



Health Service Plan 2019-2029

Background Paper

Darling Downs Health

Health Service Plan Background Paper March 2019

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1 INTRODUCTION

The Darling Downs Hospital and Health Service (Darling Downs Health) has now completed a health service plan for the next ten years.

The purpose of health service plan is to support the Chief Executive and Board to make decisions regarding the development of services across Darling Downs Health, by exploring the implications of service options for hospitals within Darling Downs Health based on future projections for health service activity and capacity requirements. The projected requirements for Toowoomba Hospital (TH) are critical given the physical constraints of the existing site and infrastructure and the need to maintain the achievements of the past five years including timely patient care to specialist outpatient clinics, elective surgery, emergency care, endoscopy and dentistry services while achieving a balanced financial budget.

The purpose of the Health Service Plan Background Paper (this paper) is to 'set the scene' for future planning stages, and inform the development of the planning scenarios (additional to the 'no change' planning scenario) as outlined in the accompanying paper 'Health Service Plan Activity and Projections'. Facilities not co-located on a public hospital campus such as Baillie Henderson Hospital, Toowoomba Community Care Units and Mt Lofty Heights Nursing Home (residential aged care) are not featured in the Background paper facility profiles.

Information presented within this paper is to be read in conjunction with the key planning considerations identified through the staff and community engagement process facilitated by Darling Downs Health and Deloitte and documented by Deloitte in the Darling Downs Health Consultation Report for the Health Service Plan 2018-2028 (the consultation report).

Those planning considerations of a strategic nature that are prevalent within the consultation report are:

- Interest from the clinicians to pursue opportunities for different approaches to health care delivery by including increased emphasis on health promotion and early intervention.
- Opportunities to develop capability and capacity in major rural areas within Darling Downs Health.
- Community characteristics impacting health care access, health needs and expectations identified for example; socio-economic challenges, remoteness and impact on potentially preventable hospitalisation (PPH) and length of stay.
- Concern regarding ability to meet projected demand for services from Darling Downs Health residents (Intra-HHS patient flow patterns)

This paper acknowledges the role of Darling Downs Health as a specialist referral hospital provider for South-West Queensland. For this reason, detailed analysis of inter-HHS flow patterns has been undertaken to inform opportunities for collaborative service planning with surrounding HHSs, improve the sustainability and quality of health services, and cooperatively enhance the role of the Darling Downs Health services throughout the Darling Downs Health area.

Notes:

A glossary of key words is provided at Appendix 3.

For providing a broad overall understanding of the future use of health services by residents of Darling Downs Health, projections based on Acute Inpatient Modelling (AIM) have been used for all Service Related Groups (SRG) in this paper.

Renal dialysis has been specifically excluded due to the distorting impact that the very large volume of these separations has on the overall analysis. Projections for renal dialysis have therefore been provided separately.

This paper assumes reader knowledge of the full suite of services offered at Darling Downs Health as detailed within the review and the Darling Downs Health Organisational Chart at Appendix 4.

It should also be noted that there are alternative Queensland Department of Health endorsed projection methodologies (other than AIM) for mental health, interventional cardiology, cancer, qualified neonates and endoscopy. For interventional cardiology, cancer and endoscopy services the endorsed methodologies adjusted for the additional volumes of non-admitted activity that are not included in AIM. Population based methodologies are used for qualified neonates and mental health. These endorsed methodologies will be used to develop specialty specific projections during the next phase of the planning process. Percentages shown throughout the report are for information, these percentages are rounded and so may not total 100 percent in all occasions.

1.1 PLANNING AND POLICY CONTEXT

Refer to Appendix 5 summary of Planning and Policy documents both National and State that inform the focus for health service planning.

2 CATCHMENT ANALYSIS

The Darling Downs Hospital and Health Service (Darling Downs Health) services an area of approximately 88,650 square kilometres servicing approximately 5 percent of the total Queensland area.

Local Government Areas serviced within the Darling Downs Health area are: Cherbourg Aboriginal Shire Council, Goondiwindi Regional Council, South Burnett Regional Council, Southern Downs Regional Council, Toowoomba Regional Council, Western Downs Regional Council and part of the Banana Shire Council (community of Taroom). Darling Downs Health catchment area includes 34 Service Area Level 2 (SA2) within six Service Area Level 3 (SA3) including Darling Downs – East, Goondiwindi, South Burnett, Southern Downs, Toowoomba and Western Downs. Refer Figure 1 and Table 1.

The Darling Downs Hospital and Health Service area covers a predominately rural region extending from the New South Wales border to Glenmorgan in the west and Taroom in the north and includes the regional centre of Toowoomba. Darling Downs Health provides public hospital and healthcare services from 28 facilities, which includes one large regional referral hospital, three medium sized regional hub hospitals, twelve rural hospitals, three multipurpose health services, one community outpatient clinic, six residential aged care facilities, one community care unit and an extended inpatient mental health service.

