

MEDICAL / HEALTH CENTRE ADVISORY COMMITTEE MINUTES

MEETING HELD FRIDAY 2 NOVEMBER 2012 AT RECEPTION LOUNGE
COMMENCING AT 9.00AM

Medical / Health Centre Advisory Committee Terms of Reference

That the Medical / Health Centre Advisory Committee endorses the following Terms of Reference:

- *Develop a communications plan to guide the consultation process, feedback mechanisms, surveys, public meetings, record keeping, and media releases from the Council and committee.*
- *To assess the needs for medical/ health centre accommodation:*
- *Review the current medical centre and hospital accommodation for Doctors and other primary health providers.*
- *Consider options under the Primary Health Care Demonstration Site model of the Southern Inland Health Initiative and advise Council on whether to participate in any call for expressions of interest.*
- *Review previous medical centre plans, options, and feedback / submissions from the community to guide the committee.*
- *Provide a short list of options for consideration of Council to allocate resources for detailed work up of plans.*
- *Develop a scope of works for appropriate architectural / design consultant / or building support for the options above based on the outcomes of the needs analysis and liaison with key stakeholders/ users.*
- *Review the detailed options and provide advice to Council on the outcome of detailed work up based on:*
 - *Meeting the identified community needs;*
 - *Meeting the identified functional needs of users;*
 - *Value for money*
- *Provide advice on funding, timing, and delivery of the project.*
- *Provide advice to Council on any other issue that the committee view relevant to the Medical / Health Centre consideration*



1. **DECLARATION OF OPENING/ANNOUNCEMENT OF VISITORS**
The Presiding Member welcomed Committee Members and Sam Barron, Acting Operational Manager of Great Southern Multipurpose Services and opened the meeting at 9:00am.

2. **RECORD OF ATTENDANCE/APOLOGIES/APPROVED LEAVE OF ABSENCE**

Mr N Young	Community Member
Mr E Graham	Community Member
Mr G Hobbs	Community Member
Mrs J Matthews	Community Member
Mr N Radford	Community Member
Mrs J Webb	Community Member
Mrs J Warland	Community Member
Mrs P Crook	Community Member (arrived at 9:10am)
Cr J Mathwin	Council Member
Cr J Benn	Council Member

Mr A Middleton	Acting CEO
Mrs A Boschman	Acting PA to the CEO

Guest Speaker

Mr Sam Barron	Acting Operations Manager Great Southern Multipurpose Sites (MPS)
---------------	---

Apologies

Cr R Hewson	Council Member
-------------	----------------

3. **RESPONSE TO PREVIOUS PUBLIC QUESTIONS TAKEN ON NOTICE**

Nil

4. **PUBLIC QUESTION TIME**

Nil.

5. **APPLICATIONS FOR LEAVE OF ABSENCE**

Nil.

6. **DECLARATIONS OF INTEREST**

Nil.



7. CONFIRMATION OF MINUTES OF PREVIOUS MEETINGS

Committee Decision:

7/12 MOVED: Cr Mathwin seconded: Mr Hobbs
That the Minutes of the Medical / Health Centre Advisory Committee Meeting held on 12th October 2012 be confirmed as a true record.

CARRIED 9/0

8. GENERAL BUSINESS

8.1 Action List

ACTION LIST MEDICAL / HEALTH CENTRE ADVISORY COMMITTEE	
Item	Action Allocated to
Action 5 : Clarification of Aboriginal Heritage – Land adjoining Kojonup Hospital & the Old School Site Outcome: <ul style="list-style-type: none">In progress – no update	Mrs A Boschman
Action 6: Title & Access Conditions – ‘Alby Walkers Block’ the Land adjoining the Kojonup Hospital Outcome: <ul style="list-style-type: none">In progress – no update	Mr A Middleton
Action 8: Contact Health Department Speakers to attend the next Committee Meeting on the 12 th October 2012 at 9.00am Outcome: <ul style="list-style-type: none">Sam Barron – Acting Operations Manager Great Southern Multipurpose Sites (MPS) attending the meeting.	Mrs A Boschman & Mr A Middleton

9. Other General Business

9.1 Guest Speakers

Melissa Vernan (Southern Inland Health Initiative)



Sam Barron – Acting Operations Manager Great Southern Multipurpose Sites (MPS)

Sam attended the meeting on behalf of Melissa Vernon. Sam's role includes providing strategic planning assistance to the Clinical Nurse Manager at the Kojonup Hospital and Director of Nursing Health Service Managers at the other multipurpose sites. There are 6 Multipurpose sites located in the Great Southern.

