



LEGISLATIVE ASSEMBLY
FOR THE AUSTRALIAN CAPITAL TERRITORY

STANDING COMMITTEE ON PLANNING AND URBAN RENEWAL

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Submission Cover Sheet

Inquiry into Planning for the Surgical Procedures, Interventional Radiology and Emergency Centre (SPIRE) and the Canberra Hospital campus and immediate surrounds.

Submission Number: 18 - Woden Valley Community Council

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The Committee Secretary
Standing Committee on Planning and Urban Renewal, Legislative Assembly for the ACT
GPO Box 1020
CANBERRA ACT 2601

Dear Committee members

Inquiry into Planning for the Surgical Procedures, Interventional Radiology and Emergency Centre (SPIRE) and the Canberra Hospital (TCH) campus and immediate surrounds

Thank you for the opportunity to provide a submission to this very important Inquiry.

The \$500 million Surgical Procedures, Interventional Radiology and Emergency (SPIRE) is a much needed acute care facility for Canberra and the surrounding regions.

While the Woden Valley Community Council (WVCC) **supports** the construction of the SPIRE on the Canberra Hospital campus, we have **serious concerns** about the construction of the SPIRE facility on the north east edge of the campus (opposite the Garran Primary School) and whether the funding is adequate to future proof health outcomes on the campus.

TCH is the largest acute care hospital between Sydney and Melbourne and it services residents in Canberra and southeast NSW. The ACT Treasury forecasts Canberra's population to reach 581,000 by 2040 and 703,000 by 2058 (*Population Projections 2018 to 2058 - released January 2019*). The population in southeast NSW is also expected to increase.

The SPIRE needs planning for a site that provides:

- external access - ambulance access from the front door (the main arterial Yamba Drive).
- internal access – a centrally located anchor building to ensure effective patient flows and interfaces with existing services
- a precinct wide plan, including the Garran Primary School
- consideration of the impacts on the surrounding residents
- parking and traffic flows
- comfortable, reflective green areas
- space for future acute care expansion preserved.
- staff involvement to ensure great health outcomes and to build morale.

Recent Reports

Recent reports from the Productivity Commission and the Medical Board of Australia demonstrate the ongoing problems at the hospital. The resolution of these issues requires leadership that considers all opportunities to improve the operation and culture of the hospital.

TCH Emergency Department is currently experiencing longer waiting times than hospitals in other states. The Productivity Commission's Report on Government Health Services, released on 31 January 2020, found that the TCH has the lowest proportion of emergency patients seen within the triage timeframes (shown in the following table).

Table 12.1 Proportion of emergency department patients seen within triage category timeframes, public hospitals, 2018-19^a

Triage category	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
1 — Resuscitation	100	100	100	100	100	100	100	100	100
2 — Emergency	79	75	72	78	60	72	74	67	75
3 — Urgent	74	66	61	48	46	56	32	54	63
4 — Semi-urgent	79	72	75	64	65	64	47	65	73
5 — Non-urgent	93	89	93	91	89	85	83	92	91
Total	78	71	69	63	58	64	46	64	71

Data are not comparable (across jurisdictions).

Data are complete (subject to caveats) for the current reporting period.

Productivity Commission's Report on Government Health Services

Similarly, the Medical Board of Australia's 2019 medical training survey found that the ACT had the least satisfaction across Australia for the following metrics:

- I would recommend my current training position to other doctors
- I would recommend my current workplace as a place to train
- how would you rate the quality of your clinical supervision?
- how would you rate the quality of your orientation?
- how would you rate the quality of the teaching sessions?
- how would you rate the quality of your training on how to raise concerns about patient safety?

See Attachment A for comparisons of the ACT results with other states.

There have been claims of a poor culture at TCH for years and the Canberra Times (12 February 2020) reported that Canberra's junior doctors are the most likely in the country to face bullying, harassment or discrimination.

The SPIRE building provides an opportunity to plan the campus and the interfaces with existing campus services (and the broader precinct) to achieve better health outcomes and staff morale. This process would 'bring the staff along for the ride' and build a sense of hope in the future of the hospital. It is a concern that this opportunity is being missed. Questions about the process to decide the site for SPIRE are at Attachment B.