Figure 1 Darling Downs Health Regions and Inpatient Facilities

Planning Regions

- Darling Downs - East
- Toowoomba
- South Burnett
- Goondiwindi
- Southern Downs
- Western Downs

Facility type

- +

 Hospital
- +

 Multipurpose Health Service
- +

 Outpatient Clinic
- +

 Community Care Unit
- +

 Residential Aged Care

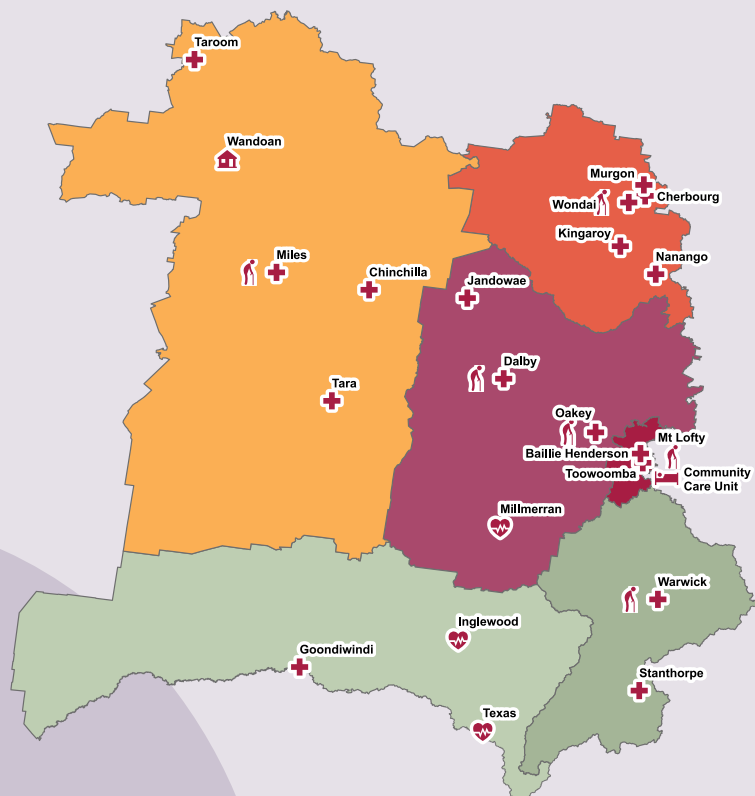


Table 1 Darling Downs Health Defined Planning Regions (SA3 and SA2 Codes)

Local planning region	SA3 Code	SA3 Name	SA2 Code	SA2 Name
Darling Downs - East	30702	Darling Downs - East	1179	Crow's Nest - Rosalie
			1180	Jondaryan
			1181	Millmerran
			1182	Pittsworth
			1183	Wambo
Goondiwindi	30701	Darling Downs (West) - Maranoa	1173	Goondiwindi
			1174	Inglewood - Waggamba
South Burnett	31902	Burnett	1505	Kingaroy
			1506	Kingaroy Region - North
			1507	Kingaroy Region - South
			1509	Nanango
Southern Downs	30703	Granite Belt	1184	Clifton - Greenmount
			1185	Southern Downs - East
			1186	Southern Downs - West
			1187	Stanthorpe
			1188	Stanthorpe Region
Toowoomba	31701	Toowoomba	1189	Warwick
			1445	Cambooya - Wyreema
			1446	Darling Heights
			1447	Drayton - Harristown
			1449	Gowrie (Qld)
			1450	Highfields
			1452	Middle Ridge
			1453	Newtown (Qld)
			1454	North Toowoomba - Harlaxton
			1455	Rangeville
			1456	Toowoomba - Central
			1457	Toowoomba - East
Western Downs	30701	Darling Downs (West) - Maranoa	1458	Toowoomba - West
			1459	Wilsonton
			1172	Chinchilla
	30802	Gladstone - Biloela [DDHHS part]	1175	Miles - Wandoan
			1178	Tara
			1194	Banana [DDHHS Part]

Source: Information supplied by Qld DoH, February 2018

2.1 FACILITY CATCHMENTS DEFINED

While planning regions align with Darling Downs Health catchments, there are a range of factors that influence how and where people access services.

These factors include the availability of hospital based medical services in local areas relative to local needs (for example, people may travel to a service geographically associated with the location of where they work), medical primary care historical referral practices, the centralisation of services offered at tertiary level facilities (such as medical specialties), and public transport and road networks.

In 2016/17 there were 69,289 Darling Downs Health hospital separations. The majority (37percent) of the people who accessed the services were from Toowoomba region, followed by Southern Downs (15 percent) and Darling-Downs East (14 percent). Approximately 11 percent of the of the total activity came from other HHS/ interstate residents.

