



Caring Better Together

Community Profiles Report

West Moreton Hospital and Health Service

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About this Report

The West Moreton Health (WMH) community health profiles have been developed to provide concise snapshots of the public health services, population health status and healthcare priorities across key regions within WMH.

It is intended that this document will support WMH's engagement with staff and stakeholders alike.

West Moreton Health has developed community profiles for eight planning regions within the West Moreton catchment area. Specifically, this includes:

- Lockyer Valley
- Boonah
- Esk
- Gatton
- Springfield
- Ipswich City
- Ipswich North
- Ipswich East

This report is structured to enable timely access to relevant information on each region. It is intended that relevant sections can be used in isolation, clusters or as a whole.

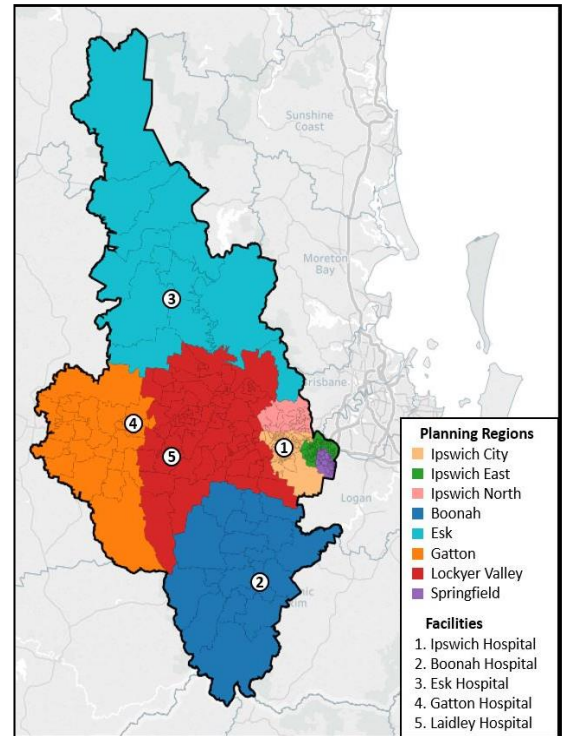
It is important to note that West Moreton Health's planning regions differ to Local Government Areas (LGA). West Moreton Health's planning regions (figure 1) are aligned to 31 Statistical Area Level 2s (SA2's). Maps of the SA2s are available from the Queensland Government Statistician's Office.

<http://www.qgso.qld.gov.au/subjects/society/government/maps/qld-sa2-asgs-2011/index.php>

Data Sources

- Queensland Government Statistician's Office (2018), Queensland Treasury, Queensland Regional Profiles: Resident Profile for West Moreton region.
- Department of Health (2018), projections of future health services activity inpatient projections 2016/17 base year, 2011 ASGS.
- Queensland Health. The health of Queenslanders 2018. Report of the Chief Health Officer Queensland
- Queensland Hospital Admitted Patient Data Collection, Department of Health (2019)

Figure 1, West Moreton planning regions



About West Moreton Health

WMH delivers public health services to a population of more than 290,000 people living in an area covering 9,521 square kilometers and extending from Springfield, Ripley and Ipswich in the east, to Boonah in the south, north to Esk and west to Gatton. It provides medical, surgical, emergency, obstetrics, paediatrics and specialist outpatient services and mental health, critical care, sub-acute and clinical support services.

WMH provides care at the following services:

- Ipswich Health Service
- The Park – Centre for Mental Health
- Boonah Health Service
- Esk Health Service
- Laidley Health Service
- Gatton Health Service
- Goodna Community Health
- Gales Community Care Unit

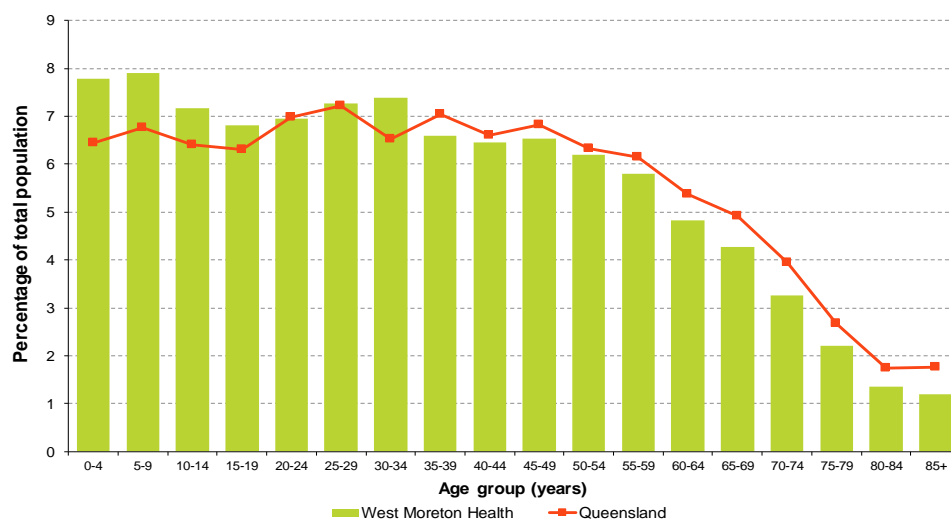
WMH also provides school-based primary oral health care services, community mental health services for all age groups and alcohol, tobacco and other drug services. It provides a range of prisoner health services to Brisbane Women's, Wolston and Brisbane Correctional facilities and the Borallon Training and Correctional Centre. Other state-wide services provided include the Queensland Centre for Mental Health Research, the Queensland Centre for Mental Health Learning and the Queensland Mental Health Benchmarking Unit.

WMH acknowledges and pays respect to the Jagera, Yuggera and Ugarapul people, the Traditional Owners and Caretakers of the land on which the health service is located today and recognises their continuing connection to land, waters and community. We also pay our respects to Elders past, present and emerging.

Our Population

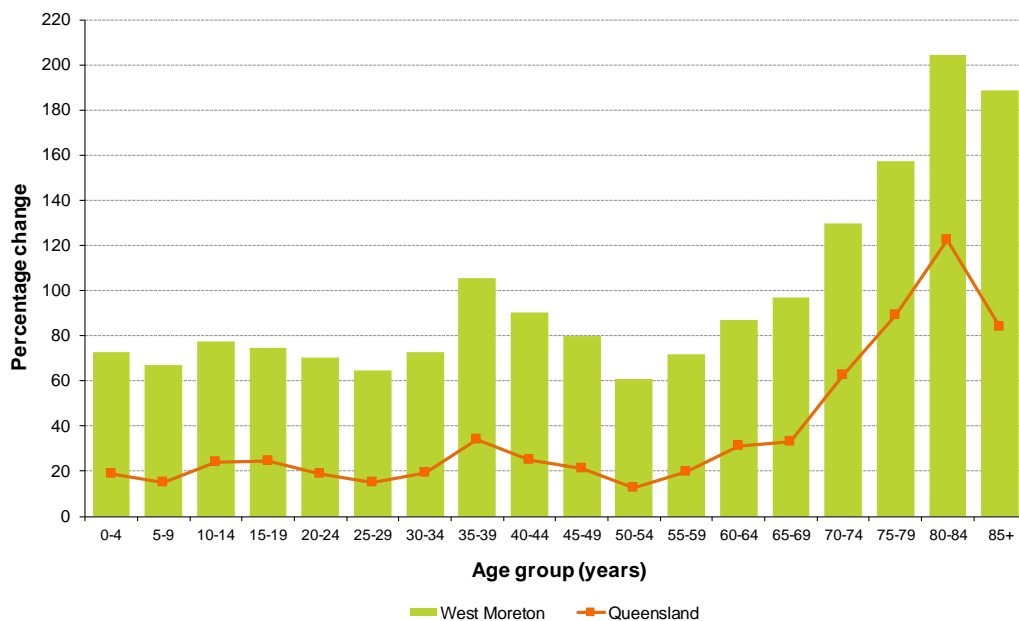
The estimated resident population of WMH as at 30 June 2017 was 286,271 persons, representing about 6% of the Queensland population. Compared with Queensland, West Moreton Health had a larger proportion of young children and adolescents (0 to 19 years of age) and younger adults (30 to 34 years of age), and a smaller proportion of older persons (50 years and over) (figure 2).

Figure 2, Percentage of total estimated population by age group, June 2017
(source WMH's Public Health Unit, Health Indicators Report, 2019)



The West Moreton Health catchment is experiencing remarkable growth. Historically, the region has grown at an annual growth rate (AGR) of 3.0% over the past ten years (Queensland's AGR was 1.8%). The most recent population projections estimate an increase in overall population of around 83% in West Moreton Health from 2016 to 2031. This compares with a projected increase across all of Queensland over the same period of 28%. By far the largest increases are projected to occur in the age groups over 70 years (figure 3). By 2031, it is projected that there will be just under 46,000 more West Moreton Health residents aged 65 years and over than there were in 2016. Such substantial ageing of the population will have major implications for the health and hospital system.

Figure 3, Projected population changes by age group, 2016 to 2031 (source WMH's Public Health Unit, Health Indicators Report, 2019)



Our Demographic Status

The West Moreton community is culturally, linguistically, economically and geographically diverse, encompassing both metropolitan and rural settings.

- 18% of residents were born overseas, compared with a state-wide average of 21.6%.
- Residents' top places of origin include New Zealand (4.6%), England (3.2%), the Philippines (0.9%), India (0.8%), and South Africa (0.5%).
- 11,059 West Moreton people (or 4.1% of the population) identify as Aboriginal and/or Torres Strait Islander. This is comparable to the statewide average of 4%.
- The Socio-Economic Indexes for Areas (SEIFA) are a summary of social and economic conditions of geographic areas. In terms of the Index of Relative Socio-Economic Disadvantage, the West Moreton region is disadvantaged compared to Queensland as a whole. In 2016, up to 33.7% of the population was in Quintile 1, the most disadvantaged measure, and 27.5% of the population was in Quintile 2, the second-most disadvantaged marker.

Our Health Status

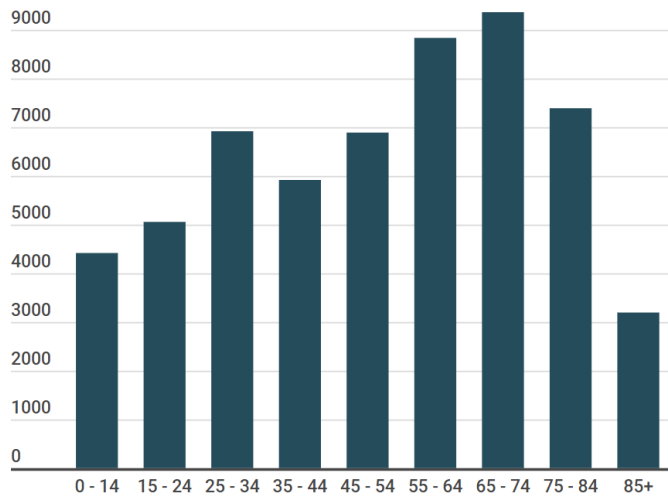
When compared to other Hospital and Health Services across Queensland, the West Moreton community has a higher percentage of people who are obese, living with a disability, living with a cancer diagnoses and are smokers, including women who smoke during pregnancy (figure 4).

Figure 4, West Moreton health status percentages and HHS ranking, Health of Queenslanders 2018 Report, Chief Health Officer

Demographic Description	West Moreton	Compared to Qld
 Deaths	1,433 (44% premature)	11% higher
 Median age at death	76 years	80 years
 Hospitalisations	130,847 (47% of pop)	Crude hospital rate 6% lower than Qld
 Potentially preventable hospitalisations	11,833 (9% of hospitalisations)	17% higher
 Private Health Insurance rate (ASR)	38%	-
 Assistance needed for profound / severe disability	5.9%	-
 Adult daily smokers	15%	28% higher
 Adults who were obese	35%	39% higher
 Children who were overweight or obese	30%	-
 Adult risky drinkers	19%	-
 Women smoking while pregnant	17%	38% higher
 Women obese at conception	29%	-
 Cancer incidence rate (ASR)	543 per 100,000	-

Health service utilisation

Figure 5, West Moreton episodes of admitted care by age 2017/18



In 2016/17, the total number West Moreton region hospital utilisation was split 67% publicly funded hospital activity compared to 33% private activity.

In 2017/18 West Moreton had a total on 57,955 episodes of admitted care (figure 5).

A high number of hospital admissions are attributed to the 25-35 age group, spiking in admissions again in people aged 55-74 with over 8,000 episodes of admitted care.

The most recent Potentially Preventable Hospitalisations (PPH) data 2017/18 showed a total of 7,640 separations (an episode of care for an admitted patient) attributed to PPH's for the West Moreton 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, West Moreton Health serviced 67% of their public hospital demand.

