



**Privacy statement:** The collection of this information is authorised under Chapters 5 and 6 of the Public Service Act 2008. Your personal details will not be disclosed to any other third party without your consent, unless required to do so by law.

**Important:** Complete one application per health facility.

**Section 1: Facility details**

Health facility name*		Health facility type*	
Weststate Private Hospital		Private hospital	
Physical address	Suburb	State	Postcode
29-37 Ingham Road	Townsville	QLD	4 8 1 0
Approval holder name*		Approval reference number*	
Weststate Private Pty Ltd		1904/17	
Key contact name*		Position	
Ms Leith MacMillan		Compliance Manager	
Contact number	Email address		

**Section 2: Request details**

Estimated build start date (if known)	Estimated build end date (if known)
01.02.2021	29.03.2022
Provide the details of construction stages (if applicable)	
List any other extenuating circumstances	

**Section 3: Supporting documentation**

Please tick to indicate the relevant supporting documentation is attached with this application.  
The requirements for this application are referenced in section 25(3) (b) of the *Private Health Facilities Act 1999*.

Licence fee\*

Amount\*

\$245.00

**Section 4: Submission details**

I am the key contact person as detailed above (section 1)

Date of submission\*

06.07.2020

**Office use only**

QLD Health reference	Customer file number	Licence number
Comments		

# Certificate of Registration of a Company

This is to certify that

**WESTSTATE PRIVATE HOSPITAL LIMITED**

**Australian Company Number 646 580 967**

is a registered company under the Corporations Act 2001 and  
is taken to be registered in Queensland.

The company **is limited by shares.**

The company is a **public** company.

The day of commencement of registration is  
**the fourteenth day of December 2020.**



CERTIFICATE

Issued by the  
Australian Securities and Investments Commission  
on this fourteenth day of December, 2020.

James Shipton  
Chair



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**Important:** Complete one application per health facility.

**Section 1: Facility details**

Approved proposed health facility name*		Health facility type	
Weststate Private Hospital		Private hospital	
Physical address	Suburb	State	Postcode
29-37 Ingham Road	Townsville	QLD	4 8 1 0
Approval holder name*		Approval reference number*	
Weststate Private Hospital Pty Ltd		1904/17	
Key contact name*	Position		
Ms Leith MacMillan	Compliance Manager		
Contact number	Email address		

**Section 2: Request details** (provide details only where a change to the original approval has occurred)

New proposed health facility name

Weststate Private Hospital

Provide the currently approved and newly proposed number of beds, bays and rooms for each of the categories listed below.

Type	Category	Current approved number	New proposed number
Beds	Ward (does not include a surgical table, recovery trolley, treatment bay, discharge lounge/bed/chair)	22	26
Specialty beds	Cardiac (Coronary) Care Unit		
	Intensive Care Unit	4	0
	Neonatal Intensive Care Cots (NICU)		
	Neonatal Special Care Cots		
	Children's Intensive Care Service (PICU)		
	Paediatric (dedicated)		
	Mental Health		
	Palliative (dedicated)		
	Rehabilitation		
	Maternity		
<b>Total beds and specialty beds</b>			26
Specialty bays/rooms	Chemotherapy bays		
	Renal dialysis bays		
	Endoscopy procedure rooms		
	Intravenous therapy bays		
	Operating theatres	5	5
	Procedure rooms		
	Cardiac catheter labs	1	0
	Emergency department resuscitation bays		
	Emergency department bays		
	First stage recovery bays (includes day surgery units, endoscopy units, cardiac catheter labs, interventional cardiology areas, medical imaging areas)	24	27

**Section 3: Services** (provide details only where a change to the original approval has occurred)

Provide a list of the clinical services and levels you intend to offer.

Refer to the relevant [Clinical Services Capability Framework](#) (CSCF) service module for further information. Use the clinical service description template ([reference G](#)) and complete one document for each service you intend to offer. Provide a copy of the clinical services and levels that were originally approved for comparison.

## Section 4: Supporting documentation

Please tick to indicate the relevant supporting documentation is attached with this application (Ref G, H and L are required when a change has occurred since the initial approval to build was granted).

Refer to the [Private Health Licensing Forms and Templates](#) for attachment descriptions and templates. The requirements for this application are referenced in section 30(2) (a) of the *Private Health Facilities Act 1999*.