Table 2: Total separations treated in Darling Downs Health facilities 2016/17

HHS of Residence	Place of Residence	Separations	% of Total Separations
Darling Downs	Darling Downs - East	9,792	14%
	Goondiwindi	2,525	4%
	South Burnett	9,348	13%
	Southern Downs	10,234	15%
	Toowoomba	25,397	37%
	Western Downs	4,381	6%
Other HHS/Interstate	All	7,612	11%
TOTAL		69,289	100%

Source: AIM Base Case 16/17 and Base Case - Inpatient Projections (Base Year 2016-17, ASGS 2011). Data prepared by Health Service Research, Analysis and Modelling Unit (HSRAM), System Planning Branch, Strategy, Policy and Planning Division (SPPD), Department of Health, Queensland. Published by the State of Queensland (Queensland Health), 2018. Note: excludes Renal Dialysis and Unqualified Neonates.

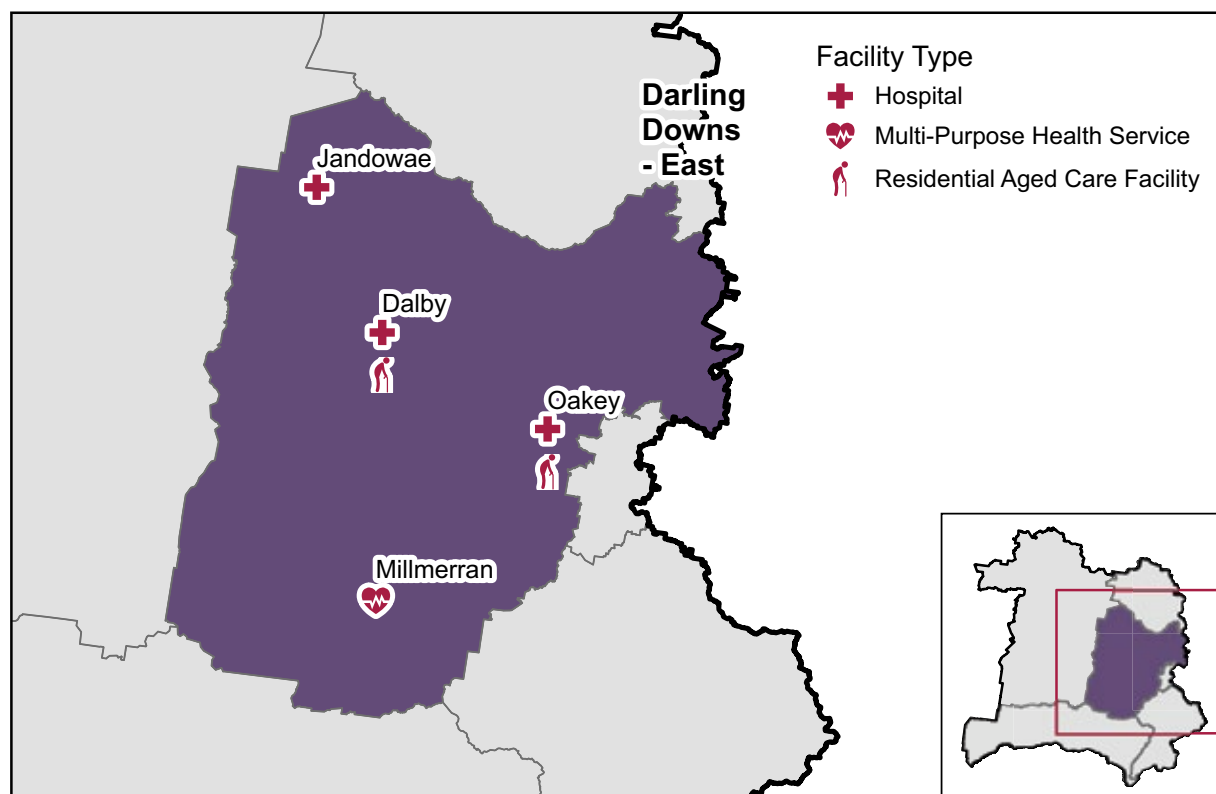
Due to the vast area serviced by Darling Downs Health each local planning area has a number of facilities within its catchment area. The following tables within this section summarized 2016/17 activity at Darling Downs Health facilities by place of residence (local planning region or other HHS). This provides an overview of the demand or capacity for each facility within a catchment area in terms of the local planning region.



2.1.1 DARLING DOWNS – EAST PLANNING REGION

The Darling Downs – East planning region consists of six public facilities namely; Dalby Hospital, Karingal Residential Aged Care Facility, Jandowae Hospital, Millmerran Hospital, Oakey Hospital and Dr EAF McDonald Residential Aged Care Facility.

Figure 2 Local Catchment for Darling Downs – East Planning Region



Dalby Hospital Separations

In 2016/17 there were 3,689 separations from Dalby Hospital. The majority 88 percent (3,174) of separations were residents of Darling Downs – East planning region.

