



aspex consulting

Cohuna District Hospital Service Plan 2017



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What is a Service Plan and why is it required?



Definition

A Service Plan defines the core health services to be provided to the community by considering the following

- Review of the demographic data for the CDH catchment
- Current Services
- Service Gaps
- Service demand to be estimated for a 10 year period
- Identification of other health service providers in the catchment area

Why is a Service Plan required?



“ A Service Plan is required to be completed and approved prior to embarking on a capital works project.”



THERE ARE TWO MAIN REASONS WHY CAPITAL REDEVELOPMENT IS REQUIRED AT CDH

1. Operating Theatre

To ensure compliance with Australian Standards 4187 by 2019.

Current deficiencies

- No dedicated recovery area
- Reliability of Air Conditioning

Estimated cost of refurbishment \$1.8m

THERE ARE TWO MAIN REASONS WHY CAPITAL REDEVELOPMENT IS REQUIRED AT CDH



2. Aged Care Refurbishment

- Refurbishment to provide safe, comfortable and complying amenities for nursing home residents and staff
- No ensuite bathrooms
- Currently only two single rooms in 16 bed facility
- Currently no lifting tracks in bedrooms

Estimated cost of refurbishment \$2.9m



Why is a Service Plan required?

- Given the need for this significant refurbishment \$4.7m, the Board with the support of the Health Department in June 2017, agreed for a Service Plan to be finalised.
- At the same time “The Village” merged with Island Care/Respect.
- Since then, representatives from CDH and Respect have met on two occasions and agreed that an ideal outcome would be to develop a “joint master plan” for the health precinct across both sites.



Key External Drivers

1. Changing policy landscape

- Clinical governance and service quality (Targeting Zero)
- Rural and regional service system design – integration & collaboration
- Aged care services

2. Ageing population in Gannawarra Shire

- From 2016 to 2031, proportion of residents aged >70 will increase from 20.6% to 29.8%
- Despite an expected annual total population decline of 0.8%

3. Poor health status

- Higher prevalence of heart disease and high blood pressure compared to Victorian rates
- Significantly higher (almost double) incidence of cancer (10.2 per 1,000 population) compared to 5.3 for Victoria

Acute Demand - Very high utilisation rate



1.69 public hospital utilisation rate for Gannawarra Shire - This indicates that the utilisation rate of public hospitals by Gannawarra Shire residents is significantly higher.

This is 69% higher, when compared with the state-wide rate.



Acute Demand - Relatively high rates of Ambulatory Care Sensitive Conditions (ACSC) presentations

- Ambulatory Care Sensitive Conditions (ACSC) presentations are hospitalisations that are potentially avoidable with primary care and community care support.
- CDH statistics show that this is marginally higher than average for small rural Health Services.



Other Service Demand Issues

CDH Community based services

- Very limited range of available community-based services
- District Nurse
- Social Support Group (Day Care)



Other Service Demand Issues

Residential Aged Care Services (RACS)

- CDH is the smallest provider of Residential Aged Care in the catchment
- Viability problem going forward
- Changing landscape, with 'Respect' (The Village) being a competitor and a potential partner

Small Rural Health Service Role



As a Small Rural Health Service (SRHS), CDH is expected to provide:

- Low acuity medical inpatients
- Residential Aged Care Services
- Urgent care
- Community based and primary care services to the local community



CDH also provides services compatible with other local health services

- Level 2 maternity services - low risk birthing
- Some low complexity surgical/procedural services
- It is becoming increasingly rare for a Small Rural Health Service to provide these services.

Small Rural Health services must facilitate patient access to appropriate services, including referral pathways and align, collaborate and develop partnerships with other health services.



SERVICE STREAMS

There is a strong case for the development of CDH community-based health services

Addressing priority service gaps:

- Hospital in the Home
- Complex care and case management
- Chronic Disease Management
- Acute 'outpatient' services
- Primary nursing and allied health
- Develop partnerships and shared services



In Summary

A Service Plan supports CDH continuing role in

- Delivering low risk birthing services
- Providing low complexity surgery
- Providing acute medical inpatient services
- Maintaining a 16 bed residential Aged Care Service with a potential focus on bariatric, Indigenous, disability, dementia and Transition Care Places (TCP).
- The plan recommends a close partnership arrangement with “Respect” (The Village)
- Grow community based health services



COHUNA DISTRICT HOSPITAL FLOOR LAYOUT PLAN
SCALE: 1 : 100

Cohuna District Hospital has a number of shared rooms with shared bathrooms.

