STATEMENT ON THE ECONOMIC AND BUDGET REVIEW COMMITTEE REPORT ON THE INQUIRY INTO BUSH NURSING SERVICES IN VICTORIA
BY THE HON. D.R. WHITE,
MINISTER FOR HEALTH


1. PREAMBLE

In April this year the Economic and Budget Review Committee released its Nineteenth Report to Parliament: a Review of Bush Nursing Services in Victoria. The Committee had as its brief;

1. To review the role and function of Bush Nursing Hospitals and Bush Nursing Centres with regard to inpatient and outpatient services,

2. To examine appropriate arrangements for funding Bush Nursing Hospitals and Bush Nursing Centres,

3. To consider how Bush Nursing Hospitals and Bush Nursing Centres relate to Government and other agencies.

This excellent report contains 72 recommendations many of which are supported by the Government and some of which are already being implemented by the Health Department Victoria (H.D.V.). The recommendations encompass issues that lie, not only within the domain of my Department but also the Commonwealth Government, the Victorian Bush Nursing Association and the individual Bush Nursing Hospitals and Bush Nursing Centres.

The Government's response to the report has been formed after consultation with all Regional Directors of Health and appropriate divisions within the Health Department. In addition, the Government has benefitted from responses to the report from individual hospitals, the Victorian Hospitals Association and other interested groups. It is clear that the future role of the Bush Nursing Hospitals and Centres must be considered on a case by case basis. The pattern of public and private health services varies widely across Victoria as does the demography and the health care needs of the eight health regions in Victoria. The regionalisation of the Health Department enables specific cases to be appropriately addressed within the context of state-wide policy and the Governments' social justice strategy taking into account these regional differences.

The report highlights the need for;

- the co-ordination of all health services across Victoria,

- the inclusion of the Bush Nursing Services in the regional planning process,

- the recognition that in some areas bush nursing hospitals provide health care which is needed by the local community and outside the scope of other health services,

- assistance, where available and appropriate, to enable the Bush Nursing Services to continue providing that health care.
2. ROLE AND FUNCTION OF BUSH NURSING SERVICES

The report recommends that the Health Department Victoria should include consideration of Bush Nursing Hospitals and Centres when planning health services. The Government views Bush Nursing Services as an integral component of the regional health plans currently being developed. These are due to be finalised by June 1988. As data becomes more available from the Bush Nursing Services, the full impact of these facilities can be taken into account, ensuring that in future years the regional plans reflect the true mix of services available to a community.

Regional Offices have initiated discussion with the Bush Nursing Hospitals and are providing support, where requested, to assist hospitals to develop role and function statements. This is a necessary first step for those Hospitals seeking accreditation. I fully support the accreditation programme and urge all Bush Nursing Hospitals to heed the Committees' recommendation that accreditation be a high priority objective.

The Regional Directors will also be available for consultation with the Bush Nursing Services in their endeavours to ensure that they are providing services which meet the needs of their communities. In some cases this may lead hospitals to the conclusion that some change or modification is needed to their current pattern of service delivery such as conversion to extended care facilities or more broadly based community health centres.

The review of midwifery services recommended by the Committee is strongly supported, especially in hospitals where low birth rates affect the level of staff experience, thereby giving rise to concerns about clinical safety. Some Bush Nursing Hospitals have already carried out such reviews and have ceased providing obstetric services.

This self-regulatory approach is to be applauded. I recommend it to all Bush Nursing Hospitals.

3. ROLE OF BUSH NURSING SERVICES IN HDV PLANNING

In accordance with our Social Justice Strategy the Government fully supports the recommendation that all Victorians have access to public hospital facilities.

However, due to population changes since the first half of the 20th century when the majority of our hospitals were built, there is now an uneven pattern of services across the state. The Government is attempting to redress the situation as indicated by the relocation of the Queen Victoria Hospital, the development at Clayton of the Monash Medical Centre and the establishment of the Maribyrnong Medical Centre in the western suburbs of Melbourne.

In addition to demographic changes it is recognised that lack of public transport is a concern in some remote areas of Victoria. This Government is concerned that some people are unable to gain access to their hospitals due to the lack of public transport. The recently established Office of Ambulance Services has proposals for extra branch stations to increase local communities access to public hospitals in emergency situations. Non-emergency transport is, in many cases, provided by local government, service clubs and concerned organisations. Officers of my department are currently investigating the integration of the various free and subsidised travel schemes currently available via the Isolated Patients Transport and Accommodation Assistance Scheme and the Free Travel Scheme. This integration would improve access to public hospital facilities for all the community. In addition to this, the Government recently commenced strategic planning for metropolitan and rural public transport systems. These will closely examine the needs of older people and the disabled.
In some situations, where access to public hospitals services is limited, it may be possible to fund public patients in Bush Nursing Hospitals.

In many rural areas the creation of public beds in Bush Nursing Hospitals cannot be justified because of the availability of acute beds in nearby public hospitals. There may, however, be a small number of Bush Nursing Hospitals where options for providing public beds could be considered due to their remoteness, the distance from available public hospital beds and/or the lack of available transport. For example, the Sea Lake Bush Nursing Hospital is situated in an area that is under serviced by public hospital facilities. This year funds will be reallocated to Sea Lake to enable the lease of beds for use by public patients.

Conversion of bush nursing hospitals to Public Hospital status is a potentially costly option and only feasible if a shortage of acute beds is clearly demonstrated in an area. However, it is not an option to be discounted altogether and could be given consideration on a case by case basis by Regional Directors of the Health Department Victoria.

The Report recommends that the Health Department examine the appropriateness of the current system of hospital registration in Victoria. This has been done and the outcome is incorporated in the report of the Health Legislation Review Unit entitled Health Care Agencies and Charities, issued in August this year. The conclusion in that report is that the current private registration of bush nursing hospitals as private hospitals is appropriate.