Table 3: Total separations at Dalby Hospital, by place of residence, 2016/17

HHS of Residence	Hospital	Place of Residence	Separations	% of Total Separations
Darling Downs	Dalby Hospital	Darling Downs - East	3,174	88%
		Goondiwindi	4	0%
		South Burnett	10	0%
		Southern Downs	1	0%
		Toowoomba	23	1%
		Western Downs	260	7%
Other HHS/Interstate			136	4%
TOTAL			3,608	100%

Source: AIM Base Case 16/17 and Base Case - Inpatient Projections (Base Year 2016-17, ASGS 2011). Data prepared by Health Service Research, Analysis and Modelling Unit (HSRAM), System Planning Branch, Strategy, Policy and Planning Division (SPPD), Department of Health, Queensland. Published by the State of Queensland (Queensland Health), 2018. Note: excludes Renal Dialysis and Unqualified Neonates.

Jandowae Hospital Separations

In 2016/17 there were 257 separations from Jandowae Hospital. The majority 91 percent (234) of separations were residents of Darling Downs – East planning region. Refer to Table 7 and Figure 3.

Table 4: Total separations at Jandowae Hospital, by place of residence, 2016/17

HHS of Residence	Hospital	Place of Residence	Separations	% of Total Separations
Darling Downs	Jandowae Hospital	Darling Downs - East	234	91%
		South Burnett	9	4%
		Southern Downs	1	0%
		Western Downs	9	4%
Other HHS/Interstate			4	2%
TOTAL			257	100%

Source: AIM Base Case 16/17 and Base Case - Inpatient Projections (Base Year 2016-17, ASGS 2011). Data prepared by Health Service Research, Analysis and Modelling Unit (HSRAM), System Planning Branch, Strategy, Policy and Planning Division (SPPD), Department of Health, Queensland. Published by the State of Queensland (Queensland Health), 2018. Note: excludes Renal Dialysis and Unqualified Neonates.

Millmerran Hospital Separations

In 2016/17 there were 398 separations at Millmerran Hospital. The majority 90 percent (359) of separations were from residents of Darling Downs – East planning region.

Table 5: Total separations at Millmerran Hospital, by place of residence, 2016/17

HHS of Residence	Hospital	Place of Residence	Separations	% of Total Separations
Darling Downs	Millmerran Hospital	Darling Downs - East	359	90%
		Goondiwindi	2	1%
		Southern Downs	4	1%
		Toowoomba	15	4%
Other HHS/Interstate			18	5%
TOTAL			398	100%

Source: AIM Base Case 16/17 and Base Case - Inpatient Projections (Base Year 2016-17, ASGS 2011). Data prepared by Health Service Research, Analysis and Modelling Unit (HSRAM), System Planning Branch, Strategy, Policy and Planning Division (SPPD), Department of Health, Queensland. Published by the State of Queensland (Queensland Health), 2018. Note: excludes Renal Dialysis and Unqualified Neonates.



Oakey Hospital Separations

Oakey Hospital had 338 separations for 2016/17. Residents of Darling Downs – East planning region accounted for the majority 81 percent (273) of separations, followed by 17 percent (56) of residents from Toowoomba planning region.

Table 6: Total separations at Oakey Hospital, by place of residence, 2016/17

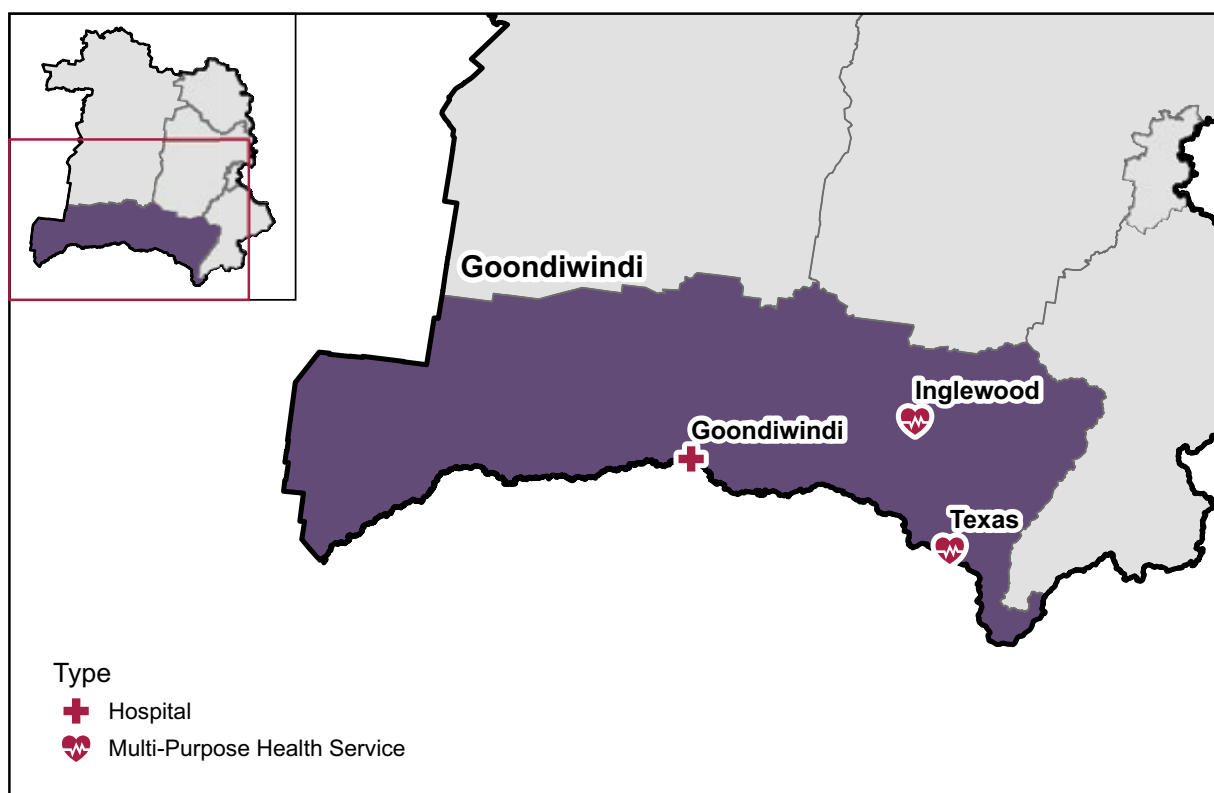
HHS of Residence	Hospital	Place of Residence	Separations	% of Total Separations
Darling Downs	Oakey Hospital	Darling Downs - East	273	81%
		Goondiwindi	2	1%
		Southern Downs	1	0%
		Toowoomba	56	17%
Other HHS/Interstate			6	2%
TOTAL			338	100%

