

Attachment E

Use Group:	Early years
Use(s):	E. Maternal and child health

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Summaries of the key findings from this assessment are provided in the main Community Infrastructure Needs Analysis Key Findings & Recommendations report.

Detailed assessment results are provided in Part B to this report. Where available, Building Condition audits and Fitness for Purpose assessments that have informed the Suitability Assessment may be requested directly from Moorabool Shire Council.

Definition(s):

Maternal and child health:

Maternal and Child Health (MCH) provide services for families with children 0-6 years, e.g. support for parents, breastfeeding, developmental assessments for babies and children and activities for families. It is funded under a joint MOU between State Government and Local Government. In Victoria Local Government is the infrastructure provider for Maternal & Child Health.

Notes

Revision and update of the Quantity Standards

The Quantity Standards are directly informed by the current levels of public use that existing facilities receive. This is because Council cannot reasonably determine Quantity Standards without first understanding how well, or how poorly, existing facilities are used.

The current Quantity Standards for MCH have been informed by the findings of the Utilisation Assessment. If utilisation rates change in future, the Quantity Standards should be revised to reflect that change.

Existing infrastructure

The following facilities within Moorabool Shire were recorded through the Community Infrastructure Audit and assessed for this report:

Maternal and Child Health Centres	Owner & operator	# consulting rooms	Nurse capacity
Ballan and District Pre School & Maternal Health Centre	Council-owned and operated	2	2
Darley Early Years Hub	Council-owned and operated	2	2
Gell Street Maternal and Child Health Centre	Privately-owned, Council operated	1 ¹	0.6 ²
Wallace & District Preschool and MCH	Council-owned and operated	1	1

Table E1: Existing infrastructure (within Moorabool Shire)

Almost all residents in the Shire access an MCH service provided by Moorabool Council. A small number of families in the west of the Shire have been able to access services provided by Ballarat City Council, but these are not included in the modelling due to a lack of certainty that non-Ballarat residents will always be able to use those services.

¹ Discounted from MCH modelling on direction of EY Service Manager due to uncertainty of the short term lease.

² Room leased by Council for MCH use 3 days per week ($3 \div 5 = 0.6$).

Quantity Assessment findings

Purpose

A strategic assessment to determine whether there are enough facilities in relation to population size.

The Quantity Assessment determines whether there is currently a suitable and sufficient quantity of services or facilities to meet the needs of the population of an area. It seeks to identify any under or over-provision that exists now and, using Council's population forecasts, may exist in the future.

Note regarding notation:

- *Figures that refer to an undersupply are prefixed with '-' and oversupply prefixed with '+'.*
- *The name 'Bacchus Marsh and Surrounds' refers to the urban areas of Darley, Bacchus Marsh and Maddingley.*

The Quantity Standard

Demand for MCH

Council's MCH service managers use a formula to determine where nurses are required and subsequently where their time is allocated. The formula considers various factors, one of which is the number of MCH enrolments in an area. Future forecasts for MCH enrolments are not available however, and this assessment must use a different estimate for demand.

As a proxy for MCH enrolments, Council's population forecasts provide estimates for births as well as children aged 0 years. However, population estimates for the 0-6 age group is considered the most reliable and therefore used by the Quantity Assessment.

MCH supply

MCH supply is measured as the number of consulting rooms. Each MCH Centre comprises one or more consulting rooms from which MCH nurses conduct appointments. Each consulting room is used by an individual nurse at any one time, but different nurses can operate from the same room at different times. In Moorabool, appointments are taken between 8.30am and 5.00pm on weekdays only.

This assessment has assumed that each consulting room has capacity for 1 Equivalent Full Time (EFT) MCH nurse.

Standard

used: *1 full time nurse per 500 children aged 0 to 6 years.
Population trigger³: 50 children aged 0-6 within a 20 minute drive*

Rationale: *The current ratio for Bacchus Marsh and Surrounds (1 full-time nurse per 543 children aged 0-6) is deemed a more important indicator than the ratios for Ballan and rural areas, due to the much higher utilisation of the urban facilities. As the urban area already requires more capacity, a standard of 1 full-time nurse per 500 children has been used.*

³ minimum cohort population required to trigger need for a facility

Findings of the Quantity Assessment

Detailed results of the gap analysis comparing the audit of existing supply with the Quantity Standard are provided in Part B to this report.

