

Entry Permit Holder Report

Application ID: 24483974

Entry Permit Holder	
Full Name:	Bernadette Mulholland
Permit Number:	ET-25-03411
Union Represented:	South Australian Salaried Medical Association SASMOA

Worksite Entered	
Business Name:	Modbury Hospital Emergency Department
Industry:	Other Health
Address:	Smart Road, Modbury SA 5092
Date workplace entered:	30/09/2026

I Bernadette Mulholland am of the opinion that the PCBU has contravened the WHS legislation relating to:

	Suspected Contravention	Summary of suspected contravention, discussions on rectification, and agreed actions with timeframes	Was the contravention rectified?
PCBU Alleged Contravention 1	Not maintaining a safe work environment	Workers reported that the Modbury Hospital Emergency Department ED has been operating between 100 per cent to 200 per cent over its capacity of 34 for months. AT the time of entry there are 22 patients waiting for a bed, and it is difficult to provide adequate care for patients, within the confines of current facilities and resources. Overall, there are 34 cubicle spaces and 76 patients in the ED tonight. Doctors stated, 'We are maxed out and it has been for months not just winter'. Patients are waiting 3 to 4 hours to receive	No

		care. Patients who are awaiting results are assessed in general cubicles without walls and can remain there for more than 3 days, some patients are also provided with corridor care. This has resulted in dissatisfied patients and frustrated family members, and has reportedly increased the numbers of code blacks in the ED.	
PCBU Alleged Contravention 2	Not maintaining a safe work environment	PCBU Alleged Contravention 1 Continued One doctor interviewed stated, 'We are at our wits end and in the years, I have been here this is the worst I have ever seen including the total number of patients waiting for a hospital bed in our ED'.	No
PCBU Alleged Contravention 3	Not maintaining safe systems of work	PCBU Alleged Contravention 2 Doctors reported that working conditions are 'demoralizing' 'depressing' and they 'feel overwhelmed' and 'feel empty' because they aren't resourced to provide the level of care that meets the demand. Doctors reported that morale is low in the ED, and 'sick leave has just spiraled' and 'absenteeism is high'. Senior doctors are concerned about the impact on trainees and junior doctors. Doctors reported compassion fatigue and burn out. One doctor remarked that a local bakery provides the ED team with left over donuts from the day, and this is something that the ED team looks forward to in times of 'overwhelm and distress'. One doctor stated 'I was hoping spring time would be reprieve but no'. Another, 'I don't understand why we can rack and stack very infectious patients with other patients in the waiting room and the government thinks this is safe and think they can damage our morale and undermine a desire to be a good doctor'.	No
PCBU Alleged Contravention 4	Not maintaining safe systems of work	PCBU Alleged Contravention 3 Workers reported that they use the internal escalation process, 'code assist' but often no action is taken by the administration to provide relief and assistance to doctors in the ED and deescalate	No

		Code assists when called in the ED requires immediate assistance from the NALHN Executive, however at times when the ED is understaffed or under resourced, a code assist is not helpful and many occasions the code assist is not responded to by the NALHN Executive. We were told that the NALHN leadership have no solutions. We were told 'the biggest issue for ED staff is patient safety and we can't help them, I feel empty and find it demoralizing caring for long stay patients in the ED with nowhere to go'. We were told that 7 patients in the ED had been in the ED beyond 24 hours, there were 4 beyond 36 hours. One doctor stated, 'this is not the environment for caring for our elderly'.	
PCBU Alleged Contravention 5	Not maintaining safe systems of work	PCBU Alleged Contravention 3 Continued The doctors stated that there was significant 'crankiness from patient and their families'. The doctors stated the nurses cop it and we cop it. One doctor stated, 'I would be angry as well, hidden behind curtains, sleep deprived, I wouldn't do it to my dog'. One doctor we interviewed said that 'this is just a daily shit show'. Another stated 'we cannot give good care to these patients for multiple days'. The EPH was told that the 'code blacks have gone up'.	No
PCBU Alleged Contravention 6	Inadequate facilities or access to facilities	PCBU Alleged Contravention 4 Doctors reported increase in ramping and corridor care, noting that historically ramping was not a common practice in ED. Doctors reported that night coverage is an issue, with sick leave. Doctors reported that they do not have adequate facilities to meet patient demand, with inadequate spaces to take blood and assess patients. This often results in patients getting stuck in triage for extended periods of time. We were told, 'we are ramping everyday and we were the hospital that never did'.	No

