

11.1.3.2

Sub # 1

From: James Toohey
Sent: Wednesday, 11 July 2012 10:27 AM
To: Health and Community Services Committee
Cc: Capalaba Electorate Office; Bundamba Electorate Office; Redlands Electorate Office; Bulimba Electorate Office; Townsville Electorate Office; Woodridge Electorate Office; Ferny Grove Electorate Office; Barron River Electorate Office
Subject: Submission to the Health and Community Services Committee
Attachments: HCSC Submission.pdf

To Whom It May Concern,

Pursuant to the Terms of Reference for the Inquiry, please find attached my submission in respect of changes to the care of the frail aged which could result in significant savings for Q Health. I have very senior experience over many years in these matters and welcome the opportunity to assist the Committee.

Terms of Reference

1. That the Health and Community Services Committee inquire into and report on Queensland's chronic, frail and palliative care services.
2. That, in undertaking this inquiry, the committee should consider:
 - the capacity and future needs of these services (including children and adolescents palliative care)
 - the effectiveness, efficiency and adequacy of palliative, frail and chronic care services
 - examine opportunities for reforms to improve collaboration and cooperation between chronic, disability and other health services, and
 - consideration of segmenting the current Home and Community Service system based on age of the client, needs of the client, their carer and the providers.
3. Further, that the committee take public submissions and consult with key industry groups, carers, health workers and relevant experts.
4. The committee is to report to the Legislative Assembly by 28 February 2013.

I am happy to provide any additional information you may require.

Yours sincerely

Jim Toohey

Submission to the Queensland Government
Health and Community Services Committee
**BETTER AGED AND HOSPITAL CARE FOR
QUEENSLANDERS**