This means if there is an infectious patient in one of the rooms, we cannot use any of the other beds, and the bathroom is also isolated.

This can result in being unable to use up to 4 beds at any given time or more.



Proposed bed configuration in the Service Plan

17 Treatment spaces comprised of:

- 3** Dialysis Chairs
- 3** Urgent Care Treatment Cubicles
- 11** Beds

PLUS

- 1** Operating Theatre/Recovery Room
- 1** Birthing Suite
- 16** Aged Care Beds including Transition Care Program



Of Note - In the last 10 months

- Average number of patients staying overnight during past 10 months was 7
- Maximum number of patients staying overnight totalled 14 on two occasions



NEXT STEPS

The Board will be seeking Department Support and funding to commence a Master Plan.

This body of work will include analysis of:

- Model of Care requirements
- Work flows
- Flexibility of available treatment spaces
- Scheduling of elective procedures



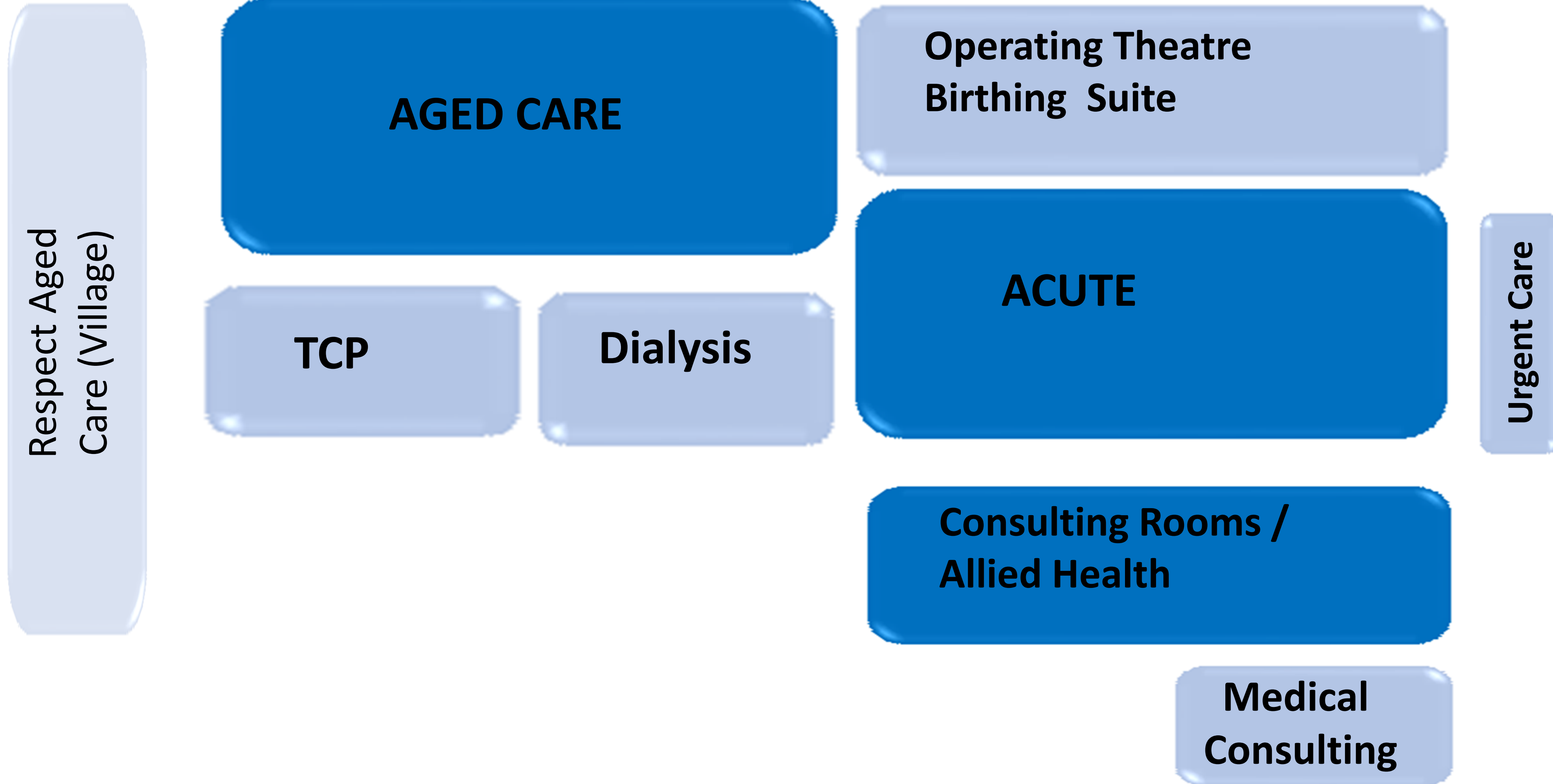
CDH Site Aerial View



Red = “Respect” (The Village)