Source: AIM Base Case 16/17 and Base Case - Inpatient Projections (Base Year 2016-17, ASGS 2011). Data prepared by Health Service Research, Analysis and Modelling Unit (HSRAM), System Planning Branch, Strategy, Policy and Planning Division (SPPD), Department of Health, Queensland. Published by the State of Queensland (Queensland Health), 2018. Note: excludes Renal Dialysis and Unqualified Neonates.

2.1.2 GOONDIWINDI PLANNING REGION

The Goondiwindi planning region consists of three public facilities namely; Goondiwindi Hospital, Inglewood Hospital and Texas Hospital.

Figure 3: Local Catchment for Goondiwindi Planning Region



Goondiwindi Hospital Separations

Goondiwindi Hospital had 1,760 separations for 2016/17. A majority 74 percent (1,304) of the total activity came from residents of Goondiwindi planning region followed by 24 percent (420) of separations from residents of other HHS/Interstate. Refer to Table 21 and Figure 7.

Table 7: Total separations at Goondiwindi Hospital, by place of residence, 2016/17

HHS of Residence	Hospital	Place of Residence	Separations	% of Total Separations
Darling Downs	Goondiwindi Hospital	Darling Downs - East	5	0.3%
		Goondiwindi	1,304	74.1%
		South Burnett	3	0.2%
		Southern Downs	4	0.2%
		Toowoomba	11	0.6%
		Western Downs	13	0.7%
Other HHS/Interstate			420	23.9%
TOTAL			1,760	100%

Source: AIM Base Case 16/17 and Base Case - Inpatient Projections (Base Year 2016-17, ASGS 2011). Data prepared by Health Service Research, Analysis and Modelling Unit (HSRAM), System Planning Branch, Strategy, Policy and Planning Division (SPPD), Department of Health, Queensland. Published by the State of Queensland (Queensland Health), 2018. Note: excludes Renal Dialysis and Unqualified Neonates.

Inglewood Hospital Separations

Inglewood Hospital had 318 separations for 2016/17. A majority 88 percent (281) of the total activity came from residents of Goondiwindi planning region followed by 7 percent (22) of separations from residents of other HHS/Interstate. Refer to Table 22 and Figure 7.

Table 8: Total separations at Inglewood Hospital, by place of residence, 2016/17

HHS of Residence	Hospital	Place of Residence	Separations	% of Total Separations
Darling Downs	Inglewood Hospital	Darling Downs - East	6	2%
		Goondiwindi	281	88%
		South Burnett	1	0%
		Southern Downs	6	2%
		Toowoomba	2	1%
Other HHS/Interstate			22	7%
TOTAL			318	100%

Source: AIM Base Case 16/17 and Base Case - Inpatient Projections (Base Year 2016-17, ASGS 2011). Data prepared by Health Service Research, Analysis and Modelling Unit (HSRAM), System Planning Branch, Strategy, Policy and Planning Division (SPPD), Department of Health, Queensland. Published by the State of Queensland (Queensland Health), 2018. Note: excludes Renal Dialysis and Unqualified Neonates.