Patient flow (outflow) represents the proportion of the population who receive services outside their geographic catchment area. Figure 6 represents the outflow for West Moreton residents.

Figure 6, West Moreton patient outflow, 2016/17

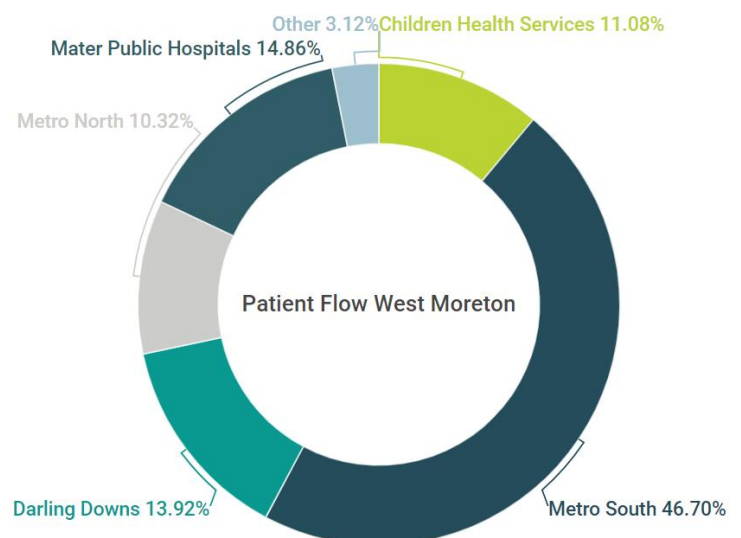
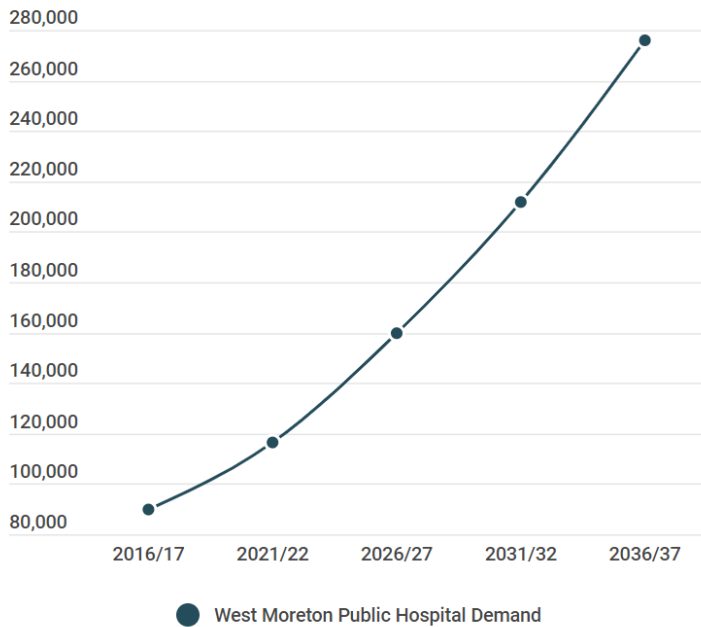


Figure 7, West Moreton public hospital demand (by number of admissions) projections 2016 - 2037



Health service demand

As the population is growing and ageing, so too is the demand for public hospital services. Figure 7 shows the significant growth in projected inpatient hospital demand for the West Moreton region.

It is expected that by 2036/37 the number of public hospital admissions for West Moreton will increase to 275,912, an increase of 207%.

Community Profiles – Lockyer Valley

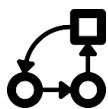
Health needs and service issues summary



Population expected to more than double in the next 20 years.



Ageing population, with 43% of the region's population aged 45+.



Laidley Health Service has a 6% self-sufficiency, meaning the hospital serviced 6% of their catchment's public hospital demand.



Highest rates of patient outflows outside of West Moreton for Laidley are to Metro South 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 Laidley Health Service.

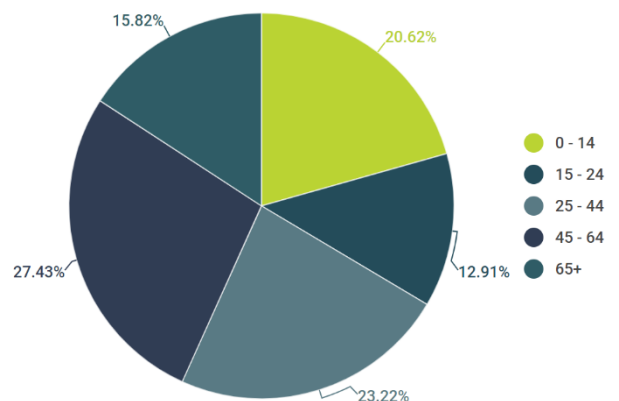
About Lockyer Valley

Lockyer Valley planning area consist of three SA2 areas:

- Lockyer Valley - East
- Lowood
- Rosewood

Lockyer Valley covers a land area of 2,034 square kilometers and contains 48,594 residents or 17% of West Moreton's total resident population. Figure 8 shows a breakdown of population by age group, showing significant numbers of both young (0-14) and older (65+) people in the region.

Figure 8, Lockyer Valley planning region population breakdown by age, 2017



Demographics



4.3%

of Lockyer Valley's population identify as Aboriginal and/or Torres Strait Islander, compared to a statewide average of 4%.



10.4%

of people in the Lockyer Valley were born overseas, compared to a statewide average of 21.6%.



0.4%

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



4%

annual growth rate (AGR), compared to a state AGR of 1.6%. By 2031 there will be an estimated 123,832 persons residing in Lockyer Valley.



11.2

Lockyer Valley's crude birth rate per 1,000 (Qld 12.4) and a death rate of 6.8 per 1,000 (Qld 6.4).

Health services

The Lockyer Valley includes the Laidley Health Service, which is located 45kms west of Ipswich. Laidley Health Service has an inpatient bed capacity of 15 physical beds and three beds in emergency.

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

Inpatient services include medical, post-operative surgical, tele-pharmacy, slow stream rehabilitation, palliative care and telehealth.

Outpatient services include medical and nursing outpatients, allied health (physiotherapy), social work, telehealth, radiology, mental health and alcohol and other drugs (including needle and syringe program).

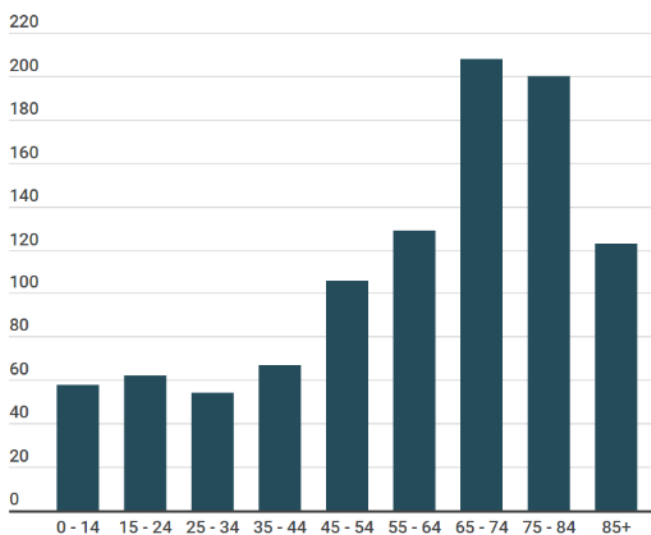
Community Health Services include a full-time community health nurse, social worker and occupational therapy.

Laidley Hospital 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 Lockyer Valley community.



Health service utilisation

Figure 9, Laidley Hospital episodes of admitted care by age, 2017/18.



In 2016/17, the Lockyer Valley planning region hospital utilisation was split 66% publicly funded hospital activity and 34% private activity.

In 2017/18 Laidley Health Service had a total of 1,007 episodes of admitted care (figure 9).

A high number of hospital admissions are attributed to people aged 65 and over, tapering down to approximately 60 admissions each across the 0-44 age groups.

The most recent Potentially Preventable Hospitalisations (PPH) data 2017/18 showed a total of 1,376 separations (an episode of care for an admitted patient) attributed to PPH's for the Lockyer Valley planning region. The top three conditions include diabetes complications, chronic obstructive pulmonary disease and cellulitis. PPH's are separated into acute, chronic and vaccine preventable categories and some total PPH calculations may appear greater as patients

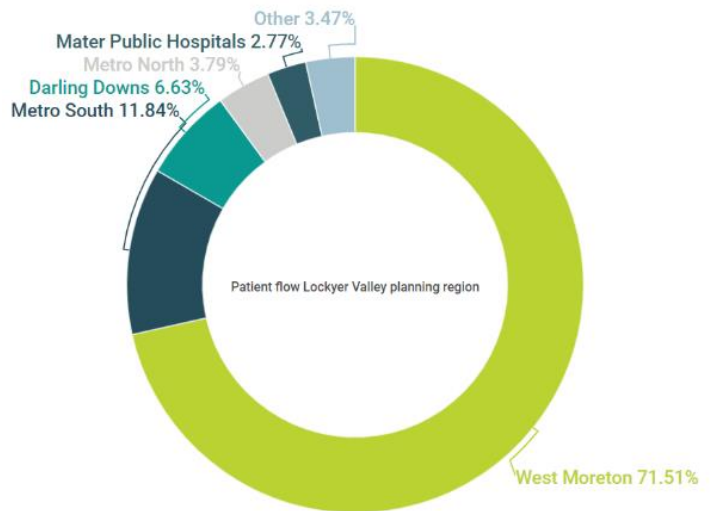
may belong to more than one category and PPH data is calculated by place of residence, not by facility they presented at.

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, Laidley Health Service serviced 6% of their public hospital demand.

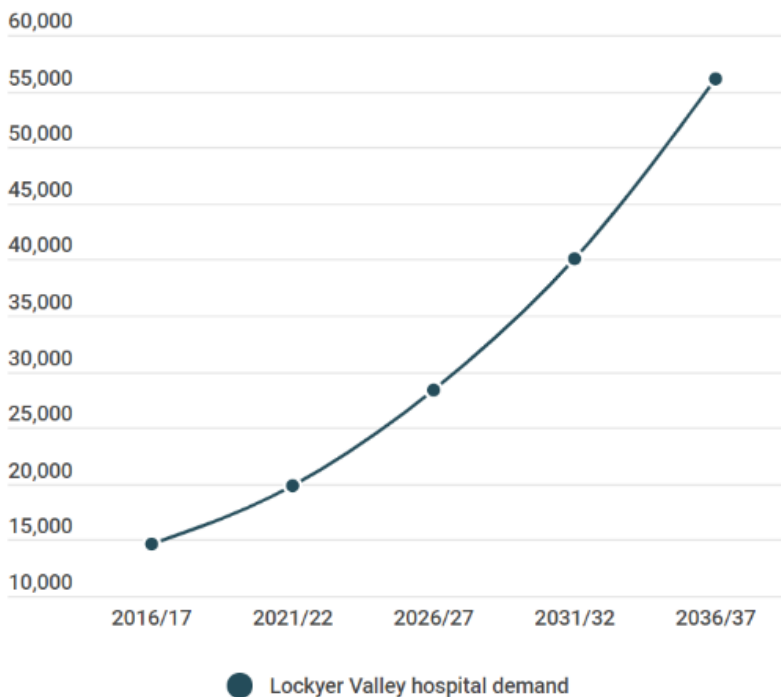
Patient flow (outflow) represents the proportion of the population who receive services outside their geographic catchment area. Figure 10 highlights where residents of the Lockyer Valley planning region are receiving their care.

Figure 10, Lockyer Valley planning region patient outflow, 2016/17



Health service demand

Figure 11, Lockyer Valley public hospital demand 2016-2037



As the population is growing and ageing, so too is the demand for public hospital services. Figure 11 shows the significant growth in projected inpatient hospital demand for the Lockyer Valley region.

It is expected that by 2036/37 the number of public hospital admissions for the Lockyer Valley planning region will increase to 56,091, an increase of 285%.

Top 10 Service-Related Groups for Lockyer Valley residents

Renal dialysis accounted for the highest amount of publicly funded admissions in 2016/17 for Lockyer Valley 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, orthopaedics and non-specialty surgery (general surgery) all of which were higher than 1,000 admissions during 2016/17 (figure 12).

Figure 12, Service-Related Groups for Lockyer Valley residents 2016/17.

	Service-Related Group	2016/17
1	Renal Dialysis	1,413
2	Chemotherapy	1,230
3	Orthopaedics	1,135
4	Non-Subspecialty Surgery	1,102
5	Diagnostic GI Endoscopy	962
6	Cardiology	903
7	Respiratory Medicine	770
8	Non-Subspecialty Medicine	698
9	Neurology	684
10	Obstetrics	605

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 Lockyer Valley Community Reference Group meets on a quarterly basis to provide insight into the needs of the community.

