A McGowan Labor Government will develop Western Australia’s first Medihotels.

The Medihotel is a specialist hotel designed to support patients discharged from hospital but who are still recovering. Our new Medihotels will provide patients with a comfortable, innovative and family friendly environment in which to receive ongoing care.

- **A McGowan Labor Government will develop WA’s first Medihotels to deliver a better experience for recuperating patients and to free up hospital beds so more patients can be treated.**

It’s a simple solution to free up expensive hospital beds so more patients can be treated and wait lists shortened. Medihotels will especially be welcomed by Western Australians from regional areas who often find themselves admitted for long periods for simple day surgery.

### What is a Medihotel?
- A specialist hotel designed to support patients when they have been discharged from hospital but are still recuperating, being monitored or receiving outpatient tests.
- Staff provide assistance with everyday tasks, companionship, nourishment and transfers to and from hospitals.
- Medical staff such as nurses, physiotherapists and occupational therapists visit the guests.
- Family members will be able to stay with patients.

### Medihotels freeing up beds

If regional patients are transferred to a Medihotel for their last 2 days of their hospital stay:

- **54 tertiary beds would be freed up every day in 2017-18.**
- **5,262 more patients could be treated in our hospitals each year.**

Patients will appreciate recuperating in comfort and privacy while still having access to medical care.

Medihotels have already proved their worth in other states where they increase the capacity of hospitals allowing the treatment of more patients while cutting the cost of individual health care because each patient spends less time in expensive hospital beds.

A McGowan Labor Government’s Medihotels will take pressure off our health system.

- **Freeing up hospital beds** - Medihotels will not replace hospital beds, but will free them up so more patients can be treated.
- **Helping patients from regional WA** – providing accommodation for regional patients.
- **Comfortable and family friendly** – easier for families to visit or stay with their loved ones while they are recovering.

Medihotels will help regional patients, the elderly and those who live alone get well faster.

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1 Rhonda Kerr, Health Planner, “Average Length of Stay in Metropolitan Teaching Hospitals”, September 2016
Improving Access to Health Care for All

Medihotels will:

• give doctors and nurses the opportunity to focus on diagnosis and treatment;
• move patients through the hospital system in a timely fashion;
• allow new patients to be admitted from emergency departments sooner;
• improve health pathways for the patients;
• give better support to regional patients as they enter and leave the hospital system;
• implement extra support for patients traveling from remote regions and with little knowledge or support in the metropolitan area; and
• develop new care plans for patients on their hospital journey to create better and more cost efficient hospitals.

Freeing up Hospital Beds

Medihotels will free up hospital beds so more patients can be treated.

Well integrated health services have the potential to improve the experience for patients and free up hospital beds. Efficient delivery of services across a broad range of health care settings will reduce the need for WA patients to remain in hospital as they transition to a more appropriate setting for their health needs.

Patients from regional WA have more than double the average length of stay in metropolitan hospitals as other patients. Patients from the South West, Pilbara and the Mid West have the longest average stays of between 8.5 and 9.1 days.

By comparison NSW tertiary referral hospitals averaged lengths of stay of five days (varying between 3.1 days and 7.9 days).¹

For example if country patients are transferred to a Medihotel for their last two days of their hospital stay:

• 54 tertiary beds would be freed up every day in 2017-18.
• 5,262 more patients could be treated in our hospitals each year.²

These estimates do not include savings that can be made by reducing length of stay for metropolitan patients especially those people with longer lengths of stay including the elderly and those who live alone.

WA Labor will ensure the most efficient use of hospital beds possible, so that the only patients occupying hospital beds are those who need to be there. Other patients will be accommodated in a more appropriate environment, but still be close to a hospital prior to going home, or having tests and treatments.

¹ Health Department of WA, “WA Hospital Morbidity Data search Inpatient data collection. Regional patients by hospital” (RPH, PMH, KEMH, SCGH), Ref: 7258-1a, 16 October 2014, Patients= 84,421
² Rhonda Kerr, Health Planner, “Average Length of Stay in Metropolitan Teaching Hospitals”, September 2016
A Better Experience for Regional Patients

As tertiary hospitals receive state wide patient referrals, they have patients coming from all corners of Western Australia. Many of these patients have acute conditions and require the highest level of care.

However, our hospital system does not allow for regional patients to access the hospital system except as inpatients. So after diagnosis and treatment, their recovery is in our hospital facilities because of the lack of appropriate alternative care.