Texas Hospital Separations

Texas Hospital had 238 separations for 2016/17. A majority 53 percent (125) of the total activity came from residents of Goondiwindi planning region followed by 44 percent (105) of separations from residents of other HHS/Interstate. Refer to Table 23 and Figure 7

Table 9: Total separations at Texas Hospital, by place of residence, 2016/17

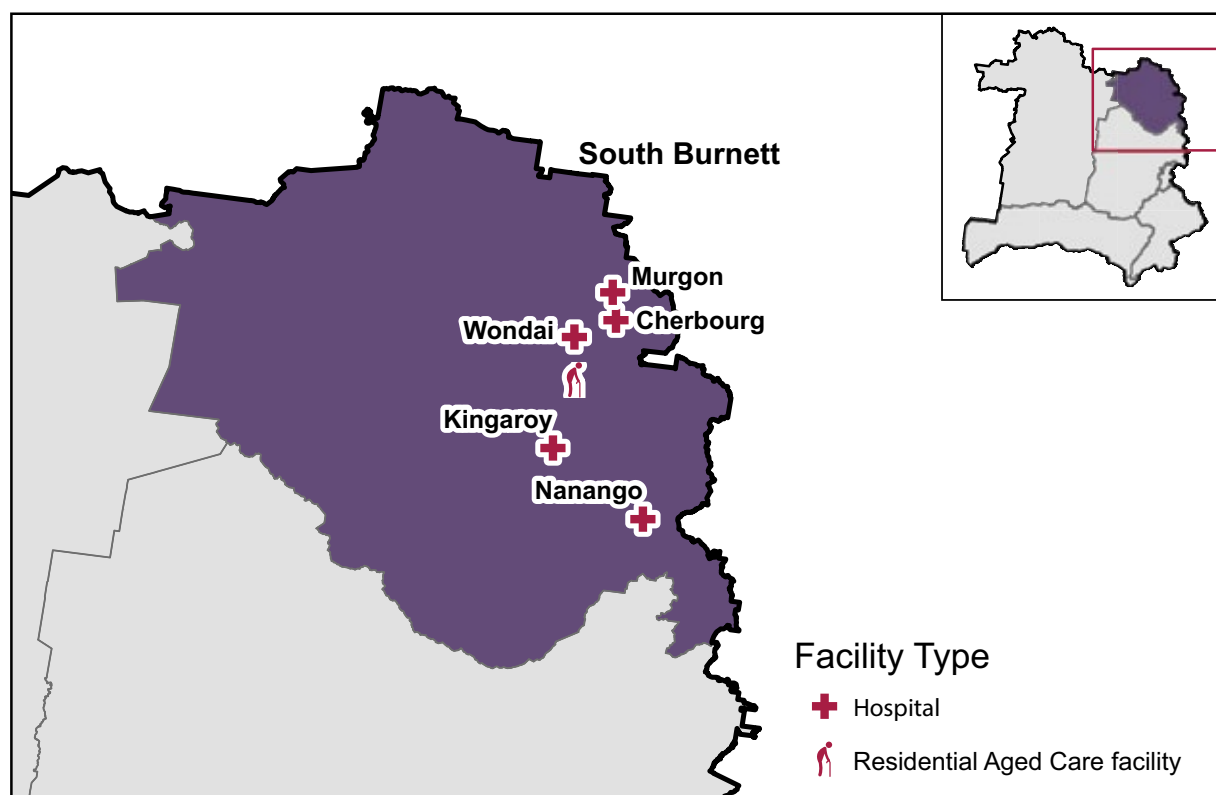
HHS of Residence	Hospital	Place of Residence	Separations	% of Total Separations
Darling Downs	Texas Hospital	Darling Downs - East	1	0%
		Goondiwindi	125	53%
		South Burnett	1	0%
		Southern Downs	4	2%
		Toowoomba	1	0%
		Western Downs	1	0%
Other HHS/Interstate			105	44%
TOTAL			238	100%

Source: AIM Base Case 16/17 and Base Case - Inpatient Projections (Base Year 2016-17, ASGS 2011). Data prepared by Health Service Research, Analysis and Modelling Unit (HSRAM), System Planning Branch, Strategy, Policy and Planning Division (SPPD), Department of Health, Queensland. Published by the State of Queensland (Queensland Health), 2018. Note: excludes Renal Dialysis and Unqualified Neonates.

2.1.3 SOUTH BURNETT PLANNING REGION

The South Burnett planning region consists of six public facilities namely; Kingaroy Hospital, Murgon Hospital, Cherbourg Hospital, Nanango Hospital, Wondai Hospital and Forest View Residential Aged Care Facility.

Figure 4: Local Catchment for South Burnett Planning Region



Kingaroy Hospital Separations

Kingaroy Hospital had 4,947 separations for 2016/17. A majority 92 percent (4,527) of the total activity came from residents of South Burnett planning region. Refer to Table 12 and Figure 5.

Table 10: Total separations at Kingaroy Hospital, by place of residence, 2016/17

HHS of Residence	Hospital	Place of Residence	Separations	% of Total Separations
Darling Downs	Kingaroy Hospital	Darling Downs - East	167	3%
		South Burnett	4,527	92%
		Southern Downs	3	0%
		Toowoomba	5	0%
		Western Downs	8	0%
Other HHS/Interstate		All	237	5%
TOTAL			4,947	100%

Source: AIM Base Case 16/17 and Base Case - Inpatient Projections (Base Year 2016-17, ASGS 2011). Data prepared by Health Service Research, Analysis and Modelling Unit (HSRAM), System Planning Branch, Strategy, Policy and Planning Division (SPPD), Department of Health, Queensland. Published by the State of Queensland (Queensland Health), 2018. Note: excludes Renal Dialysis and Unqualified Neonates.

