

**Submission
No 164**

**INQUIRY INTO HEALTH OUTCOMES AND ACCESS TO
HEALTH AND HOSPITAL SERVICES IN RURAL,
REGIONAL AND REMOTE NEW SOUTH WALES**

Organisation: Blue Mountains Hospital Auxiliary

Date Received: 4 December 2020

NSW Legislative Council Inquiry

Health outcomes and access to health and hospital services in rural, regional and remote New South Wales

Submission by: Noel Rath (President) on behalf of the Blue Mountains Hospital Auxiliary

Date: 4th December 2020

SUBMISSION

The attached submission is in response to the NSW Legislative Council Inquiry into Health outcomes and access to health and hospital services in rural, regional and remote New South Wales.

BACKGROUND

The Blue Mountains District ANZAC Memorial Hospital (Blue Mountains Hospital) at Katoomba is a C2 District Group 2 hospital and provides emergency and basic services, minor surgical procedures and short term patient beds. It is within the Nepean Blue Mountains Local Health District.

The current building was built in 1927 and is an ageing facility with no room for expansion. The building is beset with asbestos and water leakage challenges. The land site at Katoomba is land locked with no room for expansion. Parking is very limited with patients and visitors often having to walk over 100 metres to the hospital entrance.

The hospital is at 100% physical capacity and the hospital has no room for expansion to cater for any complex procedures and an ageing population. The hospital does not provide services such as Aged Care, Cardiac and Respiratory Care, Intensive Care, Medical Imaging and Nuclear Medicine, Cancer and Oncology services, ENT surgery, Orthopaedic surgery and Neurology. Patients requiring these services must travel to Nepean Hospital or other Sydney hospitals for care.

73% of Blue Mountains residents receive care in Sydney hospitals¹.

BASIS OF THE SUBMISSION

This document is submitted by Noel Rath, President of the Blue Mountains Hospital Auxiliary on behalf of the Auxiliary and its members. The Blue Mountains Hospital Auxiliary is a branch of the United Hospital Auxiliaries of NSW Incorporated, a registered charity and volunteer organisation. Our hospital Auxiliary raises funds to purchase equipment for patient care in our hospital.

The Auxiliary members are all residents of the upper Blue Mountains. We are keenly aware of the challenges facing patients attending the Blue Mountains Hospital at Katoomba. There is often a need to transfer to other hospitals for treatment requiring more than short stay emergency care or minor procedures. The population of the region is ageing with a commensurate need for oncology, cardiovascular, respiratory and co-morbidity care placing an ever increasing load on the hospital.

It is the strong opinion of the Auxiliary that the upper Blue Mountains needs a new hospital with facilities to treat the majority of residents of the Blue Mountains.

The building of a new Blue Mountains hospital would meet the NSW Premier's Priorities of a) Building infrastructure, and b) Improving service levels in hospitals.

The following submission outlines the background of the hospital, the Blue Mountains region and the need for a new Blue Mountains District ANZAC Memorial Hospital.

SUBMISSION SUMMARY

The Blue Mountains Hospital is well regarded by patients with recent surveys demonstrating that the staff exceed their performance and patient satisfaction targets as measured by NSW Health.

The Blue Mountains Hospital is within the Sydney Metropolitan zone and is not classified as a rural hospital therefore it does not attract junior clinical staff for rural service. There is a shortage of locally resident medical staff at the hospital with only 1% living in the Blue Mountains¹. With a new C1 District Group 1 hospital that is classified as a rural hospital and attached to a clinical school, junior doctors would be attracted to the Blue Mountains thereby facilitating better patient care. This would increase the likelihood of medical staff choosing to live and practice in the Blue Mountains.

A new hospital will alleviate the patient load on Nepean and Westmead hospitals, provide better and local patient care for residents of the Blue Mountains and dramatically reduce the need to transport patients to Sydney hospitals for care. Travel by residents of the Blue Mountains for cardiovascular, respiratory, oncology and orthopaedic surgery and services could be avoided.

SUBMISSION

ABOUT THE HOSPITAL

The Blue Mountains Hospital is a C2 District Group 2 Hospital with 113 beds as well as a dedicated 15 bed Mental Health Unit (declared). It provides district level inpatient and outpatient services for people of all ages.

The hospital provides Emergency Services 24 hours a day plus a range of general inpatient services including obstetrics & gynaecology, paediatrics, general medicine & surgery, renal, rehabilitation, geriatrics and palliative care. These services are supported by on-site pathology, medical imaging and pharmacy as well as a wide range of allied health services such as occupational therapy, physiotherapy, speech pathology, nutrition & dietetics and social work.

Outpatient clinics and services operating at the hospital include hydrotherapy, physiotherapy, dental, antenatal, psychiatry and sexual health². Inpatient services provide for lower complexity patients who do not require sub-speciality care. Patients are referred to Nepean Hospital for tertiary and relevant specialist services.

