

UNIVERSITY OF SYDNEY FACULTY OF MEDICINE
GRADUATION

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ADDRESS BY RICHARD ALCOCK, CHAIRMAN
WESTERN SYDNEY LOCAL HEALTH DISTRICT

'imagine life as a game in which you are juggling some five balls in the air...work, family, health, friends and spirit. You will soon understand that work is a rubber ball...But the other four balls – family, health, friends, and spirit – are made of glass.'

Pro- Chancellor Professor Marian Baird AO, Dean of the Faculty of Medicine Professor Arthur Conigrave, Members of the Faculty of Medicine, Graduates, Families and Friends, it is an honour for me to speak on this day of celebration of your graduation in the Great Hall.

As the Dean has mentioned, my grandfather William Keith Inglis was among the Faculty's early graduates, awarded his medical degree 101 years ago.

Since the first medical school admitted its first students 135 years ago, the University's contribution to medicine has been fundamental to the quality of the health services we all enjoy today. My involvement has been with two of the hospitals in which the University's Medical Schools are located - Westmead Hospital, whose Board I chair, and the Children's Hospital at Westmead for which for five years I was Deputy Chair.

Today I would like to speak about three graduates who embodied a fundamental principle which I will speak about today - namely, that to achieve the best outcomes for your patients, excellence in research and teaching must be embedded in clinical practice.

They were my grandfather, and two of the founders of Westmead – John Loewenthal and John Read. They are among my 'heroes', visionaries whose achievements came from challenging conventional thinking. I think about them often when I am at Westmead, and how they would respond to some of the challenges I face as Chair. As I tell you about my 'heroes' I will leave you with three suggestions to consider as you enter this important phase of your career.

My grandfather's first role after graduation was as demonstrator in the University's Pathology Department. Except when on active war service in France, he remained on staff at the University until his retirement, rising to Professor of Pathology, and founding member of the Royal Australasian College of Physicians. At various times he was Director of Pathology at Sydney Hospital and Royal Prince Alfred Hospital. As early

as 1926 my grandfather wrote to the Health Commission outlining his ideas concerning the importance of medical research in a teaching hospital. His concept was that research should be undertaken by salaried doctors trained in research and that it should be fundamental rather than applied research. This was considered radical at the time when healthcare carried out by honorary medical staff was considered by the Health Commission as the prime or only function of a major hospital, apart from the training of medical students.

John Loewenthal's first role, like most of his peers, was in military surgery, in the Middle East and later in New Guinea, during which he saved many soldiers on the field of battle. Returning to Australia after the war, he resumed surgical duties, undertook research, and commenced teaching at the University, rising to Professor of Surgery, later to become Dean. Loewenthal was very active in fostering research. He was a reformist, outward looking and worked to develop surgical research in Australia. In many ways Loewenthal was influential in the development of the intellectual heart of surgery in Australia.

The third of my heroes, John Read joined the professorial unit at Royal Prince Alfred Hospital as a junior resident, progressed as registrar in thoracic medicine, and then was appointed Professor of Medicine by the age of 37!!! In 1970 in writing detailed plans for the establishment of Westmead Hospital, Read wrote of the close linkage between the clinical, teaching, and research roles of the complex, with mutual benefit to all three. The fruitful inter-relation between them would be fostered by adoption of the principle of academic headship of hospital service divisions. There would also be a significant number of holders of joint academic posts in the hospital.

Central to the thinking of all three men was the relationship between research and education as integral parts of a major hospital.

Today, the Westmead Precinct is vitally one of the largest education, research and training precincts in Australia, with more than 1400

researchers and post graduate students undertaking thousands of current research projects to increase knowledge, discovery and treatment for our patients. Approximately 18,000 people come to the Westmead campus every day. By 2036 we expect this will rise to 80,000 people per day, with Metro West linking Westmead to the Eastern city CBD in less than 20 minutes. Hopefully at some stage of your careers many of you will have the opportunity of collaborating with colleagues at Westmead, wherever your place of work may be.

May I offer some suggestions about issues you may face in your careers.

The availability of data and the use to which it will be applied will be very impactful in your careers. With so much more data, our communities will worry about their privacy, and as researchers you will be worrying about the relative significance of different data sets. How prepared are you to address the opportunities and indeed the threats from quantum computing and artificial intelligence to name just two? Already at Westmead we are pioneering with the University a very significant future for data scientists, design planners, engineers, social scientists and business leaders to help solve these and other problems we encounter in health. Working in teams and creating innovative technologies such as virtual and augmented experiences will become standard practice for you. Are you ready to meet the many ethical as well as technological challenges you will face? Who owns a citizen's data and how it can be used is currently very much in focus in the US Congress questioning of Facebook's CEO Mark Zuckerberg. This is only an example of many ethical challenges you will face. Are you prepared to ask yourselves when is a technological advance not OK?

