, and after some time I was able to get a copy of this business plan, and most surprising and alarming to me was to read that the business plan suggested that I had collaborated in the production of it. I have had no input in this. I was not asked to contribute.

The reasons why I should be involved are self evident. There are only two neurosurgeons, the whole process was initiated by myself because of my interest and previous experience in the use of this equipment, and this decision will have a major impact on my working life.

The most important reason for ne not wanting my name associated with the business plan is that it is to my reading very inaccurate.

In my opinion, this whole process has been inappropriately managed, and my exclusion from it most unprofessional. When I phoned the Business Unit Manager to ask how this occurred, I was disappointed to hear him say that it is 'known around the Townsville General Hospital that I don't like the Hospital'. My loyalty to the Hospital and public patients in the six years I have been employed there cannot be questioned. This loyalty can be measured by my involvement in the Hospital, particularly in trying to improve services, my commitment to treating public patients, both within Townsville and the zone in general. I am disappointed that I would be treated in such a professional manner and I would like to have it explained to me why this has occurred.

I am a strong believer that we require frameless stereotaxis to ensure that we continue to provide a high standard of care to our neurosurgical patients. How this is provided needs very careful unbiased assessment to ensure that the service is delivered in the most efficient and cost effective manner. However, having had my attention drawn to the Townsville Bulletin of 5th December 2000, it would seem the decision has been made and the article in the paper is not just for general consumption but to inform me as well.

Yours sincerely,

ERIC P. GUAZZO

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18th January 2001.

WPDOCJOHNSTON18.1.01.

Dr. Andrew Johnston, Executive Director of Medical Services, Townsville General Hospital, P.O. Box 670, TOWNSVILLE. Q. 4810.

Dear Andrew,

Further to my letter of the 8th December, 2000 regarding the issue of frameless sterotaxis, I have not yet received a reply from yourself.

You will recall there are 3 issues that I would like addressed. They include, how a business plan for the purchase of major neurosurgery equipment could be conducted without any involvement by myself? I have outlined the reasons why I should be involved in a letter to you. Secondly, how the business plan which was developed would have my name attached to it? You will recall in my letter I made the point that in my opinion this business document was flawed, and I did not wish my name attached to it. Lastly, and most importantly, I would like to know how a person I have never met, perhaps spoken to once or twice on the phone can form an opinion that I am not a supporter of the development of high level neurosurgery care within the Northern Zone, and in particular the Townsville General Hospital.

As a matter of professional courtesy I would like these issues answered satisfactorily.

Yours sincerely,

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eg:sc

July 2001

Dr Andrew Johnston Executive Director of Medical Services Townsville General Hospital PO Box 670 TOWNSVILLE QLD 4810

Dear Andrew

Further to our phone discussion of a week or so ago regarding a number of matters.

I understand from Rhonda Smith and emails she has received from Dr Sammy Thomas that he is attempting to arrange his visa which will allow him to come to Australia as a Visiting Fellow in Neurosurgery at the Townsville General Hospital. You will recall his funding is through the Rowan Nicks Scholarship from the Royal Australasian College of Surgeons. Rhonda has been kindly helping arrange his transfer and I understand that there is still accommodation available through the hospital when he does arrive.

The second issue we discussed was that of the frameless stereotaxis and my understanding from you is you were not aware whether a capital grant had been made for the equipment. I look forward to hearing further from you regarding this and particularly the status of the capital grant application and whether any decisions are being made regarding purchase. I reiterate the points I have made to you in discussion and via letters, I would like to be involved in the formulating of tender documents particularly regarding specifications and in the decision regarding need and purchase. You will recall that the trialing of this equipment at the Townsville General Hospital was an initiative of mine.

The last matter is in regard to Neurosurgery Workforce. I was surprised to hear from you that some study or investigation had been undertaken and a decision made that neurosurgery was well catered for in the northern region and the need for further manpower answered in the negative. I find it unusual that such an investigation or study would be undertaken and concluded without asking all stakeholders to be involved and comment on findings and recommendations. I draw your attention to the Australian Medical Workforce Advisory Council Report on this very matter and I enclose for your information a copy of the summary and recommendations.

The other point we discussed was the Neurosurgery oncall and what you aptly termed the human factor. Oncall is becoming increasingly more demanding and there have been periods where Reno and I have had prolonged periods of call. Recently for myself it involved at least four consecutive weekends and the intervening time between them. This is unreasonable by any contemporary standard and I would like to draw your attention to this, as I have in previous correspondence. I would like to indicate to you that I will not be available to do such prolonged periods of call in the future and a maximum period of time that I think is reasonable is two consecutive weeks. I would also like to confirm in letter to you that as of the 1st January, 2002, I do not think it is reasonable that the call arrangements that now exist continue.

I think that we should meet to discuss these matters at your earliest convenience.

Yours singerely

ERICP GUAZZO

NEUROSURGERY AND SPINAL SURGERY

ERIC P. GUAZZO M.B.B.S., M.D., F.R.C.S., F.R.A.C.S. NEUROSURGEON

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SPECIALIST MEDICAL CENTRE, 207 LAKE STREET

CAIRNS, Q. 4870

80th November 2001

Dr Adrian Nowitzke Dept of Neurosurgery Princess Alexandra Hospital Ipswich Road WOOLLOONGABBA QLD 4102 eg:sc

Dear Adrian

It was most disappointing that I was not able to attend the scheduled meeting organised for Wednesday 28th November, 2001 from 12noon to 2.30pm at The Townsville Hospital as per the agenda you circulated the day before the scheduled meeting. As you are aware, Wednesday is my operating day at The Townsville Hospital and I made significant alterations to my operating list to be available and I was most surprised to hear when I contacted you by phone at 12.30pm, the meeting had been moved to a location away from the hospital.

As I have informed you I had no prior notification of this change and I found it most extraordinary and unusual.

I am not certain what discussion occurred on the seven points you listed on the agenda, but I think the lack of cooperation and professional courtesy is unexplainable and a significant impediment to progress on this issue. Therefore, unless the issue is addressed, I cannot support any moves to have an affiliated Registrar at The Townsville Hospital. You and Michael are aware that I have been canvassing support for an affiliated position over some years and I am grateful for the support given by Princess Alexandra Neurosurgery Department to this initiative.

Yours sincerely

ERIC P GUAZZO

cc. Dr Michael Weidmann, Chairman, Dept of Neurosurgery, Princess Alexandra Hospital, Ipswich Road, Woolloongabba 4102

cc. Mr Reno Rossato 7/57 Mitchell Street, North Ward 4810

NEUROSURGERY AND SPINAL SURGERY

ERIC P. GUAZZO
M.B.B.S., M.D., F.R.C.S., F.R.A.C.S.
NEUROSURGEON

Associate Professor Schools of Medicine University of Queensland and James Cook University NORTH WARD CLINIC 65 EYRE STREET NORTH WARD TOWNSVILLE Q. 4810

PHONE: (07) 47722844 FAX: (07) 47722834

EMAIL: nwclinic@austamet.com.au

SPECIALIST MEDICAL CENTRE, 207 LAKE STREET CAIRNS, Q. 4870

C/server E word doc: Johnson

1st January, 2002.

DR. Andrew Johnson, Executive Director of Medical Services, The Townsville Hospital, P.O. Box 670, TOWNSVILLE. Q. 4810.

Dear Andrew,

You will recall I have written on a number of occasions, last on the 16th July, 2001 subsequent to which we had a phone discussion on the 17th October, 2001 and we met on the 3rd December, 2001.

I look forward to receiving your draft proposal regarding the zonal business plan for neurosurgery workforce. I appreciate your understanding in considering not only the adequate provision of service, but also the increasingly recognised and important human factor to provision of on-call services.

As discussed at our meeting, during the next six months while endeavouring to, I am unlikely to be available for call every second week and cover when Reno is away, more so after 01/07/2002.

The other important issue that I discussed with you on the 17th October, 2001 but not raised at our recent meeting, was the issue of the frameless stereotaxis, particularly how it went to tender without involvement from myself. I need not go back over the history of this issue, but you did assure me I would be involved in the process, and you have subsequently assured me that you will find out the reason why this did not occur.

Yours sincerely,

ERIC P. GUAZZO.

NEUROSURGERY AND SPINAL SURGERY

PLEASE RESPECT THIS LETTER AS BEING CONFIDENTIAL TO YOU. IT IS NOT TO BE COPIED TO A THIRD PARTY WITHOUT PRIOR CONSENT

Mr. RENO G. ROSSATO O.A.M. K.H.S.

Associate Professor (Clinical)
Sobool of Madicine
James Cook University
M.B., B.S., F.R.C.S., F.R.A.C.S., F.A.C.S.
NEUROSURGEON

MEDICAL DIRECTOR
A.C.N. 010 437 279

JCU HOUSE, 7/57 MITCHELL STREET, NORTH WARD, TOWNSVILLE, Q, 4810 PHONE: (07) 47716243 FAX: (07) 47712014 rg_rossato@bigpond.com

CALVARY HOSPITAL CAIRNS, Q.4870 PHONE (07) 40525111

13th June 2003 (Dictated 12th June)

Mr Eric Guazzo Fax: 47722834 TOWNSVILLE

Dear Eric,

I had hoped to catch you this week sometime and when I did ring you, unfortunately, were still working at night.

As from 1st July 2003 I am not going to be doing anymore procedural neurosurgery privately. I am going to become more involved in the Institute of Surgery administration and I find this increasingly more difficult to do without continuous compromise of either my private practice or this other job.

Obviously there are other influences on this decision and I am sure it is no surprise that indemnity is one of them together with the ever-spiraling costs of running the business without any commensurate increase in HIC rebates. I really cannot see this business getting much better in my visible horizon at least so I think it is really time to do what I am going to do.

As you know Neurosurgery was one of the very few areas where Phillipa Milne in her recent staffing review argued for an increase in service delivery in terms of people. I think this other decision of mine may well make that even more viable should we be able to attract John Baker or someone similar. I think the decision as to who comes should be principally driven by yourself since it is anticipated that your professional longevity will exceed mine.

I do intend to wind down these rooms over the space of 6 - 8 weeks and obviously will continue to fulfill my obligation in alternate calls etc.

I am sure I could have handled your returning to work here in Neurosurgery much better than I did and for that I do offer my apologies.

With every good wish,

Dictated not signed by

MR R.G ROSSATO Clinical Director Neurosciences

TOTAL P.01

ERIC P. GUAZZO
M.B.B.S., M.D., F.R.C.S., F.R.A.C.S.
NEUROSURGEON

Associate Professor School of Medicine University of Queensland and James Cook University

14 August 2003

File Copy.

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eg:km

Dr Andrew Johnson Executive Director of Medical Services The Townsville Hospital DOUGLAS QLD 4815

Dear Andrew,

I thought I would write to bring you up to date on the changes with the neurosurgical advanced trainee rotation from the Princess Alexandra Hospital. At the recent board meeting, I was able to, with the help of the Chairman Michael Weidmann, convince the board that it would be to the trainee's significant advantage that they rotate to the Townsville Hospital for a one-year period rather than six months. The board supported this on the basis that the first trainee, Peter Lucas, gave a positive report regarding his surgical experience in Townsville. Certainly his workload, operatively and patient management including outpatients, was more than sufficient. Therefore, beginning next year, we will have a one-year rotation from the Princess Alexandra Hospital and the trainee for next year will be Jeff Webster, who will be in his third year, so quite well advanced in the training program. He is a Queensland graduate and will have spent the first two years of his advanced training in Melbourne.

The other issue, is regard to the on-call and while it is recognised that the trainee who comes to Townsville has to spend more time on-call than perhaps their colleagues elsewhere, is important that they have at least every second weekend off, beginning Friday afternoon to Monday morning. The board was concerned about this, but I did suggest that we were having some initial problems but this issue has now been rectified. One of the requirements for a hospital position to be accredited for advanced training in Neurosurgery is that the trainee does not cover other surgical specialties unless there are extraordinary circumstances.

Just to give you some idea of the workload, Peter Lucas, in his six months with us, was involved in just over 250 neurosurgical cases and he was the primary surgeon in almost 100 of them. This was considered very satisfactory for an advanced surgical trainee. The level of supervision and support he received was also considered satisfactory.

Another issue I thought I'd bring you up to date with, perhaps is not so encouraging, and maybe Mark Elcock or Reno Rossato have spoken to you about this, the protocol that has been implemented for the management of acute severe neurotrauma. As you recall, this is a zonal protocol and was signed off at a zonal level, however unfortunately over the recent weeks, patients have been not managed along this protocol and my understanding the reasons for this variance has been inadequate staff levels, particularly at the Cairns Base Hospital. This has resulted in delays in patient transfer and I know that Mark Elcock and Reno are going to take this up at different levels and I hope will also sort this out to ensure we do adhere to what is a well thought out protocol to ensure best practice for patients who suffer severe neurotrauma within our zone.

Yours sincerely,

ERIC GUAZZO.

CC: Dr Reno Rossato, Clinical Director of Surgical Services, Townsville Hospital, Q 4815.

ERIC P. GUAZZO
M.B.B.S., M.D., F.R.C.S., F.R.A.C.S.
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SPECIALIST MEDICAL CENTRE,

207 LAKE STREET CAIRNS, Q. 4870

Dr Andrew Johnson, Executive Director of Medical Services, The Townsville Hospital, Douglas_Townsville

25/05/2004

Dear Andrew

Thank you for making the time to meet with me in your office at the Townsville Hospital on Friday 21/05/2004. This letter is to confirm our discussion at that time regarding my employment with Queensland Health.