Small towns and rural areas:

- The Wallace and District MCH has 1 consulting room, which is currently used 40% of its weekly maximum. The Quantity Assessment shows that by the year 2031 there will be demand for 0.9 EFT (equivalent to 90% utilisation of the existing room), which should be the trigger point to plan for an additional consulting room from 2031 onwards.
- When modelled together as 'Ballan and the Rural West', the current provision of 3 rooms should be sufficient up to the year 2031, beyond which a 4th room will be required.

Ballan:

- When Ballan is modelled on its own, the 2 existing rooms should be sufficient to meet demand up to 2041. However, when modelled along with the Rural West that it also services, the 2 rooms at Ballan and the 1 at Wallace are only sufficient up to 2031.

Bacchus Marsh and Surrounds:

- At present, Council is able to deliver 3.6 EFT of MCH within Bacchus Marsh and Surrounds⁴, through use of all three consulting rooms at the Darley Early Years Hub, and the leased office at Gell Street. One of the rooms at the Hub is intended to support other child and family health and support services, which cannot be delivered due to its full-time use for MCH. As Gell Street is leased short-term by Council, its use cannot be guaranteed beyond 2018. As such, there is an immediate need for Council to secure long-term and full-time access to at least one additional consulting room. This would reduce the risk of Gell Street no longer being available in future and would partially free up the 3rd consulting room at the Hub for use for other children and family services including early intervention, allied health visitations and family support. It would also allow Council to meet the recent increase in demand for MCH due to a spike in births in 2018.
- Another additional consulting room is required by 2021 (bringing the total to 4), ideally within Bacchus Marsh or Maddingley. This suggests that Council should secure 2 additional rooms in the very short term and end the lease at Gell Street.
- By 2031, a 5th room will be required, ideally in Maddingley. And by 2041 a 6th room, again ideally in Maddingley. These figures assume that facilities in Bacchus Marsh and Surrounds will continue to service families across the Rural East.

Alternative means to increase the quantity of MCH provision

It should be noted that the MCH service already provides home visits to families with high needs or who cannot access in-centre MCH. To fill the gaps identified by the Quantity Assessment, Council may choose to build or otherwise secure access to additional consulting rooms. Alternatively, the MCH service could potentially increase service capacity by providing more home visits. While current home visits are funded by Government, any additional home visits would need to be fully funded by Council (at least 1 hour per visit).

Another alternative to increase service capacity would be to extend the availability of in-centre appointments beyond the current Monday to Friday 8am to 5pm model. This would allow more than 1 EFT to be delivered through each consulting room but would incur additional staffing costs in terms of salaries and penalty rates.

Utilisation Assessment findings

Purpose

Facility-specific assessments that determine whether services and facilities have adequate capacity to meet community demand.

The Utilisation Assessment examines the current level of use of facilities and determines whether or not they have capacity to accommodate existing and/or increased use.

The Utilisation Standard

Utilisation of maternal and child health facilities is measured in terms of the equivalent full-time (EFT) nurses currently operating out of each consulting room, where 1 EFT is equal to 1 consulting room.

Standard

used: *Rooms are deemed fully utilised at 95% utilisation and above (i.e. 0.95 EFT)*

Rationale: *While rooms can be fully utilised, a small operating surplus of 5% is allowed for.*

Findings of the Utilisation Assessment

Error! Reference source not found. (overleaf) provides the latest utilisation figures for each centre. Ballan and Wallace are shown together grouped under 'Ballan and the Rural West' to illustrate the substantially lower utilisation of these facilities compare with those in Bacchus Marsh and Surrounds.

Small towns and rural areas:

- The Wallace and District MCH has only 1 consulting room, which is currently used only 40% of its weekly maximum and is therefore sufficient to meet current demand.

