



1997

PARLIAMENT OF TASMANIA

PARLIAMENTARY STANDING COMMITTEE ON PUBLIC WORKS

**BEACONSFIELD MULTI-PURPOSE
SERVICE CENTRE**

Brought up by Mr Cox and Ordered by the House of Assembly to be printed

MEMBERS OF THE COMMITTEE

LEGISLATIVE COUNCIL

Mr Wilson (Chairman)
Mr Wing

HOUSE OF ASSEMBLY

Mr Cox
Mr Goodluck
Mr Groom (Braddon)

By Authority: Government Printer, Tasmania

INTRODUCTION

The Committee has the honour to report to the House of Assembly in accordance with the provisions of the *Public Works Committee Act 1914* on the proposal to develop the Beaconsfield Multi purpose Service Centre.

PROPOSAL AND COSTING

Proposal

The proposal will convert the existing 26 bed acute and out patient facility to a 22 bed multi-purpose service with 18 aged care beds including respite and 4 acute beds along with a range of community and health services. The services operating from or co-ordinated through the centre include:—

- community nursing
- home care
- community based care
- family based care
- meals on wheels
- women's health clinic
- alcohol and drug
- physiotherapy
- day care
- diversional therapy social work
- client transport
- family and child health
- podiatry
- ambulance services
- mental health
- community social worker (joint funded with local government)

The conversion of existing district hospitals offering predominantly acute care services to multi-purpose facilities is occurring across Australia.

This proposal builds on previously developed Multi-Purpose Centres (M.P.C.) in Tasmania at Oatlands, Dover, King and Flinders Island. The difference with the proposed Multi-Purpose Service (M.P.S.) is that beds can be re-allocated within the centre without adversely effecting the funding structure, thus providing greater flexibility in servicing the community needs. This will be the first service of its type in Tasmania.

The locally based services increase the emphasis on preventative, primary and community based care, decreasing the dependence on high cost institutional care. It also provides a second life to facilities which can no longer meet community expectations and clinical needs. These centres are also often a community focus and a significant district employer.

The existing building lends itself to redesign. The existing wards will be divided into single rooms with ensembles and other steps taken to provide privacy, allow flexibility and to assure efficient use of staffing resources.

The lower level will be allocated to support functions and community services with the upper level concentrating on the hostel, nursing home and acute facilities plus the doctors consulting and treatment rooms.

LEVEL 1.

- (i) DAY CENTRE - Kitchen;
 - Dining Area;
 - Lounge and Recreation Area;
 - Activities Area;
 - Office;
 - Stores.

The Day Centre opens out onto an enclosed garden area.

- (ii) RECEPTION - adjoins a store.
- (iii) CONSULTING ROOMS for - Allied Health Professionals, e.g.
 - physiotherapist, podiatrist;
 - Women's Health;
 - Consulting Doctors;
 - Home Care Services;
 - Community Options;
 - Family and Child Health;
 - Drug and Alcohol;
 - Utility Room;
 - Meeting Room and Kitchenette;
 - Storage.
- (iv) OTHER ROOMS - Hairdresser;
 - Baby Change Room;
 - Laundry;
 - Cleaners Room;
 - Toilets, including a disabled toilet.

LEVEL 2.

- (i) BEDROOMS - 21 beds with en-suites;
 - 1 additional hospice bedroom;
 - Quite Room;
 - Lounge;
 - Day Room;
 - 2 Sitting areas;
 - Bathroom.
- (ii) CONSULTING ROOMS - Doctor's Consulting Rooms;
 - Treatment Room;
- (iii) OTHER ROOMS - Nurses Stations;
 - Staff Room;
 - Existing Kitchen (slightly reduced);
 - Dirty Utility;
 - Linen and Dirty Linen;
 - Cleaners;
 - Storage.

COSTING

The project will be jointly funded with the Commonwealth Government under their multi-purpose services (M.P.S.) scheme and state funds with additional funds privately donated to the project and held in trust by the Northern Region.

	\$
Commonwealth Capital contribution	500 000
Beaconsfield Trust Funds	239 000
State Building Construction Program	400 000
Department of Community and Health Services	72 000
.....	1 211 000

The Commonwealth will also provide recurrent funding towards the centres ongoing operation.