For professional and clinical reasons, I am no longer able to continue as a Visiting Medical Officer in Neurosurgery. I can confirm my original intention was to resign as of 04/10/04. However, because of my commitment to and the requirements of the current training registrar, if you are agreeable, I would ask to defer this date to 01/12/2004. From this date, I intend to take my accumulated leave entitlements.

I hope during my ten years of employment I have made some positive contributions. It is a real disappointment that circumstances have been allowed to reach this point.

Yours sincerely

Eric P Guazzo



Queensland Health

Townsville Health Service District District Administration

Enquiries to:

Executive Office

Telephone: Facsimile:

07 4796 1003 07 4796 1021

Our Ref:

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Email

Andrew_Johnson@health.qld.gov.au

Eric Guazzo
VMO - Neurosurgery
The Townsville Hospital
IMB 20

Dear Eric,

I write in acknowledgment of your letter, faxed to me on 3 June, tendering your resignation from the Townsville Hospital from 1 December 2004.

It was with enormous disappointment that I received this letter and whilst acknowledging your decision, and thanking you for your decision to extend to December, I would like to engage with you to assist in future planning of neurosurgical services.

Your investment in this community and in the Townsville General and later the Townsville Hospital over the last 10 years has been well recognised by all. It is never easy to work in an environment with such extensive on-call commitments, which disrupt family and private lives. Accordingly, we have made the decision to attempt recruitment of a third neurosurgeon to the Townsville Hospital and we would appreciate your assistance in planning for this irrespective of your imminent departure.

I am heading off on a month's combined study and recreation leave through the remainder of June and early July. I would like to convene a meeting initially with yourself and Jackie Hanson, with the objective of identifying a strategy for recruitment, an approach to integration with the private sector, and further planning on a zonal basis for delivery of neurosurgical services.

Your input into this is extremely important to us, and acknowledging the professional difficulties you have encountered, we feel it would be best handled as a small group in the initial stages.

I will ask my secretary to contact you to arrange an appropriate time and date. I believe the first meeting should take no more than one hour. Both Jackie and I are prepared to be very flexible with our time allocation to suit your needs.

Once again, I wish to express my sincere thanks to you for your commitment to the Townsville Health Service District over the last 10 years, and express also my hope that we may be able to work with you to ensure quality neurosurgical services are delivered to the people of North Queensland into the future.

Yours sincerely,

Dr Andrew Johnson

Executive Director of Medical Services
Townsville Health Service District

08.06.04

cc:

Jackie Hanson, Operations Director Institute of Surgery

Ken Whelan, District Manager



17/9/04

Queensland Health

From: Dr John Archer FRACP, PhD Senior Lecturer Medicine, James Cook University, Department of Neurology, Cairns Base Hospital

To: Ms Jill Newland, Director of Medical Services, Cairns Base Hospital Mr Philip Cammish, District Manager, Cairns Health Service

It is with great concern that I hear of a potential reduction in the availability of public neurosurgical services in North Queensland, in particular the withdrawal of services of Mr Eric Guazzo. As you are probably aware there have been two neurosurgeons based in Townsville who have provided these services, supported by an advanced trainee in neurosurgery. The neurosurgeons visit Cairns on alternate weeks, providing outpatient cover, and importantly the opportunity for regular face to face meetings. While a Cairns based neurosurgical team would ultimately provide optimal cover for the people of this region, the current arrangement has until now functioned reasonably well.

Myself, the physicians, surgeons and paediatricians at Cairns Base Hospital have the highest regard for Mr Guazzo both professionally and personally. As the neurologist for the region I am in regular contact with Mr Guazzo and have always found him to be polite, reasonable and easy to deal with. His clinical decision making has, in my opinion, been without fault. He is equally committed to public and private patients. He attends our neuroradiology conferences fortnightly and always makes a substantial contribution. Mr Guazzo and I share a vision for the development of a North Queensland Neuroscience group, and have established a monthly neuroradiology video-conference between Cairns and Townsville as part of this. Mr Guazzo continues to provide educational cases for discussion, enhancing the ongoing medical education of the neurosurgical and medical trainees, and radiologists both in Cairns and Townsville.

Mr Guazzo is readily contactable. The importance of ease of communication should not be underestimated. Patient care is clearly enhanced when there is a free discussion about optimal management, with ready acceptance of patients about whom there are medical concerns. If Mr Guazzo were allowed to leave this could be compromised. Experience tells us that attempts to divert patients to Brisbane may result in prolonged delays in accessing neurosurgical care.

Mr Guazzo's curriculum vitae speaks for itself. He has worked in major centres in Australia and the United Kingdom, prior to taking up the post at Townsville General Hospital. He is well regarded in the Neurosurgical community, and there is little doubt he could have taken a position at a capital city teaching hospital if he chose. The loss of Mr Guazzo from the region would substantially compromise neurosurgical care in North Queensland. At an immediate level it would lead to the



Queensland Health

loss of the advanced neurosurgical trainee, significantly reducing neurosurgical throughput, and reducing the likelihood of attracting another neurosurgeon.

I believe the Northern Health Zone has to seriously examine what has led to Mr Guazzo considering a withdrawal of services. I believe Mr Guazzo to be a man of great integrity who would not consider such a decision lightly. I and the undersigned would strongly support serious attempts to address this issue. Clearly these issues need to be discussed with Mr Guazzo directly, but it is my understanding that a greater degree of autonomy, greater control over forward planning of neurosurgical services, and appointment of a further neurosurgeon would be well received. We would welcome his skills in Cairns if that were an acceptable solution.

The loss of MR Guazzo's neurosurgical experience from North Queensland would be the loss of an opportunity to build a first rate neuroscience facility, and a testament to poor health service management.

Dr John Archer - Neurologist Cairns Base Hospital

Dr Ross Messer - Head, Paediatrics, Cairns Base Hospital

Dr Peter Boyd - Head, Department of Medicine, Cairns Base Hospital

Dr Christina Steffan - Head, Department of Surgery, Cairns Base Hospital



Queensland Health

Townsville Health Service District District Administration

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Andrew_Johnson@health.qld.gov.au

Dr Eric Guazzo VMO Neurosurgery North Ward 'Clinic 65 Eyre Street NORTH WARD QLD 4810.

Dear Eric,

Please find attached a document titled Draft Memorandum of Understanding, Neurological Services, The Townsville Health Service District.

I would appreciate review of this document and advice on its content and suggested modifications. As we discussed, your contribution to the Townsville Health Service District over an extended period has been greatly appreciated and we would like to do anything we can to ensure you continue that contribution.

Sincere thanks,

Dr Andrew Johnson

Executive Director of Medical Services

Townsville Health Service District

07.09.04

MEMORANDUM OF UNDERSTANDING (MOU)

Neurological Services The Townsville Health Service District



Introduction

The signatories to this document undertake to work together in provision of Neurosurgical services to the betterment of people of North Queensland. This document seeks to outline the way in which services should be provided and the expectations of interactions within clinical service teams.

All members of the Neurosurgical service can expect to be involved in decision making about issues critical to provision of Neurosurgical services. This will include strategic planning, equipment, purchases, budgeting matters, theatre times and allocation, and clinical protocols.

Clinical Protocols will be developed identifying admission criteria, interactions with referring sources, and standards of supervision and support of Registrars. All practitioners with an interest in Neurosciences will have an opportunity for input into these protocols.

The Northern Zone of Queensland Health will commit to a creation of a Neurosciences Services Network which will be the principal advisory forum for strategic planning for Neurosciences in the Northern Zone. All Senior Medical staff employed in Neurosciences areas across the zone shall be involved in service planning and development through this forum.

On call commitments shall be shared between Neurosurgeons on staff. The Townsville Health Service District commits to seeking employment of three Nucrosurgeons in order that a one in three roster shall be maintained wherever possible. Changes to rosters shall be negotiated between relevant parties and communicated to the roster clerk in the Institute of Surgery for dissemination.

Neurosurgical Department shall have regular departmental husiness meetings which discuss issues including registrar management, budgetary management within the department, ward based issues, theatre issues, and equipment issues. Minutes of such meetings shall be maintained and meetings shall be structured at such a time that attendance can be maximised.

ERIC P. GUAZZO M.B.B.S., M.D., F.R.C.S., F.R.A.C.S. NEUROSURGEON

Associate Professor School of Medicine University of Queensland and James Cook University File copy.

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CAIRNS, Q. 4870 eg:km

14 October 2004

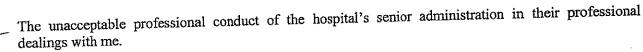
Dr Andrew Johnson Executive Director of Medical Services Townsville Hospital 100 Angus Smith Drive DOUGLAS QLD 4815

Dear Andrew,

RE: My position as Senior Visiting Specialist in Neurosurgery at The Townsville Hospital with additional appointment to the Cairns Base Hospital and Mount Isa Base Hospital.

After we met in your office in late May 2004, I tendered my resignation, which you acknowledged in a letter to me in early June 2004, the letter taking a while to reach me, as it found it's way through the internal mail of the hospital to the Outpatients. In August, September and October we have met on occasions, the last on Wednesday 13 October 2004 to discuss the reasons for my resignation and look towards addressing and resolving these issues, thus perhaps allowing me the opportunity to stay on in the public hospital system.

I would like there to be no misunderstanding regarding the reasons for my resignation. They are:-



What I believe to be serious issues regarding the standard of neurosurgical care at the Townsville Hospital. I understand my concerns in this area have been confirmed to you in your discussions with other members of the medical community in the Northern Region.

You recognise, and your letter to me of June 2004 acknowledged the onerous task of one in two on-call, and it's contribution to my decision to tender my resignation. This ongoing issue only serves to reflect the lack of action by the hospital administration, despite representations by myself over the least five years regarding this and other important professional matters regarding my service in the public hospital system.

I acknowledge your kind remarks regarding my service to Neurosurgery in the public sector in North Queensland and I appreciated the letters I've received from the Executive Directors of Medical Services from the regional hospitals to which I have provided service as well as the support I've received from a number of colleagues and other staff at the hospital. I would like to think I've been a loyal employee of Queensland Health for more than 10 years and I think this is reflected in the quality of my service and application and my standing amongst my peers and staff at the hospital.

In our discussions I have proposed a way forward in actions required for me to reconsider my resignation, including the following:-

- 1. A memorandum of understanding between parties involved in the provision of neurosurgery services. You have kindly provided a draft of this, which is acceptable.
- A letter from yourself representing the hospital, recognising the actions of the hospital management and their professional dealings with myself have been less than optimal. You have read to me over the telephone on Friday 8 October 2004 a draft proposed letter, which was acceptable. I am yet to receive a copy.

Lastly, what I believe to be the most important issue, a significant change in the clinical responsibilities and leadership of neurosurgery at the Townsville Hospital. This is my major concern and I believe, from you, this is a major impediment to any further progress to resolving the issues regarding my resignation. In your proposed letter to me, you have made some suggestions however for reasons I mentioned, the proposal was not acceptable.

I have provided copies of some documentation to support the points I have made in this letter and I can provide further if required. Your office is to arrange a meeting between Ken Whelan, yourself and myself (in the near future). My resignation takes effect as of 30 November 2004. If you consider a resolution of the issues is possible I will take annual leave for 2 months from 1 December 2004, otherwise I will complete and return the termination of employment documents you forwarded.

Yours sincerely,

DR ERIC GUAZZO.

CC: Dr Ken Whelan, District Manager, Townsville Health District.

Enc.

NEUROSURGERY & SPINAL SURGERY

ERIC P. GUAZZO M.B.B.S., M.D., F.R.C.S., F.R.A.C.S. NEUROSURGEON

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eg:km

19 October 2004

Dr Hugh Bartholomew Chairman of Queensland State Committee Royal Australasian College of Surgeons Tri Rosen House 1 Court Street IPSWICH QLD 4305

Fax: 3281 0522

Dear Dr Bartholomew,

Re: My position as VMO in Neurosurgery at The Townsville Hospital.

I thought it appropriate that I write to you and ensure you have the correct information regarding my reasons for resigning from 'my public hospital appointment. I know that my resignation has been discussed at the Queensland State Committee level.

The two reasons that have lead to this action are:-

- 1. Professional conduct of senior management at The Townsville Hospital
- The clinical standards in practice of neurosurgery.

I have been employed at The Townsville Hospital contributing to regional neurosurgery for ten years, providing a one in two on-call and at least six sessions per week including outreach clinics to Mount Isa and Cairns with video outpatients sessions to Mackay. During this time I believe I have provided a high level of service and this belief is supported by the comments in the attached documents. During this time I have, to my knowledge, never had a complaint made against me regarding my service from either patients, family or other staff. M commitment to public practice has been extended beyond that usually expected by developing a number of initiatives including:-

- 1. Developing a training registrar post in neurosurgery at The Townsville Hospital which is now in jeopard
- 2. Development of a neurotrauma plan for North Queensland and my continuing involvement in othe hospital projects such as the development of a general trauma plan for North Queensland.

I had envisaged to continue to work in the public sector until retirement and I am very disappointed to have hat to proceed down this path. Please don't hesitate to contact me if you wish to discuss this further and I have enclosed information of relevance for your perusal.

Yours sincerely,

DR ERIC GUAZZO.

North Ward Clinic

From:

"Ken Whelan" <Ken_Whelan@health.qld.gov.au>

To:

<nwclinic@austarnet.com.au>; "Eric Guazzo"

Cc:

"Reno Rossato" <Reno_Rossato@health.qld.gov.au>

Sent:

Wednesday, 27 October 2004 17:15

Subject:

Meeting Outcomes

Good Afternoon Eric

Thank you for taking the time to visit me this afternoon and thank you for sharing your views. Some of the outcomes from this meeting were as follows:

I agree that the development of protocols and standards for Neuroservices would be very good indeed and that in consultation with Neuroservices Andrew will draft these up which once agreed would be signed off by ALL parties. At that point the service offered will be consistent and enforceable.

