



# Question and Answer Sheet

## **Why are Nathalia, Cobram and Numurkah health services considering merging together?**

- The Boards of Management are taking a proactive approach to ensure that high quality, safe care continues to be provided.
- A proposal to join health services together is being explored to improve service delivery and access to care for local communities – close to home.
- Our communities are responding to current challenges faced by regional and rural health services and want to build a stronger health system.
- Consultation is taking place with staff and the community to gain feedback on the proposal before any final decision is made.
- Nathalia District Hospital, Cobram District Health and Numurkah District Health Service will seek approval from the Minister for Health to combine their operations under one new management entity, pending the outcome of consultation.

## **What do the proposed changes involve?**

- The three separate health services will combine to operate under one management entity, whilst the existing locations/facilities will remain in place.
- Current services will be maintained and enhanced to improve access and deliver the best possible health care locally. There will be no reduction in services or funding in relation to this proposal.
- We will combine our resources and expertise across the three services to better meet the needs of the community – close to home. There will be no reduction in staff as a result of this proposal.

## **What are the benefits for local residents, patients, staff and families?**

- Patients will be able to access a broader range of health services locally by sharing the skills and expertise of medical, nursing allied health staff and practitioners across the region.
- There will be improved access to health services.
- Health care services will be enhanced to meet patient needs at different stages of life.
- There will be better connected and consistent service delivery across the region.
- Better coordination of aged care services.
- Shared knowledge and expertise will improve levels of care.
- Staff opportunities for professional development and extended work options/flexibility will be provided, helping to retain and attract staff.
- Specialist staff may be attracted due to improved employment opportunities such as more hours.
- There will be better connections and service opportunities with GV Health, which is undergoing a \$168.5 million redevelopment.

**Will there be job cuts?**

- Staff are valued members of the health organisations and local communities. There will be no reduction in staffing, services or funding as a result of this proposal. Existing staff will all be part of the new entity.

**Will there be a loss of services, beds and funding?**

- Providing consistent, high quality, safe and accessible care to the community is our priority. There will be no reduction in funding. Services will be maintained and improved. Bed numbers will be maintained.

**I like my local hospital. Does this mean we will no longer have a local hospital?**

- Each of the hospitals will remain in their local communities. We will continue to provide the same and/or better care (with no reduction in staff or funding as a result of this proposal).

**I currently work close to home. Will I have to travel to work in another town?**

- No. Staff will remain in their current location and may have the opportunity to work across other locations if they choose.

**Will consultation be undertaken with staff and the community?**

- Yes. Consultation is taking place with staff and the community to gain feedback on the proposal before any final decision is made.
- We want to know what is important to staff and the community to inform how the new entity and its services will look and operate. We will keep people informed as we move through the process (via Website, Email, Mail, Media and Staff/Community Engagement Sessions).

**When will this happen? How long will this take?**

- We are starting out on this process and it may take some time to complete. We know that a process of community and staff consultation, service design and planning will need to be undertaken. This takes time and needs to be done properly. As a guide, initial consultation and planning will commence this year (2017) and depending on the outcomes, implementation planning could be undertaken by the end of June 2018.

**What will happen to Board Members?**

- A new entity would mean that a new Board would be created. The Minister would need to approve nominations from existing Board Members for the interim period (12 months) and the new Board would then be established. Current Board Members would have the opportunity to apply.

**What will happen to the CEO role?**

- A new entity would mean that a new CEO role would be created over the coming years. Current CEOs would have the opportunity to apply for the role. All other roles will remain in place at the existing locations/facilities.

**What will happen to existing finances, donations and auxiliaries. Where will the money, items and equipment go?**

- The Governance Working Group for the project includes representatives of the three health service Boards. They will consider the current financial reserves at each organisation. Recommendations will focus on local priorities for each health service.
- Donations and items will remain with each facility/location.

**What would happen if we did nothing?**

- Rural and regional hospitals face a number of challenges – such as: increasing patient demand, sickness and complexity of care; meeting new legislative changes/requirements; infrastructure, technology and equipment needs; attracting and retaining staff and specialists; securing funding for new services etc.
- By combining resources and skills, and working together, we would have a stronger health system that can meet current and future community needs.

**What will happen to residential aged care facilities?**

- They will continue to provide the same high standard of care in each facility at their current location.

**What will the name/branding of the new entity be?**

- The name and branding of the new entity would need to be created through a formal consultation process. During the consultation period, the project name will be: Nathalia, Cobram, Numurkah Health Services. Each of the individual health service identities will remain, including their logos, throughout the consultation.

**Are there examples of how the health services work together?**

- Nathalia, Cobram and Numurkah health services currently run a number of health programs together such as Moira Palliative Care, Community Rehabilitation and Chronic Disease. We currently share education between the health services, a recent example is advanced life support training and Cultural Diversity Training.

**How can I find out more or have my say?**

Regular information will be provided via newspapers, website [www.ncnhealthservices.org.au](http://www.ncnhealthservices.org.au), e-newsletter, mail-outs and at community/staff engagement sessions.

For more information:

Visit the website: visit [www.ncnhealthservices.org.au](http://www.ncnhealthservices.org.au)

Phone:

- Nathalia District Hospital - 5866 9444
- Cobram District Health - 5871 0777
- Numurkah District Health Service - 5862 0555

Email: [ncnhealthservices@humehealth.org.au](mailto:ncnhealthservices@humehealth.org.au)

Write to: NCN Health Services Proposal  
PO Box 252 Cobram 3644

Participate in a community engagement session in early 2018