Licence fee\*

Amount\*

\$497.50

Current approval\* (original paper copy to be provided)

[Ref G] Clinical Services Capability Framework (CSCF) service modules (refer to section 3)

[Ref H] Building floor plans and description of the area to be licensed

[Ref L] Mental health services (if applicable)

## Section 5: Submission details

I am the key contact person as detailed above (section 1)

Date of submission\*

15.12.2020

## Office use only

QLD Health reference

Customer file number

Licence number

Comments



**ASIC**

Australian Securities & Investments Commission

# Current Company Extract

**Name:** WESTSTATE PRIVATE HOSPITAL LIMITED

**ACN:** 646 580 967

Date/Time: 28 January 2021 AEST 05:16:37 PM

This extract contains information derived from the Australian Securities and Investments Commission's (ASIC) database under section 1274A of the Corporations Act 2001.

Please advise ASIC of any error or omission which you may identify.

EXTRACT

Organisation Details	Document Number
<b>Current Organisation Details</b>	
Name: WESTSTATE PRIVATE HOSPITAL LIMITED	5ECK56901
ACN: 646 580 967	
Registered in: Queensland	
Registration date: 14/12/2020	
Next review date: 14/12/2021	
Name start date: 14/12/2020	
Status: Registered	
Company type: Australian Public Company	
Class: Limited By Shares	
Subclass: Unlisted Public Company	

Address Details	Document Number
<b>Current</b>	
Registered address: PVW PARTNERS, 52 Walker Street, TOWNSVILLE QLD 4810	5ECK56901
Start date: 14/12/2020	
Principal Place Of Business address: 7 Turner Street, PIMLICO QLD 4812	5ECK56901
Start date: 14/12/2020	

Contact Address
Section 146A of the Corporations Act 2001 states 'A contact address is the address to which communications and notices are sent from ASIC to the company'.
<b>Current</b>
Address: PO BOX 1047, TOWNSVILLE QLD 4810
Start date: 23/12/2020

Officeholders and Other Roles	Document Number
<b>Director</b>	
Name: KAUSHIK HAZRATWALA	5ECK56901
Address: 5B Mariners Drive, TOWNSVILLE CITY QLD 4810	
Born: 20/01/1970, , INDIA	
Appointment date: 14/12/2020	
Name: KIRAN HAZRATWALA	5ECK56901
Address: 31 Waterlily Circuit, DOUGLAS QLD 4814	
Born: 18/08/1968, , INDIA	
Appointment date: 14/12/2020	
Name: PETER JAMES COLLETON MCEWEN	5ECK56901
Address: 13 Queen Street, NORTH WARD QLD 4810	
Born: 07/03/1967, , PAPUA NEW GUINEA	
Appointment date: 14/12/2020	
<b>Secretary</b>	
Name: KAUSHIK HAZRATWALA	5ECK56901

Address: 5B Mariners Drive, TOWNSVILLE CITY QLD 4810  
 Born: 20/01/1970, , INDIA  
 Appointment date: 14/12/2020

**Ultimate Holding Company**

Name: WESTSTATE INVESTMENTS PTY LTD 5ECK56901  
 ACN: 640 186 689  
 ABN: 23640186689

**Share Information****Share Structure**

Class	Description	Number issued	Total amount paid	Total amount unpaid	Document number
ORD	ORDINARY SHARES	1000	1000.00	0.00	5ECK56901

**Documents**

Note: Where no Date Processed is shown, the document in question has not been processed. In these instances care should be taken in using information that may be updated by the document when it is processed. Where the Date Processed is shown but there is a zero under No Pages, the document has been processed but a copy is not yet available.

Date received	Form type	Date processed	Number of pages	Effective date	Document number
14/12/2020	218 Constitution Of Company	14/12/2020	50	14/12/2020	031117269
14/12/2020	201A Application For Registration As A Public Company	14/12/2020	3	14/12/2020	5ECK56901

\*\*\*End of Extract of 2 Pages\*\*\*

APPROVAL NUMBER: Approval1904/17



Queensland  
Government

Department of Health

Private Health Facilities Act 1999  
Private Health Facilities Regulation 2016

## APPROVAL FOR A PRIVATE HEALTH FACILITY

for

### Weststate Private Hospital Limited

proposed licensee of

### WESTSTATE PRIVATE HOSPITAL

located at  
29-37 Ingham Road TOWNSVILLE QLD 4810

The proposed health facility is to be a private hospital licensed for **30 beds**.

