

Occasional Address

Wilson Hall, University of Melbourne, Saturday 2 December 2017, 4.00pm

Christine Kilpatrick

Chief Executive, Melbourne Health

Chancellor, Vice Chancellor, Ladies and Gentlemen and importantly graduands of 2017.

As we gather here in this iconic building, Wilson Hall, a building which has great meaning to graduates of this university, I acknowledge the traditional owners of the land on which this building stands, the Wurundjeri people of the Kulin nation and pay my respects to elders past and present.

Today is a very special day, a day which recognizes the enormous effort and commitment you have made, knowledge gained and the beginning of a new and significant phase in your life.

For many, you are about to begin a career in medicine, a career which is privileged, challenging and rewarding, and a career which I predict will be notable for delivering change, change for the better, for the patients and the community you will serve.

In 1976, 41 years ago, I graduated from medicine, and during the subsequent four decades I have seen enormous change in the technical aspects of medicine with significant advances in patient survival, new surgical techniques, transplantation, diagnostics including genomics and therapeutics.

But there has been relatively little advance in how health services are delivered, with 'inpatient hospital care in response to illness'...a reactive model, being the predominant model of care, with relatively little emphasis on disease prevention and population health. We have created a predominantly disease care model rather than a health care model.

As medical students you have worked in health services across Victoria and I'm sure you are very aware of the predominantly clinician centric model of care delivered rather than a patient centric model which we aspire to.

I'm confident your generation will lead, drive and deliver the much needed changes in healthcare delivery. Technical advances will continue and medical research will deliver new knowledge..... but the new change will be in how we deliver healthcare, how we interact with patients and how we respond to the health and wellbeing needs of our communities.

And the key enablers of this change will be consumers and technology, underpinned by the need to respond to and manage growing demand related to an ageing population and the marked increase in chronic disease, including lifestyle illnesses.

There is a tendency for health professionals to view increasing patient expectations as a problem, but other industries have long recognized that an active consumer is a force for change, and we need to acknowledge that an engaged consumer has better clinical outcomes. Retail and banking have successfully torn down many of the barriers separating consumers and providers, involving consumers at more points in the value chain, medicine has been slow to do this.

Understanding the importance of the patient experience however is growing, and the need to deliver care that is not just technically good but also in true partnership with patients and delivers the outcomes consumers want and value is a new focus for the health sector. Our definition of success is not always the same as that of our patients.

The other enabler is technology. Health is about the last and slowest industry to embrace the benefits of technology in the way services are delivered, in driving disease prevention and population health, in enabling the use of big data and in engaging with consumers.

Fully digitized health records, a patient portal allowing the patient to view their own medical record, secure messaging between patients and clinicians and ability to schedule appointments, and telehealth as the default model of care for specialist consultations, are just some of the changes we will undoubtedly see in the not too distant future. Care not just delivered close to home but in the home supported by virtual health care through technology, is inevitable.

Australians are interested in health. 84% of Australians access the internet daily and 55% more than 5 times per day. And 1 in 20 Australian Google searchers are health related. The digital world is keen to embrace health. In 2016 there were 100,000 health related apps and Google Venture Funds has recently declared “Less Uber more Health”.

Most patients want to be true partners with health professionals in deciding the care they receive and essential to this is ensuring patients are fully informed, breaking down information asymmetry, which disempowers patients. Access to their digital record is a great step in achieving this.

But is not just technology that is impacting the delivery of health care. The recent events with support for Voluntary Assisted Dying for the terminally ill is a new policy that will challenge health professionals in particular the medical profession, but it is the ultimate example of consumer driven change and consumer – clinician partnership. It is highly likely we will see more of this approach in the future.

For those of you who have completed a doctoral degree you are also entering an era of change. Funders are becoming more focused on impact of research, not just the quality of research findings and in the UK this is now a determinant of funding.

The importance of research in delivering high quality care is increasingly recognized both within and outside of government. For the past decade there has been a focus on academic centres, also referred to as university hospitals where a research institute and university are integrated into a tertiary hospital ensuring research and education are intertwined and underpin the delivery of high quality care. Successful examples include the Melbourne Children’s campus with the Royal Children’s Hospital, Murdoch Children’s research Institute and University of Melbourne Department of Paediatrics collocated and more recently the Victorian Comprehensive Cancer Centre.

But in recent years across the world this concept has expanded with larger groupings of hospitals, research institutes and universities acknowledged by the relevant Government as Advanced Health Research Translation Centres, providing a platform for greater collaboration and translation of research, clinical trials and education, and a greater ability to address the complex health issues which you will be facing.

So the medical world is changing driven and enabled by consumers, technology, recognition of the importance of research translation and collaboration and the need to innovate and deliver new and more effective models of care.

I am confident you, today’s graduands will drive and deliver this change both as medical practitioners and researchers.

So congratulations to you all, I wish you all the very best for the future.

Vice-Chancellor’s Introduction

Professor Christine Kilpatrick is Chief Executive of Melbourne Health. She is a graduate of the Melbourne Medical School, who later specialised in neurology.

Christine earned a reputation for clinical and academic leadership that saw her establish and lead the epilepsy program at the Royal Melbourne Hospital, and become inaugural chair of the Victorian Epilepsy Centres. Christine served as chair of the Victorian Quality Council, and she also served on the Women's and Children's Health Board. The Government's acceptance of her advice to disaggregate the Royal Women's and the Royal Children's Hospitals has underpinned their subsequent success as separate and complementary health services. Christine became Chief Executive Officer of the Royal Children's Hospital soon after the Victorian Government had committed to a new hospital building. Her leadership successfully prosecuted the hospital's vision for a building that delivered improved patient care and working conditions for staff, and a welcoming environment for families. In 2016 the University of Melbourne awarded to Christine the degree of Doctor of Medical Science honoris causa in recognition of her significant career contributions.

It is a pleasure to ask her to speak today. Please welcome Professor Christine Kilpatrick.