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

- Limited transport options to be able to access services within and outside the Lockyer Valley region
- The need for more communication on local services and how to access them
- Culturally appropriate services to support the growing multicultural community
- Early year and parent education programs to support the needs of young people with mental health issues
- National Disability Insurance Scheme participants in the area are not accessing service providers due to limited understanding of how the new system works. This could impact on hospital and health services when people need support
- People over 65 years of age requiring access to in-home services are experiencing long wait times which could mean they will need additional support from the health service if they are not able to receive in-home care

West Moreton priorities for Lockyer Valley

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"> - Treating more people closer to home to increase self-sufficiency index - Focus on utilising technology to provide more services in a virtual capacity - Partnering with the people we care for and their family and support network 	<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 the Laidley Health Service - Longer term plans include a new Lockyer Valley facility providing medium acuity services for the region and surrounding areas

Community Profiles – Boonah

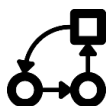
Health needs and service issues summary



Boonah region has a lower AGR compared to state average and the West Moreton region.



Boonah has an ageing population, with 50% of the region's population aged 45+, however Boonah has a lower crude birth rate than the state average.



Boonah Health Service has a self-sufficiency of 20%, meaning the hospital serviced 20% of their catchment's public hospital demand.



Highest rates of patient outflows outside of West Moreton for Boonah are to Metro South and Metro North Hospital and Health Services.



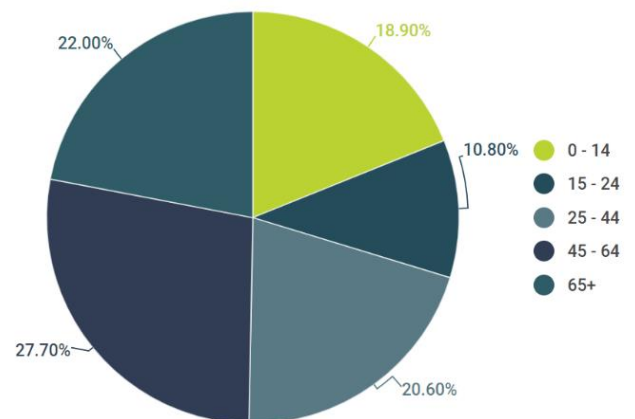
West Moreton Health's 15-year master plan identifies short, medium and long-term infrastructure priorities for Boonah Health Service.

About Boonah

The West Moreton planning region of Boonah aligns to the Boonah SA2 area. Boonah covers a land area of 2,099.4 square kilometers and has a total resident population of 12,519 people, or 4.3% of West Moreton's total resident population.

Figure 13 highlights Boonah's population breakdown by age, demonstrating the ageing population in the region with 50% of the resident population aged 45 and over.

Figure 13, Boonah planning region population breakdown by age, 2017



Demographics



2.3%

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



8.9%

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



0.6%

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 17,146 persons residing in the Boonah planning region.



8.1

Boonah's planning region crude birth rate per 1,000 (Qld 12.4) and a death rate of 6.8 per 1,000 (Qld 6.4).

Health services

Boonah is located 50 kilometres south of Ipswich and includes the Boonah Health Service which has an inpatient bed capacity of 23 physical beds. Of these, 18 beds are funded. Six are dedicated to rehabilitation and two are dedicated to Palliative Care.

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

Boonah Health Service's Inpatient Services include acute, low risk paediatric, palliative care, rehabilitation, interim care and transitional care. Outpatient Services include general outpatients, post-natal home visiting, oral health, Well Women's clinic and a wound clinic. Allied Health services provided include physiotherapy, social workers, community health, community nurses, pharmacy and radiography (X-ray).

Boonah Hospital receives visiting services delivering rehabilitation, child health, mental health (adult, child and youth), Alcohol and Other Drugs Services, young

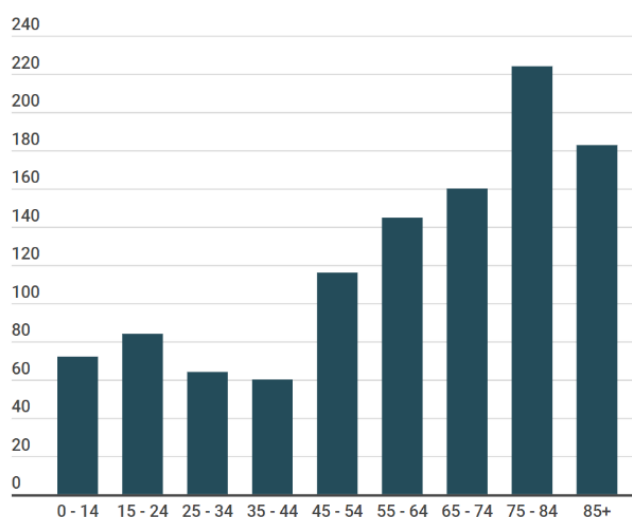
people's health, chronic disease team, diabetes, heart health, hearing and podiatry.

Boonah 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 Boonah community.



Health service utilisation

Figure 14, Boonah Hospital episodes of admitted care by age, 2017/18.



In 2016/17, the Boonah planning region hospital utilisation was split 57% publicly funded hospital activity and 43% private activity. Boonah region represents the lowest public health service utilisations compared to the rest of West Moreton.

In 2017/18 Boonah Health Service reported a total of 1,108 episodes of admitted care, figure 14 demonstrates episodes of admitted care by age distribution.

A high number of hospital admissions are attributed to people aged 45 and over, with a relatively consistent rate of presentations between the ages of 0 – 44.

The most recent Potentially Preventable Hospitalisations (PPH) data 2017/18 showed a total of 309 separations (an episode of care for an admitted patient) attributed to PPH's for the Boonah planning

region. The top three conditions include cellulitis, chronic obstructive pulmonary disease and diabetes complications. 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.

Top 10 Service-Related Groups for Boonah residents

Non-Subspecialty Surgery (general surgery) accounted for the highest amount of publicly funded admissions in 2016/17 for Boonah residents. The service-related groups with the next highest volume were orthopaedics, Cardiology chemotherapy, and Diagnostic GI Endoscopy all of which were higher than 200 admissions during 2016/17 (figure 15). It should also be noted that most renal dialysis patients receive three treatments per week.

Figure 15, Service-Related Groups for Boonah residents 2016/17.

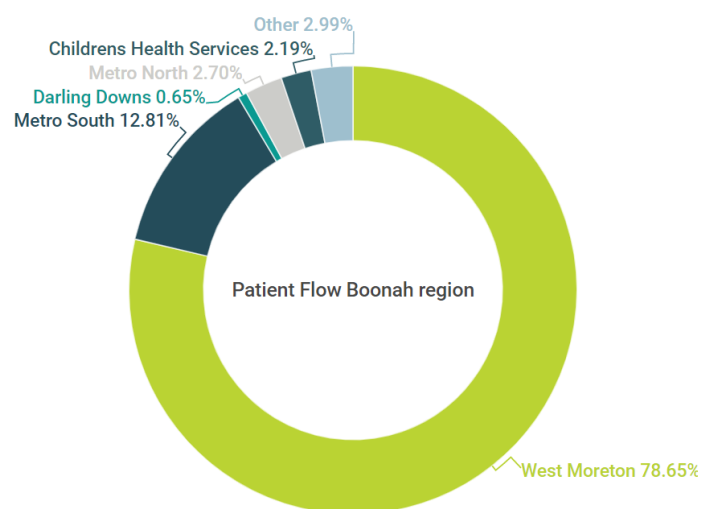
	Service-Related Group	2016/17
1	Non-Subspecialty Surgery	299
2	Orthopaedics	288
3	Cardiology	228
4	Chemotherapy	218
5	Diagnostic GI Endoscopy	213
6	Respiratory Medicine	191
7	Renal Dialysis	178
8	Non-Subspecialty Medicine	174
9	Neurology	137
10	Ear, Nose and Throat	113

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, Boonah Hospital serviced 20% of their public hospital demand.

Patient flow (outflow) represents the proportion of the population who receive services outside their geographic catchment area. Figure 16 represents where the residents of the Boonah planning region are receiving their care.

Figure 16, Boonah planning region patient outflow

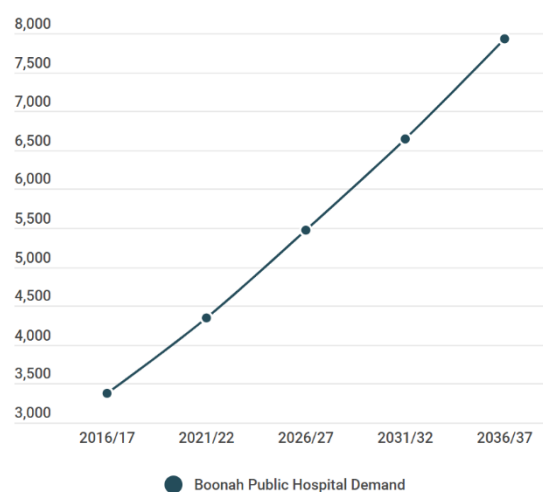


Health service demand

As the population is growing and ageing, so too is the demand for public hospital services. Figure 17 shows the significant growth in projected inpatient hospital demand for the Boonah region.

It is expected that by 2036/37 the number of public hospital admissions for the Boonah planning region will increase to 7,934, an increase of 135%.

Figure 17, Boonah public hospital demand 2016-2037



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 Fassifern Community Reference Group meets on a quarterly basis to provide insight into the needs of the Boonah planning area community.

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

- social isolation, and the reported strong correlation with poor mental and physical health outcomes
- access to information on health services
- shortages in housing and short-term accommodation particularly for people in crisis

West Moreton priorities for Boonah

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"> - Boonah Health Service provides primarily Level 2 services. It is planned to increase the complexity of services to treat more people closer to home by 2026/27 - Focus on utilising technology to provide more services in a virtual capacity 	<ul style="list-style-type: none"> - West Moreton Health's 15-year master plan identifies short, medium and long-term infrastructure priorities for Boonah Health Service

Community Profiles – Esk

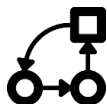
Health needs and service issues summary



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

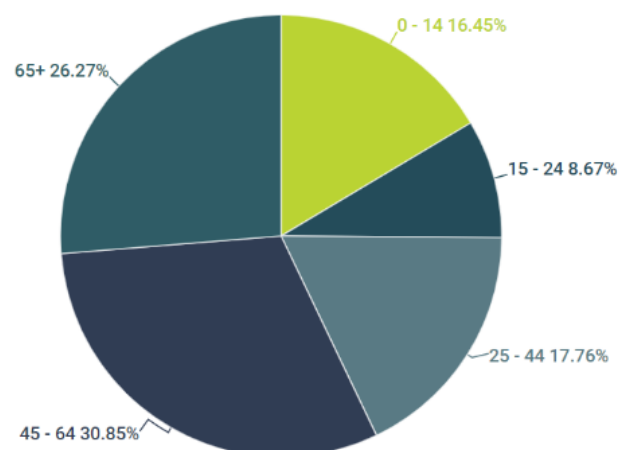
The West Moreton planning region of Esk consists of three SA2 areas:

- 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

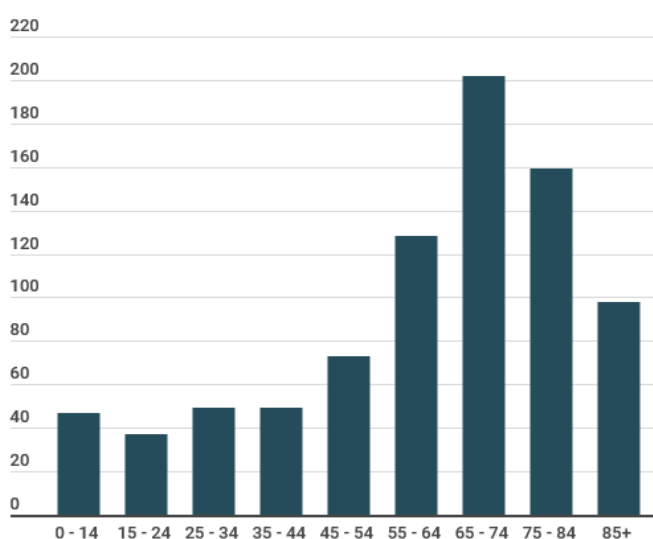
Other Drugs Services, chronic disease, diabetes and heart health, Australian hearing and podiatry.

