

BUNBURY HEALTH TASK FORCE, INTERIM REPORT

Statement by Minister for Health

MR KUCERA (Yokine - Minister for Health) [9.20 am]: Mr Speaker, I table today the interim report of the Bunbury Health Task Force. The establishment of the task force was an election commitment outlined in the Australian Labor Party's policy document "Bunbury 2020". The policy committed the Government to a comprehensive review of the regional hospital to identify solutions to a number of issues of concern. The task force, chaired by the member for Bunbury, was established in June this year. Its other members are Dr Ern Manea, Gerry Riordan, Judy Jones and Robert Prestage. They have now delivered an interim report and I expect to receive a final report by the end of the year.

In establishing the task force, I asked that a number of issues be addressed, which included -

- a review of hospital and public health services available to the people of Bunbury, including the availability of beds, waiting times for patients in the emergency department and staff shortages;
- a review of current and future levels of post-acute care services;
- an identification of strategies to attract specialist doctors to Bunbury;
- a review of the introduction of rehabilitation services at the South West Health Campus, including restorative care services for older people; and
- an identification of strategies to ensure an adequate supply of nurses and support personnel to the South West Health Campus.

The task force sought submissions from within the health system and the broader community and received more than 20. The task force also examined a strategic plan for the configuration of south west health services that was launched in 1999 and endorsed by the previous State Government last year.

Although the south west health forum developed the strategic plan, achievements to date have been driven by a cooperative and collaborative arrangement that exists between south west health services through a body known as the South West Health Executive. The task force found that the South West Health Executive has no legal status or authority. It also found that although the work and achievements of the health executive have been significant, further advancement of key initiatives has been hampered by the absence of any clear lines of accountability for the implementation, measurement and review of achievements.

Although the south west strategic plan establishes a direction for the provision of health services in the region, a major stumbling block to its success has been the existence of five statutory health authorities managing the provision of health services in the south west. In essence, there is no single authority charged with responsibility for implementing the plan and ensuring its relevance and currency. Importantly, there is currently no single authority that can be held accountable to the Government or to the community for the success or otherwise of the plan.

The establishment of a single health authority or area structure in the south west is now essential to ensure effectiveness and sustainability in the provision of quality health services to the community. I have therefore accepted the task force's recommendation to amalgamate the health service boards of Bunbury, Harvey-Yarloop, Vasse-Leeuwin, Warren-Blackwood and Wellington to create the South West Health Services Board. I have also decided to create a position of Chief Executive Officer, South West Health Services, and an appointment will be made as soon as possible. The chief executive officer will then assume day-to-day management responsibility for all health services currently managed by the existing health service boards in the south west. I am confident that the measures I have outlined today will contribute significantly to health service delivery in the south west of the State.

[See paper No 911.]