		We were told 'clinical staff at this ED and in the hospital do their very best in a very unsupported environment'. We were told, 'it is hard to watch patients and their families when the patients are really sick and there is no space or support'. We were told one support that could be put in place 'is additional senior registrars at night. We were told there is only one senior registrar on at night and this is not sufficient for patient care or support for staff.'	
PCBU Alleged Contravention 7	Inadequate facilities or access to facilities	PCBU Alleged Contravention 4 Continued One doctor said 'We were told by the administration that we had to find ED patients suitable for corridor care. We are responsible for the clinical care of the patient if we suggest that a patient is right for corridor care and something happens to that patient, its us that will go to the coroner court not the administration'. Doctors reported that demands in the Lyell McEwin Hospital Emergency Department have impacted the ED. Doctors reported an incident whereby a patient with a post-surgery infection was brought to ED via ambulance, doctors advised paramedics that as they do not have surgical facilities, the patient should be taken to the Lyell McEwin Emergency Department LM ED. Paramedics were concerned, due to the high waiting times at the LM ED. Doctors reported that tensions have been high amongst staff. We were told that the ED is 'overwhelmed' and it should be known that 'when we are busy the whole of hospital is busy'.	No
PCBU Alleged Contravention 8	Inadequate facilities or access to facilities	PCBU Alleged Contravention 4 Continued Another said 'Don't forget transforming health closed our specialized acute medical services at the Modbury Hospital knowing this would be damaging for the communities health but ambulances still come to Modbury Hospital bringing patients that we no longer have medical services in the hospital to provide the care they need'. 'Patients are more complicated and some need to get quickly transferred by ambulance to the LMH needing lights and	No

		sirens but stay long periods of time in Modbury Hospital ED'.	
PCBU Alleged Contravention 9	Inadequate facilities or access to facilities	PCBU Alleged Contravention 5 Doctors reported that they had an additional room for taking blood and assessing patients, however this was taken away without consultation and is now used for other purposes. Doctors reported that the capacity of the ED is not enough to meet the changes in acuity and complex nature of presentations, this has resulted in longer ED stays. Doctors reported that General Practitioners are referring patients to the ED, and the increase in health care has contributed to increase in ED presentations. Further, there are challenges to discharge elderly patients, who do not have social supports in place, or are waiting for a residential care facility. Two doctors reported that in their many years of practice they haven't seen the ED in this condition and are concerned that it will only get worse.	No
PCBU Alleged Contravention 10	Inadequate facilities or access to facilities	PCBU Alleged Contravention 5 Continued 'We are waiting for ambulances for patients, that had been dropped off by the ambulances at the Modbury ED as the ED had a shorter waiting time than LMH, the patient requires surgical services we do not have, so the ambulance is called to take the patient from Modbury Hospital to the LMH'. The different professions are cross with each other when it is none of our fault we simply don't have the capacity or the patient is at the wrong hospital.	No
PCBU Alleged Contravention 11	Not maintaining safe systems of work	PCBU Alleged Contravention 6 Permit holders met with PCBU Delegates and asked for their plan to address overwhelm and lack of resources in the ED. The Permit Holders were advised by PCBU delegates that the additional beds implemented at Lyell McEwin Hospital are already at capacity, and they are expecting further funding to address demands due to the expansion of the Northern suburbs. They advised entry permit holders that decanting patients has become increasingly difficult, and further funding, both at state and federal level is required to	No

		address the exponential increase in demand within the Modbury ED. 'We got those additional 20 beds recently opened for the elderly on 21 September 2026 at LMH and they were filled within one week I have never seen this before'.	
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Summary of matters that remain unresolved:

The PCBU has not provided Permit Holders with their position with respect to addressing the alleged contraventions as outlined above.