

Wattleseed Healing Centre PTY LTD

ACN

Dr Clayton Spencer

MBBS, BSc (med), MHLthMgt, DCPsych.

Attention: NSW Department of Planning.

On Behalf of Waterbrook at Wahroonga Pty Ltd and as a Health Service Consultant* the following critique is offered.

The proposed development at Water St, Wahroonga is a 129 bed private hospital on a heritage listed site. Of the 129 beds that are proposed, 39 will be utilised to manage private patients with psychological difficulties. These patients will all be voluntary admissions, which will mean that they will have been assessed by appropriately trained medical staff who have deemed them to be of no harm to themselves or others. Patients with a violent forensic history will be excluded absolutely. In fact the majority, if not all, of the patients will be in the category of "worried well". These are largely employed people with private health insurance, who are having difficulty coping with life and the associated "ups and downs". Although these patients will have labels such as "depressed", it is important that this group of people not be stigmatised through the use of such labels. The development is sensitive to these issues and with due consideration given to the issues identified in this critique should allow for the community acceptance of this important health service provision.

Over the last 25 years, the Australian public has come to appreciate that many of the fears surrounding psychiatric patients are completely unfounded. The overwhelming majority of crimes are not committed by the mentally ill and they certainly do not spend their time lurking about in the shadows posing threats to children. These views are outdated and unfounded. Many of the patients that are admitted to the hospital will be family members, mothers, fathers, corporate high flyers and those who wish to "pull their life back together" after suffering a misfortune. To claim that to treat patients in this area will invite crime is unfounded, all of the patients coming to the hospital will be voluntary and thus be seeking help from trained professionals. These are patients with psychological difficulties not moral ones. They are acutely aware of what is right and wrong and are respectful of the surrounding neighbourhood having chosen to come here for treatment.

To deny human beings the right to seek help for their psychological difficulties on the basis of prejudice is a poor reflection on our society indeed. The World Health Organisation recognises that mental health issues are emerging as the number one problem to be faced by all generations in the future and this is especially so in the older populations. This proposed development is a mature response to this social concern. The only ward that will be secured is that for dementia patients who will wander if it is not secured. No one could argue that this group of elderly patients are dangerous, having memory problems primarily, this group of patients is in desperate need of a supportive environment. To deny as a result of stigma is to ignore the suffering of others. It is time that the old, unfounded beliefs about mental illness be left behind so that we can all focus on the future needs of the community, without prejudice.

With particular reference to the Waterbrook development, the decision to include psychiatric beds in the new hospital was made in response to the growing demand of treating mental health. Based on a site historically used as a hospital and nestled in the suburb of Wahroonga some public dissent is understandable. This unrest is not unique to this development however as historically all developments that have some focus on the management of mental illness, are met with prejudice. One of the most famous psychiatric hospitals in Australia, Cumberland Campus in North Parramatta, felt the sting of prejudice at the time of its inception over a century ago, forcing the transport of psychiatric patients at night and via the Parramatta River so as to not upset the local community. It is hoped that as a society we have moved past this today as many with psychological problems now live among us.

This is not to say that there are absolutely no concerns with the plan for Water St. I have some reservations about the efficiencies of the ward layout as it stands and the lack of a Health Service Mission Statement.

- 1. The layout is such that efficiencies are not being maximised.**

There is considerable flexibility in the design which could be optimised. Most obviously, the single rooms offer more than ample space, offering a lounge area and en suite in each single room is a luxury few other private hospitals offer and may be very appealing to many patients. What needs to be made certain however is that the mental health patients need to be accommodated together, in close proximity to the ground floor consulting rooms in the new part of the building. This allows for the patients to identify as a group and also prevents undue prejudice against them from other patients. This can be easily adapted in the current design but as yet this does not seem to have been a consideration. Further on this point and regarding the mix of

specialities, the treatment of mental health patients is very compatible with the treatment of dementia/old age psychiatry, peri-natal (mother baby units) and brain injury and consideration should be given to adapting the wards to suit these needs clearly identified in the Sydney population. Keeping in mind the demographics of the majority of the HKH patients (over 65 years), the high volume of births through the Sydney Adventist Hospital and the close proximity of Mt Wilga Private Rehabilitation Hospital making use of the Water St Hospital in this way will mean that the health needs of Northern Sydney and the Central Coast are met in entirety. An opportunity that is rarely seen in health care.

2. Lack of Health Service Mission Statement.

The mission statement for the hospital needs to be developed now. This allows for the planners to keep in mind what the health Service is aiming to achieve. Considering the community concerns about safety, this should be the first tenant of the mission statement. The Service has to maintain the focus on the safety of the patient, staff and community at large. This in turn leads to the needs to have strict protocols and procedures in place to honour this tenant. In particular it is absolutely essential to screen patients for threats of harm to self or others. If they represent a threat then the patient is not to be admitted to the hospital. As the hospital will have no beds gazetted under the Mental Health Act, 2000 clinicians working at the hospital will be under a legal obligation to transfer all patients at risk to the nearest gazetted hospital, in this case this will be Hornsby Ku Ring Gai Hospital. The hospital will not accept forensic patients for admission especially if they have a history of violence recognising that a private hospital is not the appropriate setting for the treatment of this group of patient. It is recommended that safety to the patient, staff and the community should be the main mission of the hospital.

It is also worth noting that the operator of this facility will need to satisfy a rigorous compliance process prior to obtaining private health care bed licences from NSW Health. Associated with this approval will be an equally rigorous regular reporting of operations to ensure the facility and its operators adhere to the relevant health care guidelines (Mental health Act). Failure to comply will result in the loss of the private bed licences. Further to this the operators will need to display hospital standards and practices which satisfy the requirements of accreditation with the Australian Council of Healthcare standards (ACHS).

The factor most strongly in favour of approving this development is the need for this service on the Upper North Shore. There is an absolute lack of high quality private hospitals on the upper north shore who have a focus on psychiatry. Hornsby Ku Ring Gai hospital (HKH) is at breaking point (North Shore times) and an opportunity for this public institution to develop a relationship with a local private institution would be most welcome, allowing for privately funded patients to be admitted to Water St rather than HKH. This in turn will relieve Public Hospital bed pressure and allow public funds to be invested in other areas servicing the community. This would be a certain win for the community.

Overall, this hospital development can offer considerable benefits to the local community. The development of the site will ensure the survival of a beautiful heritage listed estate, the blue gum forest and provide the community with a grounds befitting the austerity of the area. By establishing some psychiatric beds, this will relieve the considerable bed pressure felt at HKH psychiatric hospital which in turn means more public funds available for HKH to reinvest in the community. The public angst expressed so far is noted and understood, however it is founded on false beliefs and long standing prejudices. The Water St development has been very sensitive to community concerns over the past few years and will continue to do so, however to deny the residents of Ku-Ring- Gai broader community quality private health care for psychological issues, is to sell short the health needs of the Ku-Ring Gai at large .In my opinion, this will result in a very regrettable net community loss.

Dr Clayton Spencer

Health Service Consultant, Doctor

***PROFESSIONAL PROFILE:**

- **Undergraduate degrees:**

Bachelors of Medical Science, Surgery and Medicine.1998

- **Post graduate degrees:**

Diplomat in Clinical Psychiatry for the Royal College of Physicians and Royal College of Surgeons, London. 2006

Masters in Health Service Management, University of Newcastle. 2009

- 10 years experience as a clinician.
- 6 years experience as a Career Medical Officer in Psychiatry in the private and public sector.
- 3 years experience as a Health Service Consultant: Director of Medical Service and Medical Advisor to the NSW Department of Health.