I further agree that both Neurosurgeons need to be involved in the appointment of additional Neurosurgical staff and in the purchase of major capital equipment. I have spoken to Reno and he agrees with this process.

I also stated that if at anytime there was ever any concerns about the clinical competency of any medical officer that the issues should be put on that table either between the parties or through Executive Director Medical Services. If the allegations were of a serious nature which could impact on patient safety I would require evidence based written statements to enable me to effectively deal with any such concern.

I stated my vision for the future for Neuroservices is the creation of a ZONAL service lead from Townsville but clinically inclusive of the other districts in the Zone. This model would be very similar to the current Oncology configuration. To this end I did say that although we were considering moving on Cardiac services as the next Zonal service there is no reason why we could not move on Neuroservices first. BUT there would need to be general agreement and sign off on the above mentioned issues before this would be considered.

I also acknowledged your skill and commitment to the patients of our community who over the years have required and indeed still require you clinical expertise.

I also stated that I had talked to Reno about the possibility of you being more involved as Clinical Director of Neuroscience in the future and he was not opposed to this notion although clearly if you choose to go forward with this the detail would need to be worked through.

You agreed to take our conversation on board and have a look at the draft protocols to enable you to make an informed decision.

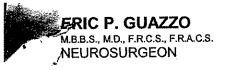
We as a District are committed to developing an inclusive zonal neuroscience service and hope that you can be a part of this but we also need to move on ensuring that the service is covered and therefore will be advancing the employment of additional staff.

I look forward to further interaction with both you and Reno and with good will on all sides I am sure this can be resolved.

Thank you again for meeting with me.

Kind Regards

Ken Whelan District Manager Townsville Health Services District PO Box 670 Townsville Queensland 4810 **AUSTRALIA**



Associate Professor School of Medicine University of Queensland and James Cook University

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1 November 2004

Mr Ken Whelan Ken Whelan@health.qld.gov.au

Dear Ken.

Thank you for your e-mail of 28 October outlining some of the outcomes of our meeting of 27 October 2004. Andrew has drafted a memorandum of understanding which I believe covers some of the matters we've discussed; protocols and standards could be added to this. I look forward to receiving a draft copy.

Regarding the position of clinical director of neuroscience, I would need a position description to consider, particularly regarding the responsibilities and reporting pathways.

As we discussed, I have family and professional commitments in the coming December and January, organised after I tendered my resignation to Andrew in May 2004. If you agree, I can take annual leave during this time to allow further time to resolve some of the issues.

In the coming months some important clinical decisions will be made regarding neurosurgery in North Queensland and I'm pleased that you have asked me to be involved. They include:

- Appointment of an additional neurosurgeon. Is there a position description and a plan of how this person is to be integrated into the neurosurgical service?
- Major capital expenditure on a new operating microscope. Two meetings have been held at times I could 2. not attend and I forwarded my apologies. I did not receive any correspondence regarding the outcomes.
- Appointment of a Level 2 registered nurse responsible for neurosurgery in the operating theatres. What is Athe time frame for this appointment?

There are some other important issues which require relatively urgent attention including the following:

- Establishing a neurosurgery outpatients at the Mackay Base Hospital where there has been none since 1. John Baker resigned more than one year ago. You know that I do conduct a three monthly video outpatients session to review children, but this is less than adequate to cover the needs of the community in that region.
- Re-establishing of a training registrar, the position for 2006 and interval arrangements for staffing for 2. 2005.

I appreciate you putting aside your time to speak with me on Wednesday 27 October 2004 and I was particularly pleased to have confirmed that you and Mr Meehan agree on the strategy of a zonal plan for neurosciences in North Queensland based in Townsville but inclusive of other districts in the zone.

I look forward to hearing further from you.

Yours sincerely,

ERIC GUAZZO.

NEUROSURGERY & SPINAL SURGERY



Queensland Health Townsville Health Service District District Administration

Enquiries to: Telephone: Facsimile: Executive Office 07 4796 1003 07 4796 1021

Our Ref: Email P:\dms\nerida\corresp\nov\031104
Andrew Johnson@health.qld.gov.au

Dr Eric Guazzo VMO Neurosurgery North Ward Clinic 65 Eyre Street NORTH WARD QLD 4810.

Dear Eric,

Further to our discussions regarding your resignation from the THSD I write to propose to you a way forward.

Your reputation as a clinician and a professional are beyond reproach and your services are greatly valued by this organisation and the community of North Queensland, we do not want to lose such an important contribution to public health care.

We acknowledge that you have had cause to raise concerns with us from time to time, regarding your perception of the conduct of Neurosciences practices at the Townsville Hospital, and before that at Townsville General Hospital. We acknowledge that on several instances, we have not met your expectations. At times, you have felt significantly let down and undervalued by our system.

I sincerely apologise to you for our failings in this respect. I believe that at all times you have demonstrated the highest levels of professional integrity, and that at times, we have fallen short of appropriate recognition of your input and contribution to the system.

If you choose to leave our services at this juncture, I will understand your decision, bear you no ill will, and hope that we may be able to entice you back at some later stage.

If you choose to change your decision, I believe that working together we can offer you a different and more satisfactory working environment. You have had a meeting with Ken Whelan and I am aware that Ken has discussed with you the prospect of taking a greater formal role within Neurosciences and a hand in determining the standard and protocols to apply in Neurosurgery at the Townsville Hospital

Our vision would be to see safe and sustainable workloads, training for succession and carefully cultivated and maintained clinical networks across the Zone. You have, through

your work with us, and your leadership role within the neurosurgical society, demonstrated that you have the attributes and quiet determination to do justice to a leadership role, and would have the support of our District Management team to achieve a safe and sustainable service of the highest professional standards.

I would be happy to discuss this with you further, however am unfortunately pressed to make a determination in order that we can resolve our junior staffing for 2005. Your earliest consideration would therefore be greatly appreciated.

Sincere

Dr Andrew Johnson

Executive Director of Medical Services Townsville Health Service District

03.11.04

ERIC P. GUAZZO MB.B.S., M.D., F.R.C.S., F.R.A.C.S. NEUROSURGEON

Associate Professor School of Medicine University of Queensland and James Cook University

9 November 2004

Dr Andrew Johnson
Executive Director of Medical Services
Townsville Health Service District
The Townsville Hospital
100 Angus Smith Drive
DOUGLAS QLD 4815

NORTH WARD CLINIC 65 EYRE STREET NORTH WARD TOWNSVILLE Q. 4810

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EMAIL: nqneurosurgery@austamet.com.au

SPECIALIST MEDICAL CENTRE 207 LAKE STREET

CAIRNS, Q. 4870

eg:km

Dear Andrew,

I received your letter of 3 November 2004. As you are aware, it is significantly different to that which you read to me over the phone on Friday 8 October 2004; you would have your reasons for this.

Attached is a copy of an e-mail to Ken Whelan – he may have already brought it to your attention, I am yet to receive a reply.

I am waiting for concrete proposals from yourself addressing the issues we have discussed, including:-

- 1. Memorandum of understanding
- Protocols / standards
- The issue of leadership / clinical directorship of neurosurgery and other matters as listed in my last letter to you of 14 October 2004.

Two significant events illustrating the failings of administration and professional conduct in neurosurgery occurred over the last two months, only reinforcing my resolve regarding this matter. They include:-

- 1. The failure to properly organise neurosurgical care and cover during the period of 18 September 2004 to 23 September 2004.
- 2. The extremely short notice given to me to undertake cover for most of the month or November.

Lastly, in my letter to you of 14 October 2004, I asked whether you wished for me to return the termination of employment documents or should I take leave for 2 months from 1 December 2004.

I await your reply and further discussions.

Yours sincerely,

TERK GUAZZO.



Townsville Health Service District District Administration

Enquiries to: Telephone: Facsimile; Executive Office 07 4796 1003 07 4796 1021

Our Refe

P:\dms\frances\corresp\dec\011204
Andrew_Johnson@health.qld.gov.au

Dr Eric Guazzo Neurosurgeon North Ward Clinic 65 Eyre Street NORTH WARD QLD 4810 Fax No. (07) 4772 2834

Dear Eric,

Further to your correspondence of 9th November to Andrew and 1st November to Ken we write in a final attempt to clarify our position on Neurosurgery at The Townsville Hospital.

The issues remaining on the table as we understand it, and our position on those issues is outlined below:

1. Clinical Leadership in Neurosurgery

Regardless of your decision to remain with THSD, it is our intent to develop a succession plan for the Clinical leadership in Neurosurgery. We would be very keen for you to engage with the Executive and Institute Management Team in this process.

The Clinical Director position in Neurosurgery will be in line with other departmental directorships, with an expectation of developing and implementing clinical protocols and standards for the discipline and contributing as a member of the leadership team in the Institute of Surgery. We have not yet written the Position Description, and would welcome your input as a part of the succession planning process, however some guidance may be given by the draft Position Description attached based on the Director Cardiothoracic Surgery.

2. Protocols and Standards in Neurosurgery

The Director of Neurosurgery would be expected as a part of their brief to work with other neurosurgeons to develop an agreed framework for service protocols and standards, defining admission and acceptance policies, communication standards and processes for managing common patient groups.

../2

Office The Townsville Hospital 100 Angus Smith Drive DOUGLAS QLD 4814 Postal PO Box 670 TOWNSVILLE QLD 4810 Phone i 07 4796 1003 Fax 07 4796 1021

3. Reporting Arrangements

The Director of Neurosurgery will report operationally to the Clinical Director of the Institute of Surgery and will have a professional reporting line through to the Executive Director of Medical Services. If there are any issues of professional disagreement, there is scope to raise these to the EDMS for assistance in reaching resolution.

4. Appointment of Additional Neurosurgical Staff

The recruitment process is currently underway for a third neurosurgeon. A number of applications have been received, the most promising being from a neurosurgeon currently working in Auckland. If you choose to remain with QH, we would welcome your input into the interview and appointment process. We have received funding for additional theatre time and surgical beds, so feel that we will be able to provide adequate clinical support resources while relieving your currently unacceptable on call burden.

5. Capital expenditure in Neurosurgery

It is our expectation that all senior medical staff should have an opportunity to provide input into purchase of capital equipment. At times our capacity to select is limited by statewide tendering processes, however we would seek to influence these processes to insure that the most appropriate equipment is purchased.

6. Establishment of a Level 2 Registered Nurse in Neurosurgical Operating Theatres

This has been discussed with Jackle Hanson, the position has been advertised and interviews conducted last week. An appointment is imminent.

Establishing Neurosurgery Outpatients in Mackay

This has been discussed with Dr Craig Margetts, EDMS in Mackay who is very supportive of establishing outpatient services for neurosurgery in Mackay Base Hospital. This would need to be subject to funding support.

8. Registrar Arrangements

We are very supportive of any move to re-establish the neurosurgical training position at The Townsville Hospital for 2006.

Memorandum of Understanding

A draft memorandum of understanding has been sent to you previously for your comments. We would be happy to negotiate from this draft and give you an undertaking of support to ensure that the agreement as documented and agreed is observed in practice.

Eric, we hope that the above addresses your concerns and allows you to withdraw your resignation from the Townsville Health Service District.

Yours Sincerely

Ken Whelan District Manager 1st December 2004 Andrew Johnson

Executive Director Medical Services

ERIC P. GUAZZO M.B.B.S., M.D., F.R.C.S., F.R.A.C.S. NEUROSURGEON

Associate Professor School of Medicine University of Queensland and James Cook University

8 December 2004

NORTH WARD CLINIC 65 EYRE STREET NORTH WARD TOWNSVILLE Q. 4810

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EMAIL: nqneurosurgery@austamet.com.au

SPECIALIST MEDICAL CENTRE 207 LAKE STREET CAIRNS, Q. 4870

eg:km

Mr Ken Whelan - District Manager, Townsville Health District Dr Andrew Johnson - Executive Director of Medical Services Townsville Hospital 100 Angus Smith Drive DOUGLAS QLD 4815

Fax: 4796 1021

Dear Ken / Andrew,

Thank you for your letter of 1 December 2004. I have previously indicated that I am prepared to take extended leave as of 1 December 2004 if you are of the opinion that the matters concerning my employment with Queensland Health can be resolved.

Therefore, I await confirmation of a time we can meet and the agenda for that meeting. During this time I will be on extended annual leave.

Yours sincerely,

ERIC GUAZZO.

NEUROSURGERY & SPINAL SURGERY

From: \"Ken Whelan" < Ken_Whelan@health.qld.gov.au>
To: \quad \quad \text{Teric Guazzo}"

Sent: Thursday, 23 December 2004 10:11

Subject: Position

Eric

Thought I better get in touch with you and advise having looked at all the issues and trying to establish the written facts I am not in a position to be able to confront Dr Rossato and therefore have no choice but to advise that he will be remaining the Clinical Director of Surgery. Over time he has agreed that he would like to step down from the Neuro Clinical Directors role but not in the short term. Industrially I have no where to go with this at this point.

Thought it prudent to give you this information so you could make some decisions for yourself. I would be very pleased if you could let me know ASAP whether under these circumstances you still wish to remain as a VMO or whether you will be resigning. Clearly if you resign this will be a big loss but I need to be able to get on and advertise if this is to be the case.