Planning for Health Outcomes

A Precinct Plan is required to determine the best layout of the hospital for ambulance access, patient flows (to reduce bed block), interfaces with existing services, parking, traffic movements and to minimise the impacts on the surrounding residents.

Cart before the horse – the Palmer Street site for SPIRE was chosen prior to a Precinct Plan being developed. This site was chosen to minimise disruption rather than for health outcomes. The users of these health services deserve a site that provides the best outcomes for health, now and into the future, with construction disruption managed.

The Precinct Plan should include a strategy to continue the delivery of the existing critical care services and minimise disruption while replacing the old hospital buildings.

Access

TCH has many advantages, a significant one being its central location in Canberra and its access from the duplicated north south and east west road corridors. The 24 hour Emergency Department is located on Yamba Drive, a main arterial road that is easily accessible from all directions. It is often the gateway to admissions, the hospital's front door, with large signage for residents in a hurry to find emergency services.

Moving the **ambulance access** to a single lane residential street, opposite a primary school with 40km/h speed limits, is a second rate solution. People from most areas across Canberra will be required to travel further to reach the Emergency.

The outcomes of many time-sensitive health conditions, such as heart attacks, trauma, and stroke, are highly dependent on the speed of access to emergency for treatment.

The Garran residents

Many Garran residents have expressed concerns about SPIRE being located on Palmer St, including:

- **safety** of the community (especially children) due to the 24 hour ambulance movements on Palmer Street, a residential street opposite the Garran Primary School
- **traffic congestion** on Kitchener St, Gilmore Cres and Palmer St which is the main entrance to Garran and Hughes from Hindmarsh Drive
- **parking shortages**
- **noise** from the helicopter pad (on the 9 storey SPIRE).

The Garran residents undertook a petition to the ACT Legislative Assembly to demonstrate their concerns about the site of the SPIRE building. These concerns should be considered during the assessment for the best site for SPIRE.

Patient Flows

The SPIRE building is more than an Emergency Department, it is the anchor of the campus. It includes medical imaging, a surgical inpatient unit, an intensive care unit, an acute cardiac care unit and a mental health short stay unit. Patients are likely to access this building for multiple reasons (eg imaging and surgery) so its location is critical for efficient and effective patient flows across the campus.

The hospital campus will need to be planned to allow SPIRE, the anchor building, to play a central role in the patient flows, from all areas of the campus, to facilitate health outcomes. Wards and parking can be located around the SPIRE. See an example at **Attachment C**.



It is important to achieve hospital wide patient flows to improve productivity and health outcomes. The location of infrastructure should be considered due to its contribution to moving more patients through the system as effectively and efficiently as possible, to

Effective patient flows provide a better experience for patients and staff.

The long term benefits of ambulance access and patient flows from delivering SPIRE on the centrally located building 3 should be considered.

This will also preserve the opportunities for growth of the emergency, ambulance bays and wards on all areas of the campus.

Future proofing

Failing to achieve hospital-wide patient flow — the right care, in the right place, at the right time — puts patients at risk for suboptimal care and potential harm. It also increases the burden on clinicians and hospital staff and can accelerate burnout.

Achieving hospital-wide patient flow, and ultimately improving outcomes and the experience of care for patients, requires an appreciation of the hospital as an interconnected, interdependent system of care. See a multi-criteria analysis at **Attachment D**.

The Precinct Plan should also include the surrounding regions, including the 5.5 hectare former CIT site. These buildings were built in the 1960s by the Commonwealth and are structurally sound. They are not in use and could be refurbished to provide options for space to continue

hospital services until the SPIRE is completed. Demolition of these buildings prior to the development of a precinct plan reduces opportunities for addressing the growing health and education requirements in the area.

A university located on the site opposite the hospital has a number of advantages as there is space for courses, research and student accommodation on the 55,600 square metre former high school site. In addition to the buildings, the site has a gym, access to playing fields and is within walking distance to the Woden Town Centre which is on Canberra's main north-south public transport alignment. The ACT Government has also committed to the second stage of light rail, which will connect the CBD to Woden.

Utilising the former CIT site allows for growth in the capacity of acute care services on the main hospital campus into the future.

Transport

Parking, traffic congestion and public transport access have been ongoing issues at TCH. These issues need to be investigated and resolved through detailed traffic modelling and planning prior to construction of SPIRE.

