NATIONAL HEALTH AND HOSPITALS NETWORK - NATIONAL PARTNERSHIP AGREEMENT ON IMPROVING PUBLIC HOSPITAL SERVICES

PROJECT IMPLEMENTATION PLAN FOR New Subacute Beds

Project number:	16 (also No 7)
Hospital/Location (not area health services generally)	Various (see below)
Project Description	**Subacute beds (existing Infrastructure) and mental health** Provision of new subacute beds in the following locations: • Gordonvale – 12 rehabilitation beds (2010-11) • Mareeba – 8 rehabilitation beds (2010-11) • Redlands – 10 palliative care beds (2012-13) • Maleny – 8 GEMS and rehabilitation beds (2011-2012) • Carrara–9 subacute (GEMS/Rehab) (2011-2012) • Mackay –2 rehabilitation beds (2010-11) • Royal Children's Hospital – 4 beds paediatric palliative care service (2011-12) • Boonah – 6 subacute beds (GEMS/Rehab) (2011-12) • Ipswich - 10 bed Geriatric Evaluation and Management unit (2011-12) • Toowoomba – 6 subacute beds (GEMS/Rehab) (2010-11) • Royal Brisbane and Women's Hospital (RBWH) – 4 subacute beds for geriatric assessment and rehabilitation unit (2011-12) • Royal Brisbane and Women's Hospital (RBWH) – 28 bed Geriatric Evaluation and Management unit (2011-12) • Brighton (Brisbane) – 6 subacute rehabilitation beds (2011-12) • Cairns – 20 Subacute Mental Health Community Care Unit beds (opening 2013-2014) These proposals (except Cairns) utilise existing infrastructure resulting in services becoming available early in the life of the NPA providing more immediate benefits.

This initiative will provide the following beds for each year of the NPA:

2010-11	2011-12	2012-13	2013-14
28	103	113	113

Please note:

- Subacute care services including rehabilitation, palliative care, and geriatric services are provided in accordance with the definitions use in the National Health and Data Dictionary Version 15 and include care provided via a multi-disciplinary team with regular assessments against a plan that is working towards negotiated goals within indicative time frames.

- Subacute Mental Health is provided in Queensland using an inpatient services model that provides clinical care and residential rehabilitation for adults whose level of mental illness and disability requires a structured living environment with clinical treatment available twenty-four hours a day. The services are targeted to provide medium term care for consumers who are unable to be supported to live within other less intensive community residential options.

- The opening of beds within the stated timeframes is contingent on the following:
    - Capacity to recruit staff (particularly and issue for rural and remote locations)
    - Minimal disruptions to minor capital works/refurbishments.

- Subacute Mental Health Community Care Unit beds

  A Community Care Unit is a supervised residential rehabilitation facility for mental health consumers over 18 years of age who would benefit from 24 hour residential care for a serious mental disorder and/or severe mental health problems, with persistent symptoms that substantially impair psychosocial function and the capacity for independent living. The program is for consumers who are in recovery but require additional support and life skills to successfully transition to independent community living. The service aims to promote an individual's recovery by providing opportunities that maximise their strengths and potential, supported by 24 hour, 7 day clinical care, provided by health professionals.

  The staffing profile of clinicians (allied health, nurses and doctors) and support staff will be provided through recurrent funding supplied by Queensland Health

Relationship with other Commonwealth or state funded	• Additional beds at Brighton builds upon funding received under the NPA on Health and Hospital Workforce Reform.

<table>
<tr><td>activities</td><td>

- A number of sites will utilise the online geriatric assessment service funded under the NPA on Health and Hospital Workforce Reform

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<tr><td>Expected improvement as a result of this project</td><td>

The increased provision of sub acute beds across the state will provide the following benefits:

- Patients able to access subacute care closer to their home (particularly for patients in rural/regional areas)
- Increase flow of patients through the hospital system (particularly for acute patients waiting for the availability of subacute beds/services)
- Provide patients with appropriate, medical specialist driven care
- Reduction in functional decline, particularly for patients who are a risk (i.e frail aged) thereby improving post hospital outcomes and reducing potential re-admission.
- Access to online geriatric assessments for rural and remote areas without specialist geriatrician support.

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<tr><td>Estimated Cost</td><td>

<table>
<tr><td></td><td>2010-11</td><td>2011-12</td><td>2012-13</td><td>2013-14</td><td>Total</td></tr>
<tr><td>Operational</td><td>3.43</td><td>23.52</td><td>29.22</td><td>31.53</td><td>87.71</td></tr>
<tr><td>Capital</td><td>.78</td><td>.80</td><td></td><td>10</td><td>11.58</td></tr>
<tr><td>Total</td><td>4.21</td><td>24.32</td><td>29.22</td><td>41.53</td><td>99.29</td></tr>
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<tr><td>Estimated Start Date</td><td>Refer to section on project descriptions</td></tr>
<tr><td>Estimated Completion date</td><td>Ongoing for life of NPA</td></tr>
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