Murgon Hospital Separations

Murgon Hospital had 962 separations for 2016/17. A majority 83 percent (798) of the total activity came from residents of South Burnett planning region. Refer to Table 13 and Figure 5.

Table 11: Total separations at Murgon Hospital, by place of residence, 2016/17

HHS of Residence	Hospital	Place of Residence	Separations	% of Total Separations
Darling Downs	Murgon Hospital	Darling Downs - East	2	0%
		South Burnett	798	83%
		Southern Downs	1	0%
		Toowoomba	2	0%
		Western Downs	1	0%
Other HHS/Interstate		All	158	16%
TOTAL			962	100%

Source: AIM Base Case 16/17 and Base Case - Inpatient Projections (Base Year 2016-17, ASGS 2011). Data prepared by Health Service Research, Analysis and Modelling Unit (HSRAM), System Planning Branch, Strategy, Policy and Planning Division (SPPD), Department of Health, Queensland. Published by the State of Queensland (Queensland Health), 2018. Note: excludes Renal Dialysis and Unqualified Neonates.

Cherbourg Hospital Separations

Cherbourg Hospital services the Aboriginal community of Cherbourg Shire. It had 899 separations for 2016/17. A majority 96 percent (861) of total activity came from residents of South Burnett planning region. Refer to Table 14 and Figure 5.

Table 12: Total separations at Cherbourg Hospital, by place of residence, 2016/17

HHS of Residence	Hospital	Place of Residence	Separations	% of Total Separations
Darling Downs	Cherbourg Hospital	Darling Downs - East	3	0%
		South Burnett	861	96%
		Toowoomba	1	0%
Other HHS/Interstate		All	34	4%
TOTAL			899	100%

Source: AIM Base Case 16/17 and Base Case - Inpatient Projections (Base Year 2016-17, ASGS 2011). Data prepared by Health Service Research, Analysis and Modelling Unit (HSRAM), System Planning Branch, Strategy, Policy and Planning Division (SPPD), Department of Health, Queensland. Published by the State of Queensland (Queensland Health), 2018. Note: excludes Renal Dialysis and Unqualified Neonates.

Nanango Hospital Separations

Nanango Hospital had 810 separations for 2016/17. A majority 85 percent (687) of the total activity came from residents of South Burnett planning region. Refer to Table 15 and Figure 5.

Table 13: Total separations at Nanango Hospital, by place of residence, 2016/17

HHS of Residence	Hospital	Place of Residence	Separations	% of Total Separations
Darling Downs	Nanango Hospital	Darling Downs - East	95	12%
		South Burnett	687	85%
		Southern Downs	1	0%
		Toowoomba	3	0%
Other HHS/Interstate		All	24	3%
TOTAL			810	100%

Source: AIM Base Case 16/17 and Base Case - Inpatient Projections (Base Year 2016-17, ASGS 2011). Data prepared by Health Service Research, Analysis and Modelling Unit (HSRAM), System Planning Branch, Strategy, Policy and Planning Division (SPPD), Department of Health, Queensland. Published by the State of Queensland (Queensland Health), 2018. Note: excludes Renal Dialysis and Unqualified Neonates.

Wondai Hospital Separations

Wondai Hospital had 45 separations for 2016/17. 100 percent (45) of the total activity came from residents of South Burnett planning region. Refer to Table 16 and Figure 5.

