

Community Profiles – Esk

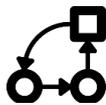
Health needs and service issues summary



Esk population has slower growth rate compared to West Moreton and is expected to grow by 40% over the next 20 years.



Ageing population, with 57% of the region’s population aged 45+.



Esk Health Service has a self-sufficiency of 18%, meaning the hospital serviced 18% of the catchment’s public hospital demand.



Highest rates of patient outflows outside West Moreton for Esk are to Metro South, Metro North and Darling Downs Hospital and Health Services.



West Moreton Health’s 15-year master plan identifies short to medium term infrastructure priorities including minor refurbishments to Esk Health Service.

About Esk

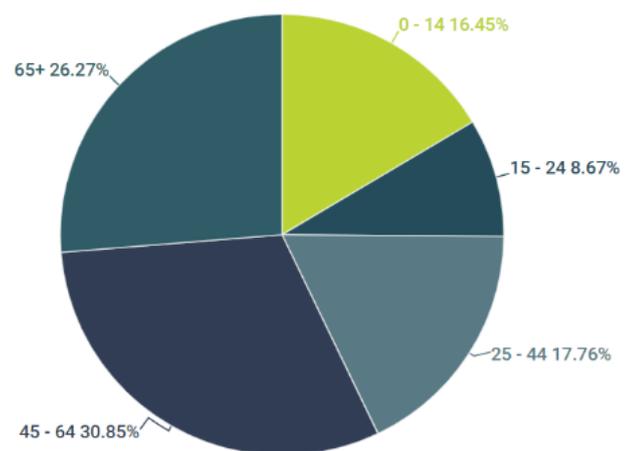
The West Moreton planning region of Esk consists of three SA2 areas:

- Esk
- Lake Manchester - England Creek
- Kilcoy (15% of the Kilcoy SA2 falls into the West Moreton HHS catchment)

Esk planning region covers a land area of 4,865.8 square kilometers and as at June 2018 has a total resident population of 10,961 persons or 3.8% of West Moreton’s total resident population.

Figure 18, shows a breakdown of the population by age group, showing significant numbers of people aged over 45 in the region.

Figure 18, Esk planning region population breakdown by age, 2017



Demographics



3.1%

of the Esk planning region population identify as Aboriginal and/or Torres Strait Islander, compared to a statewide average of 4%.



14.4%

of people in Esk planning region were born overseas, compared to a statewide average of 21.6%.



0.9%

speak a language other than English at home, compared to a statewide average of 1.8%.



1.4%

annual growth rate (AGR), compared to a state AGR of 1.6%. By 2041 there will be an estimated 15,389 persons residing in Esk planning region.



7.3

Esk planning region's crude birth rate per 1,000 (Qld 12.4) and a death rate of 9.2 per 1,000 (Qld 6.4).

Health services

The Esk planning region includes the Esk Health Service (Level 2 Rural Hospital, outpatient services and a community health service) which is located 65 kilometres north-west of Ipswich.

Esk Health Service is a Level 2 Clinical Services Capability Framework (CSCF) hospital. CSCF is provided by the Department of Health to determine the complexity of services provided at a hospital.

The Esk Health Service has a physical bed capacity of 20 beds of which 10 are funded (10 general beds and 2 Emergency Department beds). The hospital delivers inpatient services for emergency, general acute, palliative care, telehealth/tele pharmacy, interim care, transitional care and rehabilitation.

Outpatient services include general outpatient clinics, oral health clinic, Well Women's clinic, wound clinic, allied health, social workers, community health, telehealth, limited x-ray services and community nurse. Visiting services include rehabilitation, child health, mental health (adult, child and youth), Alcohol and

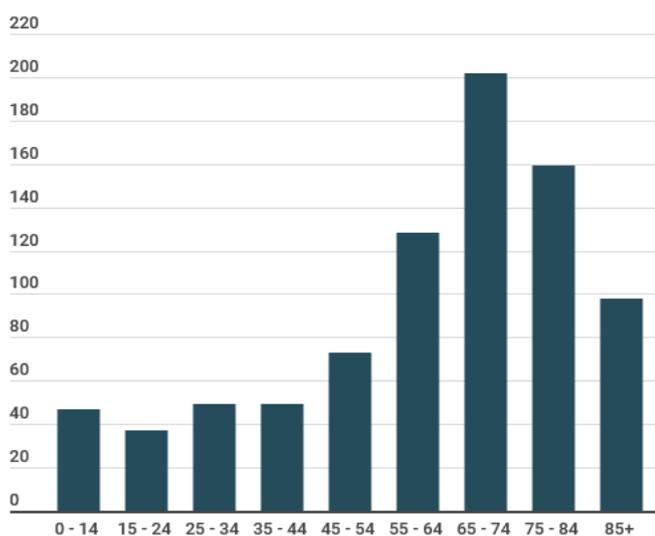
Other Drugs Services, chronic disease, diabetes and heart health, Australian hearing and podiatry.

Esk Health Service cannot support the health needs of the community in isolation and works in collaboration with a range of primary care and community-based health professionals to provide care to the Esk community.



Health service utilisation

Figure 19, Esk Hospital episodes of admitted care by age, 2017/18.



In 2016/17, the Esk planning region hospital utilisation was split 74% publicly funded hospital activity and 26% private activity.

In 2017/18 Esk Health Service had a total of 842 episodes of admitted care (figure 19).

A significant number of hospital admissions are attributed to people aged 65-74 with 202 admitted episodes reported for this age group, followed by 159 for admitted episodes reported for the 75-84 age group.