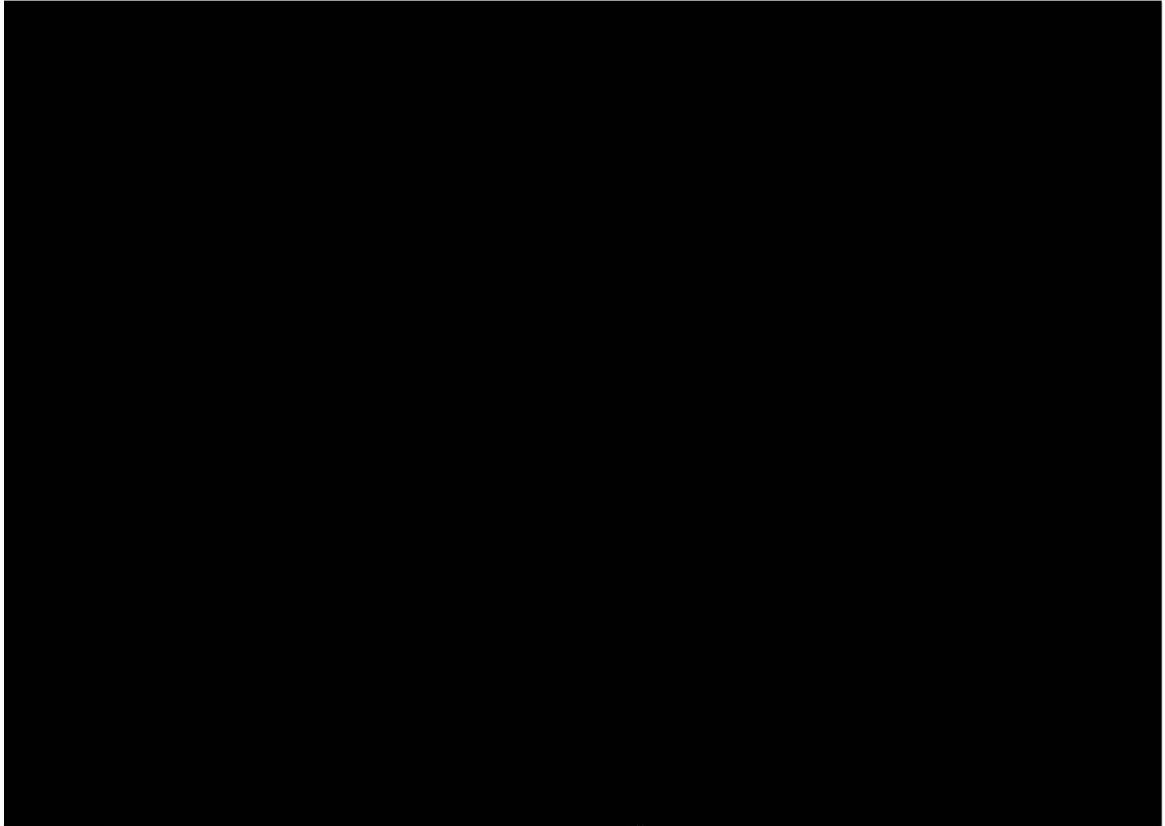
Mr Jim Toohey



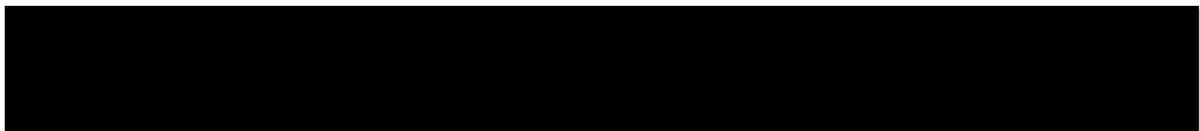
Executive Summary

The Queensland State government is reviewing government programs to reduce the state deficit.

A prime area for consideration is health and aged care.



In addition, some recommendations are included for streamlining the subacute/transitional care program which should provide a substantial easing of pressure on public hospital beds by taking advantage of the thousands of vacant aged care beds in Queensland.



The author is a highly experienced private sector background CEO of large, highly successful residential aged care and retirement living organisations. He has represented the industry on a number of government inquiries and commissions and has been appointed by both state and federal government over many years to policy reviews and legislative committees.

Sub-Acute and Transitional Care

The subacute and transitional care programs refer to initiatives rolled out several years ago in Queensland on a region by region basis.

In essence, local health regions and/or public hospitals, enter into contractual arrangement with aged care providers to access specific services for public hospital patients requiring a moderate to low level of rehabilitation (usually following surgery) or an elderly person seeking permanent residential aged care waiting for a place to become available at a particular facility.

This represents a significant advantage for both Queensland Health and the sector.

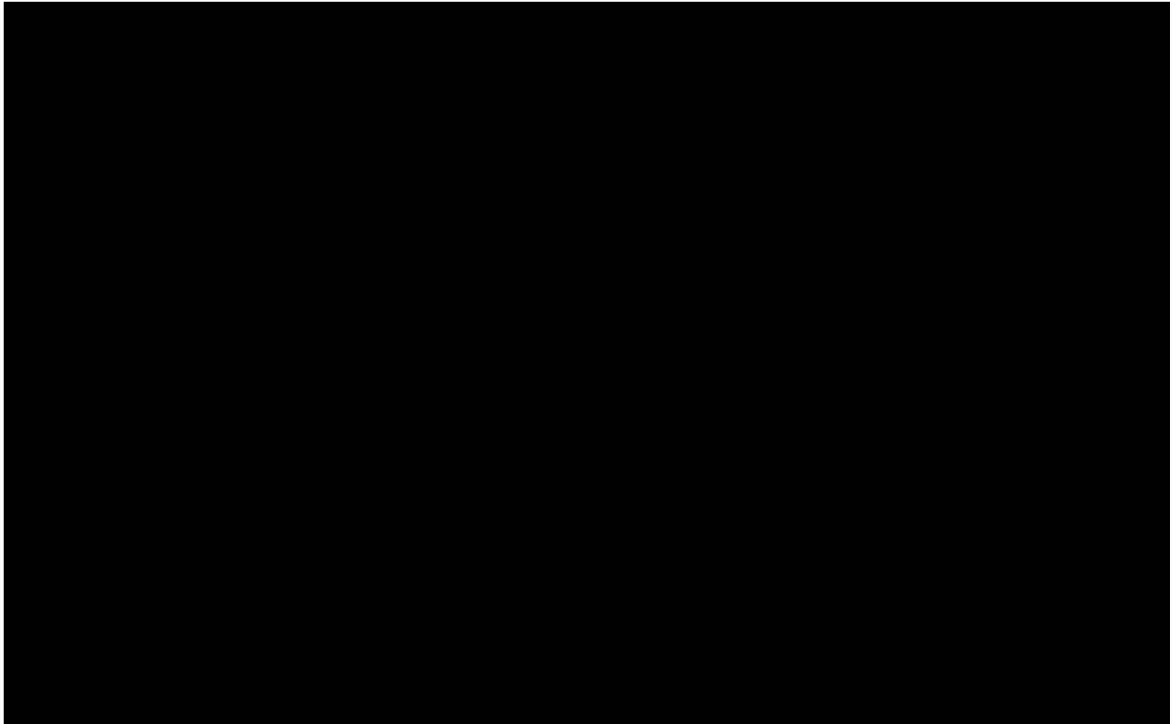
The cost of care for residents in aged care facility is significantly lower than in public hospital - up to 60% less.