The state funds have been approved from the 1997-98 Capital Investment Program. The \$72 000 noted above has still to be sourced but is expected to be found within the projects design contingency.

EVIDENCE

The Committee commenced its inquiry on Tuesday, 25 February 1997. The Committee met at the West Tamar Council Chambers, Beaconsfield, and proceeded to inspect the existing facility. The following witnesses gave evidence at a public hearing which followed the site inspection:—

Pip Leedham, Acting Regional Director, North,
Robin Phelps, Program Manager, Aged and Disability Support Services,
Yvonne Burns, Manager, Beaconsfield Multi Purpose Centre, and
Brian Khan, Chairman, Northern Regional Health Board, Department of Community and Health Services;

Honourable John Loone, M.L.C. for Tamar;

Marie Bender, Rowella Auxiliary, Beaconsfield.

Ms Leedham presented a formal submission on behalf of the Department of Community and Health Services. In addition Ms Leedham stated "This is Tasmania's first multipurpose service site. It is actually part of a Commonwealth-State pilot project of which there are 34 sites to be developed throughout the country. The reason that the Commonwealth-State committee have looked at the development of multipurpose services is actually to improve the provision of aged care and health services to rural communities. What it was actually designed to do was to overcome the difficulties that exist within rural communities of providing stand-alone specific services because they do not have the population or the infrastructure to support stand-alone services."

Ms Leedham added "The pilot project has been evaluated nationally and valuation was considered very successful and if I talked to my colleagues in other States, they are all very keen to expand the number of multipurpose services they have as long as it fits the needs of that particular community. What this proposal does is replace a 22-bed facility—which is currently hospital beds and has some long-stay patients—with facilities that can be used flexibly for aged care—and that is residential aged care—and acute services as well as respite and palliative care."

It was explained that the existing 22 bed facility would become a 26 bed facility through the redevelopment process. By making the centre a multi purpose facility the new capacity of 26 beds will be more fully utilised than the existing 22 beds.

The proposal has been planned since 1993 and there has been extensive community consultation and through this process there has been demonstrated strong community support.

The Committee questioned the witnesses about the ongoing funding arrangements for the administration of the new facility. Mr Phelps responded by saying "The funding is constant ... and that is one of the significant advantages of the MPS model over an MPC model. It is virtually cashing in of all the services that are provided from a range of different specialities, be it community nursing or the hospital-based services; provide a bucket of dollars which can then be used flexibly for clients. From memory, the amount of the current funding for the MPS is \$400 000 per year. That has been provided as recurrent funding from the Commonwealth each year whether those beds are full or not. That is where we get significant flexibility whereas our other MPCs, like Flinders Island, or Oatlands and Dover, ... if there is not anyone in the beds there is no funding."

The Honourable John Loone M.L.C. appeared before the Committee. Mr Loone stated the strong community support for the project. He said "The community involvement and staff involvement has been very, very good. The board itself has gone out of its way to set up meetings with the public, and we as a community at Beaconsfield are very happy with what is done. I do not think you will find a person in this area that is not totally and absolutely behind the project. They have financial involvement in that perhaps something like 25 per cent of the total expenditure is coming from trust funds from within the Beaconsfield district, which speaks for the solidarity of it and its support of the project. I would like it to be made aware that this project has been so well received and the processes that have been used are real guidelines for any future developments like this around the State. I think as a role model everybody is to be congratulated."

Mrs Marie Bender, on behalf of the Rowella Auxiliary, also submitted to the Committee the strong community support for the project. She emphasised that this type of facility is particularly beneficial in country areas as it removes the need for the elderly to move to the larger towns or cities, away from their community, to be close to necessary services.

The West Tamar Council made a written submission to the Committee stating its strong support for the Project.

CONCLUSION AND RECOMMENDATION

The evidence presented to the Committee showed that the proposed facility would produce a much more effective and efficient delivery of community and health services to the Beaconsfield district and surrounds. The overwhelming community support and the process adopted by the Department of Community and health Services to involve the community in developing the facility clearly signify the positives associated with the project.

Accordingly, the Committee recommends the project, in accordance with the plans and specifications submitted to the Committee at an estimated cost of \$1 211 000.

Parliament House, Hobart
13 March 1997

S. J. WILSON M.L.C., Chairman