Ballan:

- 2 nurses currently operate from the 2 consulting rooms within the Ballan and District MCH for 3 days each per week, which is equivalent to 60% utilisation.

Bacchus Marsh and Surrounds:

- The Darley Early Years Hub is the only Council-owned MCH facility. It provides 2 consulting rooms for full-time use by MCH and a 3rd room intended for use by visiting health practitioners. This 3rd room is currently fully used for MCH due to a shortage of space elsewhere, but should only be a temporary arrangement.
- The room at Gell Street is only available for use by Council 3 days per week, and is fully utilised during that time.

Facilities providing maternal and child health	# consulting rooms	Current nurse EFT ⁴	Utilisation %
Bacchus Marsh & Surrounds:			
Darley Early Years Hub, Darley	2	3 ⁵	150%
Gell Street MCH, Bacchus Marsh	0.6 ⁶	0.6	100%
<i>Sub-total for BM & Surrounds</i>	2.6	3.6	140%
Ballan and the Rural West:			
Ballan & District MCH	2	1.2	60%
Wallace & District MCH	1	0.4	40%
<i>Sub-total for Ballan and the Rural West</i>	3	1.6	53%

Table E2: Utilisation of maternal and child health centres

⁴ Equivalent Full-Time nurses

⁵ MCH Office 1 and 2 occupied full time by MCH = 2 EFT. 3rd room is a consulting room currently in temporary use for MCH due to demand.

⁶ Room leased by Council for MCH use 3 days per week (3÷5 = 0.6).

Travel Accessibility Assessment findings

Purpose

A strategic assessment to determine whether people can travel to services and facilities within a reasonable journey time.

The Travel Accessibility Assessment examines the geographic distribution of existing facilities and their relationship to public transport (train station and bus stops) and car parking. It assesses whether facilities are accessible within a reasonable journey distance or time from where people live and identifies any significant spatial gaps in provision.

The Travel Standard

Standards

used: *Settlements of population less than 2,000: 15 minute drive*
Settlements of population more than 2,000: 10 minute drive
Population trigger⁷: 50 children aged 0-6 within a 20 minute drive

Rationale:

The Travel Standards have been informed by various factors:

- *The geographic distribution of existing facilities and their distance from people.*
- *Minimum populations required to support viable services and facilities.*
- *Council and other service providers' financial ability to deliver and maintain a network of services and facilities.*

The MCH Travel Standards for all small towns under a population of 2,000 have all been set to 15 minutes' drive or less, which is a shorter journey time than for some other service and facility types. This reflects the importance of MCH and the desire of Council to provide MCH within an easy journey of all families. Where this is not possible, the MCH service does provide in-home visits.

Findings of the Travel Accessibility Assessment

*Detailed results of the Travel Accessibility Assessment are provided in Part B to this report. Summary results are shown in **Table E3** and **Map E1** below.*

Small towns and rural areas:

Table E3 below provides tabular results of the assessment for each of the 22 small towns and rural areas; the same results are shown on Map E1.

- The results show that 8 small towns fail their travel standards, mainly those towns in the far south of the Shire:
 - Balliang (closest facility Gell St MCH is 6 minutes beyond the standard and is leased by Council so has poor certainty of tenure. Next closest is Darley Early years Hub at 25 minutes)
 - Balliang East (closest facility Gell St MCH is only 1 minute beyond the standard but is leased by Council so has poor certainty of tenure. Next closest is Darley Early Years Hub at 21 minutes)

⁷ Minimum population required to support a viable service / facility.

- Blackwood (closest facility is Ballan, 5 minutes beyond travel standard and Darley Early Years Hub at 24 minutes)
- Clarendon (closest facility is Wallace, 7 minutes beyond travel standard)
- Dales Creek (Ballan is only 1 minute beyond travel standard)
- Elaine (closest facility is Wallace, 15 minutes beyond travel standard)
- Lal Lal (Wallace is only 3 minutes beyond travel standard)
- Morrisons (closest facility is Ballan, 10 minutes beyond travel standard)
- It should be noted that the MCH service provides home visits to families with high needs or who cannot easily access in-centre services due to travel distance.

