



THE UNIVERSITY OF
SYDNEY

2017 Graduation Ceremony
Sydney Medical School

Welcome distinguished guests, University staff, graduates, families and friends. My special thanks to the University Senate, Vice-chancellor Dr Michael Spence and our Dean, Professor Arthur Conigrave for the invitation to say a few words on this most important occasion, in this hall, which, for a graduate of this great University as I am proud to be, is a significant honour.

The University of Sydney has a great tradition of producing leaders in many fields. This ceremony is an important milestone for these future leaders, and a significant occasion in the University calendar. I will therefore address my remarks to them. Others may listen if they wish.

Firstly, I'd like to talk very briefly about leadership, communication and learning:

In this world, there are leaders and followers and there is a longstanding debate about whether leaders are born or made. However, there is a science of leadership which can be learned and many of the best leaders have learned by observation but like any other skill it requires practice.

We commonly hear of the importance of empathetic communication. Of specific interest a recent systematic literature review from the Harvard Medical School concluded that "The physician/patient relationship has a bigger effect on 5-year male mortality than smoking cessation or taking aspirin". That is a salutary finding with important implications for all of us.

Given that there are now many sources of so called knowledge, (even apart from Google and Wikipedia) learning requires not

only the ability to seek knowledge but also the capacity to assess evidence and to understand probability, risk and consequence. We know that the rate of change in so called evidence as a result of research creates challenges such that lifelong learning is necessary simply to remain relevant. I cannot tell you how often I see colleagues who have become so busy and/or burnt out that they gradually become irrelevant or just plain dangerous. This does not happen suddenly but is often associated with a lack of commitment to the challenges of lifelong learning AND UNLEARNING.

The Cambridge dictionary defines unlearning as follows:

“Unlearn: to make an effort to forget your usual way of doing something so that you can learn a new and sometimes better way”

Or to quote Hutchinson and Spence:

“Throughout our lives we’re taught important lessons. We learn how to talk, to write, even how to behave. But there’s one important lesson most of us never get – a lesson in unlearning. It’s only by challenging, questioning the accepted and being brave enough to break down old rules, that we can wright new ones.”

Or, lest you think that is an original thought I quote from another great authority, Yoda, from Star Wars – “YOU MUST UNLEARN WHAT YOU HAVE LEARNED”.

So, in order to remain relevant and engaged and avoid the consequences of the treadmill syndrome we need to continually challenge and be challenged so that we can achieve and enjoy making a difference and attain the best outcomes for those who give us their trust and confidence.

There are two challenges which I would urge you to at least consider as you make career choices and determine your priorities.

Firstly, how safe is our healthcare system?

Patients EXPECT high standards of care, understanding and compassion but have a RIGHT to believe that at the very least they will be kept safe. Unfortunately, we often fall short of that basic expectation.

In 1995 (22 years ago) a landmark study of adverse events in NSW and SA hospitals was published in the Medical Journal of Australia which revealed the following salutary findings:

- 16% of hospital inpatients suffered as a result of significant adverse events of which approximately 50% were deemed to have been preventable.
- of these adverse events 13.7% resulted in permanent disability and 4.9% in death.

These findings are remarkably similar to those from other so called first world countries.

Lest you think this is a relatively small number it amounts to approximately 3,675 deaths per year across Australia or, to express it more graphically, a fully loaded jumbo jet crashing and resulting in the death of all passengers every six weeks and in addition almost three times this many suffering permanent disability.

Unfortunately, a number of subsequent studies worldwide have failed to demonstrate any significant improvement in these sad statistics.

The second challenge I will call “the big picture”.

I was privileged earlier this year to attend the Royal Australian College of Physicians Congress in Melbourne and pleasantly

surprised to see that the closing plenary session was titled “Doctors Must Do More to Change the World – Employment Poverty and Health”. This symposium looked at the well-recognised problem of the relationship between poverty and health. What is clear is that like patient safety our generation has not yet developed an effective strategy to deal with the underlying problem. Unfortunately, then, you have inherited another problem which goes to the core of who we are.

I commend a career in medicine to you as exciting and loaded with possibilities. However, having seen some of the health problems in our own country, as many of you also have, and having worked for a short time in New Guinea, Nepal and Ethiopia I am convinced that they will not be solved simply by providing better healthcare. We need to take the lead in combatting disadvantage and poverty.

I apologise to you that our generation has left you with these serious, unsolved problems.

However, to quote from the French novelist Marcel Proust – “The real voyage of discovery consists not in seeking new landscapes but in having new eyes”.

On behalf of the University and faculty it is my privilege to offer our congratulations and wish you all the best for an exciting and fulfilling future.