I look forward to your early reply

Kind Regards

Ken Whelan District Manager

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ERIC P. GUAZZO M.B.B.S., M.D., F.R.C.S., F.R.A.C.S. NEUROSURGEON

Associate Professor School of Medicine University of Queensland and James Cook University 65 EYRE STREET NORTH WARD TOWNSVILLE Q. 4810

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7 January 2005

Mr Ken Whelan
District Manager
Townsville Health District
Townsville Hospital
100 Angus Smith Drive
DOUGLAS QLD 4815

Fax: 47961021

Dear Ken,

I received your email of 23 December 2004. I have been on leave over the Christmas / New Year period.

The matter of Directorship of Surgery and that of Clinical Director of Neuroscience is a matter for yourself and your administration. My concerns have been raised with you.

I am asking only for a reasonable input into decisions which affect my work practice and in particular for a proper professional approach to the conduct and development of neurosurgical services in North Queensland.

Therefore, I await your response to my letter of 8 December 2004 as to when we should meet to discuss the matters in your letter to me of 1 December 2004. For your information, I will be away for the week beginning Monday 17 January 2005.

Section 1

Yours sincerely,

ERIC GUAZZO.

ERIC P. GUAZZO M.B.B.S., M.D., F.R.C.S., F.R.A.C.S. NEUROSURGEON

Associate Professor School of Medicine University of Queensland and James Cook University

24th January 2005.

Mr Ken Whelan
District Manager
Townsville Health District
Townsville Hospital
100 Angus Smith Drive
DOUGLAS 4815

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PHONE: (07) 47722844 FAX: (07) 47722834

EMAIL: ngneurosurgery@austarnet.com.au

SPECIALIST MEDICAL CENTRE, 207 LAKE STREETCAIRNS, 4870



Fax Number 47961021

Dear Ken

Thank you for making time to meet with me on the 14/1/05 when we re-discussed the matters which have led to my resignation. In particular we discussed the matters as listed in your letter to me of the 1/12/04.

I am willing to return to the Townsville Hospital on a three month temporary basis on a reduced sessional commitment to allow the outstanding matters to be resolved.

If you agree to this suggestion, then perhaps you could ask Jackie Hansen, Operations Manager of the Surgical Institute to liaise with me.

I look forward to hearing from you in the near future.

Yours sincerely

ERIØ GUAZZO

ERIC P. GUAZZO M.B.S.S., M.D., F.R.C.S., F.R.A.C.S. NEUROSURGEON

Associate Professor School of Medicine University of Queensland and James Cook University

7 February 2005

Ms Jackie Hansen
Operations Director

The Townsville Hospital 100 Angus Smith Drive DOUGLAS QLD 4815

Institute of Surgery

FAX: 47961431

7.3.0

NORTH WARD CLINIC

TOWNSVILLE Q. 4810

PHONE: (07) 47722844

FAX: (07) 47722834

EMAIL: nqneurosurgery@austernet.com.au

65 EYRE STREET

NORTH WARD

eg:km

Dear Jackie,

Further to our meeting of Wednesday 2 February 2005, regarding my willingness to resume working at the Townsville Hospital on a reduced capacity to allow further time to resolve outstanding issues regarding my employment.

I would like to confirm the following proposals after having had time to further consider what we had discussed.

- If you agree, I will resume my commitments on Wednesday 9 February 2005 at the Townsville Hospital with alteration to my schedule. On the second and fourth Wednesday of each month I would be prepared to do an outpatient clinic, preferably in the afternoons. The remaining part of that Wednesday and other Wednesdays would be operating time.
- Regarding on-call, I agree to doing perhaps Tuesday nights and Wednesday during the day while I'm at the hospital and Wednesday nights, with the understanding that I will on at least every second Thursday morning, have to leave at about 6.00am to do my clinic in Cairns. At the present time, for a number of reasons, I'm not prepared to do any routine on-call on weekends.
- I have negotiated with the Cairns Base Hospital to resume outpatients there on a fortnightly basis. I do not envisage returning to do outpatient clinics in Mount Isa on a three monthly basis. I am prepared to consider a rotating arrangement to do outpatient clinics in Mackay, which I consider are an important step in improving neurosurgical services in the northern zone.
- You agreed that we would have a monthly business meeting to ensure appropriate communication and involvement, as well as the opportunity to discuss the issues which were listed in the letter of Mr Ken Whelan and Dr Andrew Johnson of 1 December 2004.
- As discussed, I am in the process of arranging a four month sabbatical with the University of Cambridge as an honorary consultant neurosurgeon from 1 October 2005 until 31 January 2006. I would envisage that the current arrangements as suggested in this letter would continue on a temporary basis until the time of my return, upon which we would reconsider my employment.
- In view of the changes to my hospital commitment, I suggest that my professional commitment be
 reduced to four routine sessions plus one notional session per week, and payment for on-call duties
 according to the VMO agreement.

Yours sincerely,

ERIC GUAZZO.

Townsville Health Service District Institute of Surgery

Enquiries to:

Jackie Hanson

Telephone: Facsimile:

4796 1442 4796 1431

Facsimile Our Ref:

JH:st 070205

Mr Eric Guazzo Visiting Medical Officer Neurosurgery 65 Eyre Street North Ward Qld 4810

Dear Eric

Thank you for the opportunity to discuss your return from leave on Wednesday 2nd February. Points of action and/or change as a result of our discussion are outlined below:

- 1. Clinics will be contained to ten (10) patients per session with over booking approved by you.
- 2. Sessions will be reduced to 0.5. This will cover Wednesdays and Friday morning ward rounds.

 Week
 1
 Operating
 08.30 - 16.30

 Week
 2
 Operating/clinic

 Week
 3
 Operating
 08.30 - 16.30

Week 4 Operating/clinic

- 3. We will conduct a monthly Neuroscience meeting with yourself, Reno Rossato, the Business Manager and myself, to plan and discuss Neurosurgical business.
- 4. I have discussed the call with Ken Whelan who agrees that structured call agreements are vital in sustaining any service. I propose that;
 - The call roster is 1:3, Reno will take the call 8.00AM 6.00PM on the weekdays when you are rostered on call.
 - The call roster is published monthly to allow flexibility.
 - During annual leave by either yourself or Reno Rossato the call will revert to 1:1 until the third Neurosurgeon is recruited if you are agreeable. I would look at commencing the call from Saturday 26th February as Reno has requested one weeks leave.

It is hoped you will continue to participate in the Neuro-radiology/pathology meetings also. Please let me know if these arrangements are suitable and if I can be of any assistance.

Yours sincerely

Jackie Hanson

Operations Director

Institute of Surgery

7 February 2005 Office Queensland Health 100 Angus Smith Drive Douglas Qld 4814

Postal PO Box 670 Townsville Qld 4810 **Phone** 4796 1442

Fax 4796 1431



Townsville Health Service District

Queensland Health

Enquiries to: Telephone:

Executive Office 07 4796 1035 07 4796 1021

Facsimile: Our Ref:

SD/JG

CONFIDENTIAL

Dr E Guazza North Ward Clinic 65 Eyre Street NORTH WARD QLD 4810

Dear Dr Guazzo

I am writing regarding your changes to hours of work and call arrangements.

It is with regret that the Health District must respond saying that the proposed arrangements are not satisfactory to the Health Service.

As we are unable to agree on a mutually acceptable commitment, it is with regret that the District accepts your resignation. If you contact this office with the date you intend to cease employment, arrangements for your final payment will be made.

On behalf of the District we would like to thank you for the contribution you have made in providing neurosurgical services to the public sector. Health is an every changing environment and therefore we would like to keep channels of communication open.

Yours sincerely

Shaun Drummond

Acting District Manager

Townsville Health Service District

18/2/2005

CC

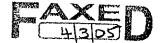
Executive Director of Medical Services

Manager - Payroll Services

Manager - Human Resources

ERIC P. GUAZZO M.B.B.S., M.D., F.R.C.S., F.R.A.C.S. NEUROSURGEON

Associate Professor School of Medicine University of Queensland and James Cook University



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eg:km

3 March 2005

Ms Jackie Hansen
Operations Director – Institute of Surgery
The Townsville Hospital
100 Angus Smith Drive
DOUGLAS QLD 4815

Fax: 4796 1431

Dear Jackie,

Further to our discussions since our meeting of 2 February 2005, in particular a meeting yesterday regarding the on-call roster.

You will recall that my fax to you of 7 February 2005 crossed your letter to me of 7 February 2005, after which you passed on my letter to the acting district manager, Mr Shaun Drummond. He wrote to me on 18 February 2005 saying that the proposed arrangements were not satisfactory to the Health Service. In our subsequent discussions we have confirmed that of the six points in my letter to you of 7 February 2005, five had been agreed upon and it was the issue of on-call which concerned Mr Drummond. You have subsequently spoken to Mr Drummond and clarified my position with him.

I therefore have resumed working at the Townsville Hospital on a five session appointment, alternating operating and outpatient clinics as per your letter to me of 7 February 2005. Regarding on-call, I have completed the roster and returned it with this fax. I'm sorry about it looking a little dishevelled.

I previously indicated I would be willing to do on-call from 6pm Tuesday until 8am Thursday of most working weeks in the current roster. The only times that I cannot do this would be in Week 9 beginning 14 March 2005 when I will be away from 4pm Wednesday. I will be attending a glioma management seminar in Sydney. In Week 11 I will be on annual leave. Week 17 I will be away attending the Annual Scientific Meeting of the College of Surgeons.

Regarding weekends, it's my understanding that the weekends would begin on Friday at 6pm and conclude on Monday at 8am and I have marked with a "C" the weekends which I am available to work. I would be available to do part of the Easter weekend, working from Friday 8am until Sunday 8am.

I trust this is a satisfactory arrangement and it would seem to be roughly a one-in-three on-call roster. I look forward to hearing further from you about this and perhaps receiving confirmation from Mr Drummond that his letter of 18 February 2005 no longer applies.

Yours sincerely,

ERIC GUAZZO.

till copy

ERIC P. GUAZZO

M.D., F.R.C.S., F.R.A.C.S. NEUROSURGEON

Associate Professor School of Medicine University of Queensland and James Cook University

May 2005

Ms Jackie Hansen
Operations Manager – Institute of Surgery
The Townsville Hospital
100 Angus Smith Drive
DOUGLAS QLD 4815

Fax: 4796 1431

Dear Jackie,

I was pleased to be able to attend the first business meeting of the Neurosurgery Department at your office on 27 April 2005, which was attended with yourself and the business manager. Unfortunately Reno Rossato did not attend.

Over the hour of our meeting we had a broad discussion about a number of matters, which I found extremely helpful, particularly gaining some insight into the business matters as regards to the provision of neurosurgery both locally and in the zone.

Could I suggest that the following items be listed on the agenda for our next meeting on 25 May 2005.

- 1. Protocol and standards in neurosurgery, particularly for common conditions such as neurotrauma, cerebral tumours and subarachnoid haemorrhage.
- 2. Clinical duties particularly regarding the on-call roster.
- 3. The timing of clinical meetings, particularly those in neuro-radiology.
- 4. Clinical audit of the Neurosurgical Department activity and timing of the clinical audit meetings.
- 5. Appointment of additional neurosurgical staff and their clinical role.

Yours sincerely,

ERIC GUAZZO.

CC: Mr Ken Whelan, District Manager, Townsville Hospital.

Dr Andrew Johnson, Executive Director of Medical Services, Townsville Hospital.

NORTH WARD CLINICM.B.B.S., 65 EYRE STREET NORTH WARD TOWNSVILLE Q. 4810,

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eg:km

#AH: Ken Whelan. 47961004

ERIC P. GUAZZO

M.D., F.R.C.S., F.R.A.C.S. NEUROSURGEON

Associate Professor School of Medicine University of Queensland and James Cook University

6 June 2005

Dr Andrew Johnson Executive Director of Medical Services Townsville Hospital 100 Angus Smith Drive DOUGLAS QLD 4814 NORTH WARD CLINICM.B.B.S., 65 EYRE STREET NORTH WARD TOWNSVILLE Q. 4810

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SPECIALIST MEDICAL CENTRE 207 LAKE STREET CAIRNS, Q. 4870

eg:km

Faxed V b.b.os @ 4.50pm with GP letter

Dear Andrew,

I wish to follow-up on our discussions of Friday 3 January 2005, confirming by letter a number of matters.

I look forward to Dr Don Myers, Neurosurgeon, commencing his practice at The Townsville Hospital and I especially look forward to working with him as a colleague, I hope for the long term. As I have mentioned to you, I intend to support and assist him in any way I can to ensure he settles into practice in North Queensland. However, I am not willing to undertake his formal supervision and I have discussed the reasons with you. Most important is I was excluded from the processes of his selection, contrary to the assurance I had been given by Mr Whelan, the District Manager, this experience similar to past with the administration at the Townsville Hospital when excluding me from other important matters concerning the provision of neurosurgical services.

I also discussed with you the current state of Neurosurgical Services at the Townsville Hospital and you are well aware of our previous discussions. I have received from you and Mr Whelan a number of communications including a letter of 1 December 2004 which listed my concerns about neurosurgery services in Townsville and how they would be resolved.

I informed you that while I had met with Jackie Hansen, the Operations Director of Surgery on two occasions and intend to continue meeting with her on a monthly basis, the Director of Neurosurgery, Mr Reno Rossato has not attended either of these meetings. You will be aware that we have not had any audit process since I resumed practice in early February. I had discussed with Jackie Hansen the moving of the clinical meetings to Wednesday and I have asked her whether it would be possible that we could have the audit at that time on the first Monday of every month. I would also be suggesting to her that perhaps our business meetings could be moved to that time and would be part of the audit process. There have been no significant development of protocols for Neurosurgery at the Hospital, with the only new protocol being the one addressing the issue of paediatric head injuries, about which I have written to you indicating why it was unacceptable. I also confirmed with you that I had not been involved in it's drafting.