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

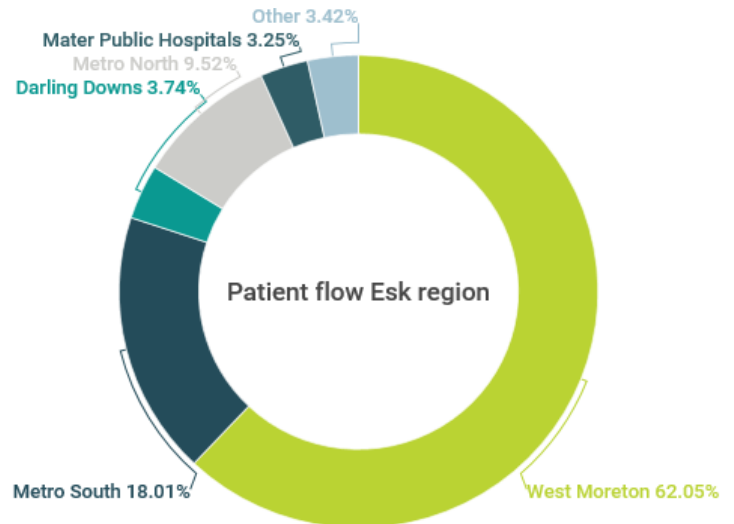
belong to more than one category and PPH data is calculated by place of residence, not by facility they presented at.

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.

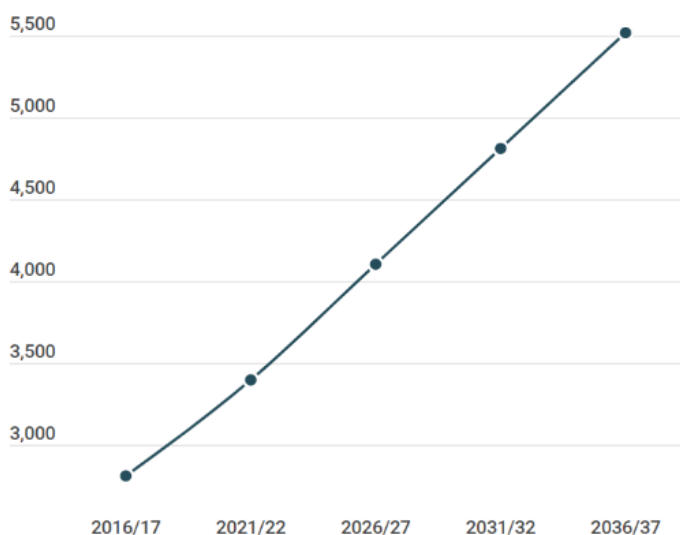
Patient flow (outflow) represents the proportion of the population who receive services outside their geographic catchment area. Figure 20 represents where residents of the Esk planning region are receiving their care.

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

Community Profiles – Gatton

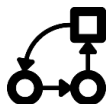
Health needs and service issues summary



Gatton is diverse with high rates of people born overseas and people who speak English not well or not at all.



Relatively young population with 34% of the resident population aged under 24. Gatton also has a high itinerant population due to agricultural employment.



Gatton Health Service has a self-sufficiency of 15%, meaning the hospital serviced 15% of the catchment's public hospital demand.



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



West Moreton Health's 15-year master plan identifies short to medium term infrastructure priorities including minor refurbishments to Gatton Health Service including an upgrade of the emergency department facilities.

About Gatton

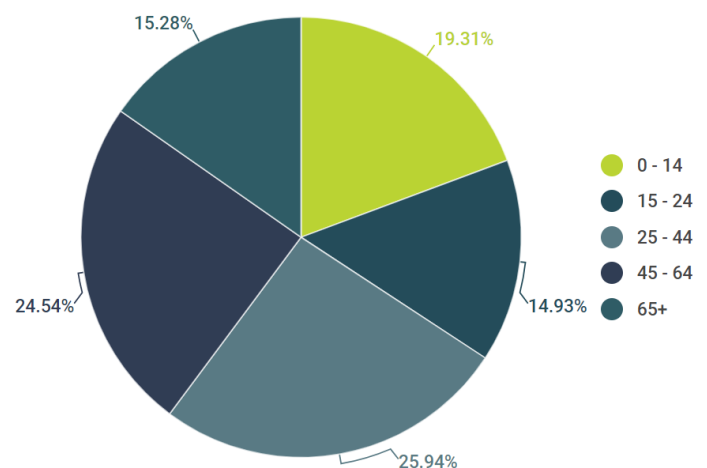
Gatton planning region consists of two SA2 areas:

- Gatton
- Lockyer Valley - West

Gatton planning region covers a land area of 1,530.2 square kilometers and as at June 2018 contains a total resident population of 19,896 persons or 6.9% of West Moreton's total resident population.

Figure 23 shows a breakdown of population by age group, showing significant numbers of young people in both the 0-14 and 15-24 age categories.

Figure 23, Gatton planning region population breakdown by age, 2017



Demographics



3.0%

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



15%

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



2.9%

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



1.3%

annual growth rate (AGR), compared to a state AGR of 1.6%. By 2041 there will be an estimated 26,317 persons residing in Gatton planning region.



12.3

Gatton planning region's crude birth rate per 1,000 (Qld 12.4) and a death rate of 5.7 per 1,000 (Qld 6.4).

Health services

The Gatton planning region includes the Gatton Health Service, located 55 kilometres west of Ipswich. The Gatton Health Service has a physical inpatient bed capacity of 26 beds, 10 of which are funded with the ability to flex to 15 beds.

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

Inpatient care at Gatton Health Service is provided for low acuity paediatrics, palliative care, post-natal maternity, slow stream rehabilitation, acute and interim care.

Inpatient Services include acute medical, post-surgical care, post-natal, rehabilitation, palliative care, interim care and respite services

Outpatient Services for Gatton Health Service include general outpatients, allied health and telehealth services. Community services include community health and immunisation, community child health, maternity care in the home, mental

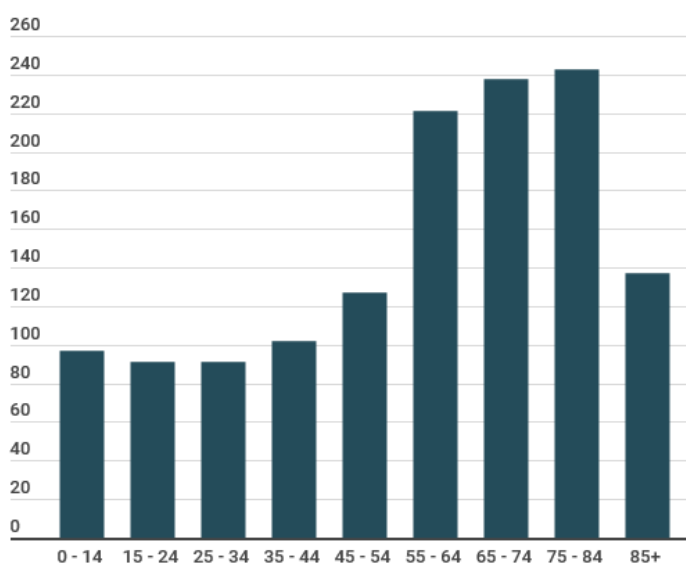
health, alcohol and other drugs, oral health, well women’s clinics and visiting allied health services.

Gatton 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 Gatton community.



Health service utilisation

Figure 24, Gatton Hospital episodes of admitted care by age, 2017/18.



In 2016/17, the Gatton planning region hospital utilisation was split 63% publicly funded hospital activity and 37% private activity.

In 2017/18 Gatton Health Service had a total on 1,347 episodes of admitted care (figure 24).

A significantly higher number of hospital admissions were reported for 55-84 age groups, each with 220+ episodes of admitted care.

The most recent Potentially Preventable Hospitalisations (PPH) data 2017/18 showed a total of 314 separations (an episode of care for an admitted patient) attributed to PPH’s for the Gatton planning region. The top three conditions include, chronic obstructive pulmonary disease, diabetes complications and congestive cardiac failure. PPH’s

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

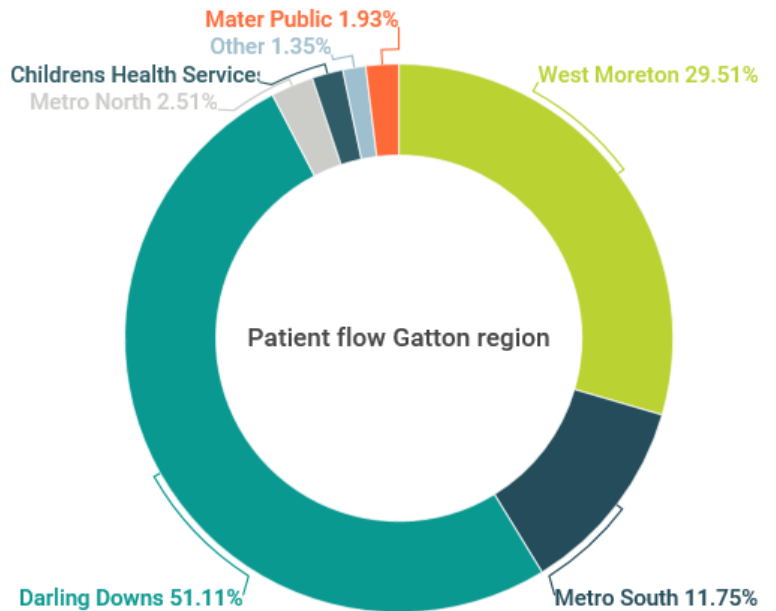
belong to more than one category and PPH data is calculated by place of residence, not by facility they presented at.

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, Gatton Health Service serviced 15% of their public hospital demand.

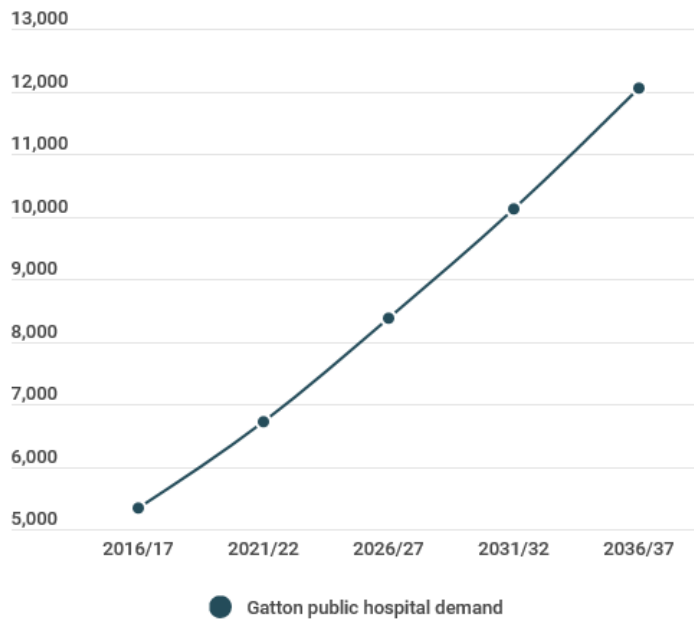
Patient flow (outflow) represents the proportion of the population who receive services outside their geographic catchment area. Figure 25 represents where the residents of the Gatton planning region are receiving their care. Given the geographic proximity of Gatton to the Darling Downs HHS, it is not surprising that over 50% of Gatton’s resident population choose the receive their care at Darling Downs HHS.

Figure 25, Gatton planning region patient outflow, 2016/17



Health service demand

Figure 26, Gatton planning region public hospital demand 2016-2037



As the population is growing and ageing, so too is the demand for public hospital services. Figure 26 shows the significant growth in projected inpatient hospital demand for the Gatton region.

It is expected that by 2036/37 the number of public hospital admissions for the Gatton planning region will increase to 12,049, an increase of 126%.

Top 10 Service-Related Groups for Gatton residents

Renal dialysis accounted for the highest amount of publicly funded admissions in 2016/17 for Gatton 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 obstetrics, chemotherapy, non-subspecialty surgery (general surgery) and Diagnostic GI Endoscopy all of which were higher than 350 admissions during 2016/17 (figure 27).

Figure 27, Service-Related Groups for Gatton residents 2016/17.

	Service-Related Group	2016/17
1	Renal Dialysis	577
2	Obstetrics	477
3	Non-Subspecialty Surgery	424
4	Diagnostic GI Endoscopy	374
5	Orthopaedics	341
6	Cardiology	330
7	Respiratory Medicine	278
8	Chemotherapy	272
9	Neurology	209
10	Non-Subspecialty Medicine	198

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 Lockyer Valley Community Reference Group meets on a quarterly basis to provide insight into the needs of the community.

