Organisational commitment for a bright community future

Carole Bain¹
¹Silver Chain, WA

Background
Brookton is a small rural farming community of approximately 1500 people in the Western Wheatbelt region of WA. It is located approximately 2 hours’ drive, south of Perth, WA.

The history of health services in the town of Brookton is that the State closed all the Hospital boards and centralised the funding, in the early 2000. At this time, Brookton community, decided it wanted the health funding to stay in the Shire and not to be “pooled”, or in their eyes lost in the Regional Centre, Narrogin. At this point the Brookton Hospital Board continued to administer the hospital funded services while the Brookton Nursing Home (part of the hospital) was still in operation.

The old Brookton Nursing Home closed in early 2002 with a new residential aged care facility, Kalkarni, opening in October 2002. At this time an adjacent aged care hostel was renovated and the Brookton Health Centre established. With the opening of the Health Centre a contract between State Health and the Brookton Shire was agreed, with management of the “old hospital” services by the Brookton Shire as a Primary Health outreach model, including a nurse led emergency service.

Since 2002, there were many unforeseen challenges and difficulties encountered with the Shire being responsible for the management of the Health Services, including building suitability, private hospital licensing, state and regional health relationships, recruitment of staff and understanding, and having expertise in how to manage a health and community service. This resulted in Silver Chain being asked to take over both the Health and Community Services in July 2012.

Silver Chain
The Silver Chain Group, one of the largest not for profit health and community care organisations in Australia, provides a range of services to assist people in their homes across Western Australia, South Australia, New South Wales and Queensland. With over 100 years’ experience the Silver Chain Group is committed to caring for individuals and to helping shape the future of health and community care across Australia.

In Western Australia, Silver Chain began over 100 years ago as a small district nursing service. Today, it provides a wide range of community, clinical and health care services assisting over 40,000 people each year in WA.

Their services assist people of all ages, including the elderly, people with disabilities and people with acute illness and injury to maintain or regain their independence while caring for them in their home.

Brookton Health Services
Services that had been provided and co-ordinated by Brookton Health Services were:

- School Health
- Child Health
- Visiting General Practitioner
- Allied Health including Occupational Therapy, Speech Therapy, Social Work, Podiatry
- Aboriginal Health (not fully operational)
- Community Aged Care Services
- Emergency Nursing Post Services (had not been fully operational)
- Visiting Dentist.
The transition
After three months of working together, the services were successfully transferred form under the management of the Brookton Shire to Silver Chain and no changes to service provision were made, at this time. It was always the understanding, post transfer, that there would be a program of community engagement and consultation to identify the service needs and gaps for now and into the future, specifically for the small community, before we would enter into any changes or growth in services.

It is well known that in small communities that the access to services is limited for many reasons and that often priorities need to be made. We wanted the services delivered by Silver Chain to be driven by community engagement and true partnership between Silver Chain and the Community. Communities know what is required and often have the solutions to how gaps are met. We wished to have the community fully involved in the decisions around the services that were required, develop a service plan which would be visible, measurable and kept “alive” in the community.

Methodology for community engagement
When we started there was no formal mechanism for engaging consumers in the planning, delivery and evaluation of health services in the Shire of Brookton.

The Shire and the Brookton committee that had been established to manage the health services had been understandably pre-occupied with the governance and management of the service in the past and there had not been a focus on establishing formal mechanisms for community or consumer engagement.

Establishing a process for meaningful community engagement was the first activity undertaken, and with strong support from both the Brookton Shire and committee, Silver Chain committed to:

- keep consumers well informed about their services, rights and responsibilities, choices and how to give feedback
- provide support to consumers to ensure they are involved and able to provide feedback
- keep consumers well informed through the dissemination of appropriate information in a timely manner.

The first step in establishing a process for meaningful consumer participation was to form a partnership between Silver Chain and the Shire to oversee the formation of a Brookton Health Advisory Committee (BHAC). Silver Chain contracted an external consultant to work with the community. We felt this was important from a community perspective as we wanted the community to drive the process, and not have Silver Chain seen as “doing to” the community. The consultant facilitated the partnership, supported as a secretariat function as well as ensured involvement of all relevant parties in the process.