Ballan:

- Ballan meets the Travel Standard (10 minute drive) as it has the Ballan and District MCH within town. The Wallace and District MCH is 12 minutes away.

Note: at present, Bacchus Marsh is the only settlement assessed as an urban area. As the population of Ballan grows, it may be appropriate to also apply the urban assessment to Ballan.

Bacchus Marsh and Surrounds:

- The Darley Early Years Hub is the only Council-owned MCH centre serving the entire Bacchus Marsh and Surrounds area. The Gell Street office in Bacchus Marsh is leased by Council for 3 days per week but has no further availability. Given the room at Gell Street is leased, there is no certainty of ongoing use by Council.
- Far southwestern Maddingley is the only part of the urban area not within a 10 minute drive of the Darley Early Years Hub. It is important to note that Gell Street is within 10 minutes, but that it has been excluded from the analysis given its uncertainty of ongoing availability.
- Families in Maddingley currently accessing MCH (or kindergarten) at the Darley Early Years Hub are having to travel for almost an hour if travelling by bus.
- There are no MCH facilities in Maddingley.

Gap analysis results (Travel Accessibility Assessment) - maps

The following maps are provided in Part B to this report ('Detailed assessment data'):

Map E1: Travel Accessibility Assessment results for 'maternal and child health'

	Population within range ⁸	Travel Standard	Standard met/failed	Actual journey time to 2 nearest facilities (as measured)	Comments
Balliang	<100	15 minute drive	✘	21 minutes: Gell Street MCHC 25 minutes: Darley Early Years Hub	No facilities within travel standard. Closest facility is Gell St, 6 minutes beyond.
Balliang East	100-200	15 minute drive	✘	16 minutes: Gell Street MCHC 21 minutes: Darley Early Years Hub	No facilities within travel standard but Gell St is only 1 minute beyond.
Barkstead	<100	15 minute drive	✓	12 minutes: Wallace & District MCH 23 minutes: Ballan & District MCH	1 Moorabool facility within travel standard.
Blackwood	200-500	15 minute drive	✘	20 minutes: Ballan & District MCH 24 minutes: Darley Early Years Hub	No facilities within travel standard. Closest facility is Ballan, 5 minutes beyond.
Bungaree	100-200	15 minute drive	✓	5 minutes: Wallace & District MCH 17 minutes: Ballan & District MCH	1 Moorabool facility within travel standard and another 2 minutes beyond.
Clarendon	100-200	15 minute drive	✘	22 minutes: Wallace & District MCH 30 minutes: Ballan & District MCH	No facilities within travel standard. Closest facility is Wallace, 7 minutes beyond.
Dales Creek	200-500	15 minute drive	✘	16 minutes: Ballan & District MCH 20 minutes: Darley Early Years Hub	No facilities within travel standard but Ballan MCH is only 1 minute beyond.
Dunnstown	200-500	15 minute drive	✓	9 minutes: Wallace & District MCH 20 minutes: Ballan & District MCH	1 Moorabool facility within travel standard.
Elaine	<100	15 minute drive	✘	30 minutes: Wallace & District MCH 33 minutes: Ballan & District MCH	No facilities within travel standard. Closest facility is Wallace at 30 minutes (double the travel standard).
Gordon	500-2000	15 minute drive	✓	7 minutes: Wallace & District MCH 10 minutes: Ballan & District MCH	2 Moorabool facilities within travel standard.
Greendale	500-2000	15 minute drive	✓	12 minutes: Ballan & District MCH 16 minutes: Darley Early Years Hub	1 Moorabool facility within travel standard and another only 1 minute beyond.
Hopetoun Park	500-2000	15 minute drive	✓	10 minutes: Gell Street MCHC 12 minutes: Darley Early Years Hub	2 Moorabool facilities within travel standard.

