

Community engagement summary report

This report provides a summary of the feedback received during the community consultative committee meetings for the period August – September 2020



Cranbourne Community Hospital Community Consultative Committee meeting

Meeting details

Online via Microsoft Teams | Thursday 10 September 2020

Engagement purpose

Community consultative committees provide a forum for members of the local community to participate in the planning and development of the Community Hospitals Program through open dialogue and consultation.

The meetings provide a mechanism through which views of the community are heard, emerging issues are monitored, and concerns and priorities of the community are voiced.

Session summary

This meeting presented the committee with the progress of the service plan and collected feedback on the design principles and draft master plan for the Cranbourne Community Hospital. Committee members also received an update on the progress of the project and had the opportunity to ask questions throughout the session.

The session provided an opportunity for the committee to reconnect after some months of being unable to meet due to the social distancing requirements associated with COVID-19. The meeting was held virtually using the Microsoft Teams video conferencing platform, and feedback was recorded using Mentimeter, an interactive presentation tool.

Who was there

Chair: Pauline Richards MP

Foundation members: Representatives from Monash Health and City of Casey

Community members: Five community members from the Cranbourne area

Staff: Representatives from VHHSBA Planning and Development, DHHS System Design, VHHSBA Communications and Engagement, Billard Leece Partnership (principal consultant)

Community feedback, concerns and sentiment



Preference for new location to be **easily accessible via public transport and taxi**, as well as adequate accessible parking to cater for current and future use



Particular focus on **community outreach** and how to attract people to the community hospital who are not already patients



Committee noted that COVID-19 pandemic has shown **how telehealth can cater for a variety of medical needs**, especially basic consults for pathology results or repeat prescriptions, physio, and social support groups



General agreement with design principles. **Light, bright spaces with serene artwork and quiet space** for people to collect their thoughts and recharge are desirable



Committee noted sometimes **hospitals overlook the needs of partners and families waiting with patients**. Tea and coffee facilities, child-friendly spaces and private reflection areas were suggested



Interest from consultative committee members **in partnering with Cranbourne Gardens for landscaping of the community hospital site**, or at least modelling some of the native planting principles displayed at Cranbourne Gardens



Pleased with the variety of services proposed, interest in whether palliative care and carer respite could be added to the service mix



Members raised that there is **poor local knowledge of health and social services available in the area**, particularly amongst CALD community. Suggestion of regular multi-lingual information sessions or interpreter sessions for people with limited English ability



Staff parking and security was highlighted as important



Design of interior should **consider COVID-19 infection control learnings**, including appropriate separation of people entering and exiting the building

What we heard

Is there anything else you think we should consider for our land identification criteria?

- connections to local transport. Many people do not have access to private transport
- service location is convenient to local community
- good access to public transport
- sufficient parking for staff and visitors, and access to public transport.

Thinking about the drivers of health demand and local demographics, what are the priorities for Cranbourne Community Hospital?

- focus on accessibility for CALD communities
- disability ramps
- regular information sessions for multi-lingual communities. Interpreter sessions for people with limited English ability
- how will hospitals and health services across the area share information to ensure a seamless journey for patients?
- how will community outreach work? How do we reach people who are not already patients?
- as Cranbourne has a large ageing population, is there an outreach service planned to deliver care in the home?

What are your initial thoughts about the breadth of services to be provided at Cranbourne Community Hospital?

- given amount of space available, the services offered will cope well
- appears a well-thought out selection of services and basics covered
- priority should be given to youth services
- what thought has been given to services tailored to people on the autism spectrum?
- are psychology services other than mental health being offered?
- aged care liaison services. Many people requiring services are confused by My Aged Care website. Maybe a social worker service to guide clients and families?
- provision of a day-care respite program for people living with mild dementia.

Thinking about the current Cranbourne Integrated Care Centre, what is working well?

- the current location with its multiple car parks works well
- convenience and short waiting times for consultation.

What could be improved at the current Cranbourne Integrated Care Centre?

- infrastructure, mental health and child health services all need to be enhanced
- the waitlist for dental care needs to improve.

Reflecting on the projected points of care, how does our data reflect your experience of healthcare in the area?

- Yes, it included essential care to meet community health requests.

During COVID-19, health service delivery has changed (telehealth). What are your personal experiences?

- Yes, I did one of my GP appointments over a phone call and found it efficient and less time consuming
- Telehealth is fine for repeat scripts and minor issues, review of tests and pathology. There are however some ailments which require in-person consults
- I love e-referrals, however where required, clients should be able to visit the doctor in person as well
- I am part of an online group exercise program every Tuesday morning, which is something I look forward to every week.

What are the most important exterior design elements we should consider for this site?

- native plant gardens – we can partner with Cranbourne Gardens
- a safe and appropriate space for partners to spend time while they wait
- personalised view and appropriate waiting area for family members
- when I was in rehab after having my stroke they had a garden outside and one of my exercise classes was to go outside and weed the garden. After being stuck in the hospital for weeks it was nice to get outside
- staff access to garden areas in their break time so they can enjoy available amenity
- at the palliative care unit in Frankston, we get birds and other wildlife in our garden, which is therapeutic for both patients and staff
- water fountain, outdoor café?

What are the most important interior design elements we should consider for this site?

- lifts that are designed to allow for trolley and bed access plus bed moving equipment
- occupational health and safety for clinicians
- durable floor surfaces which allow for both non-slip and infection control safe cleaning
- prayer rooms
- tea rooms for staff
- child-friendly areas
- air-conditioning with zones which can be changed to negative pressure. Most older health facilities do not allow for airborne disease spread prevention
- commissioning local artists.

Thinking about the patient, staff and visitor experience, what other facilities, features or amenities would you like to see?

- front door concierge to welcome people inside
- healthy and culturally appropriate food options
- flexible spaces that can be used for community purposes out of hours
- serene art or images
- information displayed in diverse languages
- community notice board area to advertise health and wellbeing services.