Governance and consultation

As noted by the Chief Minister, governance is important. So is due diligence, consultation and transparency.

We would like to understand the governance arrangements and the decision making process undertaken prior to the 12 December 2018 announcement of the Palmer This includes the business case and options analysis (the evidence base) for the \$500 million investment.

Questions are at **Attachment B**.

We are disappointed that there has been a lack of consultation regarding the site for the emergency building. After the December 2018 announcement regarding the site on Palmer St, the ACT Government discussed the project at the WVCC March public meeting. The presentation was very brief and did not mention that the ambulance access to SPIRE was from Palmer St.

In June 2018 the former Minister for Health attended our public meeting to discuss matters in her portfolio, this primarily included discussion around the ANU Medical School.

We were not aware of the ambulance access from Palmer St and the concerns of the Garran residents until the September 2019 meeting at the Garran Primary School.

The ACT Government has not brought the community 'along for the ride' and we now, quite rightly, have very upset residents, both in Garran and in the broader community.

In response to the concerns of the community, the ACT Government established the Local Community Reference Group. It is not clear how the ACT Government will ensure the Group is representative of the community's views given the SPIRE site is not in scope for discussion.

Mass Casualties

We note that when it comes to responding to catastrophic natural disasters, accidents with multiple casualties, acts of terrorism, and infectious disease outbreaks, emergency departments are on the front line and often require great access and additional capacity to accommodate a sudden massive influx of patients.

It is not apparent that the Palmer St ambulance access is the better site for mass casualties.

Background

In 2008-09 Budget, the ACT Government released the *Your Health - Our Priority* initiative which provided \$300 million to work on a ten year plan for the renewal of Canberra's health services.

Under this initiative the Emergency building was to be centrally located on Building 3 with access from Yamba Drive, there was a medi hotel and a training and education precinct in addition to the ANU medical school.

In the 2016 election, \$500 million was provided for the emergency building which was moved to the current helipad site and named SPIRE.

In December 2018, the former ACT Minister for Health issued a media release announcing that SPIRE will be built between Hospital Road and Palmer Street, stating that the advantage of this location is the minimal disruption to critical care services during the building phase.

As stated by the Chief Minister in his 2016 Statement of Ambition - cities don't succeed by accident or by leaving things to chance – they require design, good governance and great collaboration'.

While the WVCC welcomes development we want it to be done well.

The WVCC committee members are available to appear at the public hearings.