⁸ Travel Standards have been assigned to small towns according to population ranges. As larger populations can support a wider range of services and facilities, travel distance / time standards are generally less (i.e. better) for larger settlements. For more information regarding this methodology refer to the Moorabool Community Infrastructure Planning Process on Council's website.

	Population within range ⁸	Travel Standard	Standard met/failed	Actual journey time to 2 nearest facilities (as measured)	Comments
Korweinguboora	200-500	15 minute drive	✓	14 minutes: Wallace & District MCH 16 minutes: Ballan & District MCH	1 Moorabool facility within travel standard and another only 1 minute beyond.
Lal Lal	200-500	15 minute drive	✗	18 minutes: Wallace & District MCH 25 minutes: Ballan & District MCH	No facilities within travel standard. Closest facility is Wallace, 3 minutes beyond.
Morrison's	<100	15 minute drive	✗	25 minutes: Ballan & District MCH 34 minutes: Wallace & District MCH	No facilities within travel standard. Closest facility is Ballan, 10 minutes beyond.
Mt Egerton	200-500	15 minute drive	✓	11 minutes: Wallace & District MCH 12 minutes: Ballan & District MCH	2 Moorabool facilities within travel standard.
Mt Wallace	<100	15 minute drive	✓	15 minutes: Ballan & District MCH 24 minutes: Wallace & District MCH	1 Moorabool facility within travel standard.
Myrniong	200-500	15 minute drive	✓	11 minutes: Darley Early Years Hub 11 minutes: Ballan & District MCH	2 Moorabool facilities within travel standard.
Navigators	200-500	15 minute drive	✓	14 minutes: Wallace & District MCH 25 minutes: Ballan & District MCH	1 Moorabool facility within travel standard.
Wallace	200-500	15 minute drive	✓	1 minute: Wallace & District MCH 12 minutes: Ballan & District MCH	2 Moorabool facilities within travel standard.
Yendon	200-500	15 minute drive	✓	14 minutes: Wallace & District MCH 20 minutes: Ballan & District MCH	1 Moorabool facility within travel standard.

Table E3: results of the Travel Accessibility Assessment for small towns

- ✓ Travel Standard met,
- ✗ Travel Standard failed

Suitability Assessment findings

Purpose

Facility-specific assessments that determine whether facilities are fit for their purpose and in adequate physical condition.

The Suitability Assessment seeks to determine how suitable facilities are in terms of supporting the services or community activities delivered through them.

Suitability assessments were only conducted for Council-owned kindergartens. This assessment assumes that privately-operated facilities are in adequate condition and fit for purpose.

The Suitability Assessment has two components: building condition and fitness for purpose.

Building condition vs fitness for purpose

For Council-owned facilities (i.e. Council assets), the Suitability Assessment includes data from audits of building condition conducted in June 2018. The condition audits are a technical assessment of the physical condition and integrity of the structure and fit out of the building.

Fitness for purpose assessments were also conducted. These seek to understand how well existing facilities meet the needs of users and staff and how they compare with contemporary facility standards.

The Suitability Standards

Table E4 (overleaf) provides the 1-to-5 scoring system used by the building condition audits and fitness for purpose assessments. It is important to note that low values represent better condition or fitness for purpose.

Building condition

Standard

used: *Minimum standards for building condition are not used. Instead, condition scores are qualitatively assessed and compared with the fitness for purpose assessment findings.*

Rationale: *During audits, separate condition scores are assigned for different components of buildings such as roof, sub-structure, floor coverings and electrical services. These component scores are entered into Council's asset management systems and subsequently inform the annual maintenance, renewal and upgrade programmes.*