I urge you to become model digital citizens, developing your understanding of the myriad of legal and ethical issues around the collection and use of data and to form your own views on how data should be used.

An uncomfortable truth you will need to face is that universal healthcare will increasingly be challenged as technology propels us into a new era of precision and personalised medicine. Already the disparities between major metropolitan versus regional and remote healthcare are evident. Whilst healthcare for everyone will improve, the ‘gap’ will only increase between the ‘tech savvy’ and the disadvantaged. How will you seek to ensure the benefits of your research are universally accessible?

The world in which you now forge your careers is very complex. The skills you will need to fulfil your societal responsibilities should be your ongoing focus.

May I urge you to develop your networks, including those well outside your fields of expertise. It’s a trap for young players to be so focused on their careers that their relationships narrow to their professional peers. Not only are you at risk of becoming a very narrowly disposed individual (ie boring!) but the breadth of the skills you may develop and your ability to collaborate with other adjacent professions may be constrained.

Since my graduation I have always tried to maintain and expand my network. My start in the health sector was through fundraising, about twenty years ago. I sat around a very diverse table of people brought together through the common purpose of raising funds for medical research and education through philanthropy. I had a very broad network of people, fostered since my own graduation, who through my friendly persuasion and long established relationships I could encourage to support me in fundraising.

Philanthropic funding has always been important to medical research and education and I urge you to become good at fundraising. It took 33 years after the University was founded before a medical school commenced in a 4-room cottage between this hall and Parramatta Road. After the University was founded with schools in arts and law there were three failed attempts to start a medical school, on one occasion opposed on the grounds that a medical school would reduce the curriculum in the Faculty

of Arts!!! The University's medical school only became viable on the raising from the community of the sum of 30,000 pounds, worth \$4 million today, and through a substantial bequest of a wool merchant and landowner. Further developments over the last 100 years have been funded significantly by bequests and contributions by individual philanthropists.

Both Inglis and Loewenthal dedicated substantial time in their careers to fundraising, both for medical research and for the broader community. Inglis was tireless in sourcing philanthropic funding and seeking government matching funding, often unsuccessfully. Loewenthal was the founder and national president of the National Heart Foundation of Australia and a member of the Cancer Council of New South Wales.

In the twenty years I have been involved in health leadership roles, sourcing philanthropic funding has been a continuing responsibility for me and funds raised by a diverse group of people have funded many research roles. I urge you to learn how to fundraise - and not be wholly dependent on government grants - giving you more flexibility and diversity of source of the research you can undertake.

Inglis, Read and Loewenthal were perhaps best known for challenging conventional thinking. Inglis was described as manifesting bulldog tenacity, Loewenthal a genial but forceful personality and Read, in his early years, a 'know-it-all' approach. A characteristic common to the trio was their intensity and what psychologists might call their ego investment in their work. But such intensity can easily take disproportionate energy, stealing what should be invested in family, friends, and *your* health and well-being.

While my grandfather railed against the hospital administration of Sydney Hospital for decades and was constantly in a vocal minority in board meetings, in the middle of one such speech he dropped dead of a heart

attack at age 72. Maybe this was related to his heavy investment in work and maybe not. But in either case, as they say of the hangman's noose, it makes you think.

Read, a year after completing detailed plans for a new teaching hospital at Westmead, took his own life at 41. This was a family disaster, and a massive professional loss – it nearly derailed the Westmead project. John Loewenthal – fortunately – took it on and saw it to completion, but also died young – at 64 – collapsing at his retirement celebration one evening in this very hall.

In any career, maintaining work-life balance is critical in the pursuit of living a long, prosperous and happy life. In no career is this perhaps more relevant than in health, as you all become role models for others as your careers progress. Do not lose sight of how important this is.

You have a responsibility to yourself and your families to promote health by caring for and protecting your own. No matter how motivated you are, and how accomplished you become professionally, never lose sight of your own health. No task, no deadline and no goal should overwhelm this one. Only by maintaining work-life balance will you best be able to meet the challenges of those who depend on you and lead you into truly fulfilling careers.

Brian Dyson, a senior corporate executive, captured this theme when he said to 'imagine life as a game in which you are juggling some five balls in the air...work, family, health, friends and spirit. You will soon understand that work is a rubber ball...But the other four balls – family, health, friends, and spirit – are made of glass.'