

## **The truth behind the claims of a vocal minority**

Last week's advertisement asking if Golden Bay wanted quality health care was perplexing because that's exactly what a committed group of people have been working to achieve for up to 10 years.

A vocal minority, for their own reasons, is unhappy with the plans to integrate Golden Bay's public health services. We believe most Golden Bay people simply want the organisations involved to get on with it to ensure we preserve our health services through working together.

### **Integration path**

The Interim Management Group represents the interests of Golden Bay's three major health providers; the community hospital, the medical centre and the Joan Whiting rest home. It has never claimed to be an elected body. The three services are working to design an effective and joined up health service.

The integration plan arose from work originally done by local people in the Community Health Group, including health professionals, worried about keeping trained staff here, the future of the rest home and the belief health services could be delivered more effectively. A needs assessment was completed in 2001. Through a questionnaire the people of Golden Bay were asked their views of current and future services. From this the Community Health Group developed a health plan, which included the integration of services. A Steering Group was formed to progress this and a Feasibility Study was commissioned. Both the plan and the feasibility study were presented to the community through the media and at public meetings. This activity eventually evolved into the current IMG.

Over the past few years, as the three services have worked towards integration, IMG has kept the community fully involved with open days, a public meeting, ongoing media updates, plus regular meetings with interest groups such as Grey Power, in addition to working very closely with the staff and boards. IMG decided earlier this year not to conduct a telephone survey as feedback indicated these other processes were satisfactory.

### **Finances**

We are close to completing a detailed analysis of the financial viability of the planned facility and a business case that will be agreed by the Health Minister, the relevant boards and our financiers. Once it has been signed off, those financial plans will be shared with the community.

Part of the ongoing development of the project involving staff and other building users has resulted in some changes to the building. This is to ensure the services work in the best way and the building is affordable. Changes include reducing the size of rest home rooms, some ensuites being shared between two rooms and centralising two lounge and dining areas into one larger space.

We have always made clear the building will be financed by a combination of

- the sale of existing assets (mainly the medical centre as Joan Whiting will have little if any residual value once debts are repaid)
- loans paid for by the rent the trust will receive
- the contribution of the DHB's existing hospital facilities
- funding from cash or in-kind donations from national and community sources.

As we have already said, we have no intention of running sausage sizzles to keep this service afloat. But a number of local people have indicated their wish to support and contribute, either in cash or kind, as they have done with the Medical Centre Trust over the years. The business needs to be well financed at the start and that will need this kind of support from Golden Bay people.

### **Rest home rooms**

The design meets the national accreditation standards for rest home rooms. This standard requires rooms to be big enough for personal items, furniture, safe movement etc. The range in room size in the current building design is 15.6 sqm to 16.8 sqm, roughly 4 m by 4m, which is more generous than many similar facilities.

The room design (even before they were recently trimmed slightly in size) has never met the 18 sqm recommended in the Australasian guidelines because these are not the criteria to which we have designed, nor do we need to do so in order to meet the accreditation standard requirements. The Health Design Council has recommended to the National Health Board that the guidelines not be used as Standards and this is the current position in NZ. However based on (incorrect) advice, IMG was informed the Australasian standard was 15 and not 18 sqm and we have quoted that figure. While it is irrelevant to our planning, it has confused IMG members and the people with whom we have discussed that aspect of the plans. Our Health Planner has sincerely apologised for this genuine error and regrets any stress that has been experienced by all parties.

The new facility will offer vastly superior facilities to those currently offered at Joan Whiting, which has smaller rooms and lack of bathrooms.

The decision to locate the integrated facility at the community hospital was made after a lot of public consultation and was largely based on what was sensible and affordable. We realise this location for the GP practice is not as convenient for a small number of people but we had to balance that against the significant additional cost of other sites, which would have made the project unaffordable. And it is important to remember that this facility is not just for people in Takaka town, but for all people in the Bay.

### **The facts**

Several untrue claims were made in last week's advertisement that we refute.

Specifically:

- X-ray services are operating and will operate in the new building. A smaller

- proposed room reflects the planned use of modern equipment.
- An after-hours telephone-based service to assess the urgency of patient calls is being trialed. This service operates successfully in Motueka and other parts of Nelson Bays. It does not replace access to local after-hours doctors.
  - Access to doctors has improved under current management. There are now three full time (male) and two part time (female) doctors, plus a registrar, employed until February. For problems needing urgent attention it is always possible to see a doctor on the day you call; seeing your doctor of choice may take longer, depending on rosters.
  - We have standardised the processes for repeat prescriptions and other telephone based information to improve accuracy and patient safety, in line with national practice accreditation standards; this was a condition of passing Cornerstone quality accreditation.
  - Any cancellation of the Collingwood clinic is due to illness or other availability of doctors. We remain committed to providing GP services there.

### **The staff**

Similarly there have been claims staff and patients are being silenced under some kind of oppression. District Health Board staff throughout New Zealand are entitled to publicly comment on any issues as individuals, but they cannot do so as representatives of the DHB. If staff or patients feel they have been dealt with unfairly there are complaint processes they can follow, and can express their views through their advocate groups and unions.

Last week all staff were invited to give feedback on the proposed staff roles and rosters for the new facility. There are proposed changes to the workforces across the three organisations, and the transition of staff to the new facility and implementing the proposed way of delivering services will take time.

The transition will include clinical training, technology changes and new systems and processes. We hope to manage these changes through attrition and within the current staffing, though merging services will bring new staffing needs.

We find the comment odd that rest home advocates have been threatened by the DHB with the removal of rest home beds from Golden Bay, given Liza Eastman personally thanked DHB chief executive John Peters for his efforts in retaining the Joan Whiting service until the new integrated facility is built.

Last week's advertisement presented an inaccurate and distorted picture. We believe all it did was confuse the community and is unhelpful to the determined efforts of the members of IMG and the established health service providers who are seeking to achieve sustainable services for Golden Bay.

We continue to believe an integrated family health service will provide what those early community representatives asked for, and which we set out to achieve – preserve health services, including rest home facilities, and retain and attract staff.