GP's such as Dr King are classified as "Visiting Medical Practitioners"(VMP) and have a contract role. By working closely with local VMP's the committee can better identify requirements for the new building.

Funding and Strategic Planning

- Southern Inland Health Initiative (SIHI) consists of 4 Streams or key areas of need.
- Planning will look at services and infrastructure on a regional level and will aim to miximise value in a cost effective way.

At this stage, SIHI would not be able to offer the Committee any direct funding for the Medical / Health Centre Project; however SIHI can offer assistance with accessing funding and advice for written submissions for funding applications.

SIHI Clinical Reform

- Providing Incentives and Assisting with recruitment for Medical Practitioners in the region.
- Successful models for innovative Medical Centre Facilities include the provision for additional services to be provided at one facility. Offering space for visiting Physiotherapists, A Dentist and Health Promotion services such as a dietician, would be attractive for a Visiting Practitioner because it would promote business growth through the ability to engage clients when they are accessing other services.
- It is advised that any new facility should be able to cater for at least 2 doctors, and have various multi use rooms for other services.
- A mixed model such as a private surgery and other public services can be advantageous as overall costs can be reduced by sharing human resources.
- Consider the facilities use in the longer term and consider the ability to build on additional rooms to accommodate future growth and additional services.



Question and Answer

The Committee discussed the following items:

1. Implications for services if the existing building were to be redeveloped vs. the possibility of a new building being constructed at an alternative site i.e near the Kojonup Hospital?

Both locations could be developed to house a private practitioner.

2. What possibility is there that a salaried practitioner from Katanning would undertake afterhours / weekend backfill for a private practitioner as is occurring at the moment?

Private practitioners are easier to recruit. Many GP's have a heavy workload and often feel that they cannot take time off or look for new opportunities because there is no one to take over the role. By having 2 Doctors this pressure may be reduced.

It is important to address this concern at the beginning by asking prospective practitioners how long they would expect to stay in the area. When discussing the options with a practitioner the question should be asked in order to be able to have a succession plan in place early on. This will make the role more attractive and make it easier to engage a GP.

3. Would the "Private Model" be better than the "Shire Run Model"?

A Shire run model is limited and as most Shires do not have Health as their core business. The potential to attract additional service providers would be limited. With a Private Practitioner it would be easier to engage additional providers as the business grows and services are enhanced.

It would, however, be possible to combine a private and share model by the private practice accessing various govt. funding. For instance, Denmark has a Mental Health Nurse that provides a service that is partly funded through the commonwealth and managed by the private practice.

4. Telehealth & Private Practitioner accessing Medicare Incentives.

Medicare - Private businesses can bill Medicare. Medicare incentives can also be accessed by other health providers, depending on the funding arrangement it might include Health Promotion or Aboriginal Health .

Telehealth is a secure Skype style of communication method which allows consultants and specialist to be engaged without the need for extensive travel. Telehealth is easy to set up and only requires a computer, camera



and broadband connection. The National Broadband Network will create further opportunities for the development of Telehealth. It is even possible to use this Telehealth equipment in people's homes.

5. Co-Location at the Kojonup Hospital

Co-Location is a viable option in Kojonup. There would be no doubling up of services and thus no negative impact on other local businesses.

The impact on existing hospital services will be minimal should co-location occur.

Co-location can also increase the viability of additional services being made available at the same site and therefore allow for growth potential.

6. Additional infrastructure to be considered when choosing a site.

The new facility could be designed in Modules. This will allow for the most vital services to be provided first, but designs are drawn up for future additions to the building to accommodate further services.

Hydrotherapy, Dentistry and other custom built infrastructure could be included in the planning of the building. The Modules strategy would allow for these future developments to be included at a later date.