The most recent Potentially Preventable Hospitalisations (PPH) data 2017/18 showed a total of 212 separations (an episode of care for an admitted patient) attributed to PPH's for the Esk planning region. The top three conditions include diabetes complications, chronic obstructive pulmonary disease and urinary tract infections, including pyelonephritis.

PPH's are separated into acute, chronic and vaccine preventable categories and some total PPH calculations may appear greater as patients may

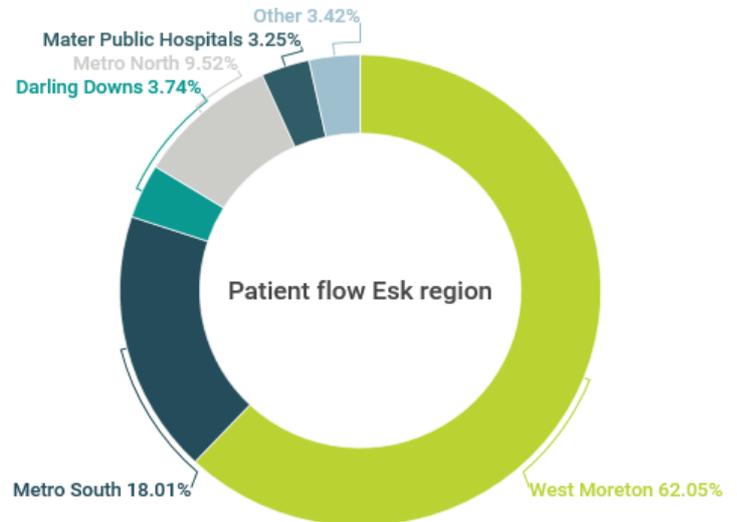
belong to more than one category and PPH data is calculated by place of residence, not by facility they presented at.

Patient flow and self-sufficiency

Self-sufficiency is the percentage of resident public health demand serviced within the catchment. Based on the self-sufficiency index, Esk Health Service serviced 18% of their public hospital demand.

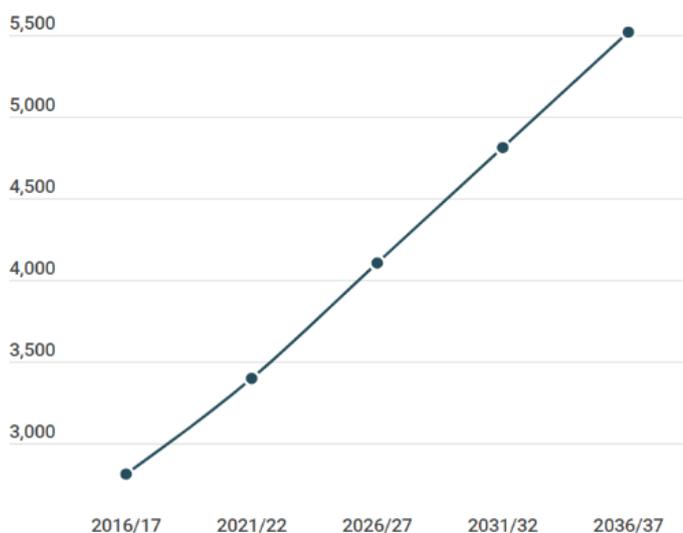
Patient flow (outflow) represents the proportion of the population who receive services outside their geographic catchment area. Figure 20 represents where residents of the Esk planning region are receiving their care.

Figure 20, Esk planning region patient outflow, 2016/17



Health service demand

Figure 21, Esk planning region public hospital demand 2016-2037



As the population is growing and ageing, so too is the demand for public hospital services. Figure 21 shows the significant growth in projected inpatient hospital demand for the Esk region.

It is expected that by 2036/37 the number of public hospital admissions for the Esk planning region will increase to 5,519, an increase of 97%.

Top 10 Service-Related Groups for Esk residents

Renal dialysis accounted for the highest amount of publicly funded admissions in 2016/17 for Esk residents. It should be noted however, that most renal dialysis patients receive three treatments per week. The service-related groups with the next highest volume were chemotherapy, non-subspecialty surgery (general surgery), orthopaedics and cardiology all of which were higher than 150 admissions during 2016/17 (figure 22).

Figure 22, Service-Related Groups for Esk residents 2016/17.

	Service-Related Group	2016/17
1	Renal Dialysis	510
2	Chemotherapy	254
3	Non-subspecialty Surgery	224
4	Orthopaedics	173
5	Cardiology	152
6	Diagnostic GI Endoscopy	144
7	Respiratory Medicine	143
8	Mental health	132
9	Neurology	130
10	Non-subspecialty Medicine	91

What our community values

Engaging with the community positions West Moreton Health to better understand the needs of the people who use or will potentially use our health services. The West Moreton Health Somerset Community Reference Group meets on a quarterly basis to provide insight into the needs of the Esk planning area community.

The Somerset Community Reference Group identified the following concerns relating to their community:

- Access to services, particularly locally
- Limited transport options for rural communities to be able to access services outside Esk
- Benefits of building connections across service providers and within community
- Identifying initiatives which can help address the growing concerns with youth mental health in the local area

West Moreton priorities for Esk

The West Moreton Health Strategic Plan 2017-2021 (2019 update) outlines nine strategic directions to meet the health needs of the diverse and growing community now and in the future. To meet these strategic directions West Moreton Health has identified key areas for clinical and infrastructure improvements as outlined in the table below.

Clinical	Infrastructure
<ul style="list-style-type: none"> - Increase telehealth and community health services for nursing and telemedicine - Service more local community needs closer to home 	<ul style="list-style-type: none"> - West Moreton Health's 15-year master plan identifies short to medium term infrastructure priorities including minor refurbishments to Esk Health Service