Illawarra International health precinct
Dedicated to Your Health

- Faster/efficient transport systems
- Bus stops & taxi ranks
- Huntley Railway Station opening sooner
- Walking & cycle share-ways on and around the site
- Improved roads
- Access to shops, banks, newsagent, restaurants, cafes
- Close and immediate 24 hour medical care

Amenity

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TABLE 1.1 – SUMMARY OF HEALTH SERVICES IN SESIAHS

HEALTH SERVICE	Eastern	St George	Sutherland	Illawarra	Shoalhaven	SESIAHS
Proportion of population[1]	30.7%	19.4%	18.6%	23.6%	7.6%	100%
Proportion of area (approx)	4%	3%	9%	24%	60%	100%
Public hospitals	6	2	1	6	3	18
Beds per 1,000 population[1]	4.37	2.59	1.45	2.76	2.33	2.94
Number of acute hospitals[2]	5	1	0	1	0	7
Private hospitals/facilities	6	3	2	6	1	18
GPs[3] per 1,000 population[1] proportion	1.71	1.14	1.00	0.85	1.03	1.21
Primary/community health:						
- number of centres	14	14	6	71	23	128
- workforce (FTE)	144.9	61.8	151.0	248.6	80.4	686.7

1. Population based on 2001 census
2. Acute facilities were defined as having a peer group of A1a, A1b, A2 or A3
3. Based on GPs who are members of one of the six GP Divisions that cover SESIAHS

Figure 5.2 - Health Services Summary (SESIAHS Annual Report 2004-2005)

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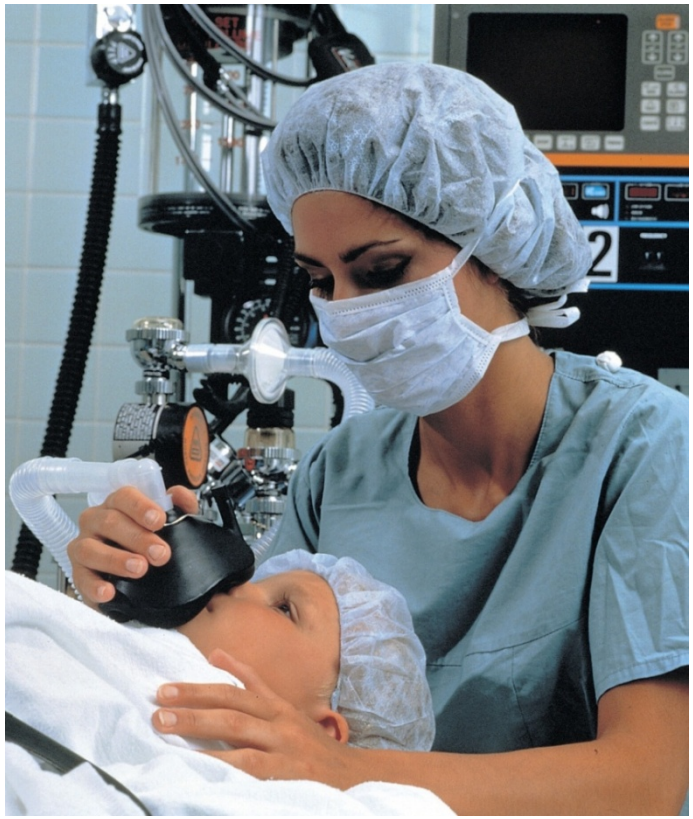

- **The benefits of a Private Hospital**
- **The need for a Private Hospital**
  - To SESIAHS
  - To the medical community
  - To the regions residents
- **Benefits to the University**
- **Benefits produced by the "model"**

(see attached letter written by Professor Don Iverson)

Focus On Benefits

Professor Don Iversons words

University of Wollongong

November 6, 2006

Dr. B R Gooley
La Vie Developments Pty Limited
44-50 McElhone Street
Woolloomooloo NSW 2208

Dear Brett:

It is with pleasure that I submit this letter in support of your development of a private hospital in Tullimbar, New South Wales.

There are three primary reasons why I support the development of a private hospital in the Albion Park area of the City of Shellharbour.