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

- Limited transport options to be able to access services within and outside the Lockyer Valley region
- The need for more communication on local services and how to access them
- Culturally appropriate services to support the growing multicultural community
- Early year and parent education programs to support the needs of young people with mental health issues
- National Disability Insurance Scheme participants in the area are not accessing service providers due to limited understanding of how the new system works. This could impact on hospital and health services when people need support
- People over 65 years of age requiring access to in-home services are experiencing long wait times which could mean they will need additional support from the health service if they are not able to receive in home care

West Moreton priorities for Gatton

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"> - Improve service configuration between Gatton and Laidley - Improve linkages with local GPs - Focus on utilising technology to provide more services in a virtual capacity 	<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 Gatton Health Service including an upgrade emergency department facility - Longer term plans include a new Lockyer Valley facility providing medium acuity services for the region and surrounding areas

Community Profiles – Springfield

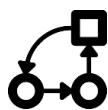
Health needs and service issues summary



Population expected to grow 224% by 2041



Young emerging population, with 27% of the region's population aged under 14 and 18.7 per 1000 crude birth rate (compared to state average of 12.4)



Springfield has a high proportion of people born overseas (31.45%), and higher than state average rates of people who speak English not well or not at all



Ipswich Health Service catchment has a self-sufficiency of 63%, meaning the hospital serviced 63% of the catchment's public hospital demand



West Moreton Health has medium and long-term priorities for the Springfield planning region including an increase in services in the Ripley/Springfield catchment

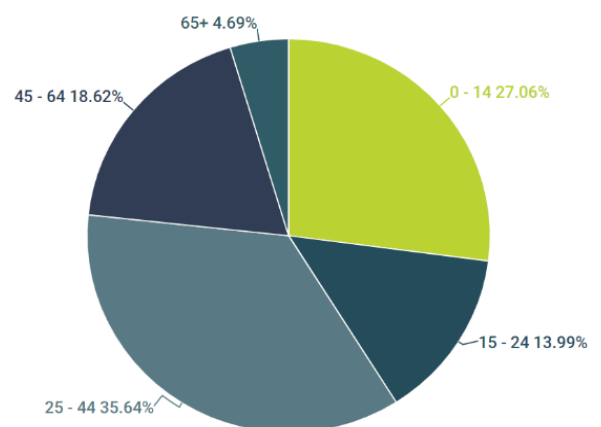
About Springfield

Springfield planning region consists of three SA2 areas:

- Springfield
- Springfield Lakes
- Bellbird Park - Brookwater

Springfield planning region covers a total land area of 41.2 square kilometers and has a total resident population of 42,982 persons or 15% of West Moreton's total resident population. Figure 28 shows a breakdown of population by age group, showing significant numbers of young people (0-14) with almost 30% of people in the region aged under 14.

Figure 28, Springfield planning region population breakdown by age, 2017



Demographics



2.5%

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



31.4%

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



2%

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



5.4%

annual growth rate (AGR), compared to a state AGR of 1.6%. By 2041 there will be an estimated 139,277 persons residing in the Springfield planning region.



18.7

Springfield planning region's crude birth rate per 1,000 (Qld 12.4) and a death rate of 1.7 per 1,000 (Qld 6.4).

Health services

The Springfield planning region falls into the Ipswich catchment, in which the Ipswich Health Service is located, 40 kilometres west of Brisbane. The Ipswich Health Service delivers care to the region and includes the following facilities:

Ipswich Hospital

Ipswich Hospital is a major acute hospital with 431 beds. Ipswich Hospital provides:

- Emergency Department
- Surgical services
- Acute mental units for adult and older persons and the acute care team
- Cancer and palliative care
- Rehabilitation
- Maternity, neonatal and paediatrics
- Allied health and rehabilitation services
- Intensive and coronary care
- Orthopaedics
- Ancillary services such as pastoral care and volunteer services.

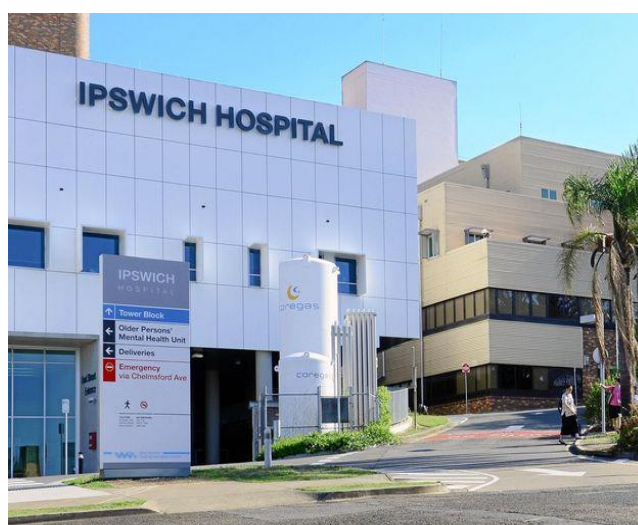
Ipswich Community Health Services

Ipswich Health Service delivers community health services from a range of settings across the region including the Ipswich Health Plaza, Oral Health Clinic and Goodna Community Health, and delivers a diverse range of services to people in the region, including:

- Child Health Clinics
- Oral Health
- Community Mental Health Services - child and youth, adult, older persons and rural
- Alcohol and Other Drugs Service
- Evolve Therapeutic Service
- Diabetes Consultation
- Well Women's Clinic
- Sexual Health and Blood Borne Virus Services
- Allied Health and Community Based Rehabilitation Team
- Screening Services (breast and bowel)
- Aged Care Assessment Teams (ACAT)
- Public Health Unit

Ipswich Hospital is a level 4-5 Clinical Services Capability Framework (CSCF) hospital. The CSCF is provided by the Department of Health to determine the complexity of services provided at a hospital.

The hospital has a major teaching role, providing both undergraduate and postgraduate clinical education and training.



The Park - Centre for Mental Health, Treatment, Research and Education

The Park – Centre for Mental Health (The Park) provides highly specialised mental health care to patients throughout the West Moreton region and wider Queensland. Mental Health and Specialised Services (MHSS), provided at the Park aim to provide the best practice care to people with a mental illness and to those requiring primary care and mental health services in correction centres.

Services hosted at The Park include:

- Forensic and Secure Services
- Prison Health Services
- Service Development and Performance

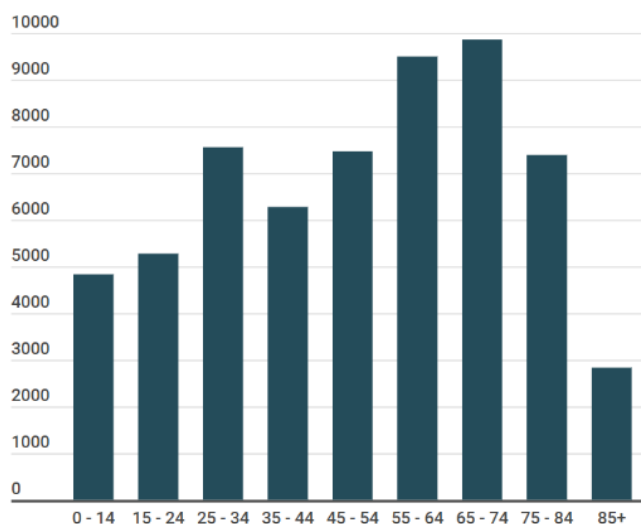
The Park also hosts state-wide leadership services in mental health research, education and benchmarking with the:

- Queensland Centre for Mental Health Research
- Queensland Centre for Mental Health Learning
- Queensland Mental Health Benchmarking Unit.



Health service utilisation

Figure 29, Ipswich Hospital episodes of admitted care by age, 2017/18.



For the purposes of this community profile, the health service utilisation data has been calculated on the Ipswich Hospital Catchment which includes the following planning regions:

- Ipswich City
- Ipswich East
- Ipswich North
- Springfield

In 2016/17, the Ipswich catchment planning region hospital utilisation was split 67% publicly funded hospital activity and 33% private activity.

In 2017/18 Ipswich Hospital had a total of 60,993 episodes of admitted care (figure 29).

A high number of hospital admissions are attributed to people aged 55 and over, with spikes in activity for the 25-34- and 45-64-years age groups with over 7,000 episodes each of admitted care.

The most recent Potentially Preventable Hospitalisations (PPH) data 2017/18 showed a total of 364 separations (an episode of care for an admitted patient) attributed to PPH's for the Springfield planning region. The top three conditions include, ear nose and throat infections, diabetes complications and urinary tract infections, including pyelonephritis. PPH's

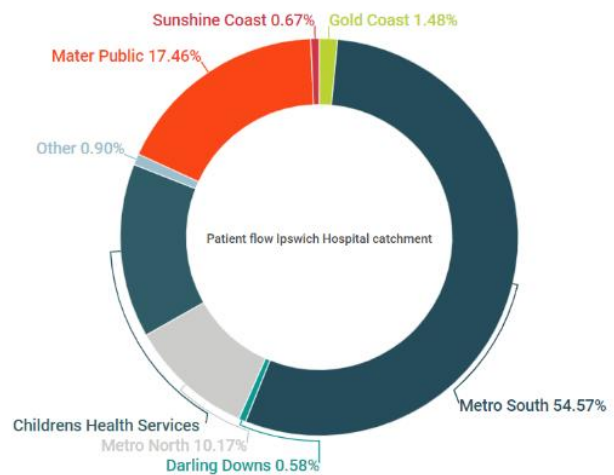
are separated into acute, chronic and vaccine preventable categories and some total PPH calculations may appear greater as patients may belong to more than one category and PPH data is calculated by place of residence, not by facility they presented at.

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, Ipswich Hospital serviced 63% of their public hospital demand.

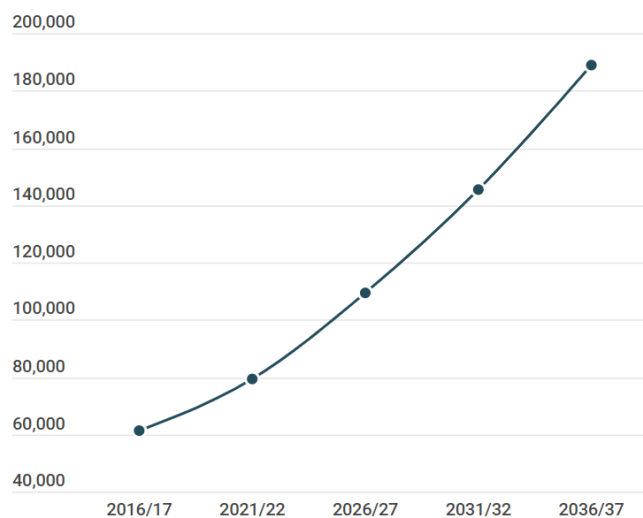
Patient flow (outflow) represents the proportion of the population who receive services outside their geographic catchment area. Figure 30 represents where residents of the Ipswich planning region received their care. It can be noted that high rates of the population receive care from Metro South, Metro North and Mater Public Hospital and Health Services.

Figure 30, Ipswich catchment patient outflow, 2016/17



Health service demand

Figure 31, Ipswich Hospital catchment public hospital demand 2016-2037



As the population is growing and ageing, so too is the demand for public hospital services. Figure 31 shows the significant growth in projected inpatient hospital demand for the Ipswich catchment.

It is expected that by 2036/37 the number of public hospital admissions for the Ipswich Hospital catchment will increase to 188,730, an increase of 209%.

Top 10 Service-Related Groups for Springfield residents

Not surprisingly given the very high crude birth rate for the Springfield planning region, obstetrics accounted for the highest amount of publicly funded admissions in 2016/17. The service-related groups with the next highest volume were Renal Dialysis (most renal dialysis patients receive three treatments per week), Non-subspecialty Surgery and orthopaedics all of which were higher than 500 admissions during 2016/17 (figure 32).

Figure 32, Service-Related Groups for Springfield residents 2016/17.

	Service-Related Group	2016/17
1	Obstetrics	870
2	Renal Dialysis	693
3	Non-subspecialty Surgery	602
4	Orthopaedics	506
5	Non-subspecialty Medicine	468
6	Chemotherapy	466
7	Respiratory Medicine	420
8	Ear, Nose and Throat	367
9	Diagnostic GI Endoscopy	333
10	Cardiology	317

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 Springfield Ripley Community Reference Group meets on a quarterly basis to provide insight into the needs of the community.

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

- Limited communication about local services and how to access them
- Springfield Ripley has a culturally diverse population which requires culturally appropriated health services provided closer to home
- Springfield and Ripley consumers tend to use services outside West Moreton, the community needs more information on local services
- Springfield and Ripley are new communities which can take time to 'warm up' and participate/respond to new initiatives and programs
- Mental health support for Springfield Ripley area. There are emerging mental health concerns developing in these areas particularly for school children, isolated stay at home mothers, families in financial stress as well as increased occurrences of domestic violence and social isolation. There are currently no bulk billing Psychologists available in the area.
- Increased need for outreach community nurses has been identified particularly to support new mothers who have a short length of stay in hospital.