4. EXTENDED AND DOMICILIARY CARE

The Government shares the Committees' concerns about the number of nursing home type patients in acute public and private hospitals. My Department is currently discussing the implications of the recommendations of the Nursing Homes and Hostels Review released by the Commonwealth Government in April 1986, particularly in regard to difficulties created in this State by the immediate adoption of the suggested nursing home/hostel bed ratios, the new funding system of standard grants and the uniform national staffing standards.

To assist with this process the Commonwealth Government is encouraging the establishment of regional geriatric assessment teams in each region of the State. These teams will provide advice to older people and recommend the most appropriate form of care and accommodation. The Health Department Victoria is cooperating fully with this program and I am confident that these teams will be widely used and accepted by the community. I support the Committees' recommendation that the services provided by these teams be extended to patients within the Bush Nursing Services. It is imperative that older people be given full support to remain in their own homes and only enter hostels and nursing homes if and when necessary.

The report highlights the important role played by Bush Nursing Centres in providing domiciliary services to people in remote areas. Officers of my department are addressing the issue of increased funding under the Home and Community Care Program. Given the growth of the proportion of older people in the population, particularly in rural areas, it is important that wherever possible services be provided to enable people to stay within their own communities rather than be admitted to institutional care at a distance. The role of Bush Nursing Centres in this process will be considered by Regional Directors in the development of Home and Community services appropriate to the needs of their regions.
5. **PROVISION OF PHARMACEUTICALS BY BUSH NURSING CENTRES**

The Committee has emphasised the role of the Bush Nursing Centres in providing front line services in areas where there is no medical practitioner or pharmacist. The recommendations enabling nurses in remote areas to supply and administer scheduled drugs are currently being investigated by two committees within the Health Department Victoria - the Poisons Advisory Committee and the Remote Area Nurse Practice Committee. The Government supports in principle the view that nurses attached to bush nursing services be able to provide emergency medical assistance where no alternatives are available and that this be done with the support and resources of the nearest hospitals or medical practitioners as back-up facilities. However, before implementation can take place, further consultation must occur between my department and members of the pharmacy, medical and nursing professions through their professional organisations such as The Pharmaceutical Society of Australia, the Australian Medical Association and The Australian Nursing Federation. Registration bodies such as the Medical Board, Pharmacy Board and Victorian Nursing Council will also have an interest in these developments.

6. **NURSING EDUCATION**

The report recommends appropriate training and continued education for nurses working in remote areas. This recommendation is certainly supported and is being considered by the Remote Area Nurse Practice Committee and the Post Registration and Education Advisory Committees established in each of the non-metropolitan health regions in Victoria. As recommended in the report, the Remote Area Nurse Practice Committee now includes a representative of the Victorian Bush Nursing Association to assist in its works.

7. **BUSH NURSING HOSPITALS - MANAGEMENT AND ADMINISTRATION**

The Government notes that there are many recommendations in the report relating to the internal management and administration of the Bush Nursing Hospitals. Whilst these are mainly the province of the Victorian Bush Nursing Association and its member services, I am aware that some public hospitals perform administrative services for Bush Nursing Hospitals. Sharing of these resources is to be encouraged but must be left to the discretion of the individual hospitals concerned. I strongly suggest however that, where appropriate, consideration be given to administrative and professional association with nearby public hospitals.

It is pleasing to note that the Victorian Bush Nursing Association has commissioned its accounting consultants to develop a uniform chart of accounts for accrual accounting in all bush nursing hospitals. Further, the Association's constitution is being amended so that the implementation of acceptable accounting and auditing standards is a pre-requisite for Association membership. These initiatives are a great practical outcome of the Committee's report and the Association is to be congratulated for its prompt response. Through their incorporation, Bush Nursing Centres will soon also be subject to strict auditing standards.

Nearly half of the recommendations in the report are directed towards individual bush nursing hospitals or the Victorian Bush Nursing Association. The Government is hopeful that the independent overview of the industry provided by the Committee will lead to increased efficiency of operations and service delivery. The Health Department will, of course, provide advice and support as necessary, to assist bush nursing hospitals achieve these goals.
8. FINANCE

The report has made specific recommendations about funding of Bush Nursing Hospitals and increased funding for Bush Nursing Centres.

In view of the economic stringency of these times, funding from my Department for the Bush Nursing Hospitals would only be considered if the services funded were of a type that enabled the provision of health services to be brought up to a more equitable level in areas where access to public hospitals is limited.

Increased funding for Bush Nursing Centres must be considered within the context of the overall priorities of the regions and only after the intensive scrutiny of efficiency and effectiveness currently being undertaken within public hospitals and community health centres. The Government is unable to commit itself any further until such an analysis has occurred within all regions.

The report recommends that Bush Nursing hospitals should pursue stricter revenue collection and fee for service procedures in order to assist in covering costs. Existing resources have to be used efficiently and the potential for revenue increases should be fully explored. The Regional Offices are willing to assist individual bush nursing services with advice on this matter if requested.

9. CONCLUDING REMARKS

I am pleased to bring to your attention the fact that my Regional Directors have already taken steps to negotiate and consult with the Bush Nursing Hospitals and Centres within their regions. Further discussion with these institutions and the Victorian Bush Nursing Association will take place, resolving many of the issues covered in the Committees' report. It must be remembered that whatever decisions are made, our priority is the continued health and well-being of all Victorians and that these decisions must be made within a consultative context taking into consideration Government policy, current economic constraints and the particular needs of the communities involved. The Health Department will continue its review and implementation of the report's findings in consultation with the Bush Nursing Services and other appropriate organisations.