As you recall, the memorandum of understanding for Neurosurgical services addresses a number of these issues, but despite best endeavours by some, many of the solutions have not been implemented.

My Sand

Page 2.....Letter to Dr Andrew Johnson.....

Lastly, as you know, I will be undertaking a four month sabbatical at the University of Cambridge at the end of September. I will be returning at the end of January 2006 to resume practice, both in private and public practice. I anticipate that I will continue to contribute to the public practice at my current commitment unless you see otherwise. For your information I enclose with this letter a copy of a letter I'll be sending to referring practitioners informing them of the temporary closure of my practice.

Yours sincerely,

ERIC GUAZZO.

CC: Mr Ken Whelan, District Manager, Townsville Hospital.



Townsville Health Service District District Administration

Enquiries to: Telephone:

Executive Office 07 4796 1003 07 4796 1021

Facsimile: Our Ref: Email

P:\dms\Shannon\corresp\June\090605 Andrew_Johnson@health.qld.gov.au

9th June 2005

Dr Eric Guazzo 65 Eyre Street North Ward TOWNSVILLE QLD 4810

Dear Eric

Many thanks for you r letter dated 6th June 2005 regarding the contents of our meeting on the 6th of June 2005.

I confirm that you letter reflects an accurate recollection of the meeting and thank you sincerely for taking the time to meet with me and discuss these issues. I look forward to your continuing contribution to The Townsville Health Service District.

Your sincerely,

Dr Ahdrew Johnson

Executive Director of Medical Services Townsville Health Service District



Enquiries to:

Dr Craig Margetts

District Medical Superintendent

Telephone: Facsimile: Our Ref: 4968 6248 4968 6408 CM:CG

7 September 2004

Dr Eric Guazzo Neurosurgeon North Ward Clinic 65 Eyre Street NORTH WARD QLD 4810

Dear Dr Guazzo

I have recently learned of your decision to withdraw from what has been a highly valued service. Your withdrawal from this service is deeply regretted as your willingness to embrace the neuroscience issues across North Queensland has been greatly appreciated and fits well with our desire for comprehensive networked services. We have spoken with The Townsville Hospital and would be very keen to participate in formalised strategic planning to take these services forward.

If there were anything that we can do to encourage you to review your decision to withdraw, then we would like to have that opportunity.

Yours sincerely

Dr Craig-Margetts

District Medical Superintendent

3/ 09 / 04

Office

Queensland Health

Mackay Old 4740

Mackay Health Service District 475 Bridge Road Postal P O Box

P O Box 5580 Mackay Mail Centre Old 4741 Phone 07 4968 6248

Fax 07 4968 6408



MOUNT ISA HEALTH SERVICE DISTRICT

Enquiries to: Telephone: Director of Medical Services

Telephone: 07 4744 4424 Facsimile: 07 4745 4575

File Ref:

Dr Eric Guazzo Neurosurgeon North Ward Clinic 65 Eyre St TOWNSVILLE QLD 4810

Dear Dr Guazzo

I receive with regret your letter of the 19 August 2004 informing me of your intention to stop visiting Mount Isa. I understand that your contribution has been significant and highly valued. Furthermore, your visits here and our ability to refer patients to you in Townsville has set something of a model of outreach services which we have been proud to be a part of.

To this end, I have spoken to Andrew Johnson at Townsville Hospital and have expressed my disappointment that your valuable service will possibly be terminated.

I realise that you have probably made a definitive decision, but if there is any way in which you could reconsider it, I would certainly be most happy.

Kind regards,

Yours sincerely

Winton Barnes

Director of Medical Services

1 September 2004

Copy to: Dr Andrew Johnson, Executive Director Medical Services, Townsville Hospital

ROYAL AUSTRALASIAN COLLEGE OF SURGEONS

Patron: H.R.H. The Prince of Wales



Executive General Manager

Phone: 03 9249 1205

Fax: 03 9249 1217

Email: david.hillis@surgeons.org

27 September 2004

Mr Eric Guazzo FRACS North Ward Clinic 65 Eyre Street NORTH WARD, QLD 4810

Dear Mr Guazzo

On behalf of the Management and staff I am writing to congratulate you on your election as Vice President of the Neurosurgical Society of Australasia.

I look forward to working with you and remind you that the resources of this office are always available to assist you in carrying out your responsibilities.

Let me know if there is anything I can do to assist you in your role as Vice President of the Neurosurgical Society of Australasia.

Yours, sincerely

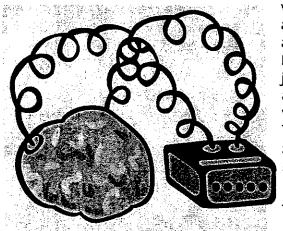
Dr David Hillis

Executive General Manager

R:\RELATIONSHIPS\Specialist Societies\NSA\Office Bearers NSA 2004 Guazzo.doc

Page 1

Mr Eric Guazzo has left the building



Theatre 7 will never be the same. After ten years of digging around in the brain in our hospital Mr. Guazzo has succumbed to the dark side and will now be going to the pri-

vate sector. So to try and make us feel better about him going (and because theatre staff just love a nosh up) an afternoon farewell tea was held in his honor. The food was a great success and the crowning achievement had to be the watermelon that Jeff 'acquired' from a patient. It impressed everyone.

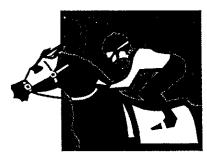
Mr. Guazzo leaves with many fond memories of the wonderful staff here at TTH— well he has to say that doesn't he— and he said that even though his is leaving the public sector there

will always be a chance that he will try and book a case on the fast tract board after hours just so we don't forget what he looks like. So as we bid Mr. Guazzo goodbye we will always remember him as a easygoing, good to work with, a man with honesty and integrity. In other words, a man with a beautiful mind.

We will miss you Mr. Guazzo



MELBOURNE CUP LUNCH



Melbourne Cup Day is not just about horses running around a track. Oh nol you have to take into account the food, the fashion, the flare and most of all, the best hat competition! This years entrants had the opportunity to dazzle the judges with their designs that not only had to be innovated, but also had to be made in lighting quick time. As the contestants found

out, it's not just the hat the counts, it's the whole ensemble.

The House of Monica & Mat chose Tiki to model their stunning design they called "A little Paris in Theatres". Tiki wore a beautiful beret style hat coordinating perfectly with a dress from the slide sheet range and shoes by chux. The overall effect was remarkable and won the best Innovated Design. Cardiac Designs worked overtime to create Angela's work of art named "The Horses are on the Track" which won the Best Traditional Design under a cloud of controversy as after the trophy was handed out, the creation started to fall apart.

The Ortho House of Pain entered the only male in the competition with a hat tastefully called "Dead Turtle Walking" worn by Pankaj who when presented with his winnings of a bottle of wine complained that the horses ass trophy's were more his style.

Mandy wore a fascinator made with blue kimgard in a rose design, Robyn brought the roaring 20's back in style with her hat and Tracey went with the feathered look. All in all, it was a wondrous event and we can only hope that next years Fashion on the Fields will be bigger and better.



MEMORANDUM

To:

Dr G Koh, A/Director, Women's & Children's Health Institute

Copies To:

Cathy Styles

Dr W. Frischman

Dr P. Ryan

Dr A. Blair

From:

Professor A. Sive

Contact No:

47961453

Director of Pa

Director of Paediatrics

47961471

Women's & Children's Health Institute

Fax No: File Ref:

020305ASNBM

Subject:

CONCERN ABOUT NEUROSURGICAL SERVICES

The Paediatricians have expressed a concern about the availability and quality of current and future neurosurgical services for children at The Townsville Hospital. This concern does not relate to past instances of care but rather aims to be proactive in preventing any future untoward events.

To date paediatric patients requiring neurosurgery have received outstanding treatment diagnostically, surgically and postoperatively. The recent institution of joint paediatric and neurosurgical care has improved patient management even further.

We would like to see this standard of care continue. With the change in the neurosurgical staffing we would like reassurance about the paediatric experience of the Neurosurgeon who is due to start working here in the near future. This information is important in aiming for "evidence based best practice" for our patients and will allow clinicians and administrators to decide the most cost effective way to manage these complex patients. The number of patients requiring neurosurgery is not large (approximately 4 to 6 new brain tumours per year plus head injury patients). We believe that there is a Paediatric Neurosurgeon at the Royal Children's Hospital in Brisbane whose area of expertise is brain tumours and depending on the expertise available locally we should consider availing ourself of this expertise. However we also believe that we need to retain expertise locally and regionally.

It is important that the "moment of truth" when we require expert services be a positive one for all concerned and hence would appreciate discussion of this issue at the highest level.

Yours sincerely

PROFESSOR ALAN SIVE DIRECTOR OF PAEDIATRICS

WOMEN'S AND CHILDREN'S HEALTH INSTITUTE

02.03.2005



MEMORANDUM

To:

Dr Niali Small, Director Emergency Department

Dr Alan Sive, Director Paediatrics

Reno Rossato, Director Neurosurgery

Coples To:

Emergency Consultants and Registrars

Paedlatric Consultants and Registrars

Val Tuckett, Director of Nursing

Ken Whelan, District Manager

From:

Dr Andrew Johnson

Executive Director of Medical Services

Townsville Health Service District

Tel No:

07 4796 1003

Fax No:

07 4796 1021

File Ref:

P:\dms\shannon\corres

p05\April\270405

Date:

27th April 2005

Subject:

Paediatric Patients with Head Injury

Outlined below is the Rationale and procedure for treating Paediatric Patients with Head Injuries which will become policy in the very near future.

Patient Group

Paediatric Patients with Head Injury

Rationale

Ensure that patients requiring admission are cared for in the most appropriate clinical setting, by the most appropriate clinical team.

Procedure

When paediatric patients with head injury are considered to require admission:

- The neurosurgical team should be consulted in the first instance.
- If no operative care is contemplated, the neurosurgeon may suggest referral to the paediatrician on-call.
- If the paediatrician agrees that the patient requires admission, they should normally be admitted to the paediatric ward for joint care between the paediatrician and neurosurgeon.
- The paediatric team will take primary carriage of care in the ward.
- Any deterioration in patient condition will be discussed on a consultant to consultant basis and consideration will be given to ICU referral.

Dr Andrew Johnson

Executive Director of Medical Services

Townsville Health Service District

Townsville Health Service District District Administration

Enquiries to: Telephone:

Executive Office 07 4796 1003 07 4796 1021

Facsimile: Our Ref:

Fmail

P:\dms\Shannon\corresp\Apri\220405 Andrew Johnson@health.qld.gov.au

28 April 2005

Ms Nicola Robinson Scholarship Programme Manager Royal Australasian College of Surgeons PO Box 553 Stepney SA 5069

Dear Ms Robinson,

Re: Reference for Mr Eric Guazzo

I am pleased to write in reference for Mr Eric Guazzo, Neurosurgeon at the Townsville Hospital. I understand that he has applied for the Ramsay Fellowship to support his planned professional development activity in the UK at the NHS Addenbrook Hospital Trust, Cambridge.

Mr Guazzo is a very highly regarded practitioner who has provided considerable support to the public healthcare system in Townsville over the last ten years. His contributions have gone beyond the simple provision of local service and have extended to:

- A significant outreach commitment to North Queensland;
- Leadership in the Queensland Neurosurgical Community;
- Post-graduate training commitments;
- Considerable commitment to the development of the James Cook University Medical School;
- Membership of the Neurosurgical Board of the Royal Australasian College of Surgeons; and Training
 of a PNG surgeon as part of Rowan Nicks scholarship, to help establish a neurosurgical service in
 PNG.

On the basis of this demonstrated commitment to the development of quality neurosurgical services in North Queensland and beyond, I feel very confident in supporting Mr Guazzo's application for the Ramsay Fellowship. I believe that he exemplifies the ethos that this award aims to support. Indeed, it would be difficult to identify a more appropriate candidate. He is a man possessed of enormous talent, drive and commitment and enjoys my full support in this application.

Yours Sincerely

Dr Andrew Johnson

Executive Director Medical Services

Townsville Health Services District

Office The Townsville Hospital 100 Angus Smith Drive DOUGLAS QLD 4814

PO Box 670 TOWNSVILLE QLD 4810 Phone 07 4796 1003

Fax 07 4796 1021

ERIC P. GUAZZO

M.D., F.R.C.S., F.R.A.C.S. NEUROSURGEON

Associate Professor School of Medicine University of Queensland and James Cook University

5 May 2005

Dr Andrew Johnson Executive Director of Medical Services Townsville Health Services District Townsville Hospital 100 Angus Smith Drive DOUGLAS QLD 4814

Dear Andrew,

NORTH WARD CLINICM.B.B.S., 65 EYRE STREET NORTH WARD TOWNSVILLE Q. 4810

PHONE: (07) 47722844 FAX: (07) 47722834

EMAIL: ngneurosurgery@austamet.com.au

SPECIALIST MEDICAL CENTRE 207 LAKE STREET CAIRNS, Q. 4870

eg:km

SUBJECT: Paediatric patients with head injuries.

Further to our discussion of yesterday, 4 May 2005, when I informed you that I would not be able to adhere to the suggested protocol for the management of paediatric patients with head injuries as circulated by the Department of Surgery on 29 April 2005. I believe this protocol is not consistent with the current standards of care or established guidelines for patients with paediatric head injuries. I informed you that I was not aware of the existence of this protocol until I received a copy when it was circulated to the members of the Surgical Department. I appreciate that I was away from clinical practice at the hospital from early December 20 to early February and there was a question as to whether I would return to the hospital. However, I had returned in clinical practices at the Townsville Hospital for three months before these guidelines was circulated.

