

22 January 2025

Dr David Rosengren Director-General Oueensland Health

By email:

Subject: Evaluation of satellite hospitals

Dear David

We thank Queensland Health for its letter of 10 January 2025 advising it is evaluating its satellite hospitals with a specific focus on minor injury and illness clinics.

AMA Queensland has consistently advocated for all health investments to be evidence-based and cost-effective, so we keep patients safe and not waste precious health resources. We also urged the Department to codesign its satellite hospitals with local general practices and other health providers to mitigate the risk of confusing patients, poaching staff, duplicating services and fragmenting care.

Our members were disappointed this did not happen and note that the Queensland Audit Office's report released just last week stated:

Data shows there were 63 category 1 presentations (less than one per cent) and 3,451 category 2 presentations (3.8 per cent) at satellite hospitals. While these figures are proportionately low, they are consistent across each period. They indicate there may be **public confusion about what medical issues the satellite hospitals are designed to treat**.

They are not equipped to treat urgent issues, and if the patient needs to be moved to a nearby emergency department, their treatment may be delayed.

The details set out in the Department's letter suggest that the evaluation is limited in scope and will not include consulting with local health practitioners. We believe that this will restrict its ability to determine the effectiveness of satellite hospitals in the health system.

The evaluation also does not include a comparison of the facilities with existing models of care such as general practice or emergency departments or enable consideration of the broader health care landscape which includes the Australian Government's Urgent Care Clinics and other primary care services.



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It is vital the evaluation covers these matters if it is to provide a comprehensive assessment of the facilities. We recommend that Queensland Health broaden the evaluation's key focus areas to specifically include:

- A cost-benefit comparison with other models of care, including general practice, and public hospital emergency care.
- Impacts on health practitioner staffing in other health services within the local catchment area for each satellite hospital.
- Impact of satellite hospitals on emergency department flows, rather than focussing solely on presentations.

In relation to the third point above, we note the Australasian College for Emergency Medicine's Queensland Election 2024 Backgrounder stated:

The Queensland Government's satellite hospitals and Federal Government's Medicare Urgent Care Clinics have been cautiously welcomed by emergency clinicians. They have the potential to improve access for low-acuity patients to out-of-hours GP care but – crucially – do little to ease the crippling effects of access block.

People requiring acute care will – and should – continue to present to EDs when they need it. Our hospital system must adapt to their needs, rather than the other way around.

We recommend that Queensland Health ensures that the evaluation provides meaningful results that can be used to improve satellite hospitals, so they result in real benefits for our community. We offer to work with the Department to achieve that aim and can meet to discuss further.

Yours sincerely

Dr Nick Yim

President

AMA Queensland

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Copied to:

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