Yours sincerely



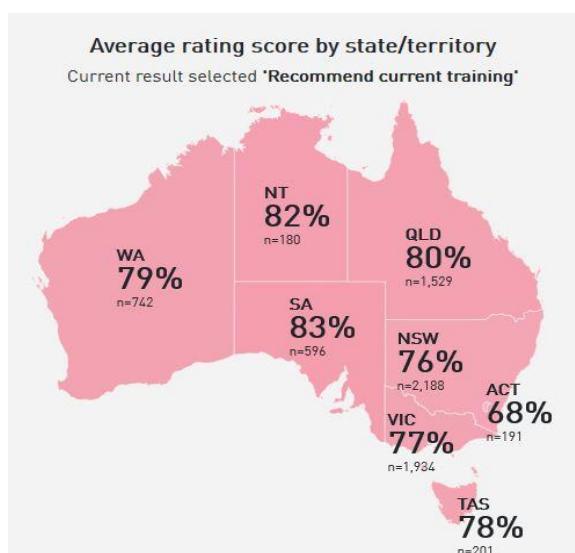
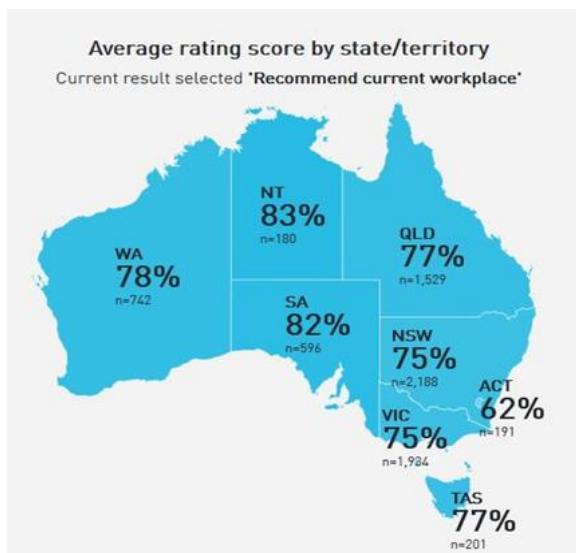
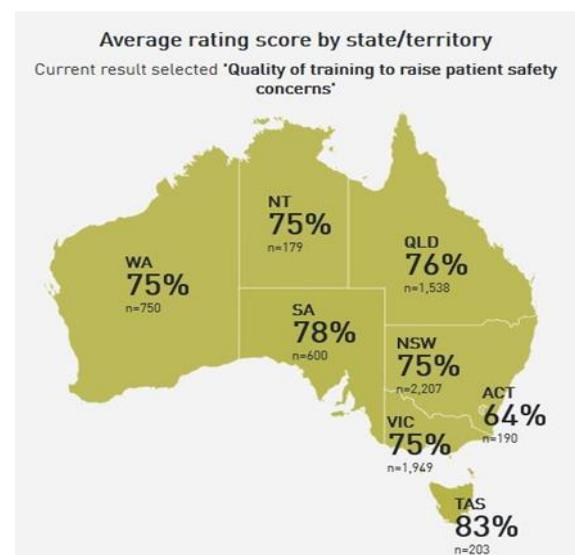
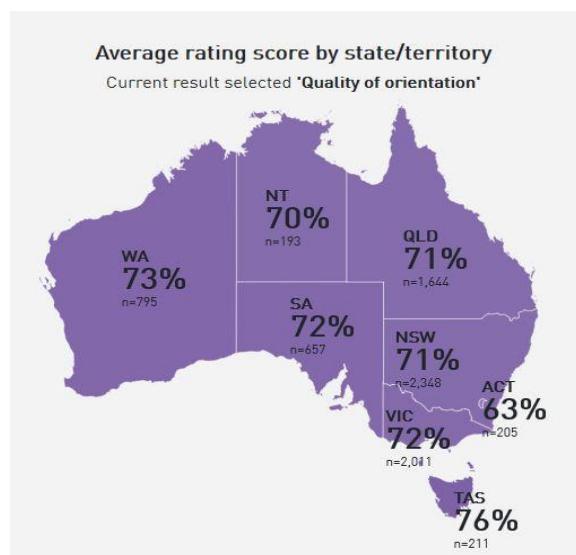
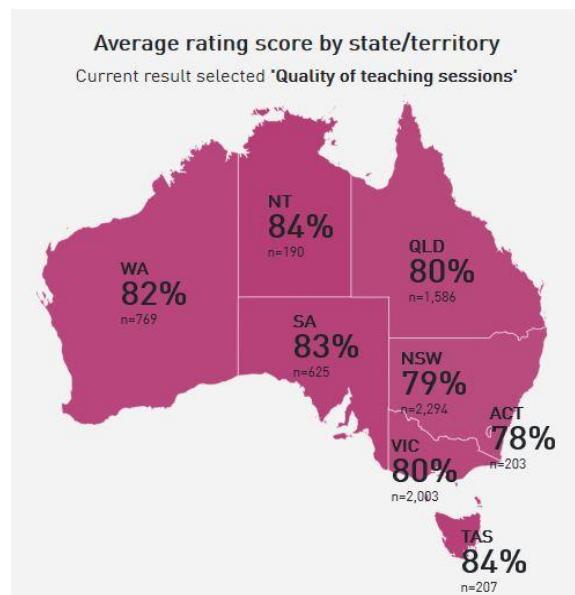
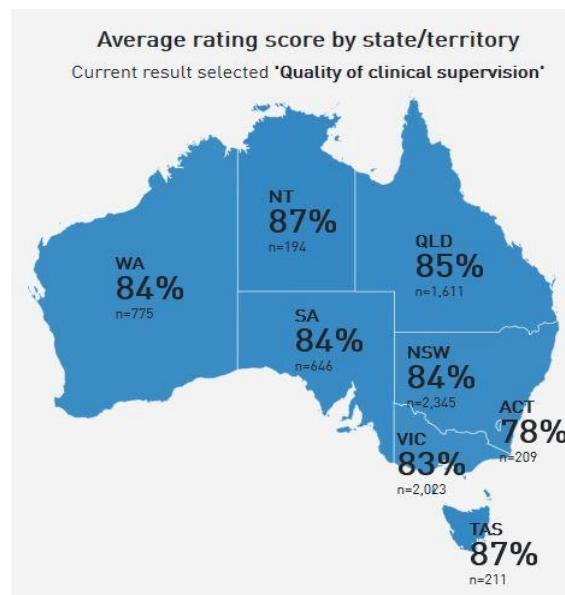
Ms Fiona Carrick
President
Woden Valley Community Council