The first relates to the changing demographics of the Illawarra region and the impact of those changes on the existing medical infrastructure. The Illawarra region continues to experience population growth and a significant portion of that growth is occurring in the Southern Illawarra, particularly the City of Shellharbour. In fact, the proposed private hospital is being build next to a major new residential development – an ideal location from my perspective based on my experiences in Denver, Colorado.

The addition of the hospital will allow residents of the Southern Illawarra to access private health care services in a timely fashion, will reduce the burden on already stressed public hospitals and will increase the likelihood of being able to attract new physicians and surgeons to the area.

The second and third reasons pertain to the development of the University of Wollongong's new Graduate School of Medicine (GSM), which will take its first students in January 2007. With the expansion of medical schools and medical places in Australia the Australian Medical Council has rightly expressed concern about the lack of clinical training places for medical students. The Council has encouraged medical schools to explore other opportunities for clinical training sites, most notably private hospitals.

Your proposed hospital represents an excellent opportunity for the GSM to develop clinical training opportunities at the hospital. In fact, my plan is to work with the administration of the proposed hospital with the intent of having it designated a University of Wollongong Graduate School of Medicine Affiliated Teaching Hospital.

Faculty of Health & Behavioural Sciences
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CRICOS Provider No. 00102E

The hospital is an especially appropriate clinical training site for our students as your approach encourages general practitioners to function as Visiting Medical Officers. This is precisely the approach embraced by the GSM. We want our students to interact with general practitioners as they admit and manage patients in a hospital setting, using specialist consultants when appropriate. It is our firm belief that if our students are

exposed to this model throughout their training years they will appreciate the richness of experiences that they can have as a general practitioner in regional, rural or remote Australia. Your offer of having GSM faculty serve on the hospital's Ethics Advisory Board would extend and further strengthen the ties between the GSM and the hospital.

The final primary reason relates directly to the mission of the GSM which is to graduate doctors who have the capacity and desire to practice medicine in regional, rural or remote Australia. It is our hope that about 70% of our graduates will elect to take specialist training in general practice. For this to occur it is imperative that new opportunities be created for general practice registrar training in the Illawarra. The proposed hospital, with its general practice model, represents the ideal opportunity for us to create new general practice registrar training opportunities. I cannot overestimate the importance of this opportunity for addressing the general practice medical manpower needs of the Illawarra and Shoalhaven regions.

Brett, I sincerely look forward to working with you and your colleagues through the various planning and development phases of the proposed private hospital. I see this as an opportunity in which everyone is a 'winner' – the developers of the hospital, the residents of the community and the Graduate School of Medicine.

Respectfully submitted,

Don Iverson

Donald C. Iverson, PhD
Professor and Dean
Faculty of Health and Behavioural Sciences

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TABLE 1.2 – SOCIO-DEMOGRAPHIC CHARACTERISTICS OF SESIAHS RESIDENTS

LOCAL GOVT AREA	Estimated population (2004)	No. 5yrs %	No. 70 yrs + %	Non-English speaking %	Aboriginal & Torres Strait Islander people %	Index of Relative Socio-Economic Disadvantage	Average annual growth 1996 - 2001 %	Projected population (2011)
Botany	37,905	6.2	9.9	36.7	558 (1.5)	995	0.7	39,543
Hurstville	76,144	6	11.6	28.6	371 (0.5)	1,019	1.6	81,439
Kiama	20,524	5.2	13	4.1	175 (0.9)	1,060	1.3	21,652
Kogarah	54,214	5.7	11	28.1	178 (0.3)	1,050	1.1	57,957
Randwick	126,574	5.2	9.7	25.5	1,352 (1.1)	1,051	0.4	0.4
Rockdale	94,555	6.3	11.5	34	402 (0.4)	987	0.9	0.9
Shellharbour	62,487	7.3	7.9	10.8	1,146 (1.8)	954	1.9	1.9
Shoalhaven	91,956	5.5	14	4.5	3,037 (3.3)	968	1.8	1.8
Sutherland	217,198	6.1	9.1	9.1	1,140 (0.5)	1,079	0.9	0.9
Sydney	72,089	3	6.6	18.9	577 (0.8)	1,050	6.7	6.7
Waverley	61,417	5.3	10.3	20	200 (0.3)	1,095	-0.3	60,513
Wollongong	193,328	6.3	10.7	14.6	2,611 (1.4)	981	0.5	198,663
Woollahra	54,189	4.8	11.3	15.8	91 (0.2)	1141	0.3	55,307
AREA TOTAL	**1,162,580**	**5.7**	**10.3**	**18.1**	**11,838 (1.0)**	**1,028**	**1.2**	**1.2**
NSW	**6,752,087**	**6.3**	**9.6**	**16**	**124,290 (1.8)**	**1,000**	**1.2**	**1.2**