Score		Building condition	Fitness for purpose
1	Very good	Near new condition with no obvious signs of wear.	Fully meets service needs with no impact on delivery of services/activities, AND No identified risks to users or building integrity
2	Good	Good condition with limited signs of wear. Does not require any special attention.	Minor impact on ability to deliver the required services/activities, OR Minor identified risks to users or building integrity
3	Fair	Generally good condition with some evidence of minor defects in local spots. Requires some planned maintenance to prevent further deterioration and to return it to a very good condition.	Moderate impact on ability to deliver the required services/activities, OR Moderate identified risks to users or building integrity
4	Poor	Evidence of significant defects in multiple locations. Requires major maintenance to prevent further deterioration and to return it to a very good condition. Will need to be renewed, upgraded or disposed in near future. Is reflected via inclusion in the 10 year Capital Works Plan.	Significant impact on ability to deliver the required services/activities, OR Significant identified risks to users or building integrity
5	Very poor	In need of major repair and referred to the capital works program for renewal / replacement / disposal. Will need to be renewed, upgraded or disposed in near future. Is reflected via inclusion in the 2-5 year Capital Works Plan.	Severe impact - required services cannot be delivered/activities, OR Severe identified risks to users or building integrity
6	End of service life	No remaining service potential.	<i>Not used</i>

Table E4: scoring system used for the Suitability Assessment

Fitness for purpose

Two overall scores are determined for each facility: one for current fitness for purpose and another for future fitness for purpose (notionally 5 years' time). Both overall scores are then classified as per the standards below.

Standards

used:	1 to 2: 'Fit for purpose'	equivalent to the top 25%
	2 to 3: 'Attention required (minor)'	equivalent to upper 25% to 50%
	3 to 4: 'Attention required (major)'	equivalent to lower 25% to 50%
	4 to 5: 'Unfit for purpose'	equivalent to bottom 25%

Rationale: *The above scores represent 25% bands where the top 25% indicate facilities that are fit for purpose and the bottom 25% unfit. Scores in between are graded into facilities that exhibit major and minor issues.*

Findings of the Suitability Assessment

*Detailed Building Condition audit and Fitness for Purpose assessment data may be requested directly from Moorabool Shire Council. Summary results are provided through **Table E5** (overleaf).*

Small towns and rural areas:

The Wallace MCH requires various minor works to the interior fit out to make it fit for purpose. A more major issue is that it is a single-office facility in an isolated location. While it is connected to the kindergarten, MCH nurses are still essentially on their own, especially when the kindergarten is not in operation. The contemporary model for MCH is for dual-office facilities, but demand in west Moorabool is not sufficient to require 2 offices. Therefore, to overcome any perceived risks to lone nurses, better integration between the MCH and preschool would be desirable.

Ballan:

A number of significant fit out and configuration issues were identified for the Ballan and District Preschool, including:

- Dated appearance. Signage in need of update. Issues with toilets, small kitchen and small office.
- Generally undersized.
- Poor configuration, legibility and undersized. Does not suit future integrated service model.
- No accessible toilet or baby change serving the MCH

There is co-location with the preschool but no integration (separate building), therefore the MCH nurses are effectively on their own. The MCH service has suggested it may be better to relocate the MCH to integrated facility, potentially closer to the primary school.

Bacchus Marsh and Surrounds:

- The Darley Early Years Hub is fit for purpose other than very minor issues.
- Gell Street MCH is not owned by Council and was therefore not assessed.

Name	Building condition	Fitness for purpose			
		Score - Now	Classification - Now	Score - Future	Classification - Future
Small towns and rural areas					
Wallace and District MCH	• All components good	2.2	Attention required (minor)	2.2	Attention required (minor)
Ballan					
Ballan and District MCH	• All components good	3.5	Attention required (major)	4.0	Unfit for purpose
Bacchus Marsh and Surrounds					
Darley Early Years Hub	• All components good	1.7	Fit for purpose	1.7	Fit for purpose
Gell Street MCH	<i>Not assessed</i>				

Table E5: overall Suitability Assessment findings for Council-owned facilities

Child Safety Standards and multipurpose facilities

It is important to note that the Victorian Government Child Safety Standards apply compulsory minimum standards to all organisations that provide services to children, including local government. The standards may have implications for community infrastructure that services both children and adults on the same site at the same time, such as an early years and community hub, library or recreation facility.

It is recommended that, for any project building or modifying facilities that service both children and adults at the same time, the project manager should consult with Council's Child Safety officer to ensure a risk management approach to child safety.