Services	CSCF Level	Services	CSCF Level
Anaesthetic Services - Children's > 1 Years	Lvl 3	Perioperative Services - Day Surgery Services	Lvl 4
Anaesthetic Services	Lvl 3	Perioperative Services - Endoscopy Services	Lvl 4
Close Observation Services	Lvl 3	Perioperative Services - Operating Suite Services	Lvl 3
Medical Imaging Services	Lvl 4	Perioperative Services - Post-Anaesthetic Care Services	Lvl 3
Medication Services	Lvl 4	Surgical Services - Children's > 1 years	Lvl 3
Nuclear Medicine Services	Lvl 4	Surgical Services	Lvl 3
Pathology Services	Lvl 4		

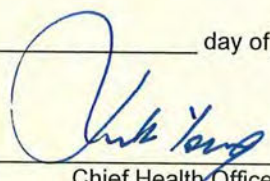
The approval is issued subject to compliance with the Private Health Facilities Act 1999 and the following conditions:

1. Notification of a prescribed change within 21 days of the prescribed change according to Section 23(4) of the Private Health Facilities Act 1999 and Section 6(1) of the Private Health Facilities Regulation 2000.
2. The type of approved health services are those as stated on the approval.

This approval shall commence on the **1 February 2021**

The approval shall, unless sooner cancelled, suspended or surrendered, expire on the **30 September 2022**

Dated at Brisbane this 15<sup>th</sup> day of February 2021

  
\_\_\_\_\_  
Chief Health Officer

Amendments:

- Change to the name of the licensee from. Weststate Private Hospital Pty Ltd to Weststate Private Hospital Limited.





Enquiries to: Helen Rees  
Director  
Private Health Regulation Unit  
Chief Medical Officer and  
Healthcare Regulation Branch  
Telephone: 3708 5325  
File Ref: C-HFA-1356-001

Queensland Health

Mr Neil Henderson  
Chief Executive Officer  
Weststate Private Hospital  
29-37 Ingham Road  
TOWNSVILLE QLD 4810

Email: [neilh@weststate.com.au](mailto:neilh@weststate.com.au)  
[leith@dayhospitalconsulting.com.au](mailto:leith@dayhospitalconsulting.com.au)

Dear Mr Henderson

**Approval No. 1904/17**  
**Private Health Facilities Act 1999**

Thank you for your application, which was forwarded on your behalf by Ms Leith MacMillan, and received on 27 January 2021.

The application was for a change to an approval in accordance with Section 30 of the *Private Health Facilities Act 1999*.

I wish to advise that I am pleased to grant the change to the approval for:

- Change to the name of the licensee from Weststate Private Hospital Pty Ltd. Has now changed to the operating entity of Weststate Private Hospital Limited.

The Approval No 1904/17 will be duly amended, effective from 1 February 2021 and sent to you in due course.

If you require further clarification on this matter, please do not hesitate to contact the Private Health Regulation Unit, on (07) 3708 5325 or via email at [Private\\_Health@health.qld.gov.au](mailto:Private_Health@health.qld.gov.au).

Yours sincerely

Dr Sonya Bennett  
**Acting Queensland Chief Health Officer**  
**Queensland Health**  
09 / 02 / 2021



Queensland Health

Enquiries to: Helen Rees  
 Director  
 Private Health Regulation Unit  
 Chief Medical Officer and  
 Healthcare Regulation Branch  
 Telephone: 3708 5325  
 File Ref: C-HFA-1356-001

Mr Neil Henderson  
 Chief Executive Officer  
 Weststate Private Hospital  
 PO Box 1434  
 TOWNSVILLE QLD 4810

Email: [REDACTED]

Dear Mr Henderson

**Approval No. 1904/17**  
***Private Health Facilities Act 1999***

I refer to the 'Approval for a Private Health Facility' dated 1 February 2021 (**the Approval**) given by the Chief Health Officer, following submissions received by the Private Health Regulation Unit, Queensland Health (**PHRU**) on your behalf from Ms Leith MacMillan on 27 January 2021. The Approval:

- named 'Weststate Private Hospital Limited' as the approval (authority) holder;
- named the private health facility as 'Weststate Private Hospital';
- contained a footnoted amendment to *Change to the name of the approval (authority) holder from Weststate Private Hospital Pty Ltd to Weststate Private Hospital Limited.*

It has recently come to light that the Approval is invalid and, pursuant to section 24AA of the *Acts Interpretation Act 1954* (Qld), I repeal the Approval and the decision to give the Approval.