The management of traumatic brain injury falls within the specialty of neurosurgery and should be managed by neurosurgeons whenever they are reasonably available and particularly when the service is available. If paediatric patients suffer a significant brain injury to require admission to the Townsville Hospital either via the accident and emergency department or referral from a referring hospital, they should be admitted under the neurosurgeon on-call for that day. I have had a long-standing good working relationship with the consultants in accident and emergency and paediatric department at the Townsville Hospital and recognise and rely on their very important role and contribution they make to the management of paediatric head injury patients admitted under my care. I do not think that they or I have had a reason to change our working practice for these patients.

Yours sincerely,

ERIC GUAZZO.

CC: Dr Niall Small, Director of Emergency Department.
Dr Alan Sive, Director of Paediatrics Department.
Mr Reno Rossato, Director of Neurosurgery.
Mr Ken Whelan, District manager, Townsville Health Services District.

Fig. Cay

ERIC P. GUAZZO M.D., F.R.C.S., F.R.A.C.S. NEUROSURGEON

Associate Professor School of Medicine University of Queensland and James Cook University

5 May 2005

Dr Andrew Johnson
Executive Director of Medical Services
Townsville Health Services District
Townsville Hospital
100 Angus Smith Drive
DOUGLAS QLD 4814

NORTH WARD CLINICM.B.B.S., 65 EYRE STREET NORTH WARD TOWNSVILLE Q. 4810

PHONE: (07) 47722844 FAX: (07) 47722834

EMAIL: ngneurosurgery@austernet.com.au

SPECIALIST MEDICAL CENTRE

207 LAKE STREET CAIRNS, Q. 4870

eg:km

Dear Andrew,

Further to our phone discussion of yesterday, 4 May 2005, regarding the medical management of Cheryl Downman (DOB: 26/1/1976).

You will recall that on Wednesday 20 April 2005, Dr Michael Corcoran, Intensive Care specialist at the Townsville Hospital contacted me as the neurosurgeon on-call to ask me to be involved in the management of this lady, who had suffered an acute medical condition. After considering all the information we decided that the unusual procedure of a decompressive craniectomy was appropriate to attempt to control her intra-cranial pressure and save her life. We recognised that she may remain with severe long term disability. The surgery was uncomplicated and the intra-cranial pressure was controlled. On 27 April 2005, I discussed her continuing management with Dr Paul Lane, on duty Intensive Care Specialist at the Townsville Hospital and we decided on a management plan regarding her discharge to the rehabilitation ward.

Dr Paul Lane contacted me later that day to say that our arranged plan had been changed and he wished to know whether I had been informed or party to this, to which I answered no to both questions. He informed me that the Clinical Director of the Surgical Institute, Reno Rossato, had been into intensive care and had altered our plan of management.

I am writing asking you to investigate this matter so that I can understand why a clear and appropriate management plan decided on by two medical specialist practitioners involved in this lady's care was altered.

Yours sincerely,

ERIC GUAZZO.

CC: Mr Ken Whelan, District Manager, Townsville Health Services District, Townsville Hospital.

From: "Andrew Johnson" < Andrew Johnson@health.qld.gov.au>

To: <nwclinic@austarnet.com.au>; "Gerry FitzGerald" <Gerry_FitzGerald@health.qld.gov.au>;

"JACKIE HANSON" < Jackie_Hanson@health.qld.gov.au>; "Ken Whelan"

<Ken_Whelan@health.qld.gov.au>; "Reno Rossato" <Reno_Rossato@health.qld.gov.au>;

"Shaun Drummond" <Shaun_Drummond@health.qld.gov.au>

"Brian PUGH" <Brian_Pugh@health.qld.gov.au>; "Monica Trujillo"

<Monica_Trujillo@health.qld.gov.au>; "Samantha Syron"

"Shannon Campbell" <Shannon_Campbell@health.qld.gov.au>

Sent: Friday, 3 June 2005 18:37

Subject: N/S Cover - Don Myers Registration and TTH Employment

Dear all,

Cc:

I have had a long meeting with Dr Guazzo this afternoon.

- . He is keen to welcome Don and to work with him as a colleague.
- Would prefer that DM had formal College assessment.
- Is prepared to continue 1 in 3 plus will be able to pick up some extras in Reno's absence (will advise Jackle on availability)
- Prepared to do first couple of lists (EG days) when DM arrives, working with DM to provide orientation and will let me know if he sees any issues
 of concern.
- Not happy to formally "sign-off" DM as competent given expected limited exposure.
- Not comfortable taking on "supervisor" role in Reno's absence as he has not been involved in selection and recruitment, has not seen logbooks etc.

Have spoken with Wavelength (John Bethell)

- They have contacted College and will carry out Instruction to seek expedited review to specialist status (Cost involved around \$4500)
- They have been advised that new Board supervision requirements not yet formally activated when they contacted Board today

Previous discussion with Chief Health Officer, Gerry Fitzgerald, MBQ member

- Board clearly moving to tiered supervision requirement
- SMO without deemed specialist status needs / will need nominated direct supervisor at similar level to registrar

Have spoken with Reno

· Reno will call NSA Exec officer to ask for special consideration of expedited review

Other Facts

- DM registration as SMO in Neurosurgery has come through
- MBQ supervision requirements not yet formalised
- DM is en route from tomorrow as I understand it
- If we do not use DM we will need to send N/S patients to BNE
- College assessment normally takes 12 weeks for deemed specialist
- DM due to commence for 12 weeks from 20 June.
- RR away from 9 June to 4 July

My recommendation

- Short Term
 - o Continue with appointment
 - O Continue with College assessment process in background expedite using any favours Reno or Gerry can pull in
 - O When DM arrives orientation but no call or independent operating until he has done two lists with EG.
 - O Eric to advise me of any issues of concern with operating technique, judgement etc
 - If no concerns, move to have DM on roster and operating independently thereafter with Reno as designated supervisor, Eric happy to
 provide collegiate support
 - Medium to long term
 - O All senior appointments to require deemed specialist status unless working in department where significant oversight / supervision is feasible... eg ED and anaesthetics

Rationale

- · Minimum disruption to acute service in Reno's absence
- · Minimises fallout on potentially very valuable long term recruit
- · Provides a level of support that increases my level of comfort in signing off independent practise
- · Works within existing Board requirements, respecting new, as yet unimplemented, requirements
- Clearly in current situation would be vastly preferable to have College assessment completed but timeframe may preclude this prior to scheduled

commencement

- If we have well trained surgeon on our books but not using them we may put patients at unnecessary risk by protracted transfers and consequent delays to care
- CV looks good, observed surgery over a couple of lists should give reasonable indication of any potential problems and improve orientation.

Fallback Position

- Pull out of locum until Reno's return or College assessment complete
- Send patients to Brisbane when EG and RR unavailable (most of 9 June to 4 July)

Requested Action

- All please confirm your agreement with planned approach detailed above or
- Detail concerns and potential solutions
- Dr Andrew Johnson
 Executive Director Medical Services
 Townsville Health Services District
- 61 7 4796 1003

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ERIC P. GUAZZO

M.D., F.R.C.S., F.R.A.C.S. NEUROSURGEON

Associate Professor School of Medicine University of Queensland and James Cook University

6 June 2005

Ms Jackie Hansen
Operations Director - Institute of Surgery
The Townsville Hospital
100 Angus Smith Drive
DOUGLAS QLD 4815

FAX: 47961431

Dear Jackie,

NORTH WARD CLINICM.B.B.S., 65 EYRE STREET NORTH WARD TOWNSVILLE Q. 4810

PHONE: (07) 47722844 FAX: (07) 47722834

EMAIL: ngneurosurgery@austarnet.com.au

SPECIALIST MEDICAL CENTRE 207 LAKE STREET CAIRNS, Q. 4870

g:km

Faxed with roster a GP letter. 6605

@ 14.172 bw.

RE: ON-CALL ROSTER FOR NEUROSURGERY.

I have completed the on-call roster, marking the weekends that I'm due to be on-call with a "G". I have essentially continued the roster as it is, doing every third weekend, with the only weekend I couldn't do in that sequence, being the weekend at the end of July as I will be away attending the Neurosurgery Board Meeting and selection of advanced trainees which is undertaken in Melbourne. I was assuming that I would continue to do call on Tuesdays and Wednesdays as I currently do.

(

Regarding Fridays when Reno is away in Cairns, I am prepared to cover these periods.

During the period of Reno's absence I am able to do additional call on the days marked with an "A" at short notice. I can not change other dates. Please let me know which days you wish me to do.

You will be aware that I have had a discussion with Dr Andrew Johnson regarding the overseeing of Dr Don Myers when he commences Neurosurgery practice at the Townsville Hospital. I look forward to welcoming him as a colleague and I hope that he will become a long term member of our neurosurgery group and I would be more than willing to support him in any way I can. However, I am not willing to undertake his overseeing or supervision and I have spoken to Andrew Johnson about the reasons for this.

I will, as you know, from previous correspondence, be leaving for the UK in the week beginning 26 September 2005 and therefore will be ceasing practice on Friday 23 September. I will be re-starting practice on Monday 30 January 2006. For your information I enclose a letter that I will be circulating to referring GP's informing them of the temporary closure of my practice.

Yours sincerely,

ERIĆ GUAZZO.

CC: Dr Andrew Johnson, Executive Director of Medical Services, Townsville Hospital.

/Faxed to 47961021 6/6/05-04-5000



Townsville Health Service District District Administration

Enquiries to: Telephone: Executive Office 07 4796 1003 07 4796 1021

Facsimile: Our Ref: Email

P:\dms\Shannon\corresp\June\090605 Andrew Johnson@health.qld.gov.au

9th June 2005

Dr Eric Guazzo 65 Eyre Street North Ward TOWNSVILLE QLD 4810

Dear Eric

Many thanks for your letter dated 5th May 2005 received 20th May 2005 regarding the care of Cheryl Downmann (DOB: 26/1/1976).

The concerns you raised in your letter reflect those raised independently by Dr Paul Lane. I have requested a response from Mr Rossato regarding these concerns and will be in a better position to provide you with a formal response on receipt of Reno's advice.

Many thanks for raising this matter.

Dr Ahdrew Johnson

Executive Director of Medical Services
Townsville Health Service District



Townsville Health Service District District Administration

Enquiries to: Telephone: Executive Office 07 4796 1003 07 4796 1021

Facsimile: Our Ref:

Email

P:\dms\Shannon\corresp\June\020605 Andrew_Johnson@health.qld.gov.au

9th June 2005

Dr Eric Guazzo 65 Eyre Street North Ward TOWNSVILLE QLD 4810

Dear Eric

Many thanks for you letter dated 6th June 2005 as a copy of your response to Jackie Hanson regarding the on call roster for neurosurgery.

I thank you sincerely for your willingness to provide assistance over this period.

Dr Andrew Johnson

sincerely,

Executive Director of Medical Services

Townsville Health Service District

From:

"Andrew Johnson" < Andrew_Johnson@health.qld.gov.au>

To:

"Adrian Nowitzke" <Adrian_Nowitzke@health.qld.gov.au>; "Craig Margetts"

<Craig_Margetts@health.qld.gov.au>; "Jeannette Young"

<Jeannette_Young@health.qld.gov.au>; "Jill Newland" <Jill_Newland@health.qld.gov.au>; "John Evans" <JohnS_Evans@health.qld.gov.au>; "Ken Whelan" <Ken_Whelan@health.qld.gov.au>;

"Mark Elcock" < Mark_Elcock@health.qld.gov.au>; "Niall Small"

"Paul Lane" <Paul_Lane@health.qld.gov.au>; "Peter Aitken" <Peter_Aitken@health.qld.gov.au>;

"Richard Ashby" <Richard_Ashby@health.qld.gov.au>; "Scott Francis Campbell"

<Scott_Campbell@health.qld.gov.au>; "Vic Callanan" <Vic_Callanan@health.qld.gov.au>

Cc:

<nwclinic@austarnet.com.au> Friday, 10 June 2005 13:16

Sent: Subject:

Neurosurgical Cover this weekend

Dear all,

late notice apologies

Our Director of Neurosurgery is on leave for three weeks from today. Our locum arrives on 14 June and should be able to participate in the on-call roster from 23 June. Dr Guazzo has kindly agreed to take on additional call to cover most of this gap, however he is unavailable this long weekend.

As a consequence we will need to be on bypass for neurosurgery from today through to Tuesday 14/6. I have spoken with Dr Campbell in RBWH and have left a message for Dr Nowitzke In PAH , if there are patients requiring acute neurosurgical care or opinions, please contact the N/S reg at RBWH in the first Instance.

Our locum will be with us for three to augment the unsustainable roster our surgeons have been working to. We are hopeful of finalising a permanent staff appointment soon.

yours Andrew Johnson

Dr Andrew Johnson Executive Director Medical Services Townsville Health Services District

61 7 4796 1003

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From:

"Andrew Johnson"

To:

<nwclinic@austarnet.com.au>

Sent:

Friday, 10 June 2005 19:27

Attach:

ATT00052.eml

Subject:

Fwd: URGENT - Neuro On Call Roster

this is the roster I discussed with you today.

Again, sincere apologies for not getting this sorted earlier. I will be following up the issues with Reno on his return.