Whilst aged care facilities are not resourced to provide intensive, acute or specialised care, they have developed a highly efficient and flexible nursing and personal care model. In addition, due to the focus on the provision of a home like environment, areas of non-medical services such as activities and meals are generally of a better standard than the government sector.

This initiative could be built on and expanded to make use of existing unused infrastructure in the private sector (there are thousands of vacant beds in Queensland in the aged care sector) providing a more appropriate and in many cases higher quality standard of care at a much reduced cost. The implications for waiting and surgery lists are very positive.

However, it is strongly suggested that this be a centrally controlled initiative rather than on a region by region basis and that competitive tender guidelines be adopted to ensure the best deal possible for Queensland Health.

Recommendations



4. Initiate a review of existing subacute and transitional care arrangements with representation from both the public and private sectors. Create and implement more efficient transitional care contracting and supply arrangements with an emphasis on public tendering and also examine the potential for expanding the program for subacute, short term patients. Given the number and geographical spread of aged care facilities, patients would enjoy the advantage of rehabilitating in a facility closer to their community.

About The Author

Jim Toohey FAIM MAICD JP

was the CEO of TriCare, a fully Queensland owned and operated aged and retirement village provider considered one of Australia's leading health care organisations, until the completion of his second five-year contract in 2010. Jim then commenced a successful career in consulting to some of the largest and best known aged care and retirement living providers in Australia.

In 2010, he was appointed to the Expert Review Committee by the Productivity Commission and made a significant contribution to its report released last year ***Caring for Older Australians***.

He has been appointed to the Health and Community Services Industry Standing Committee by the previous State Government and joined at their request, the Boards of Carers Queensland, The RSPCA and Eden in OZ & New Zealand. He has also been approached to fill a Directors role for a Local Hospital and Health Network Council in Brisbane.

During his career, Jim has undertaken a number of successful challenges in the aged care sector;

- * a groundbreaking EBA which won national recognition for its unique aged care specific competencies and productivity improvements
- * joint-venture (with Macquarie Bank) to undertake the largest aged care acquisition in Australian history at the time - the Salvation Army facilities in Victoria, SA, WA and Tasmania. The JV was independently assessed as having met all of its operational and financial goals on time and budget.
- * the first aged care provider in Australia to meet the exacting standards required to self-insure employees moving out of the state Work Cover system
- * assisted the then Lord Mayor to establish the Brisbane City Council Retirement Village Task Force which undertook significant changes to the planning and development process to ensure better facilities for the elderly in the Brisbane area.
- * personally led the successful negotiations on behalf of private sector aged care providers to abolish land tax on aged care facilities in Queensland
- * winner of the 2005 Public Relations Institute Gold Award for the most successful communications challenge of that year
- * top tier financial performance for an aged care business in the largest industry survey ever undertaken
- * development of "in-house" information systems dramatically streamlining data collection and reporting viewed as so successful they were licensed to other provider organisations
- * Strategic and Business planning, merger and acquisition advice and due diligence for a number of large aged care provider organisations

Jim has testified before Senate and Parliamentary Committees, the Queensland Industrial Relations Commission, the Productivity Commission and has extensive media experience.