The Blue Mountains District ANZAC Memorial Hospital opened in 1927. The Nurses' Home was built in the 1940's and accommodates services and provides accommodation for hospital staff. As an 'Area of Need' hospital the on-site temporary staff accommodation is crucial in attracting and retaining staff. The hospital currently has a staff of 584, 71% of whom live in the Blue Mountains³. However only 1% of medical staff live locally¹.

In 2018 the hospital developed a Clinical Services Plan for a new hospital as part of an internal review of the requirements of the area. We refer to this document¹ throughout this submission.

The hospital is the only ANZAC Memorial hospital in New South Wales and as far as we can ascertain the only one in Australia.

BLUE MOUNTAINS DEMOGRAPHICS

The Blue Mountains Local Government area comprises 22 townships from Lapstone to Mt Victoria as well as Mt Wilson to the north. The Blue Mountains Hospital is in Katoomba just west of the centre of the Blue Mountains region. The population of the Local Government area in 2019 was approximately 80,000 residents. It is forecast to grow to as many as 97,300 residents by 2031 according to projections by NSW Planning & Environment⁴.

The population in the Council area is ageing at a much greater rate than Sydney with the expectation that the number of persons over 70 will increase by over 88% by 2036¹.

The Blue Mountains region attracts a high volume of visitors and tourists from Sydney, New South Wales, interstate and internationally. It is a centre for the extreme sports of rock climbing, abseiling, and canyoning. It is also a popular area for bush walking enthusiasts. The Blue Mountains Hospital has to cater for these groups in the event of accidents. The nearest hospitals from Katoomba are Lithgow which is 42 km to the west and Nepean Hospital, 52km to the east.

In 2016/17, Nepean Hospital provided 50.6% of public hospital activity for Blue Mountains Local Government Area residents whilst the Blue Mountains Hospital provided only 26.8%¹.

SERVICES PROVIDED BY BLUE MOUNTAINS HOSPITAL

The current services provided by the hospital are:

- Emergency
- General Medicine
- Renal
- Maternity
- Paediatrics
- Palliative care
- Rehabilitation
- Pathology & Pharmacy
- Planned and Urgent Surgery
- Sub and Non-acute Aged Care
- Mental Health Unit (declared)

The bed capacity of the hospital and services provided are¹:

- Acute Adult Beds 64 Overnight, Day only, Short Stay
- Acute Paediatric Beds 4
- Obstetrics 8
- Sub & Non Acute 37 Includes 6 Rehabilitation Day Hospital beds
- Mental Health 15
- **Total 128**
- Birthing Suites 2
- Emergency Department 9
- ED Resus Bays 2
- Operating Theatres 3 Minor operations, Procedures, Endoscopy
- Oral Health 4
- Ambulatory/Outpatients 6

There are two palliative care beds however there is no room in the hospital to extend this facility or add any further beds. Operating theatres and clinical staff are limited and perform only basic procedures. There is no intensive care facilities other than 4 beds in the Close Observation Unit.

SERVICE NOT PROVIDED

The following facilities are not provided:

- 24 hour theatre
- Intensive Care Unit
- Critical Care Unit
- Special Care Unit
- Chemotherapy Chairs
- Rehabilitation Day Hospital Consulting and Treatment Rooms
- Rehabilitation Day Hospital Gymnasium
- Ocular plethysmography, fixed fluoroscopy
- Medical Resonance Imaging (MRI)

Patients requiring these facilities are transferred to Nepean Hospital.

CHALLENGES FACING THE BLUE MOUNTAINS HOSPITAL¹

- The Blue Mountains population will increase by approximately 15% over the next 15 years.
- The number of local residents over 70 years will increase by >80% over the next 15 years
- Blue Mountains residents travel out of the area for 73% of their public health services
- There are higher rates of deaths from Circulatory & Cardiovascular Disease than NSW
- Currently a third of adults in the Blue Mountains are overweight
- 4% of surgery for local residents occurs at Blue Mountains Hospital
- 45% of Blue Mountains babies are born at Nepean Hospital
- 75% of children travel out of area for public hospital care
- The Western Sydney Airport will lead to significant growth in tourism in the Blue Mountains

The Blue Mountains Hospital at Katoomba is at full capacity with no room for expansion in the hospital and the surrounding grounds. In addition the building which opened in 1927 has asbestos and water leakage problems.

As a C2 District Group 2 Hospital the Blue Mountains Hospital is at a disadvantage in that it does not attract clinical staff. The hospital if upgraded should be a C1 District Group 1 Hospital, classified as a rural hospital and be attached to a clinical school. This will encourage higher levels of clinical staff moving to and living in the local area. Currently only 1% of medical staff live in the Blue Mountains.