West Moreton priorities for Springfield

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"> - Treating more people closer to home to increase self-sufficiency index - Increase the range of complex services available for the whole of West Moreton Health's catchment - Focus on utilising technology to provide more services in a virtual capacity 	<ul style="list-style-type: none"> - Installation of an MRI at Ipswich Hospital (Stage 1) - Construction of a new Mental Health Unit at Ipswich Hospital (Stage 1) - Relocation of administration services off site from the acute Ipswich Hospital campus - Increase services in the Ripley/Springfield catchment - Implement the 15-year West Moreton Master Plan including development of an Ipswich Health Precinct and refurbishment of Ipswich Hospital

Community Profiles – Ipswich City

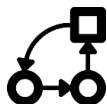
Health needs and service issues summary



Ipswich City is experiencing significant growth with the population expected to grow 170% by 2041.



Ipswich City has 5.4% of the population identifying as Aboriginal and/or Torres Strait Islander, higher than state average of 4%.



Highest rates of patient outflows for Ipswich catchment outside of West Moreton are to Metro South, Metro North and Mater Public Hospital and Health Services.



Based on the self-sufficiency index, Ipswich Hospital serviced 63% of their public hospital demand in 2016/17.



West Moreton Health is implementing its 15-year Master Plan including development of an Ipswich Health Precinct and refurbishment of Ipswich Hospital.

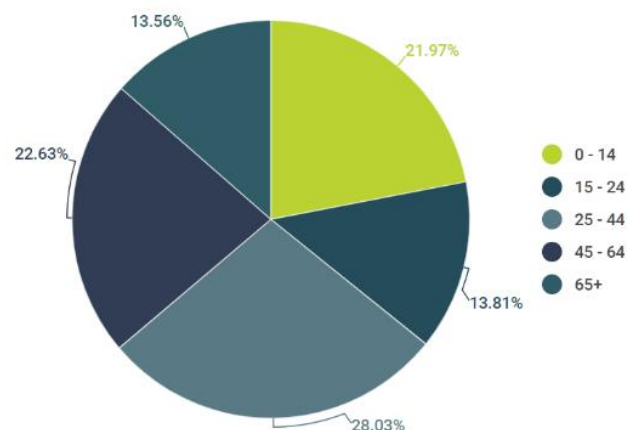
About Ipswich City

Ipswich city planning region consists of 10 SA2's areas:

- Brassall
- Bundamba
- Churchill - Yamanto
- Ipswich - Central
- Ipswich - East
- Leichhardt - One Mile
- North Ipswich - Tivoli
- Raceview
- Ripley
- Riverview

Ipswich city planning region has a total land area of 231.5 square kilometers, and as at June 2018 had a total resident population of 94,777 persons or 33% of West Moreton's total resident population. Figure 33 shows a breakdown of population by age group, showing significant numbers of people aged under 44 (64% of total population).

Figure 33, Ipswich City planning region population breakdown by age, 2017



Demographics



5.4%

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



12.3%

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



0.8%

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



4.2%

annual growth rate (AGR), compared to a state AGR of 1.6%. By 2041 there will be an estimated 256,011 persons residing in the Ipswich City planning region.



15.5

Ipswich City planning region's crude birth rate per 1,000 (Qld 12.4) and a death rate of 7 per 1,000 (Qld 6.4).

Health services

Ipswich City planning region falls into the Ipswich catchment, in which the Ipswich Health Service is located, 40km west of Brisbane. The Ipswich Health Service delivers care to the region and includes the following facilities:

Ipswich Hospital

Ipswich Hospital is a major acute hospital with 431 beds. Ipswich Hospital provides:

- Emergency Department
- Surgical services
- Acute mental units for adult and older persons and the acute care team
- Cancer and palliative care
- Rehabilitation
- Maternity, neonatal and paediatrics
- Allied health and rehabilitation services
- Intensive and coronary care
- Orthopaedics
- Ancillary services such as pastoral care and volunteer services.

Ipswich Community Health Services

Ipswich Health Service delivers community health services from a range of settings across the region including the Ipswich Health Plaza, Oral Health Clinic and Goodna Community Health and delivers a diverse range of services to people in the region, including:

- Child Health Clinics
- Oral Health
- Community Mental Health Services - child and youth, adult, older persons and rural
- Alcohol and Other Drugs Service
- Evolve Therapeutic Service
- Diabetes Consultation
- Well Women's Clinic
- Sexual Health and Blood Borne Virus Services
- Allied Health and Community Based Rehabilitation Team
- Screening Services (breast and bowel)
- Aged Care Assessment Teams (ACAT)
- Public Health Unit

Ipswich Hospital is a level 4-5 Clinical Services Capability Framework (CSCF) hospital. The CSCF is provided by the Department of Health to determine the complexity of services provided at a hospital.

The hospital has a major teaching role, providing both undergraduate and postgraduate clinical education and training.



The Park - Centre for Mental Health, Treatment, Research and Education

The Park – Centre for Mental Health (The Park) provides highly specialised mental health care to patients throughout the West Moreton region and wider Queensland. Mental Health and Specialised Services (MHSS), provided at the Park aim to provide the best practice care to people with a mental illness and to those requiring primary care and mental health services in correction centres.

Services hosted at The Park include:

- Forensic and Secure Services
- Prison Health Services
- Service Development and Performance

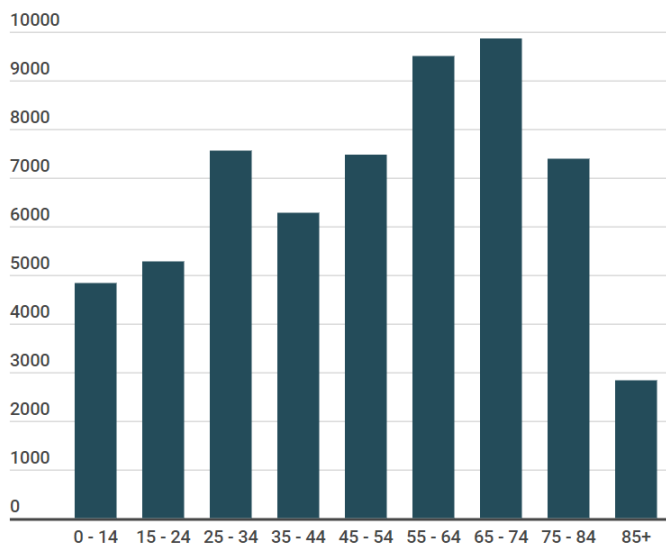
The Park also hosts state-wide leadership services in mental health research, education and benchmarking with the:

- Queensland Centre for Mental Health Research
- Queensland Centre for Mental Health Learning
- Queensland Mental Health Benchmarking Unit.



Health service utilisation

Figure 34, Ipswich Hospital episodes of admitted care by age, 2017/18.



For the purposes of this community profile, the health service utilisation data has been calculated on the

Ipswich Hospital Catchment which includes the following planning regions:

- Ipswich City
- Ipswich East
- Ipswich North
- Springfield

In 2016/17, the Ipswich catchment planning region hospital utilisation was split 67% publicly funded hospital activity and 33% private activity.

In 2017/18 Ipswich Hospital had a total of 60,993 episodes of admitted care (figure 34).

A high number of hospital admissions are attributed to people aged 55 and over, with spikes in activity for the 25-34- and 45-64-years age groups with over 7,000 episodes each of admitted care.

The most recent Potentially Preventable Hospitalisations (PPH) data 2017/18 showed a total of 3,425 separations (an episode of care for an admitted patient) attributed to PPH's for the Ipswich City 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

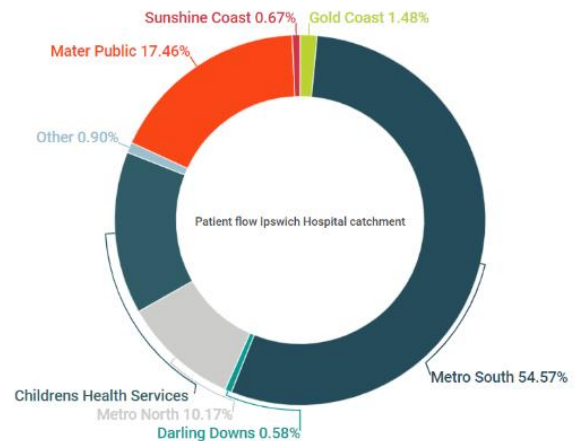
PPH calculations may appear greater as patients may belong to more than one category and PPH data is calculated by place of residence, not by facility they presented at.

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, Ipswich Hospital serviced 63% of their public hospital demand.

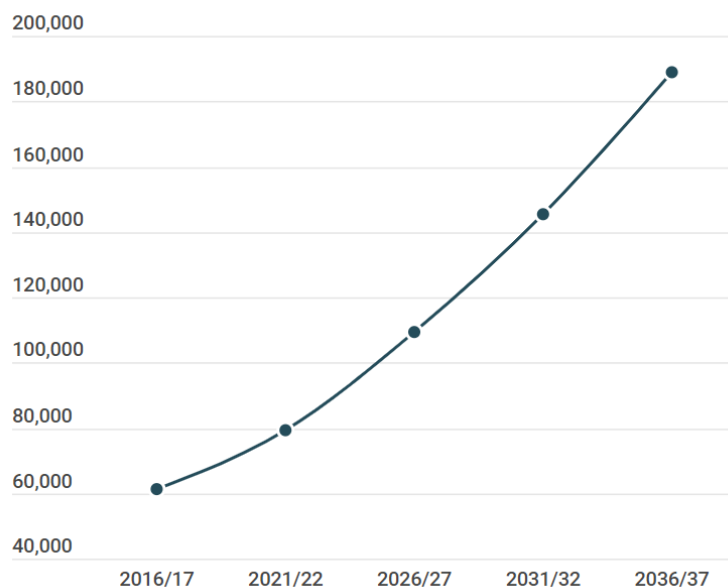
Patient flow (outflow) represents the proportion of the population who receive services outside their geographic catchment area. Figure 35 represents where residents of the Ipswich Hospital catchment are receiving their care. It can be noted that high rates of the population receive care from Metro South, Metro North and Mater Public Hospital and Health Services.

Figure 35, Ipswich Hospital catchment patient outflow, 2016/17



Health service demand

Figure 36, Ipswich Hospital catchment public hospital demand 2016-2037



As the population is growing and ageing, so too is the demand for public hospital services. Figure 36 shows the significant growth in projected inpatient hospital demand for the Ipswich catchment.

It is expected that by 2036/37 the number of public hospital admissions for the Ipswich Hospital catchment will increase to 188,730, an increase of 209%.

Top 10 Service-Related Groups for the Ipswich City Planning Region

Renal dialysis accounted for the highest amount of publicly funded admissions in 2016/17 for Ipswich City 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 Non-Subspecialty Surgery, Orthopaedics and Respiratory Medicine all of which were higher than 2000 admissions during 2016/17 (figure 37).

Figure 37, Service-Related Groups for Ipswich planning region residents 2016/17.

	Service-Related Group	2016/17
1	Renal Dialysis	5,023
2	Non-subspecialty Surgery	2,466
3	Orthopaedics	2,086
4	Respiratory Medicine	2,038
5	Cardiology	1,959
6	Chemotherapy	1,947
7	Non-subspecialty Medicine	1,757
8	Diagnostic GI Endoscopy	1,627
9	Obstetrics	1,595
10	Neurology	1,588

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 Ipswich Community Reference Group meets on a quarterly basis to provide insight into the needs of the community.

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

- Strengthening dual diagnosis capabilities for patients
- Strategies to improve mental health and substance abuse issues in the city
- Strengthening psychiatric assessments and responsiveness for people with dementia and their families
- Focus on care that includes psychological trauma as part of the care provided
- More communication on local services and how to access them
- Increasing support and education for carers around mental health
- Increasing culturally appropriate care for the migrant and refugee population
- Helping people with disability engage with the health services and the community
- The need for more information on West Moreton Health services and how to access them, particularly information on mental health, substance abuse, sexual health, disability services and geriatric health
- The need for education and information on available local services around sexual health in the LGBTQIA and over 65-year-old communities
- More communication about service improvements at the Ipswich Hospital
- Partnerships with and in schools (particularly primary schools) – specifically around food education (healthy choices) and initiatives which promote wellbeing.