Table 14: Total separations at Wondai Hospital, by place of residence, 2016/17

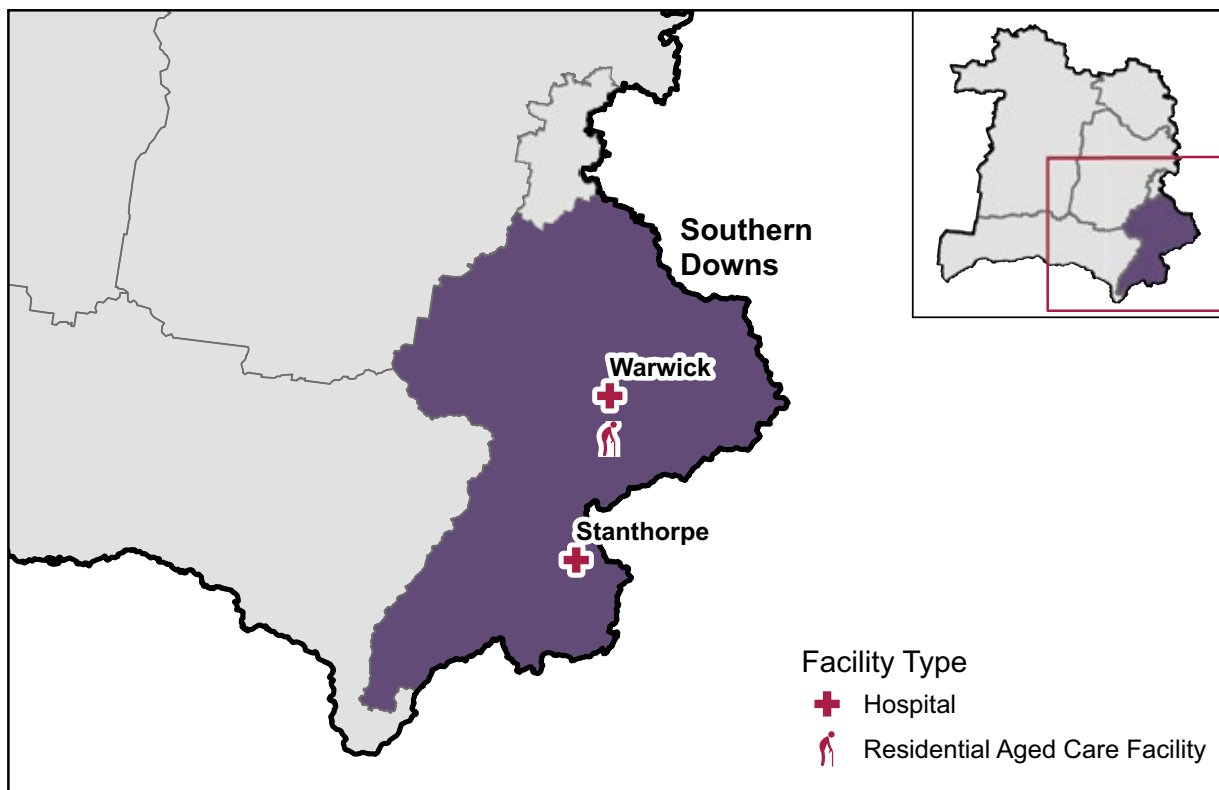
HHS of Residence	Hospital	Place of Residence	Separations	% of Total Separations
Darling Downs	Wondai Hospital	South Burnett	45	100%
Other HHS/Interstate		All	0	0%
TOTAL			45	100%

Source: AIM Base Case 16/17 and Base Case - Inpatient Projections (Base Year 2016-17, ASGS 2011). Data prepared by Health Service Research, Analysis and Modelling Unit (HSRAM), System Planning Branch, Strategy, Policy and Planning Division (SPPD), Department of Health, Queensland. Published by the State of Queensland (Queensland Health), 2018. Note: excludes Renal Dialysis and Unqualified Neonates.

2.1.4 SOUTHERN DOWNS PLANNING REGION

The southern planning region consists of three public facilities namely; Warwick hospital, Stanthorpe Hospital and The Oaks Residential Aged Care Facility.

Figure 5: Local Catchment for Southern Planning Region



Warwick Hospital Separations

Warwick hospital had 4,442 separations for 2016/17. A majority 94 percent (4,174) of the total separations were from residents of Southern Downs region.

Table 15: Total separations at Warwick Hospital, by place of residence, 2016/17

HHS of Residence	Hospital	Place of Residence	Separations	% of Total Separations
Darling Downs	Warwick Hospital	Darling Downs - East	9	0.2%
		Goondiwindi	43	1.0%
		South Burnett	3	0.1%
		Southern Downs	4,174	94.0%
		Toowoomba	22	0.5%
		Western Downs	1	0.0%
Other HHS/Interstate			190	4.3%
TOTAL			4,442	100%

Source: AIM Base Case 16/17 and Base Case - Inpatient Projections (Base Year 2016-17, ASGS 2011). Data prepared by Health Service Research, Analysis and Modelling Unit (HSRAM), System Planning Branch, Strategy, Policy and Planning Division (SPPD), Department of Health, Queensland. Published by the State of Queensland (Queensland Health), 2018. Note: excludes Renal Dialysis and Unqualified Neonates.

Stanthorpe Hospital Separations

Stanthorpe Hospital had 2,745 separations for 2016/17. A majority 89 percent (2,440) of the total separations were from residents of Southern Downs region.

Table 16: Total separations at Stanthorpe Hospital, by place of residence, 2016/17

HHS of Residence	Hospital	Place of Residence	Separations	% of Total Separations
Darling Downs	Stanthorpe Hospital	Darling Downs - East	2	0.1%
		Goondiwindi	21	0.8%
		South Burnett	2	0.1%
		Southern Downs	2,440	88.9%
		Toowoomba	5	0.2%
		Western Downs	1	0.0%
Other HHS/Interstate			274	10.0%
TOTAL			2,745	100%

Source: AIM Base Case 16/17 and Base Case - Inpatient Projections (Base Year 2016-17, ASGS 2011). Data prepared by Health Service Research, Analysis and Modelling Unit (HSRAM), System Planning Branch, Strategy, Policy and Planning Division (SPPD), Department of Health, Queensland. Published by the State of Queensland (Queensland Health), 2018. Note: excludes Renal Dialysis and Unqualified Neonates.