Once established, the BHAC soon changes its name to Brookton Healthy Communities Forum, which more suited the outcomes that were proposed, and promoted a feeling of creating health versus just an advisory or complaints mechanism. The Brookton Health Communities Forum (BHCF) provided guidance to the consultant throughout this process in respect to:

- mechanisms for distributing information to and receiving feedback from consumers
- the requirement for workshops with community members
- gaps in current service delivery
- level of satisfaction with current service delivery
- appropriateness of Health Needs Survey, health service plan and other documentation.
The BHCF initially worked with Silver Chain’s existing standard Terms of Reference for Health Advisory Committees. This was eventually reviewed by the committee and changes to suit the individual community requirements.

It was essential to the process that Silver Chain personnel were also fully engaged with the process of establishing and orientating a BHCF and the consultant ensured this did occur.

**Health Needs Survey**

The health services plan for Brookton would be heavily informed by a survey of the community's health needs. To facilitate this, the Health Needs Survey routinely administered by Silver Chain in rural and remote communities where it is the primary service provider, was adopted for use in Brookton.

The Health Needs Survey that is used by Silver Chain across our rural and remote sites as a starting point for communities, it is founded on practical, scientifically sound, socially accepted methods; utilizing research to improve health accessibility to individuals in remote communities. This is achieved through a community's full participation at a cost that the community and country health services can afford. There is a strong determination around maintaining, at every stage of development, the spirit of involvement and self-reliance.

Administration of the Survey was to be a combined effort of the BHCF, local Silver Chain staff and the Silver Chain Research Unit. The consultant would facilitate the process and lead interface with the local community. It is paramount that the BHCF are the drivers and co-ordinators of the Health Needs Survey and they encourage community members (such as the local GP, School, Police, St John Ambulance and main employers) to take interest and ownership of their health needs.

The BHCF reviewed the generic survey to ascertain whether the Health Needs Survey in the provided format (questions being asked, format of questions and wording) would enable maximum engagement from the individuality of the community and reflect their individual community needs.

This engagement changed things, like a male community member suggesting that the wording around men's health was unsuitable and provided suggestions on the wording to maximize input. There was a concern around the number of youth mixing sports and energy drinks with alcohol and drugs so this was also added to the survey.

Therefore the survey is tailored to the individual needs of the individual community population and demographic.

**How the model of health services are defined**

A new model of health service delivery was then defined using the following sources of information:

- a stock take of existing health service delivery arrangements
- contractual documentation between Silver Chain and the WA Country Health Service (WACHS) and Department of Health & Ageing
- Brookton Healthy Community Forum engagement
- Brookton Health Needs Survey
- patient activity data relating to services provided to Brookton residents locally and surrounding towns i.e. Pingelly, Beverley, Northam and the Perth metro area
- stakeholder interviews including; Silver Chain staff, WACHS personnel at Head Office and both Beverley and Pingelly Hospitals, local medical practitioners, St John Ambulance, Shire representatives, private allied health providers, Baptist Care, Wheatbelt Development Commission, Country South West Medicare Local and selected community members.
The new model of health service delivery includes a definition of services by type, volume and service provider across each of the three existing service streams of home and community care, primary health care and chronic disease management, and emergency services. A full costing of the new model provided and the staff and facilities required to deliver the new model of services will be defined. Opportunities for innovation and different ways of delivering services was also explored. For example, Telehealth to supplement face to face service delivery and the cost and benefits of doing so identified.

**Development of a Brookton Health Services Plan**

Based on the information gathered via the consumer engagement, Health Needs Survey and New Model definition processes, a comprehensive health service plan for Silver Chain services in Brookton is still under development. The Plan will include sections covering:

- executive summary
- planning context
- demography and health needs
- health partners
- current and future health service delivery
- other health service enablers
- proposed functional model of care
- recommendations
- reference documents
- stakeholder consultation.

Once the plan is formulated it will be presented in draft to the BHCF and Silver Chain management prior to being finalised and implemented.

We are continuing to work with Brookton Community to look at the measures against the plan and how we will evaluate and keep the process well and truly alive and visible for the community.

**Conclusion**

In my presentation I will discuss more about the journey we have had through this process, the outcomes for both the organisation and the community, the benefits and our learning’s. As our work is not yet finalised, the presentation will give the latest updates on how the commitment from both the community and the organisation is now resulting in a bright future for the health services in Brookton.