Yarrabah opening a big step toward community control

Deputy Premier and Minister for Health Paul Lucas and Emergency Services Minister Neil Roberts today opened the new $16.3 million Gurriny Yealamucka Primary Health Care Service at Yarrabah.

The new Yarrabah service brings together Queensland Health, the Queensland Ambulance Service (QAS), and Gurriny Yealamucka Health Service Aboriginal Corporation in a unique partnership that will become the model for other, similar projects.

Mr Lucas said the primary health care centre co-locates a wide range of medical, community and other health services and their existing staff in a brand new building.

“This includes Yarrabah’s QAS station and a multi-purpose meeting room and boardroom for the community,” Mr Lucas said.

“By co-locating existing primary health services under the one roof, along with the QAS station and community facilities, the new Yarrabah centre aims to improve service delivery and encourage a holistic approach to health.

“This co-location sets the stage for more detailed discussions and consultations with our partner, Gurriny Yealamucka Health Services Aboriginal Corporation, about how we can continue to increase the community’s involvement in the planning, allocation of resources and delivery of health services here in Yarrabah.

“The new health care service will aim to be a valued part of the community by giving a friendly welcome, a strong connection to the outdoors, and provision for future expansion of services.”

Emergency Services Minister Neil Roberts said Yarrabah’s two paramedics attended more than 650 jobs last financial year – 170 of which were life threatening emergencies.

“This investment recognises the commitment our paramedics make to the Yarrabah community and the importance and value we place on providing the community with health services of the highest standard,” Mr Roberts said.

“The importance of this state-of-the-art health facility in a community such as Yarrabah cannot be underestimated.

“The opportunity this centre presents for health services to come together and work as a united front – providing a one stop shop – is immeasurable.

“One of the fantastic features of this joint facility is that paramedics can drive their patient into the station and deliver them directly into the centre’s emergency facility through an adjoining purpose-built door.

“This saves valuable time and ensures paramedics and health centre staff can continue to work together to achieve the best possible outcome for the patient.”

Mr Lucas said it was fitting that the new building would be named after Sister Muriel Stanley, who was born in Yarrabah in 1918 when the community was an Anglican mission.

“This building is a worthy memorial to her and her dedication to improving Indigenous health and supporting Indigenous peoples,” he said.
Importantly, today’s opening marks the start of a process to transition Queensland Health’s primary health services in discrete Indigenous communities towards greater community control.

“The new Gurriny Yealamucka Primary Health Care Service at Yarrabah – along with Mapoon and Kowanyama on Cape York – is one of the three pilot sites in Queensland chosen for the development of programs to transition services to greater community control,” Mr Lucas said.

“I’ve invited the Commonwealth Government and the Queensland Aboriginal and Islander Health Council (QAIHC) to join Queensland in developing a plan for transitioning these health services toward greater community control.

“Extensive consultation with staff and people residing in these communities is also being planned, and we are in the process of establishing representative groups to discuss the most suitable means of achieving this aim.

“Notably, transition of health services won’t commence until all staff and communities have been fully consulted and the Queensland Government has had an opportunity to consider all the issues raised.”

Queensland Health services at Yarrabah currently include emergency triage, outpatient palliative care, primary clinical care, stabilisation and resuscitation, pharmaceutical dressing, immunisation, antenatal and post-natal, child health, health promotion and education, renal, preventative and interventional school screenings, support for victims of sexual and domestic violence, and transport services to larger centres for urgent and elective medical needs.

The centre will also provide facilities for visiting health specialists such as mental health, alcohol and drug services, the child development unit, diabetes services, the eye health team, social workers, GPs, TB screening and others.

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