

Major General Paul Alexander AO

Surgeon General Australian Defence Force and Commander, Joint Health Command



MAJGEN Paul Alexander joined the Army in 1976 and completed his medical training at the University of Melbourne in 1978. Following several years of clinical training in Victorian hospitals, he commenced the first of several regimental appointments as the Regimental Medical Officer (RMO) of the 3rd Battalion Royal Australian Regiment. This was followed by several years working as an RMO in Papua New Guinea with the PNG Defence Force. He then served as the RMO for the Special Air Service Regiment for three years and completed SAS selection during his tenure.

In 1988 he undertook a period of postgraduate medical training in the UK in the areas of Sports Medicine and Tropical Medicine as well as undertaking several military attachments with UK medical units. On return to Australia he was promoted to Lieutenant Colonel and appointed as Commanding Officer of 11th Field Ambulance and subsequently as Commanding Officer of 1st Military Hospital Yeronga. Three years were then spent with the US Army as the Australian Army Exchange Officer to the US Army Medical Department where he was employed in the area of Capabilities, Combat and Doctrine Development and was involved in the redevelopment of US Army battlefield hospital systems.

On return to Australia he was promoted to Colonel and posted to Headquarters 1st Division as the Senior Medical Officer and during this period, deployed with the initial peacekeeping force to Bougainville on Op BELISI. He transferred to the Army Reserve in 1998 and subsequently assumed the position of Director Reserve Health Services for Army in QLD. During this period he deployed as the Public Health Officer to the UN Peace Keeping Force in East Timor.

He was promoted to Brigadier in January 2004 and assumed the position of Assistant Surgeon General ADF - Army. He continued to work in clinical practice and was a partner in a large group medical practice in Queensland, undertaking the duties of managing partner. He was active in primary health care policy development as the Chairman of the Redcliffe Division of General Practice.

MAJGEN Alexander has been actively involved in risk management and legal medicine. He is a Fellow of the Australian College of Legal Medicine, a fellow of the Australian College of Medical Administration and also a fellow of the Australian College of Tropical Medicine. MAJGEN Alexander was promoted to the rank of Major General on 25th March 2008 and recommenced full time service.

MAJGEN Alexander was appointed Commander Joint Health and Surgeon General Australian Defence Force on 4 August 2008. Joint Health Command was established in August 2008 and has been responsible for leading the Defence Health Services Reform programs.

Major General Alexander was appointed an Officer of the Order of Australia on 26 January 2011.

As I come to the end of my tenure as Commander Joint Health Command I am pleased that there has been significant headway in many of the reforms endorsed by the Chiefs of Service Committee. I believe the Defence Health services are in a very good position to ensure that our members receive comprehensive high quality health care. I have listed some of our achievements below; however the provision of first-rate health support to the ADF is a highly valued condition of service and cannot be underestimated. I applaud the staff of Joint Health Command for their caring attitude and professional services.

Since my last editorial, Joint Health Command (JHC) has signed agreements with the Navy, Army, Air Force and the Defence Support Group to assume the delivery of Garrison Health Services. Transition to JHC will be carried out in stages, one region at a time, and we are aiming to have all five regions transitioned to JHC at the beginning of 2012. The nine Area Health Services are consolidated in to five Regional Health Services to align with DSG. Each region is led by a Regional Health Director who are highly qualified and bring extensive medical and Defence experience to their appointments. They have already begun to positively impact and improve the operations of our health services.

Furthermore, JHC have reviewed the Garrison Health Delivery Model and established new ways to deliver health services through multi-disciplinary teams. JHC are moving toward an approach where ADF members can receive primary health care, mental health, rehabilitation and dental services in one convenient and coordinated health precinct one each base, nationwide. This will improve and simplify how ADF members access health care services.

A comprehensive Strategic Infrastructure Plan for Defence Health facilities has been endorsed. This plan is the end result of significant research and analysis, and also the driver of a more integrated, streamlined and collaborative approach to our infrastructure improvement. It will take some years to implement completely, so we are upgrading some of the facilities in the short term.