Specialist support services in a new modern Blue Mountain Hospital should be able to provide:

- Aged Care
- Cardiac and Respiratory Care
- Intensive Care
- Pathology & Pharmacy
- Medical Imaging and Nuclear Medicine
- Cancer, Oncology and Neurology services
- General & ENT surgery
- Orthopaedic surgery
- Renal Medicine
- Expanded Palliative Care
- Expanded rehabilitation services
- General Physicians
- Pain management
- Expanded Psychiatric care

The hospital should be able to provide complex services for local residents. This could necessitate surgery occurring 7 days per week providing orthopaedic, cardiac and respiratory surgery and complex procedures. At present patients with these medical problems are transferred to Nepean Hospital by ambulance, private transport or helicopter.

Patients are often transferred to Nepean Hospital when the Blue Mountains Hospital is at full capacity. Travel to Nepean Hospital by car or ambulance will usually take at least an hour. At times of heavy peak hour traffic or on Sunday afternoons the travel time is well over 1 ½ hours. For patients travelling from Mt Victoria at the western end of the Blue Mountains the travel time can be 2 ½ hours on Sunday afternoons. The Blue Mountains Hospital has a helipad however this is located over 100 metres from the emergency entrance to the hospital.

CASE STUDIES

The following four case studies relate to residents of the Blue Mountains who have had significant health incidents requiring transfer from the Blue Mountains to Nepean Hospital. Names of these patients are not provided for privacy reasons.

CASE 1

An 80 year old lady living in the upper Blue Mountains had a history of mild angina. She suffered extreme pain and called an ambulance in the evening. She was taken to Katoomba Hospital for assessment and then transferred to Nepean Hospital for a possible angioplasty procedure at 5.30am. By 1.00pm the procedure was completed with a stent inserted. She was returned to Katoomba Hospital the next day.

If the Blue Mountains Hospital had a Cardiac Catheterization Laboratory on the premises the procedure may have been able to be performed at Katoomba. This would have saved the need for the patient to be transported, possibly avoiding any risk of complications that could occur by the delay in transferring the patient. In addition the concern and discomfort that the patient encountered by being transferred would have been avoided. The cost of transfers would have been avoided and ambulances made available for other cases.

CASE 2

A 68 year old woman fell and broke her hip in Hazelbrook. An ambulance was called and they arrived in less than 20 minutes. As the Blue Mountains Hospital couldn't perform orthopaedic surgery she waited in the Ambulance until another Ambulance arrived from Nepean Hospital to transport her there. The hip replacement procedure was carried out successfully and she remained in Nepean Hospital for a week and then was transferred to Rehabilitation at Nepean Hospital. After 10 days she discharged herself and returned home by taxi and then attended the Blue Mountains Hospital rehabilitation unit as an outpatient.

If our hospital was able to perform this orthopaedic surgery there would have been fewer resources needed such as ambulance transfers and travel challenges for friends and family.

CASE 3

An elderly lady in the Upper Blue Mountains was diagnosed with leukaemia requiring oncology services. It is a recurring illness. She had decided not to have chemotherapy and attends Royal North Shore hospital every week. Either her son drives her to the hospital or she is transported when she needs to be admitted for a few days where her specialist is located. The treatment is ongoing.

CASE 4

A 70 year old male in the Upper Blue Mountains had had an operation for a brain tumour and required oncology services over several weeks that required daily visits to Nepean Hospital. He had the choice of catching a train every day or using the community bus. His is a recurring cancer.

If our hospital was able to provide oncology services then many patients requiring chemotherapy & radiation treatment could have these services performed close to home with family support.

SUMMARY

If these services were available, significant resources would not have been needed to transfer these patients to Nepean Hospital. These case studies are examples of what is common practice. A new hospital would reduce the load on Nepean Hospital and residents of the Blue Mountains would have better health care and outcomes.

A new C1 District Group 1 hospital should be a modern newly built facility delivering high quality patient care. It could be a centre of clinical expertise providing leadership and innovation through the use of new technologies with the hospital attached to a clinical school.

An upgraded Blue Mountains Hospital would enable significantly improved health care and enable;

- Local management of patients with cardiovascular, cancer, respiratory and co-morbidity challenges
- Improved access and timeliness of elective surgery and emergency care
- Better management of overweight and obesity issues of residents
- The use of new cutting edge technologies to improve access to high quality health care
- Research and innovation through a clinical school that could attract clinicians to live locally.

CONCLUSION

The Blue Mountains is in urgent need of a new hospital in a new location close to the current facility which is in the centre of the Blue Mountains local health district and approximately 1.5km from Katoomba Railway Station.

REFERENCES

Statistics documented in this submission are drawn from various sources. These are:

- 1 One Hospital in the Blue Mountains CSP 2018-2036 (Clinical Services Plan)
- 2 Nepean Blue Mountains Local Health District website:
<https://www.nbmlhd.health.nsw.gov.au/blue-mountains-hospital/our-services>
- 3 Nepean Blue Mountains Local Health District website:
<https://www.nbmlhd.health.nsw.gov.au/blue-mountains-hospital/about>
- 4 Blue Mountains City Council website:
<https://www.bmcc.nsw.gov.au/council/councillors-and-elections/local-government-area>