The Springfield Ripley Community Reference Group identified the following concerns relating to the Ripley area:

- More information on local services
- Health services to grow in line with the population in Ripley
- Mental health support for Ripley area

West Moreton priorities for Ipswich City

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"> - Treating more people closer to home to increase self-sufficiency index - Increase the range of complex services available for the whole of West Moreton Health's catchment - Focus on utilising technology to provide more services in a virtual capacity 	<ul style="list-style-type: none"> - Installation of an MRI at Ipswich Hospital (Stage 1) - Construction of a new Mental Health Unit at Ipswich Hospital (Stage 1) - Relocation of administration services off site from the acute Ipswich Hospital campus - Increase services in the Ripley/Springfield catchment - Implement the 15-year West Moreton Master Plan including development of an Ipswich Health Precinct and refurbishment of Ipswich Hospital

Community Profiles – Ipswich North

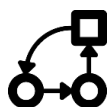
Health needs and service issues summary



Ipswich North has a lower rate of growth compared to the wider West Moreton and state average (1.4% AGR)



Lower proportion of people identifying as Aboriginal and/or Torres Strait Islander in Ipswich North (1.8%) compared to wider West Moreton and state average



Ipswich North contains 5.9% of West Moreton's total resident population



Highest rates of patient outflows for Ipswich Hospital are to Metro South, Metro North and Mater Public Hospital and Health Services



West Moreton Health is implementing the 15-year Master Plan including development of an Ipswich Health Precinct and refurbishment of Ipswich Hospital.

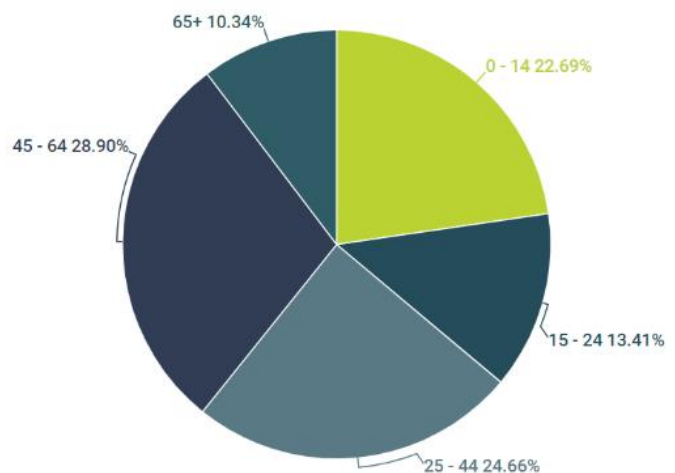
About Ipswich North

Ipswich North planning area consist of three SA2 areas:

- Ipswich - North
- Karalee - Barellan Point
- Karana Downs.

Ipswich North region has a total land area of 146.6 square kilometres, and as at June 2018 there was a total resident population of 17,285 persons or 5.9% of West Moreton's total resident population. Figure 38 shows a breakdown of population by age group, showing significant numbers of people (54%) aged between 25 – 64.

Figure 38, Ipswich North planning region population breakdown by age, 2017



Demographics



1.8%

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



16.6%

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



0.3%

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



1.1%

annual growth rate (AGR), compared to a state AGR of 1.6%. By 2041 there will be an estimated 22,031 persons residing in the Ipswich North planning region.



10.6

Ipswich North planning region's crude birth rate per 1,000 (Qld 12.4) and a death rate of 2 per 1,000 (Qld 6.4).

Health services

Ipswich North planning region falls into the Ipswich catchment, in which the Ipswich Health Service is located, 40kms west of Brisbane. The Ipswich Health Service delivers care to the region and includes the following facilities:

Ipswich Hospital

Ipswich Hospital is a major acute hospital with 431 beds. Ipswich Hospital provides:

- Emergency Department
- Surgical services
- Acute mental units for adult and older persons and the acute care team
- Cancer and palliative care
- Rehabilitation
- Maternity, neonatal and paediatrics
- Allied health and rehabilitation services
- Intensive and coronary care
- Orthopaedics

Ipswich Community Health Services

Ipswich Health Service delivers community health services from a range of settings across the region including the Ipswich Health Plaza, Oral Health Clinic and Goodna Community Health. Ipswich Community Health Service delivers a diverse range of services to people in the region, including:

- Child Health Clinics
- Oral Health
- Community Mental Health Services - child and youth, adult, older persons and rural
- Alcohol and Other Drugs Service
- Evolve Therapeutic Service
- Diabetes Consultation
- Well Women's Clinic
- Sexual Health and Blood Borne Virus Services
- Allied Health and Community Based Rehabilitation Team
- Screening Services (breast and bowel)
- Aged Care Assessment Teams (ACAT)
- Public Health Unit

- Ancillary services such as pastoral care and volunteer services.

Ipswich Hospital is a level 4-5 Clinical Services Capability Framework (CSCF) hospital. The CSCF is provided by the Department of Health to determine the complexity of services provided at a hospital.

The hospital has a major teaching role, providing both undergraduate and postgraduate clinical education and training.



The Park - Centre for Mental Health, Treatment, Research and Education

The Park – Centre for Mental Health (The Park) provides highly specialised mental health care to patients throughout the West Moreton region and wider Queensland. Mental Health and Specialised Services (MHSS), provided at the Park aim to provide the best practice care to people with a mental illness and to those requiring primary care and mental health services in correction centres.

Services hosted at The Park include:

- Forensic and Secure Services
- Prison Health Services
- Service Development and Performance

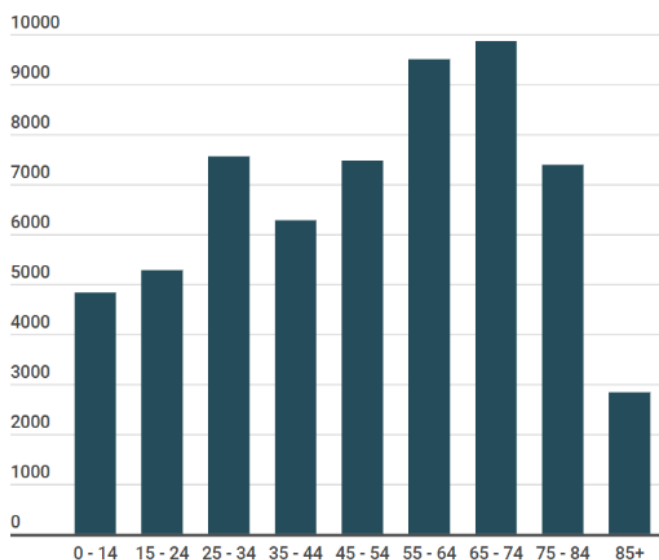
The Park also hosts state-wide leadership services in mental health research, education and benchmarking with the:

- Queensland Centre for Mental Health Research
- Queensland Centre for Mental Health Learning
- Queensland Mental Health Benchmarking Unit.



Health service utilisation

Figure 39, Ipswich Hospital episodes of admitted care by age, 2017/18.



For the purposes of this community profile, the health service utilisation data has been calculated on the Ipswich Hospital Catchment which includes the following planning regions:

- Ipswich City
- Ipswich East
- Ipswich North
- Springfield

In 2016/17, the Ipswich catchment planning region hospital utilisation was split 67% publicly funded hospital activity and 33% private activity.

In 2017/18 Ipswich Hospital had a total on 60,993 episodes of admitted care (figure 39).

A high number of hospital admissions are attributed to people aged 55 and over, with spikes in activity for the 25-34- and 45-64-years age groups with over 7,000 episodes each of admitted care.

The most recent Potentially Preventable Hospitalisations (PPH) data 2017/18 showed a total of 222 separations (an episode of care for an admitted patient) attributed to PPH's for the Ipswich North planning region. The top 3 conditions include diabetes complications, urinary tract infections Inc. pyelonephritis

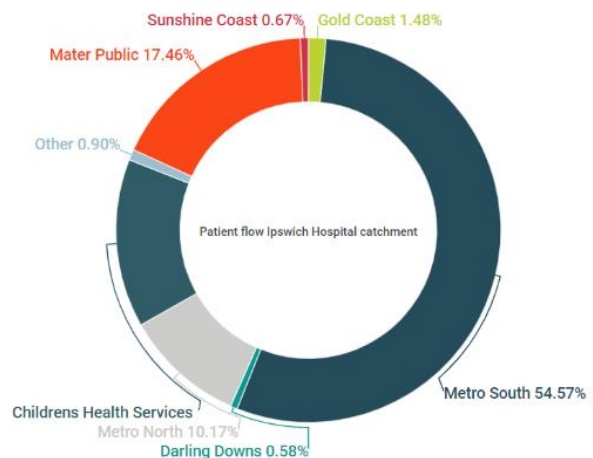
and cellulitis. PPH's are separated into acute, chronic and vaccine preventable categories and some total PPH calculations may appear greater as patients may belong to more than one category and PPH data is calculated by place of residence, not by facility they presented at.

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, Ipswich Hospital serviced 63% of their public hospital demand.

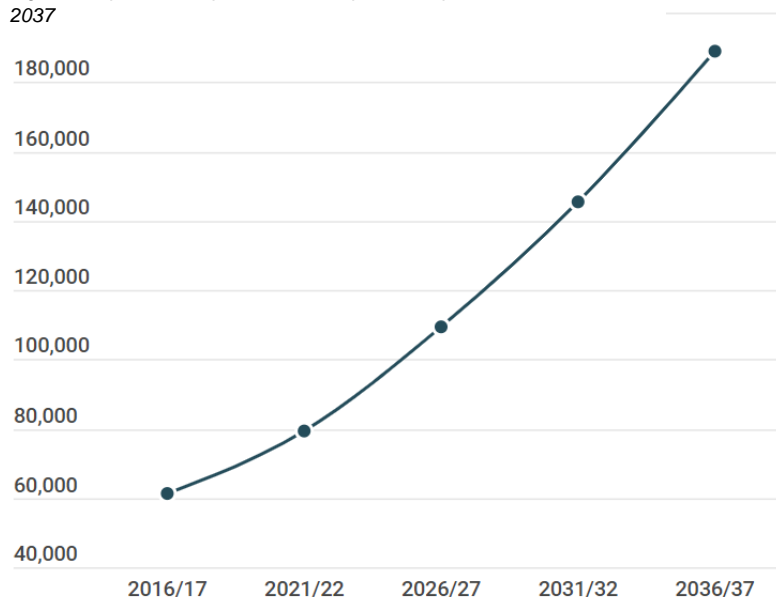
Patient flow (outflow) represents the proportion of the population who receive services outside their geographic catchment area. Figure 40 represents where residents of the Ipswich Hospital catchment are receiving their care. It can be noted that high rates of the population receive care from Metro South, Metro North and Mater Public Hospital and Health Services.

Figure 40, Ipswich catchment patient outflow, 2016/17



Health service demand

Figure 41, Ipswich Hospital catchment public hospital demand 2016-2037



As the population is growing and ageing, so too is the demand for public hospital services. Figure 41 shows the significant growth in projected inpatient hospital demand for the Ipswich catchment.

It is expected that by 2036/37 the number of public hospital admissions for the Ipswich Hospital catchment will increase to 188,730, an increase of 209%.

Top 10 Service-Related Groups for Ipswich North Planning Region

Non-subspecialty Surgery accounted for the highest amount of publicly funded admissions in 2016/17 for Ipswich North residents.

The service-related groups with the next highest volume were Orthopaedics, Cardiology and Diagnostic GI Endoscopy all of which were higher than 150 admissions during 2016/17 (figure 42).

Figure 42, Service-Related Groups for Ipswich North residents 2016/17.

	Service-Related Group	2016/17
1	Non-subspecialty Surgery	261
2	Orthopaedics	233
3	Cardiology	177
4	Diagnostic GI Endoscopy	177
5	Respiratory Medicine	140
6	Neurology	129
7	Non-subspecialty Medicine	129
8	Chemotherapy	120
9	Obstetrics	118
10	Immunology & Infections	110

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 Ipswich Community Reference Group meets on a quarterly basis to provide insight into the needs of the community.

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

- Strengthening dual diagnosis capabilities for patients
- Strategies to improve mental health and substance abuse issues in the city
- Strengthening psychiatric assessments and responsiveness for people with dementia and their families
- Focus on care that includes psychological trauma as part of the care provided
- More communication on local services and how to access them
- Increasing support and education for carers around mental health
- Increasing culturally appropriate care for the migrant and refugee population
- Helping people with disability engage with the health services and the community
- The need for more information on West Moreton Health services and how to access them, particularly information on mental health, substance abuse, sexual health, disability services and geriatric health
- The need for education and information on available local services around sexual health in the LGBTQIA and over 65-year-old communities
- More communication about service improvements at the Ipswich Hospital
- Partnerships with and in schools (particularly primary schools) – specifically around food education (healthy choices) and initiatives which promote wellbeing.