Yours Andrew

Dr Andrew Johnson Executive Director Medical Services Townsville Health Services District

61 7 4796 1003

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ERIC P. GUAZZO

CLINICM.B.B.S., M.D., F.R.C.S., F.R.A.C.S. NEUROSURGEON

Associate Professor School of Medicine University of Queensland and James Cook University copy

NORTH WARD 65 EYRE STREET NORTH WARD TOWNSVILLE Q. 4810

PHONE: (07) 47722844 FAX: (07) 47722834

EMAIL: ngneurosurgery@austarnet.com.au

SPECIALIST MEDICAL CENTRE 207 LAKE STREET CAIRNS, Q. 4870

10TH June 2005.

Dr Andrew Johnson
Executive Director of Medical Service
Townsville Hospital
PO Box 670
TOWNSVILLE QLD 4810

Dear Andrew

RE: ONCALL ROSTER FOR NEUROSURGERY

Over the years and in particular the last five years I have brought to your and the previous Medical Administrator's attention on a number of occasions, very concerning problems with the Neurosurgical roster for oncall. My main concern has been that there were periods of time when neurosurgical service was left with no cover yet no notification or alternative arrangements were made. At times I was called for advice or to provide service when I was not on call, having not been previously made aware that this may be required. You will recall that I have written on a number of occasions regarding this matter explaining how this was professionally unacceptable and also jeopardises the safety and standard of care for patients and delivery of service.

This pattern has continued and I last wrote to you about it in November of last year and brought it to your attention earlier this year.

In an attempt to overcome this, a roster was to be made available well in advance. Today the 10/6/05 I am not rostered to be on call, yet I was phoned at 7am by the General Surgical-Registrar on call at the Townsville Hospital to render him assistance in the operating theatre when he was operating on a two year old child who had suffered a severe head injury, the child having been transferred down from Cairns. I have had further calls today regarding care of patients in hospital. Mr Reno Rossato, the rostered on call Neurosurgeon knew of this child yet he was not available nor in fact within the city. No alternative arrangements had been made.

I believe this situation is professionally unacceptable and I am asking you to investigate this matter and advise me on action taken. You are aware that I have previously informed Mr Whelan of this problem and I have copied this letter to him so that he is once again been informed. Please regard this letter as an official grievance letter of complaint and I expect this matter and the two matters I wrote to you about, on the 5/5/05 to be given due process under the grievance procedure of Queensland Health.

Yours sincerely

ERIC GUAZZO

cc. Mr Ken Whelan - District Manager, Townsville Hospital

From:

"Andrew Johnson" <Andrew_Johnson@health.qld.gov.au>

To:

≲nwclinic@austarnet.com.au>

Cc.

ଧACKIE HANSON" <Jackie_Hanson@health.qld.gov.au>; "Ken Whelan"

Ken_Whelan@health.qld.gov.au>; "Luke Worth" <Luke_Worth@health.qld.gov.au>; "Shannon

Campbell" <Shannon_Campbell@health.qld.gov.au>; "Shaun Drummond"

<Shaun Drummond@health.qld.gov.au>

Sent:

Tuesday, 14 June 2005 18:44

Attach:

Neuro On Call Roster.doc

Subject: Eric,

this is the only comment we have made on Don Myers appointment...

Press Comment

some time the Townsville Hospital has been pursuing an American trained Neurosurgeon who has expressed an interest in working ih North Queensjand.

At this point in time a locum position with intention to explore a permanent placement has been negotiated, registration with the Medical Board of Queensland as a Senior Medical Officer has been granted for this period.

We have no intention for this clinician to practice independently until his specialist status is supported by the Royal Australasian College of Surgeons and authorised by the Medical Board of Queensland.

He is a highly regarded specialist in the United States and we have requested that his specialist application be advanced and assistance from the College of Surgeons to achieve this would be greatly appreciated to ensure the continuation of service provision to North Queensland.

To date this process has taken longer than hoped and until such time as this doctor is registered as a specialist he will spend time familiarising himself with the QH systems and the North Queensland clinical environment. At present the application is with the Australian Medical Council before being passed on to the College, hopefully by the end of this week.

I have spoken with the agent again today, and I am not hopeful of getting the specialist status through the College quickly. Where this leaves us is asking you to cover what you are willing to do until Reno gets back, attached is a roster representing my understanding of your offer.

Once again, thank you for your understanding on this issue. I will ask Shannon to fax this through to your rooms tomorrow as well as having this soft copy.

yours Andrew

Dr Andrew Johnson **Executive Director Medical Services** Townsville Health Services District

61 7 4796 1003

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From:

"Andrew Johnson" <Andrew_Johnson@health.qld.gov.au>

To:

<ngneurosurgery@austarnet.com.au>

Cc:

"JACKIE HANSON" < Jackie_Hanson@health.qld.gov.au>; "Ken Whelan"

<Ken_Whelan@health.qld.gov.au>

Sent:

Wednesday, 15 June 2005 17:24

Subject:

Re: Press Comment

Sincere thanks Eric

Dr Andrew Johnson Executive Director Medical Services Townsville Health Services District

61 7 4796 1003

>>> "NQ Neurosurgery" <nqneurosurgery@austarnet.com.au> 06/15/05 04:40pm >>> Dear Andrew,

Thank you for your email of 14 June 2005, which I have just read.

I appreciate the statement regarding Dr Myer.

Regarding the on-call roster, I can do all the days marked with "G" except I will be away in Caims doing clinics on 16 June 2005 and 30 June 2005. I cannot do call after 5pm on Saturday 2 July 2005 until 8.00am Sunday 3 July 2005 because of a prior engagement.

Yours sincerely,

Eric.

---- Original Message ----- From: Andrew Johnson

To: nwclinic@austarnet.com.au

Cc: JACKIE HANSON; Ken Whelan; Luke Worth; Shannon Campbell; Shaun Drummond

Sent: Tuesday, June 14, 2005 6:44 PM

Subject: Press Comment

Eric.

this is the only comment we have made on Don Myers appointment...

For some time the Townsville Hospital has been pursuing an American trained Neurosurgeon who has expressed an interest in working in North Oueensland.

At this point in time a locum position with intention to explore a permanent placement has been negotiated, registration with the Medical Board of Queensland as a Senior Medical Officer has been granted for this period.

We have no intention for this clinician to practice independently until his specialist status is supported by the Royal Australasian College of Surgeons and authorised by the Medical Board of Queensland.

He is a highly regarded specialist in the United States and we have requested that his specialist application be advanced and assistance from the College of Surgeons to achieve this would be greatly appreciated to ensure the continuation of service provision to North Queensland.

To date this process has taken longer than hoped and until such time as this doctor is registered as a specialist he will spend time familiarising himself with the QH systems and the North Queensiand clinical environment. At present the application is with the Australian Medical Council before being passed on to the College, hopefully by the end of this week.

I have spoken with the agent again today, and I am not hopeful of getting the specialist status through the College quickly. Where this leaves us is asking you to cover what you are willing to do until Reno gets back, attached is a roster representing my understanding of your offer.

Once again, thank you for your understanding on this issue. I will ask Shannon to fax this through to your rooms tomorrow as well as having this soft copy.

yours Andrew

Dr Andrew Johnson Executive Director Medical Services Townsville Health Services District

61 7 4796 1003

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From:

"John Scott"

To:

<nwclinic@austarnet.com.au>

Sent:

Friday, 17 June 2005 23:45

Subject:

Re: NEUROSURGERY IN QLD.

Eric

I am sorry to hear that we haven't progressed much. I am not sure that pushing on this particular issue is worth it at present particularly as you ask me to keep this confidential.

I have come from a meeting with the RACS this evening and we are planning a joint project with them in a few centres including Townsville - the aim is to make hospitals more "surgeon friendly"

I hope we might be able to get something from this but I must admit my hopes are not high at present.

I am off for a week at the farm in Ingham so maybe things will seem a little brighter after that.

I will be in touch

John

>>> "North Ward Clinic" <nwclinic@austarnet.com.au> 10/06/2005 2:20:35 pm >>> PLEASE FIND ATTACHED BOTH LETTERS

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20/06/2005



Townsville Health Service District District Administration

Enquiries to:

Executive Office 07 4796 1003

Telephone: Facsimile:

07 4796 1021

Our Ref: Email P:\dms\Shannon\corresp\June\230605 Andrew Johnson@health.qld.gov.au

23rd June 2005

Dr Eric Guazzo 65 Eyre Street North Ward TOWNSVILLE QLD 4810

Dear Eric

I write further to your letter of the 5th May regarding Paediatric patients with head injuries. I appreciate the points you made regarding the appropriate care and placement for children with head injuries.

Given the professional disagreement around this issue I have discussed the matter with the District Manager, Mr Ken Whelan and we have decided to seek external neurosurgical input. I will be contacting the Director of Neurosurgery at RBWH to seek his views and shall advise in due course.

Yours sinderely

Dr Andrew Johnson

Executive Director of Medical Services

Townsville Health Service District



Townsville Health Service District District Administration

Enquiries to: Telephone:

Executive Office 07 4796 1003

Facsimile: Our Ref: 07 4796 1003

Email

P:\dms\Shannon\corresp\June\230605 Andrew_Johnson@health.qld.gov.au

23rd June 2005

Dr Eric Guazzo 65 Eyre Street North Ward TOWNSVILLE QLD 4810

Dear Eric

Following on from my letter to you acknowledging receipt of your complaint regarding the care of Cheryl Downmann and the intervention of Mr Reno Rossato, the matter was discussed with Mr Rossato and he has provided a formal response (attached).

If you do not feel satisfied with this response, I will be seeking external review to resolve the issue from another consultant neurosurgeon.

Please advise regarding your views on this response.

Yours sincerely,

Dr Andrew Johnson
Executive Director of Medical Services
Townsville Health Service District

TOWNSVILLE HEALTH SERVICE DISTRICT



Institute of Surgery

Queensland Health

Enquiries to:

Telephone: 4796 1442

Facsimile: 4796 1431

Dr Andrew Johnson Executive Director The Townsville Hospital

Dear Andrew

Thank you for the opportunity of replying to your letter written to you by Eric P Guazzo, dated 5th May 2005. I would like to make the following comments.

- 1. There was no interference in this patient's clinical management, nor was it suggested by Associate Professor Guazzo in his letter.
- 2. The concern had its origin in ICU nursing staff upwards eventually to the responsible Nursing Director, who spoke to me.
- 3. My concerns were expressed to Dr Paul Lane noting inter alia
 - a. Established ICU practice was to ward patients to an appropriate ward bed when patients no longer required intensive care. Practice other than this has bed block risks and I am sure we are all familiar with concerns expressed by the then Director of ICU, Dr Michael Corkeron, regarding bed block issues. I have confirmed that this practice has been ICU established practice since its genesis some 30 years ago.
 - b. The "plan" under consideration was at such variance from established practice, i.e. to keep a non ICU patient for 10 days or so when a suitable ward bed was available.
 - c. That it would be unsafe to transfer this patient with the front part of her skull missing to a rehabilitation bed. I mention this since only three scenarios are available in this circumstance
 - .1. Stay in ICU
 - .2. To ward bed in Surgical 3
 - To rehabilitation
 - d. That I would refer my concerns to the Senior ICU Specialist available to ensure that ICU thinking was applied against my concerns. The Senior Intensivist available was Dr Geoff Gordon. The patient was transferred to Surgical 3. From that ward bed, her clinical pathway was as designed and executed by Associate Professor Guazzo, and the patient has subsequently gone to rehabilitation.

Yours singerely

Mr Reno Rossato
CLINICAL DIRECTOR
Institute of Surgery

8th June 2005

Recived 8/6/05

4796 2700

ERIC P. GUAZZO

M.D., F.R.C.S., F.R.A.C.S. NEUROSURGEON

Associate Professor School of Medicine University of Queensland and James Cook University NORTH WARD CLINICM.B.B.S., 65 EYRE STREET NORTH WARD TOWNSVILLE Q. 4810

PHONE: (07) 47722844 FAX: (07) 47722834

EMAIL: ngneurosurgery@austamet.com.au

SPECIALIST MEDICAL CENTRE

207 LAKE STREET CAIRNS, Q. 4870

1st July 2005

Dear Colleague,

RE: Temporary Closure of my practice from Friday 23 September 2005 – Monday 30 January 2006.

During the time from late September 2005 until late January 2006, I will be undertaking a four-month sabbatical at the University of Cambridge UK, Department of Neurosurgery at Addenbrooke's Hospital. This will be a period of continuing professional development and I will be involved mostly in clinical activities, however also some research work in this internationally regarded neurosurgical department where I have previously worked for four years in the 1990's.

Despite my best endeavours, I have been unable to find a locum for this period. My office will remain open during normal business hours for administrative queries and staff will be able to assist with alternative referral arrangements if you require. The possibilities available will be referral to the Regional Neurosurgery Unit at the Townsville Hospital or to Neurosurgeons in Brisbane.

I'm sorry if this will inconvenience you and your patients however I look forward to resuming our professional association upon my return in late January 2006. I will continue to treat patients until mid September 2005 and will resume booking of patients in early January 2006.

Please don't hesitate to contact me before I leave if you feel there are any matters which need to be arranged regarding patients' management during the period while I am away.

Yours sincerely,

ERIC GUAZZO.

ERIC P. GUAZZO M.B.B.S., M.D., F.R.C.S., F.R.A.C.S. NEUROSURGEON

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SPECIALIST MEDICAL CENTRE, 207 LAKE STREET CAIRNS, Q. 4870

5th July 2005

Dr Andrew Johnson
Executive Director
Townsville Health Service
PO Box 670
TOWNSVILLE QLD 4810
Fax Number - 47961021

Dear Andrew

I received your letter of the 23/6/05 which relates to my letter regarding the care of Cheryl Downmann (DOB 6/1/1976). With your letter you attached had a response from Mr Reno Rossato, Clinical Director Institute of Surgery.

