

Leading a change in healthcare



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My career as a clinician over the past 20-something years has been incredibly rewarding and still today, I share the same love of medicine and desire to achieve the very best outcomes for my patients.

Like most of us, I've had my challenges and certainly the past two years is front of mind when it comes to the most challenging. But in many ways, it's also been rewarding.

It's been rewarding to be part of Queensland's incredible response to COVID-19.

It's been rewarding to work alongside my clinical colleagues who've shown up and gotten on with the job regardless of their own fears and concerns.

And it's been rewarding to be part of the changes that have allowed us to continue to deliver care in the face of a global pandemic.

While I definitely hit the ground running when I started as Chair of the Queensland Clinical Senate in the midst of the state's first 'planned' COVID wave in January, I'm excited to have taken on the role as the reform agenda gets underway in Queensland Health.

We have seen through the recent disruptive period what can be done when we remove the clutter and just get on with it, and we now have the opportunity to build on this while also facing the future challenges on our healthcare system of population growth, increasing demand and workforce constraints.

Over the past three months, the senate has held a series of meetings under the banner of 'Redesigning Healthcare', giving our members – experienced and senior clinicians from around Queensland – the chance to look at healthcare differently

to understand what opportunities exist to better serve our community and our healthcare workforce into the future.

Our first session in March recognised the importance of timely high availability care, when and where it is needed. Care that wraps around the patient and their healthcare home. We have also recognised our agility and ability to adopt new models such as virtual care during the COVID-19 pandemic and want to harness that.

In our second session, facilitated by QUT Bridge Labs, we took a five-plus year view and thought radically about the journey through (not to and from) hospitals, to explore novel ways to access specialist and hospital care and transition home, in partnership with primary care and community teams, making use of current and future technology.

The third meeting in the series – our first in-person meeting since the beginning of the pandemic – looked at the fundamental changes that need to be made in the system to make sustainable change happen.

We will now bring it all together to provide good clinical advice to the system and reform agenda.

I know that many of us, as senior clinicians, feel very strongly about the need for reform and the need to leave a legacy of sustainable clinical services.

And I feel very privileged to be leading the senate in this change agenda to see high-quality healthcare delivered in a modern and agile way.

To find out more about Dr Tanya Kelly, her career as an anaesthetist and focus as Chair of the Queensland Clinical Senate, visit the Queensland Clinical Senate podcast page player.whooshkaa.com/episode?id=931574.