West Moreton priorities for Ipswich North

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"> - Treating more people closer to home to increase self-sufficiency index - Increase the range of complex services available for the whole of West Moreton Health's catchment - Focus on utilising technology to provide more services in a virtual capacity 	<ul style="list-style-type: none"> - Installation of an MRI at Ipswich Hospital (Stage 1) - Construction of a new Mental Health Unit at Ipswich Hospital (Stage 1) - Relocation of administration services off site from the acute Ipswich Hospital campus - Increase services in the Ripley/Springfield catchment - Implement the 15-year West Moreton Master Plan including development of an Ipswich Health Precinct and refurbishment of Ipswich Hospital

Community Profiles – Ipswich East

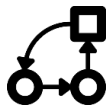
Health needs and service issues summary



Ipswich East is diverse with high rates of people identifying as Aboriginal and/or Torres Strait Islanders, people born overseas and people who speak English not well or not at all (compared to state average)



Ipswich East has a lower rate of growth compared to the wider West Moreton (1.9% AGR)



Ipswich East has a young emerging population, with 26.4% of the region's population aged under 14 and 18.5 per 1000 crude birth rate (compared to state average of 12.4)



Highest public hospital demand for Ipswich East planning region is for Renal Dialysis, Obstetrics, and Chemotherapy



West Moreton Health is implementing the 15-year Master Plan including development of an Ipswich Health Precinct and refurbishment of Ipswich Hospital.

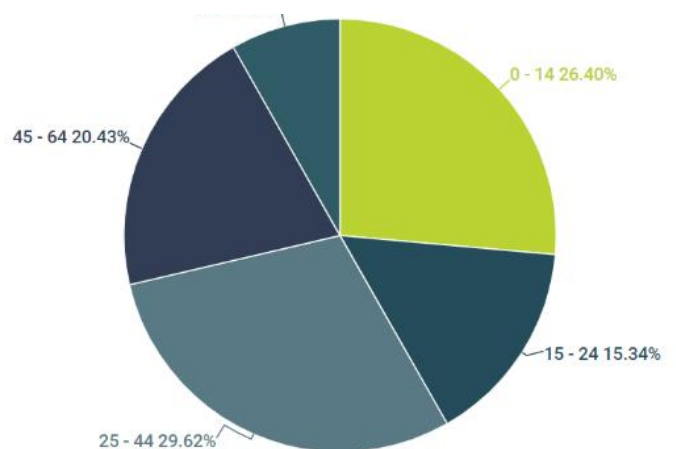
About Ipswich East

Ipswich East planning region consists of six SA2 areas:

- Camira - Gales
- Carole Park
- Collingwood Park - Redbank
- Goodna
- New Chum
- Redbank Plains

Ipswich East region has a total land area of 62.4 square kilometers, and as at June 2018 a total resident population of 52,322 or 18% of West Moreton's total resident population. Figure 43 shows a breakdown of population by age group, showing significant numbers of the population aged under 14 (26.4%).

Figure 43, Ipswich East planning region population breakdown by age, 2017



Demographics



4.4%

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



30%

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



3.7%

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



1.9%

annual growth rate (AGR), compared to a state AGR of 1.6%. By 2041 there will be an estimated 78,773 persons residing in the Ipswich East planning region.



18.5

Ipswich East planning region's crude birth rate per 1,000 (Qld 12.4) and a death rate of 3.8 per 1,000 (Qld 6.4).

Health services

Ipswich East planning region falls into the Ipswich catchment, in which the Ipswich Health Service is located, 40kms west of Brisbane. The Ipswich Health Service delivers care to the region and includes the following facilities:

Ipswich Hospital

Ipswich Hospital is a major acute hospital with 431 beds. Ipswich Hospital provides:

- Emergency Department
- Surgical services
- Acute mental units for adult and older persons and the acute care team
- Cancer and palliative care
- Rehabilitation
- Maternity, neonatal and paediatrics
- Allied health and rehabilitation services
- Intensive and coronary care
- Orthopaedics

Ipswich Community Health Services

Ipswich Health Service delivers community health services from a range of settings across the region including the Ipswich Health Plaza, Oral Health Clinic and Goodna Community Health. Ipswich Community Health Service delivers a diverse range of services to people in the region, including:

- Child Health Clinics
- Oral Health
- Community Mental Health Services - child and youth, adult, older persons and rural
- Alcohol and Other Drugs Service
- Evolve Therapeutic Service
- Diabetes Consultation
- Well Women's Clinic
- Sexual Health and Blood Borne Virus Services
- Allied Health and Community Based Rehabilitation Team
- Screening Services (breast and bowel)
- Aged Care Assessment Teams (ACAT)
- Public Health Unit

- Ancillary services such as pastoral care and volunteer services.

Ipswich Hospital is a level 4-5 Clinical Services Capability Framework (CSCF) hospital. The CSCF is provided by the Department of Health to determine the complexity of services provided at a hospital.

The hospital has a major teaching role, providing both undergraduate and postgraduate clinical education and training.



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The Park – Centre for Mental Health (The Park) provides highly specialised mental health care to patients throughout the West Moreton region and wider Queensland. Mental Health and Specialised Services (MHSS), provided at the Park aim to provide the best practice care to people with a mental illness and to those requiring primary care and mental health services in correction centres.

Services hosted at The Park include:

- Forensic and Secure Services
- Prison Health Services
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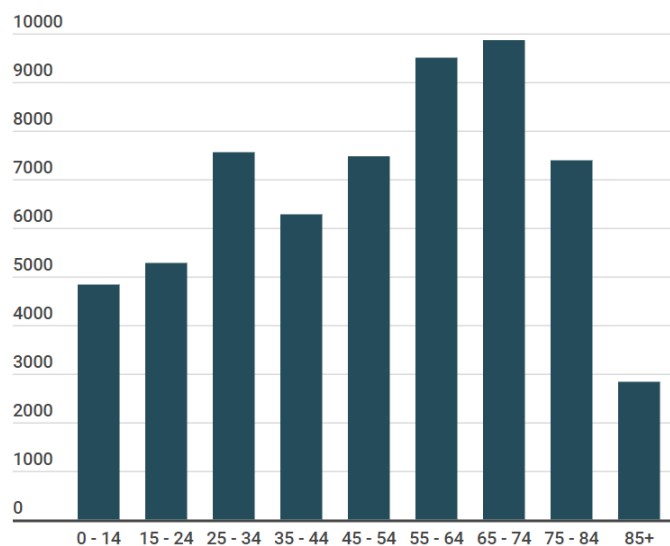
The Park also hosts state-wide leadership services in mental health research, education and benchmarking with the:

- Queensland Centre for Mental Health Research
- Queensland Centre for Mental Health Learning
- Queensland Mental Health Benchmarking Unit.



Health service utilisation

Figure 44, Ipswich Hospital episodes of admitted care by age, 2017/18.



For the purposes of this community profile, the health service utilisation data has been calculated on the Ipswich Hospital Catchment which includes the following planning regions:

- Ipswich City
- Ipswich East
- Ipswich North
- Springfield

In 2016/17, the Ipswich catchment planning region hospital utilisation was split 67% publicly funded hospital activity and 33% private activity.

In 2017/18 Ipswich Hospital had a total of 60,993 episodes of admitted care (figure 44).

A high number of hospital admissions are attributed to people aged 55 and over, with spikes in activity for the 25-34- and 45-64-years age groups with over 7,000 episodes each of admitted care.

The most recent Potentially Preventable Hospitalisations (PPH) data 2017/18 showed a total of 1,056 separations (an episode of care for an admitted

patient) attributed to PPH's for the Ipswich East planning region. The top three conditions include diabetes complications, Urinary tract infections, including pyelonephritis and chronic obstructive pulmonary disease. PPH's are separated into acute,

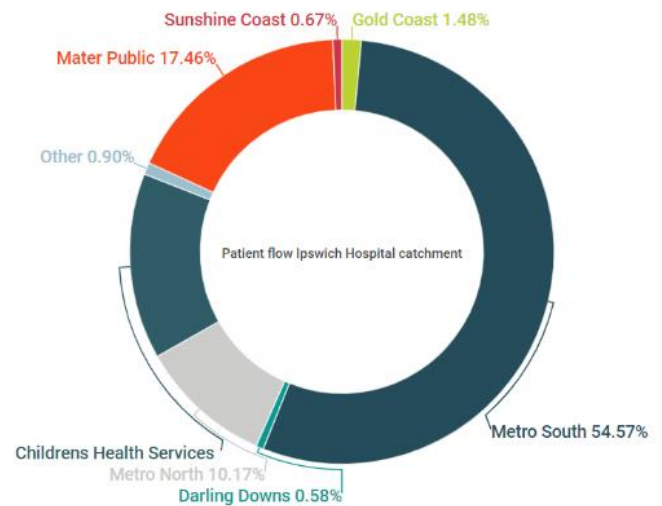
chronic and vaccine preventable categories and some total PPH calculations may appear greater as patients may belong to more than one category and PPH data is calculated by place of residence, not by facility they presented at.

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, Ipswich Hospital serviced 63% of their public hospital demand.

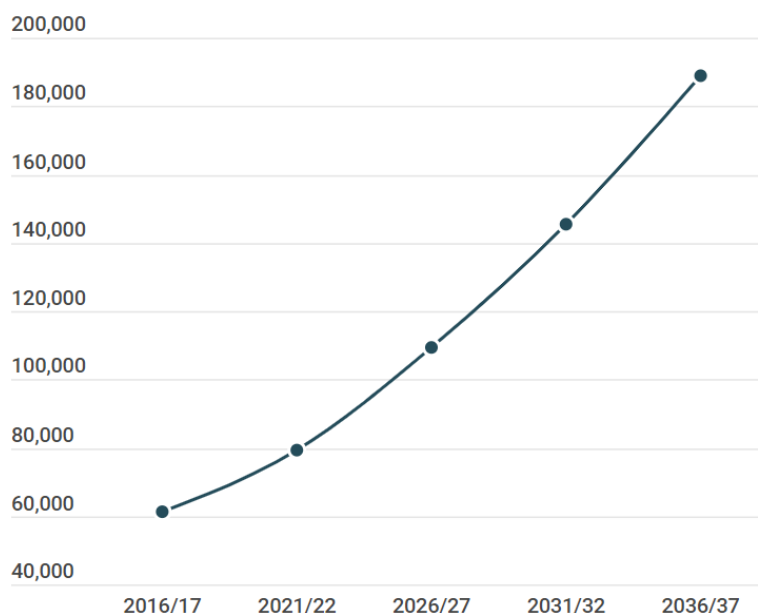
Patient flow (outflow) represents the proportion of the population who receive services outside their geographic catchment area. Figure 45 represents where residents of the Ipswich Hospital catchment are receiving their care. It can be noted that high rates of the population receive care from Metro South, Metro North and Mater Public Hospital and Health Services.

Figure 45, Ipswich catchment patient outflow, 2016/17



Health service demand

Figure 46, Ipswich Hospital catchment public hospital demand 2016-2037



As the population is growing and ageing, so too is the demand for public hospital services. Figure 46 shows the significant growth in projected inpatient hospital demand for the Ipswich catchment.

It is expected that by 2036/37 the number of public hospital admissions for the Ipswich Hospital catchment will increase to 188,730, an increase of 209%.

Top 10 Service-Related Groups for Ipswich East Planning Region

Renal dialysis accounted for the highest amount of publicly funded admissions in 2016/17 for Ipswich East 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, obstetrics and non-specialty surgery (general surgery) all of which were higher than 1000 admissions during 2016/17 (figure 47).

Figure 47, Service-Related Groups for Ipswich East residents 2016/17.

	Service-Related Group	2016/17
1	Renal Dialysis	2,412
2	Chemotherapy	1,260
3	Obstetrics	1,251
4	Non-Specialty Surgery	1,148
5	Orthopaedics	936
6	Respiratory Medicine	896
7	Non-specialty Medicine	833
8	Diagnostic GI Endoscopy	772
9	Cardiology	715
10	Ear, Nose & Throat	634

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 Ipswich City Community Reference Group meets on a quarterly basis to provide insight into the needs of the community.

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

- Strengthening dual diagnosis capabilities for patients
- Strategies to improve mental health and substance abuse issues in the city
- Strengthening psychiatric assessments and responsiveness for people with dementia and their families
- Focus on care that includes psychological trauma as part of the care provided
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- Helping people with disability engage with the health services and the community
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- The need for education and information on available local services around sexual health in the LGBTQIA and over 65-year-old communities
- More communication about service improvements at the Ipswich Hospital
- Partnerships with and in schools (particularly primary schools) – specifically around food education (healthy choices) and initiatives which promote wellbeing.

West Moreton priorities for Ipswich East

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"> - Treating more people closer to home to increase self-sufficiency index - Increase the range of complex services available for the whole of West Moreton Health's catchment - Focus on utilising technology to provide more services in a virtual capacity 	<ul style="list-style-type: none"> - Installation of an MRI at Ipswich Hospital (Stage 1) - Construction of a new Mental Health Unit at Ipswich Hospital (Stage 1) - Relocation of administration services off site from the acute Ipswich Hospital campus - Increase services in the Ripley/Springfield catchment - Implement the 15-year West Moreton Master Plan including development of an Ipswich Health Precinct and refurbishment of Ipswich Hospital