The Approval was purportedly obtained under section 30 of the *Private Health Facilities Act 1999* (Qld). There is however no legislative authority to give the Approval following an application under section 30 of the *Private Health Facilities Act 1999* (Qld) which is limited to applications made by an existing approval holder. There is an existing Approval (No. 1904/17) for 'Weststate Private Pty Ltd', however, not for 'Weststate Private Hospital Limited', nor any other named entity.<sup>1</sup>

Section 30 of the *Private Health Facilities Act 1999* does not authorise Approval No. 1904/17 to be amended to change the name of the authority holder from 'Weststate Private Pty Ltd' to 'Weststate Private Hospital Limited' (or any other named entity). If another entity (e.g. Weststate Private Hospital Limited) seeks to hold an approval under the *Private Health Facilities Act 1999* it must make an initial application for an approval under Part 5 of the *Private Health Facilities Act 1999*.

<sup>1</sup> According to the Australian Business Register website and the ASIC Registry Search website, 'Weststate Private Pty Ltd', which is the licensee named for Approval No. 1904/17, is a separately listed company to 'Weststate Private Hospital Limited'

The Approval, therefore, does not authorise 'Weststate Private Hospital Limited' to be an approval (authority) holder under the Private Health Facilities Act 1999 for the proposed private health facility named 'Weststate Private Hospital'. Further, 'Weststate Private Hospital Limited' is not an approval holder under the *Private Health Facilities Act 1999*.

**It is important to note that this means no regulated activities under the *Private Health Facilities Act 1999* may be carried out under the name of 'Weststate Private Hospital Limited' as a proposed licensee for a proposed private health facility named 'Weststate Private Hospital', which, based on publicly available information, appears to be due for completion in 2023.**

**The Approval No. 1904/17 for the entity named 'Weststate Private Pty Ltd' as a proposed licensee for the proposed private health facility 'Weststate Private' Hospital' to be located at 29-37 Ingham Road, Townsville QLD 4810, currently remains valid until 30 September 2022.**

In addition, I am informed that, based on information held on the ASIC Registry Search website, 'Weststate Private Pty Ltd' is under External Administration and in liquidation which may impact its suitability to continue to hold an approval under section 13(g) and section 13(h) of the *Private Health Facilities Act 1999*. Accordingly, PHRU may undertake any authorised investigations and subsequent regulatory actions deemed appropriate in the circumstances.

**Please immediately return:**

- the Approval dated 1 February 2021 given in the name of 'Weststate Private Hospital Limited' as the approval (authority) holder of 'Weststate Private Hospital', and any copies of the Approval to **GPO Box 48, Brisbane, Queensland, 4001**.

It is also important to note that authority holders have mandatory and statutory obligations under section 143A of the *Private Health Facilities Act 1999* (**see Appendix attached**).

If you require further clarification on this matter, please do not hesitate to contact the Private Health Regulation Unit, on (07) : [REDACTED] or via email at [REDACTED]@health.qld.gov.au.

Yours sincerely



Dr John Gerrard  
**Queensland Chief Health Officer and  
 Deputy Director-General**

24/3/22

## Appendix

### 143A Authority holder to notify chief health officer of certain events

- (1) An authority holder must give the chief health officer notice, in the approved form, of the happening of any of the following events within 21 days of becoming aware of the event happening—
- (a) the authority holder, or an associate of the authority holder, is affected by bankruptcy action, or control action under the Corporations Act;
  - (b) any of the following persons is convicted of an indictable offence or an offence against a corresponding law—
    - (i) the authority holder;
    - (ii) an associate of the authority holder;
    - (iii) if the authority holder is a corporation, an executive officer of the authority holder;
  - (c) the equivalent of an authority under a corresponding law, held by the authority holder or an associate of the authority holder, is suspended or cancelled;
  - (d) if the authority holder is an individual who jointly holds the authority with 1 or more other individuals, the other individual or any of the other individuals dies.

Maximum penalty—50 penalty units.

- (2) For subsection (1)(a), an authority holder or an associate of an authority holder is affected by bankruptcy action if the authority holder or associate—
- (a) is bankrupt; or
  - (b) has compounded with creditors; or
  - (c) as a debtor, has otherwise taken, or applied to take, advantage of any law about bankruptcy.
- (3) For subsection (1)(a), an authority holder or an associate of an authority holder is affected by control action under the Corporations Act if the authority holder or associate—
- (a) has executed a deed of company arrangement under that Act; or
  - (b) is the subject of a winding-up (whether voluntarily or under a court order) under that Act; or
  - (c) is the subject of an appointment of an administrator, liquidator, receiver or receiver and manager under that Act.