Medihotels provide a great opportunity for doctors to discharge patients where they can recuperate in a non-hospital environment allowing the patient to be accompanied by family. This can be particularly important for patients being treated for illnesses that require frequent visits to hospital.

Medihotels will provide a comfortable environment for patients traveling to Perth for hospital care. Guest rooms would be supported by specially trained staff to support patients as they transition to out-patients or community based care and safely begin their journey home.

Patients will be supported when they have been discharged from hospital particularly after day-only surgical, diagnostic or medical procedures, or when they are having outpatient treatment. Medihotels are purpose built accommodation, providing assistance with everyday tasks, companionship, nourishment and transfers to and from hospitals. Clinical care continues to be provided by visiting medical staff and in the nearby hospital.

Nurse practitioners, diabetes educators, midwives, nurses, physiotherapists, occupational therapists and other health professionals from hospitals or the community would be able to visit patients at the Medihotel. Clinically-initiated medical monitoring (telemetry) can also take place at a Medihotel.

By providing secure, supported accommodation near hospitals, WA has the opportunity to decrease lengths of stay, transfer regional patients to day surgery or have a higher proportion of investigations and treatments undertaken in outpatient clinics. The opportunity for earlier discharge to a monitored setting would result in the length of stay for regional patients being reduced in hospital accommodation. People coming to Perth for tests and investigations could also be seen in many instances as outpatients rather than inpatients.
Case Study:

Mrs Smith lives in Port Hedland and has to attend hospital in Perth for an operation booked some time ago. She is nervous about the trip and her husband decides to accompany her for the journey. Mrs Smith’s operation is at 7.30am and she needs to be in the hospital very early. Rather than admit her the night before, the hospital recommends she stay at the Medihotel on campus. PATS makes her booking and on arriving in Perth, she and her husband book into their room the night before the operation.

The following morning she has her procedure and rather than stay in the hospital, she is taken back to the Medihotel where she has daily visits to monitor her recovery. Mr and Mrs Smith stay together and eat together in the dining room and meet other people from regional WA who have had treatment and are preparing to go home.

While at the Medihotel Mrs Smith is visited by nursing staff and allied health staff who are able to speak to Mr and Mrs Smith about her treatment and how she should continue to look after her condition and make preparations for her return home.
Innovation in our Hospitals – Improving Patient Flow

The hospital system cannot afford to have patients in fully serviced hospital beds while they wait for test results or for a procedure that cannot be undertaken immediately. Medihotels represent an opportunity for doctors to seek innovative health solutions and provide a better, more person friendly style of care.

Many health policies concentrate on the front end of the hospital system. Whether it be ambulance ramping or the four hour rule, often we look to emergency departments for a way to better serve the patient. However, often the problem for emergency departments is not the capacity to treat patients; it’s the availability of beds to move patients on through the system.

Medihotels provide a way for doctors to respond to this issue in an innovative way. They will not replace hospital beds and must never be considered for doing so, but they are an extra opportunity for patients to access professional medical services from a different, but more appropriate, family centred environment.

The Eastern States Experience

Medihotels are not a new concept. In many states, Medihotels have been an innovative way to free up acute inpatient beds by providing an accommodation alternative for patients who do not need intensive nursing care.

The first 10-bed Medihotel at Melbourne’s St Vincent Hospital opened in 2002. It was expanded to a 12 bed facility in 2006 and saved 2,106 acute inpatient bed days in 2013-14. Other savings attributed to the Medihotel was a decrease in the length of stay and a decrease in theatre cancellations.

“A well-functioning MediHotel can provide a significant benefit to an organisation in regard to bed flow management, and provides a cost efficient way of caring for a select group of patients in a supported manner who require access to hospital services without the need for an acute inpatient bed.”

David Hine, St Vincent Hospital Melbourne

In QLD, the State Government said a Medihotel was far more cost-effective than being in a hospital ward.

“It’s the face of modern health care. People who don’t have to be in a hospital can be in a beautiful surrounding with their family.”

Lawrence Springborg, Queensland Health Minister

The success of the Medihotel in Australia has meant that hospitals in most capital cities and many regional centres now run a range of Medihotel models including a hotel area within wards, in separate buildings and within a commercial hotel.

1 David Hine, St Vincent Hospital Melbourne, November 2014.
2 Lawrence Springborg, Queensland Health Minister, 17 February 2014.