Figure 5.1 - Key Demographic Trends in the SESIAHS

1	ILLAWARRA INTERNATIONAL SPECIALIST AND SURGICENTRE INCLUDING 10 OVERNIGHT BEDS 2 ICU BEDS, INCLUDING AUGMENTATION OF SERVICES TO SITE	2 1/2 STOREYS
2	PATHOLOGY & RADIOLOGY UNITS	2 1/2 STOREYS
3	24 HRS MEDICAL CENTRE, PHARMACY & CASUALTY WITH 10 OVERNIGHT BEDS	2 1/2 STOREYS
4	STAND ALONE OBSTETRIC UNIT WITH 20 OVERNIGHT ONE-BED SUITES	2 1/2 STOREYS
5	ILLAWARRA INTERNATIONAL HOSPITAL WITH 310 OVERNIGHT BEDS	8 STOREYS
	RETAIL SHOPPING PLAZA	2 STOREYS
6	NURSES, RESIDENT MEDICAL OFFICERS & MEDICAL STUDENT ACCOMMODATION INTEGRAL WITH THE TERTIARY REFERRAL HOSPITAL EDUCATIONAL PROGRAMME	2 STOREYS
7	EDUCATION FACILITY WITH ASSOCIATED ACCOMMODATION FOR PATIENT'S RELATIVES & OUTPATIENT ACCOMMODATION WHILE UNDERGOING EXTENDED THERAPIES	2 STOREYS EASTERN END 5 STOREYS WESTERN END
8 A.	ILLAWARRA INTERNATIONAL AGED & DISABILITY CENTRE WITH 280 BEDS MAINLY HIGH CARE	2 STOREYS EASTERN END 3 STOREYS WESTERN END
B.	ACCOMMODATION FOR SENIORS	2 STOREYS

NOTE:

A MINIMUM OF 3.0M SETBACK HAS BEEN PROVIDED TO ALL BOUNDARIES WITH THE EXCEPTION OF THE RETAIL COMPONENT LOCATED AT THE AVONDALE ROAD AND HUNTLEY ROAD INTERSECTION.

2.5M SHAREWAY FOR PEDESTRIAN & CYCLEWAY HAS BEEN PROVIDED TO PERIMETER OF SITE.

MOTORCYCLE, BICYCLE & DISABLED PARKING TO BE DISTRIBUTED THROUGHOUT SITE.

CARPARKING TO BE DESIGNED IN ACCORDANCE WITH AS 2890.1.

Amendment Issue:

No.	Description	Date

imagescape DESIGN STUDIOS
IMAGESCAPE DESIGN STUDIOS
ABN 18 552 436 522
C2.12 THE FUSION BUILDING
22-36 MOUNTAIN STREET
ULTIMO NSW 2007
P +61 2 9215 1000
F +61 2 9215 1050

Illawarra International Health Precinct

Cnr Huntley and Avondale Rd's
Huntley

LA VIE DEVELOPMENTS PTY LTD

Site Plan

Project number	LaVie04	SK02PL	
Date	16.07.2008		
Drawn by	VL	Scale	Plot stamp 16.07.2008 ISSUE 8
Checked by	CK	1:1000@A1	

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THE MODEL

Private health makes an individual responsible for their outcome as distinct from relying on the system.

- GP of your choice(accredited) admits and is responsible for your inpatient care and discharge.
- Specialists are involved at the procedure level only, ensuring productive and effective outcomes and negating time wasted on less menial tasks.
- Medical Advisory and Ethics Committee, along with credentialing, will be performed by the Professors of the various disciplines from the University of Wollongong

EDUCATION OF DOCTORS

Most doctors who train in public system end up in the private system dysfunctional

- Private Hospitals perform 56% of all surgery and 68% of same day mental health treatments
- As a Tertiary Referral Hospital with the University associations we will undertake to train the doctors within the hospital and ensure they remain in the area
- The South Coast, no longer the poor cousins of Sydney-ites, we now have a facility that will turn the tide