23 February 2020

Attachment A

The Medical Board of Australia undertook a training survey in 2019

The results are not great for the ACT



Attachment B

The process to determine the site for the SPIRE building is not clear and the WVCC has the following questions:

Prior to 12 December 2018 (the announcement of the Palmer St site):

- What was the process to choose the existing site?
- What governance committee was established to investigate the options for the SPIRE site?
- Who were the members of the committee and what was their experience?
- What site options (on TCH site) were analysed in the options analysis?
- What criteria was used to eliminate options and determine the preferred site?
- What criteria were considered to improve morale?
- What report (output) was prepared from the analysis to inform decisions?
- Who was consulted prior to the announcement?
- What experts were consulted and what were their views?
 - Clinicians?
 - UC?
 - ANU Medical School?
 - Ambulance service?
 - Other local hospitals
- Prior to the announcement of the site, did Canberra Health Services consider:
 - The interface with the existing services eg pathology
 - The patient flow with medical wards eg mental health
 - The ambulance access
 - The impact of SPIRE on the Garran residents
 - Parking, traffic flows
- Will the facility be delivered for \$500 million
 - Will it be de-scoped if the funding is not enough
 - When will demand exceed the capacity that will be provided by SPIRE
- Where will the SPIRE expand in the future?
- Where will the ambulance bays expand?
- Where will the green spaces (for patient well being) be?
- What consideration was given to providing health education services on the former 5.5 hectare CIT site?

Attachment C

SPIRE located on building 3 (2008-09 policy)

- hub and spoke model - central location for patient flows
- room for expansion for the growing population
- direct ambulance access from Yamba Drive
- The ANU Medical School provides a buffer to Garran residents
- Parking access from the large southern structured carpark and from carparks on the fringes of the campus



SPIRE SPIRE located on corner of Palmer St and Gilmore Cres (Dec 2018 policy)

- located on the eastern corner
- corner constrained for expansion for the growing population
- ambulance access on Palmer St – a residential st
- no buffer to Garran Primary School and residents
- Parking constrained and a reasonable distance from the large southern carpark



Multi Criteria Analysis

Criteria	2008-09 Budget Building 3	2016 election cnr Yamba Drive and Kitchener St	2018 December cnr Palmer St and Gilmore Cres
Opportunities for SPIRE to expand with population growth	Yes – centrally located	Limited – constrained site	Limited – constrained site
Patient flows between SPIRE and wards	SPIRE central allowing access to SPIRE from the whole campus	SPIRE on the northern side of campus requiring longer patient movements from the south of the campus	SPIRE on the north eastern side of campus requiring longer patient movements from the south and west of the campus
Access – ambulance entry	Efficient from Yamba Drive	Efficient from Yamba Drive	less efficient – from Palmer st
Access – resident drop offs	Ability to provide parking spaces	Parking constrained	Parking constrained
Parking and access to SPIRE	Next to structured carpark with parking around the campus	Further from structured carpark with parking around the campus	Further from structured carpark with parking around the campus
Impact on surrounding residents	Limited, buffer from ANU Medical School	Residents across the road significantly impacted	Residents across the road significantly impacted
- safety	Ambulances on Yamba Drive, not Palmer St	Residents significantly impacted	Residents and students significantly impacted
- traffic congestion	Reduced due to streamlined ambulance movements and parking arrangements	Ambulance movements and parking not streamlined and convenient	Ambulance movements and parking not streamlined and convenient
- noise	Reduced due to the buffer between SPIRE, ambulances and the helipad Ambulances on Yamba Drive, not Palmer St	Residents significantly impacted from ambulance and helicopter movements	Residents significantly impacted from ambulance and helicopter movements