



Public Submission Cover Sheet

Please complete this sheet and submit with any attachments to the Sustainable Health Review Secretariat

Your Personal Details
This information will be used only for contacting you in relation to this submission

Title	Mr <input type="checkbox"/> Miss <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Dr X <input type="checkbox"/> Other <input type="checkbox"/>
Organisation	Bentley Hospital Medical Advisory Com & Community Advisory Com
First Name(s)	████
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Publication of Submissions

Please note all Public Submissions will be published unless otherwise selected below

I do not want my submission published

X I would like my submission to be published but remain anonymous

Submission Guidance

You are encouraged to address the following question:

In the context of the Sustainable Health Review Terms of Reference listed below, what is needed to develop a more sustainable, patient centred health system in WA?

- Leveraging existing investment in Primary, Secondary and Tertiary healthcare, as well as new initiatives to improve patient centred service delivery, pathways and transition;
- The mix of services provided across the system, including gaps in service provision, sub-acute, step-down, community and other out-of-hospital services across WA to deliver care in the most appropriate setting and to maximise health outcomes and value to the public;
- Ways to encourage and drive digital innovation, the use of new technology, research and data to support patient centred care and improved performance;
- Opportunities to drive partnerships across sectors and all levels of government to reduce duplication and to deliver integrated and coordinated care;
- Ways to drive improvements in safety and quality for patients, value and financial sustainability, including cost drivers, allocative and technical efficiencies;
- The key enablers of new efficiencies and change, including, research, productivity, teaching and training, culture, leadership development, procurement and improved performance monitoring;
- Any further opportunities concerning patient centred service delivery and the sustainability of the WA health system.

Submissions Response Field

Please type your response into the field below. Alternatively you may provide your submissions as a separate attachment (Suggested Maximum 5 pages).

Bentley Hospital is a 100 to 200 bed hospital with 2 operating theatres located between the catchment areas of 2 tertiary hospitals RPH & FSH.

In this submission, we suggest the Sustainable Health Review (SHR) panel consider:

1. Bentley focus on the delivery of health services for the local community. Services such as low risk paediatric surgery, day procedures for surgical specialties, obstetrics, medical and mental health services catering for the needs of the local community.
2. Bentley has a history of being able to deliver cost effective and efficient care for its community. This maybe further enhanced by the use of electronic management systems, volunteers, sharing of resources by patients and allowing opportunities for work experience amongst members of the younger local community to improve local engagement.
3. In the advent of a return to 2 metropolitan area health the SHR panel should consider allowing Bentley return to a stand-alone management status as a community hospital. This is to enable the community to drive the priorities of the local patients rather than tertiary hospitals enforcing their agenda on Bentley Hospital and the local community. For example, tertiary hospitals sending out of area patients to Bentley hospital to decompress overcrowded tertiary hospitals. Medical patients from country areas or northern metropolitan suburbs are being sent to Bentley to await discharge to community. In the area of mental health Bentley has taken a lead within the local area and provides continuity of care into tertiary hospitals (FSH & RPH) supporting the local community.
4. The use of postcodes to allocate patient to services needs urgent review as patients living locally are being referred out of their residential area. Reallocation of postcodes and diversion of low risk obstetric patients to costly tertiary hospitals, reduce the viability of low risk maternity units such as Bentley and cause inconvenience to outpatients.
5. The creation of a Midwifery Group Practice at BHS would provide an efficient and cost-effective model of care. A Level 2 Nursery would produce further income as a cost-efficient measure.
6. Bentley Hospital hopes to participate in the health and innovation hub proposed for RPH by the Premier Mark McGowan. It can provide innovative accommodation solutions for RPH. Bentley Health campus is ideally located near the Bentley precinct and Curtin University for clinical trials and translational research with scientist from the Curtin University campus and as a training centre for midwifery, physiotherapy and allied health students and postgraduates, including GP Obstetricians and anaesthetists. See <https://www.markmcgowan.com.au/news/new-research-and-innovation-fund>.
7. Bentley Hospital had \$10m provision for upgrades and refurbishment according to a business plan to be developed by East Metropolitan Health Service for its future. These funds are essential for ongoing efficient maintenance of services. We would suggest provisions be made in the upcoming budget for Bentley Hospital. See <http://www.communitynews.com.au/canning-times/news/bentley-hospital-loses-10m-upgrade-funds/>

In relation to this submission as it relates to Bentley Health Service, the MAC and CAC

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endorses the observations and recommendations of the Review of Safety and Quality in the WA Health System by Professor Hugo Mascie-Taylor (2017), especially:

- Clinical governance principles which ensure clear roles, responsibilities and accountabilities, [including a separation of executive powers] between the system manager and individual services (p.11).
 - cultural change towards fractal governance models organisation wide from the board to the bedside (p.13),
 - Appropriate system tensions and challenge given the small size of the WA Health system. (Recommendation 4, p.17),
 - monitoring the performance of HSP Boards in meeting their responsibilities by DOH and HSP leadership group (Recommendation 6, p.18),
 - clear definition of roles, expectations and managerial responsibilities of clinical leaders (Recommendation 9, p.21),
 - placing safety and quality data in the public domain “with a presumption in favour of publication at all times” (Recommendation 11, p.23),
 - demonstrated willingness to involve site based consumer representatives in governance matters (Recommendation 12, p.23),
 - a clear model of intervention (Recommendation 19, p.29),[extending to broader governance and workplace matters],
 - urgent review of mental health management to simplify and clarify arrangements to provide system oversight and organisational direction (Recommendation 24, p.30-1) ,
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- We further note his observations regarding the Staffordshire Trust enquiry where undue focus on fiscal matters outweighed those relating to patient care. “It is the responsibility of HSP Boards to balance the quality of care with the availability of resource, both human and financial....” (Recommendation 8 p.20). See [Review of Quality and Safety Health Dept WA](#)
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- The use of independent external audit and quality control of capital and infrastructure projects to avoid costly mistakes and delays.
 - Managing and delivering health care centred on the needs of patients not managing and delivering patients around the needs of the health system.
 - Simplify, clarify and coordinate the patient journey between points of care right across the sector from primary and tertiary by improving communication between sectors.
 - Treat all employees with consideration and respect so they accept directions given by more senior management, understand the reasons for such directions and have an opportunity to respond.