7. Acute Patient Care

Currently, Acute inpatient Care is difficult to deliver because there is only one doctor. This issue may be alleviated if a second doctor is available in town.

A number of examples of innovative Medical facilities can be found in Queensland.

Action: Sam Barron to provide the Committee with information regarding Queensland Medical Centres.

8. Needs vs. Financial Implications

Develop an overall plan that addresses the needs of the Community. Once funding has been assessed prioritize needs, and develop the project in stages.

9. Other examples of Medical Centre Development Projects

There are a number of Medical Centres in the region including Mt Barker and Denmark. There are also a number of examples of Centres that share



services which have been developed by the Health including one in Exmouth.

9.2 Review of Public Meeting Notes and actions arising.

The Committee Discussed the key points of the meeting and addressed a number of ideas that had been suggested by Community Meeting participants at the end of the meeting.

Matters arising from the Community Meeting:

- Shower and Sleeping facilities to be include in the design to accommodate the needs of Practitioners that live out of town.
- Possibility of Building on the west side of the Kojonup Hospital.
- Location seems to be the major community concern.
- Funding to be identified to assess the level of development potential.
- The Committee needs to engage younger demographic to take part in community consultation process.

Letter from Barbara Hobbs tabled (see attachments)

List of Ideas Jenny Matthews tabled (see attachments)

9.3 Establish a timeline for our actions.

This will help us shift from information gathering to decision making and ultimately action

9.4 Funding

Three major Funding Sources have been identified:

- Royalties to Regions Infrastructure Fund – Due Date: June 2013 & June 2014
- Federal - Royalties to Regions Projects Fund – Due Date: varies
- Federal - Regional Development Australia – Due Date: varies (18 months approx.)

Funding applications will only be successful if planning has been complete and the application is “Project Ready”.



Action List

<u>Action</u>	<u>Person</u>	<u>Date</u>
Compile Draft Report of the Committees findings	Neil Young Anthony Middleton	7 th December
<u>Action</u>	<u>Person</u>	<u>Date</u>
Contact Catholic Church Access Plans and do site visit to Jurien Bay Medical Centre.	Jenny Matthews	7 th December
Contact Anglican, Baptist Churches	Judith Warland	7 th December
Noongar Community Playgroup	Joe Webb	7 th December
Contact: Kojonup District High School P & C St Bernard's P & C St John's Ambulance Occasional Care	Pip Crook	7 th December
Contact Kojonup Rotary	Ned Radford	7 th December
Contact Kojonup Lions	John Benn	7 th December
Coordinate site visits to Denmark and Mt Barker Medical centres Actions 5 / 6 (see Action List P3)	Anna Boschman	16 th November

<u>Action</u>	<u>Person</u>	<u>Date</u>
Contact Great Southern Development Commission regarding Royalties to Regions Funding	Anthony Middleton	7 th December
Produce Draft Report of the Committee's finding so far	Anthony Middleton Neil Young	7 th December

9.4 Letter from Bruce Warland, Kojonup Pharmacy

Copy of letter attached.

Key points include:

- The Centre should cater for Allied Health Services not Just GP Services
- The location of the Centre should be within the Town site close to the CBD.
- Safety of seniors should be considered. The Centre should be located in a place that minimises the need for seniors to park / need to cross, the busy Albany Highway.

Action: The Presiding Member to respond to the letter from Bruce Warland on behalf of the Committee.

10. ITEMS FOR DISCUSSION / DECISION

The Committee discussed the following item:

- Quote from 361 Degrees – High cost rules out engaging consultant. Consider the options for conducting an in-house report of community feedback.
- Land Ownership – Identify owners of potential sites.
- Council Update- Council has access to our minutes, and three of our members are Councillors. We shall formally brief the Council when we have got to the point of making some recommendations.



11. **NEXT MEETING**

The next meeting of the Medical / Health Centre Advisory Committee to be held on Friday 7 December, 2012 commencing at 9.00am in the Reception Lounge.

12. **CLOSURE OF MEETING**

There being no further business to discuss the Chairperson thanked the Members for their attendance and declared the meeting closed at 11:18am