I am writing to inform you that the response which you have received from Mr Rossato in my opinion remains unsatisfactory. It fails to address the core issue of my complaint, inappropriate professional conduct and procedures. I would expect that if the Clinical Director of the Institute of Surgery had concern regarding the management plan of a patient under my care that he would have taken the appropriate professional step to contact me directly to enquire as to whether we could alter that plan if it was thought to be inappropriate. In my contact me directly to enquire as to whether we could alter that plan if it was thought to be inappropriate. In my opinion his actions in this case are not professionally acceptable. I would like to draw your attention to three matters in the letter of response which I believe to be incorrect;-

- I do not believe that Mr Rossato's response of the 8/6/05 is correct in saying that my letter did not suggest interference with this patient's clinical management. I have asked you specifically to investigate the matter of why a clear and appropriate management plan decided on by two Medical Specialists was altered without appropriate discussion. I believe that the patient's care was interfered with.
- 2. There is no issue of safety regarding the patient's transfer to rehabilitation without a reconstructive cranioplasty being performed. In my opinion the patient would have been as safe in the rehabilitation ward as they were in Surgical 3 Ward.
- 3. Lastly, I don't believe it was ever an intention that the patient remain in ICU for ten days awaiting a bed in the Rehabilitation Ward. My understanding is that Dr Paul Lane, Intensive Care Specialist had spoken directly with the Director of Rehabilitation with whom the plan was arranged.

Yours sincerely

Dr. Eric GUAZZO

NEUROSURGERY AND SPINAL SURGERY



Chairman:
Ellison Stephenson
Suite 2, Level 4
Pacific Private Clinic.
123 Nerang Street
Southport Q 4215

Ph 55285940 Fax. 55285942

21 June 2005

ES/ec.dh

RE: Queensland Health Systems Review

- 1. Existing administrative systems and recommended improvements to support health service delivery, focusing on:
 - 1.1. District and corporate organisational structures and layers of decision making

The Neurosurgical Society of Queensland has observed major impediments with respect to any constructive input to district and central decision making bodies over the past thirty years. There has been no co-ordinated liaison with the specialists with respect to forward planning of staffing and equipment in the Queensland public hospitals. During periods of crisis the Department has tended to blame the medical officers for short comings in the system. It is often easier to access Commonwealth Bureaucrats in Canberra than to access State Health Department administrators in Queensland.

There has been a separation and in fact a defacto removal of clinicians from the decision making about standards of care despite what has been suggested by bureaucracy. Therefore decisions are made without reasonable and appropriate consultation with the representatives of the Queensland Neurosurgical Society.

1.2. Corporate planning and budgeting systems

Planning in Neurosurgery for many years has depended on pressure, complaints and lobbying by Neurosurgeons rather than any statewide Health Department lead planning of Neurosurgical services. Budgeting for staffing has been done on an irregular, piecemeal, hospital-by-hospital arrangement which has resulted in unsatisfactory delivery of systems.

Members:

Leigh Atkinson John Baker Rob Campbell Scott Campbell Terry Coyne David Cull Eric Guazzo Ross Gurgo Bruce Hall Richard Kahler Glen Merry Adrian Nowitzke Paul Poulgrain Michael Redmond Reno Rossato James Smith Gordon Stuart Ellison Stephenson Leong Tan Frank Tomlinson Marianne Vonau David Walker Michael Weidmann

Teresa Withers Ivan Yaksich Currently there are staffing problems at the Royal Brisbane Hospital, the Rockhampton Hospital and the Townsville Hospital. Health ministers and senior administrators in the Department have tended to blame the visiting medical officers for the serious deterioration in the service across the State. However, it must be noted that Queensland Health has made a concerted effort in recent years not to employ V.M.O staff in preference to full time staff. The nature of Neurosurgery is that using full time staff to cover both day time and after hours call is not workable.

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There is a lack of strategic planning, be that for development of infrastructure or to ensure adequate personnel. This results in crisis management from day to day and the provision of Neurosurgical services becomes unreliable and standards of care diminish.

1.3. Cost effectiveness of services compared to relevant jurisdictions

Due to the high costs associated with setting up a Neurosurgery unit with requirements in terms of CT, MRI, and angiography suite, properly equipped theatres with microscope, navigational devices and surgical equipment, as well as adequate personnel it is considered that four major centres is appropriate. The Neurosurgical Society would recommend that Neurosurgical centres would require at three Neurosurgeons, at least two registrars and the above requirements. There would need to be a sufficient number of cases for this cost to be viable and to maintain a satisfactory level of care.

1.4. Effectiveness of performance reporting and monitoring systems

The major performance reporting system for Neurosurgery is the publication of waiting lists for surgical procedures. This is a dishonest manipulation because patients referred to the outpatient services are blocked for accessing appointments. They are given long-term or no appointments. There is no monitoring of the number of patients who are turned away or who are given outpatient appointments six months in advance. This is occurring across multiple specialties. It is a deliberate exercise to restrict services to patients requiring public hospital treatment.

The Neurosurgical Society is concerned about the inaccuracy of data. We are concerned with the lengthening surgical waiting list and the deliberate rationing of outpatient appointments.

The clinician at the workplace is constantly having to placate and sooth irate patients who are concerned about how long they have had to wait for an out patients appointment and how long they have had to wait to have their surgery, and this severely impacts on retention of V.M.O's. We are perpetually trying to justify a system which is out of control.

1.5. Organisation and delivery of clinical support services

The Neurosurgical Society of Queensland notes that there has been a poverty of forward planning of clinical support services for Neurosurgery in Queensland over the past 30 years but this has become worse in recent years.

It has been done piecemeal and hospital-by-hospital. It is often driven from the bottom by V.M.O pressures and lobbying. Over thirty years there has been little leadership by Queensland Health to plan Statewide services.

Over the past fifteen years, the hospital CEO's/ District managers have tended to change every 2-3 years. This has lead to a lack of corporate memory, lack of advocacy for staff and the lack of confident rapport between staff and administration.

The Directors of Surgery are appointed and not elected by the staff and as a result they represent the Health Department and they do not represent and are not advocates for the medical staff.

The Medical Staff are faced with 6 or 7 layers of beaurocracy interfering with eventual decision making, as a result reports are not acted upon.

1.6. Risk management systems

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Neurosurgery is a field well recognised for its high indemnity requirements. Yet, it still extends through Queensland Health where there is uncertainly of indemnity and the uncertainty of what you will and will not be indemnified for by Queensland Health. There seems a perpetual buck passing whenever any issues of clinical concern arise. This obviously adds stress and also contributes to the lack of retention of staff.

Governance systems and performance systems are of concern. Whenever we are supplied by Queensland Health data regarding Neurosurgical services, for instance; we are profoundly concerned by the unreliability of the statistics held by the Health Department on Neurosurgery in Queensland.

1.7. Quality and safety systems

Good risk management needs up to date equipment in modern medicine, and no more so than in Neurosurgery. So often in the Public system we are required to use substandard equipment. In an already highly stressful specialty with often high risk surgery being undertaken, the stress is significantly increased when you know that you are using second rate equipment. There is variable ability in different systems of upgrading instruments and purchasing new equipment in each specialty with consultation with the clinical consultant Neurosurgeon.

It should be considered that not only does each hospital need a patient liaison officer but also a risk management officer who is skilled in medicolegal issues and patient negotiations. There is no doctor advocate in the Hospital. Clinicians are left to face hostile patients and relatives and are often not supported by administration. There are no appropriately trained medical officers to interview hostile and dissatisfied patients.

1.8. Clinical audit and governance systems

The Queensland Health Department has resisted, during the 1980's and the 1990's, efforts to have the hospitals assessed by the Australian Council on Health Care. However, the Queensland Health Department had no effective alternative to carrying out a peer review assessment of the different services in each hospital. Only in recent years has this been accepted.

It is essential that the clinical staff are provided with appropriate resources of secretaries and computers to carry out clinical audit. Constant requests in this respect has failed to achieve an effective result.

There is also concern that high adverse outcome rates are associated with the more difficult cases being undertaken. It is essential that audit and clinical governance can take complexity of procedures and patient co-morbidities into consideration.

2. Clinical workforce management systems to deliver high quality health services, with a particular focus on:

2.1. Recruitment

There needs to be a process by which underperforming managers and or directors can be stood aside after due process. This assessment should include clinicians' evaluation. Currently, there is no assessment of management in terms of fulfilling their job description. Surgeons are assessed by audit, length of stay and infection rate.

The Neurosurgical Society of Queensland notes that currently the Directors of Surgery in the metropolitan hospitals are appointed and not elected by the staff. As a result, they become advocates for the Queensland Health Department rather than advocates for the clinicians. The Australian Council on Health Care Standards has had a policy that these Chairmen should be elected by the staff so that they can represent the surgical staff to the administration.

If the Directors of Surgery are Queensland Health appointed, then they should at least be formally evaluated just as other positions are evaluated. They should be required to perform according to their job description.

The Neurosurgical Society of Queensland notes that there has been unplanned recruitment across Queensland hospital systems for Neurosurgeons over a period of thirty years. The normal process has been for returning Neurosurgeons to pressure the Department for appointment. Townsville is the worse example of poor forward planning and hence there is likely to be only one recognised Neurosurgeon north of Brisbane in the next six months.

There has been a failure to attract Neurosurgeons from other regions of Australia and a failure to attract Neurosurgeons of international standing to Queensland. Eleven Neurosurgeons have just completed the National Part II examinations for FRACS in Neurosurgery and none of the candidates have expressed a desire to work in Queensland.

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This is due to poor moral, poor respect of medical staff and lack of forward planning.

2.2. Retention

The retention of staff has been disappointing, e.g. Royal Brisbane Hospital, Townsville General Hospital and Rockhampton General Hospital. This is mainly due to poor morale, non communication and little respect for efforts of practicing Neurosurgeons in public hospitals.

The Neurosurgical Society of Queensland recognises that the retention of staff has been very difficult. This has been partially due to lack of clinical support, uncertainty of indemnity, having to justify to patients the inadequacy of the system. This has been well recognised for many years but there does not appear to be any recognition within Queensland Health regarding our concerns.

Queensland Health pays less than other states for medical and nursing services. For VMO's, there is a substantial deficit between the costs of maintaining a private practice and the reimbursement offered by Queensland Health. It costs most surgeons money to work in the public system and yet the pleasure of working in the public system has been eroded by extremely poor working conditions.

Neurosurgeons have an ethical commitment to public health but the management style of Queensland Health and lack of any respect for the staff and failure to appropriately negotiate rates and conditions for VMO's and full time staff has eroded that commitment.

2.3. Training

There has been a lack of liaison, lack of respect and an attitude of control in relation to practising Neurosurgeons in the public hospital system. As a result, young returning Neurosurgeons have shown less and less interest in contributing to the Queensland Public Hospital System. The bureaucracy and its attitudes must take responsibility. Unless this attitude changes, the training of young Neurosurgeons for future positions in the public hospital system is likely to significantly deteriorate.

The recent interviews for the Australasian Neurosurgical training program yielded only 16 applicants. The Australasian Neurosurgical Society has significantly increased the Neurosurgical trainee numbers in recent years. However, with the specialty struggling with the indemnity crisis and poor remuneration in recent years, the specialty will have difficulty maintaining the number of Neurosurgeons.

2.4. Clinical leadership

There is a dearth of working clinicians in top management. This has resulted in lack of understanding by management in terms of the problems being faced by clinicians. The constant turnover of CEO's and district managers contributes to lack of corporate memory.

There is no recognition of excellence or super-specialisation in most specialist fields which should be encouraged and rewarded rather than denigrated by the system.

2.5. Measures to assist in improving the availability of clinicians

To sustain a high level of service provided by well trained Neurosurgeons, preferably from the Australasian Training Program, Queensland Health must recognise that positions would need to be made available as either full time Staff Neurosurgeons or substantial Visiting Medical Officer appointments. Work environment and conditions of service need to be of a standard that would be expected when one considers the professional services to be delivered. There is of course a mutual obligation, however we believe that most Neurosurgeons begin with a strong commitment to the public hospital system but it is the frustration of working in the system which eventually corrodes this commitment.

Regarding solutions, we do not necessarily believe that they are expensive. Consultation, involvement, commitment and strategic planning are probably fairly cheap. Of course there will need to be a financial commitment to develop the service, however we do not believe that if the goal is a suitable standard of care for all Queenslanders, that it is too expensive. Otherwise, we believe that the public hospital system will become a service that provides emergency care at a reasonable standard and all other services will be non existent or second rate.

3. Performance management systems including as they relate to:

3.1. Asset management and capital works planning and delivery

To ensure a high level of service does require a suitable level of staffing and this requires a commitment by Queensland Health to increase the number of Neurosurgeons within the public hospital system. We are not of the opinion that Neurosurgical units should be developed in every public hospital but we believe that the current spread of Neurosurgical units is probably reasonable excepting the obvious demise of the service in Rockhampton. With appropriate strategic planning and resources, a suitable level of care can be provided to all regions of Queensland. The four units need continuing support and growth. Both quality and quantity should be encouraged and supported.

Standards for the Neurosurgical unit should be established.

- 1: Personnel medical
 - Neurosurgeons
 - medical officers
- 2. Nurses- neurosurgically skilled in wards and theatre
- 3. HDU and ICU bed availability which is mandatory for many operative Neurosurgical cases in modern medicine
- 4. Medical imaging with neuroradiologists including interventional radiology
 - MRI
 - Angiography
 - Interventional angiography