We have commenced working on a pilot program offering specialist training opportunities for Medical Officers. The program will be conducted at the Royal Brisbane and Women's Hospital (RBWH) in alliance with Queensland Health. A total of five accredited specialist training positions will be offered

in anaesthetics, emergency medicine, intensive care, general surgery (trauma/burns) and orthopaedics commencing in 2012. On completion of specialist training our Medical Officers will continue to be employed in major teaching hospitals, available for operational deployment, education, training of our health personnel and research.

I am pleased to announce the appointment of Professor Michael Reade as the inaugural Chair of Military Surgery and Medicine at the University of Queensland. Professor Reade will focus on the unique requirement of Defence in pre-hospital care, burns, damage control, resuscitation and surgery and will be pivotal in implementing our research priorities.

JHC continues to put into operation a comprehensive Mental Health Reform Program to address the recommendations of the review completed by Professor David Dunt in February 2009. A new branch was established in 2010 within JHC with a Director General appointed to coordinate and integrate Mental Health, Psychology and Rehabilitation services. This branch developed the ADF Mental Health Plan and service delivery model. The plan is providing a framework for future mental health initiatives and the ongoing evaluation of programs and services.

A major focus of this reform program is increasing our mental health and rehabilitation provider workforce. These teams will deliver a greater level of integrated care and mental health research. The mental health workforce has increased by more than 50%; fifty-six new positions have been established at the national, regional and local levels, with more to follow in 2012.

The ADF Centre for Mental Health will also support the development and application of effective and evidence based

mental health treatment. Through the Centre, JHC is building a range of partnerships with other centres of excellence in the civilian community to ensure that ADF mental health providers are trained in the latest mental health interventions.

We have invested in a series of research studies and surveys under the Military Health Outcomes Program (MilHOP). These studies will give us better understanding of the prevalence of mental health conditions such as Post Traumatic Stress Disorder amongst our serving personnel and identify what barriers there may be in ADF personnel seeking mental health care. Importantly, the studies will consider the impact of operations and provide a benchmark for ongoing analysis.

JHC is acutely aware of the need to not only change the way we deliver services but also develop and realize a number of innovative and best practice health solutions. Joint E-Health Data and Information (JeHDI) system is progressing to plan with the completion of Stage 1. The project is now building the system. I wish to thank all the staff involved in the Solution Demonstration Laboratories as these workshops were vital part of ensuring that we develop the best product. JeHDI remains on track for release in 2013.

It has been a real privilege to again serve full time and I wish to personally thank everyone for their great support over the past three and a half years or more. I have really enjoyed the challenges and truly believe we are developing a military health system that is the equal of any. I wish to congratulate the new Commander Joint Health Command, Rear Admiral Robyn Walker on her appointment and I am sure that she will lead the command to greater success.

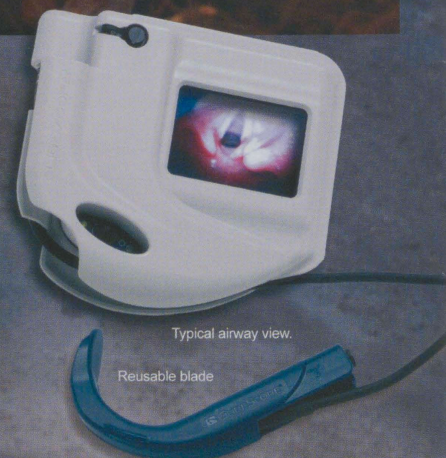


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Reference: 1. Wayne MA, McDonnell M. Comparison of Traditional versus Video Laryngoscopy in Out-of-Hospital Tracheal Intubation. *Prehosp Emerg Care* 2010 Apr 6; 14:278. GlideScope, the GlideScope symbol, GVL, Verathon, and the Verathon Torch symbol are trademarks of Verathon Inc. © 2011 Verathon Inc. 0900-3940-00-86

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