Yellow = Cohuna District Hospital and Aged Care

Blue = Vacant CDH land





We welcome all your feedback.

Please contact

Kathy Day - CDH General Manager on ph. 5456 5300

or

Email Kathy Day kday@cdh.vic.gov.au with any queries or comments.

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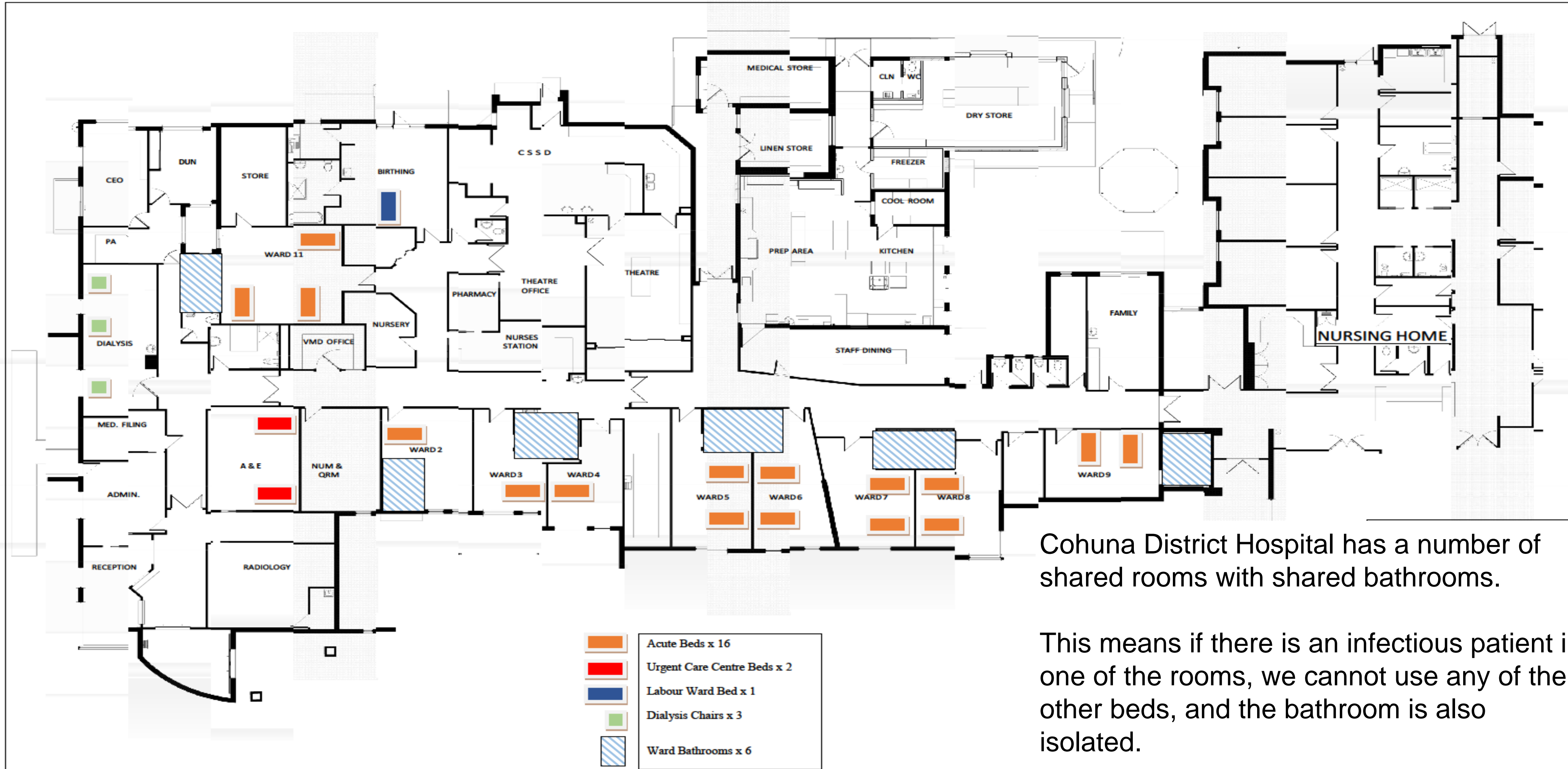
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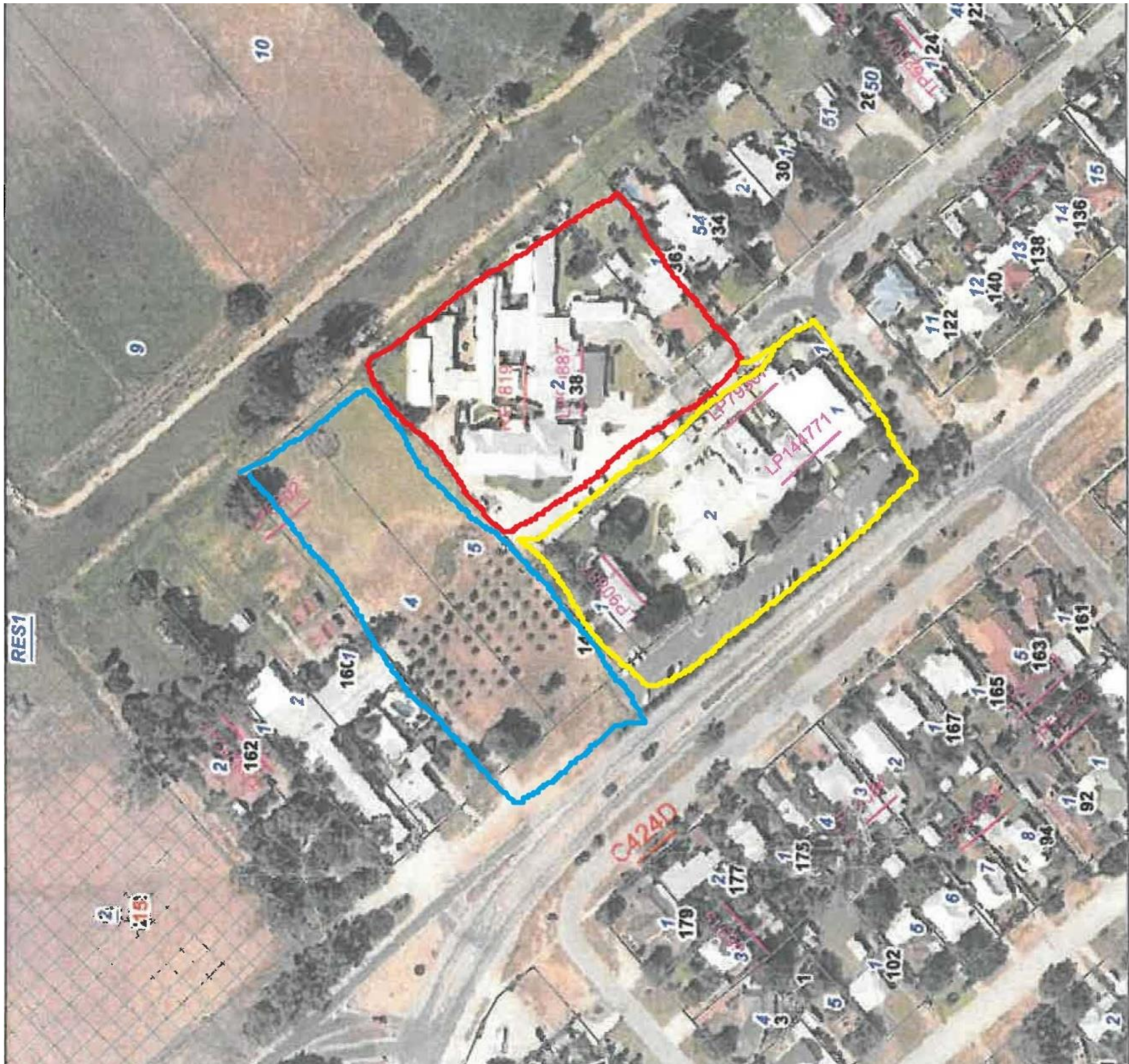
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