



# **SHIRE OF KONDININ**

## **MINUTES OF MEETING**

**Medical and Community Services**

**Committee Meeting**

**ALL OPEN AND CONFIDENTIAL ITEMS**

**Medical and Community Services**

**Committee Meeting**

Held at the Kondinin Council Chambers on 20 May 2026

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## **1 OPENING OF MEETING**

The Presiding Member opened the meeting at 1pm.

## **2 ACKNOWLEDGEMENT OF TRADITIONAL OWNERS AND DIGNITARIES**

## **3 RECORDING OF ATTENDANCE**

### **3.1 ATTENDANCE**

Cr B Browning (Presiding Member), Cr P Green (Deputy Presiding Member), Cr T Smeed, Bruce Wright, Manager Planning & Assets Mrs T Young, Mrs A Kemp, Cr D Pool, Cr Gangell

### **3.2 ATTENDANCE BY TELEPHONE OR INSTANTANEOUS COMMUNICATION**

Nil

### **3.3 APOLOGIES**

Nil

### **3.4 APPROVED LEAVE OF ABSENCE**

Nil

### **3.5 DECLARATIONS OF DISCLOSURES OF INTEREST**

Nil

## **4 APPLICATION FOR LEAVE OF ABSENCE**

Nil

## **5 PUBLIC TIME**

### **5.1 PUBLIC QUESTION TIME**

Nil

### **5.2 PUBLIC STATEMENT TIME**

Nil

## **6 QUESTIONS FROM MEMBERS WITHOUT NOTICE**

Nil

**7 ANNOUNCEMENTS BY PRESIDING MEMBERS WITHOUT DISCUSSION**

Nil

**8 DECLARATION OF MEMBERS TO HAVE GIVEN DUE CONSIDERATION TO ALL MATTERS CONTAINED IN THE AGENDA BEFORE THE MEETING**

Confirmed by all Members

**9 CONFIRMATION OF MINUTES OF PREVIOUS MEETINGS**

## 10 REPORTS OF OFFICERS

### 10.1 PLANNING & ASSETS

#### 10.1.1 Community Development Report

**FILE NUMBER:**

**DATE:** 14 May 2026

**AUTHOR:** Amanda Kemp, Community Development Officer

**AUTHORISED OFFICER:** Bruce Wright, Chief Executive Officer

**DISCLOSURE OF INTEREST:** Author - nil  
Authoriser - nil

**ATTACHMENTS:** Nil

#### UPDATE

Several well-attended community events and engagement activities have taken place across the Shire:

-Kondinin CRC Easter Egg Hunt

-Scouts WA Overnight Camp (Hyden) – Visits to Wave Rock and Mulka’s Cave, along with a community clean-up of the industrial area

-ANZAC Day Dawn Services:

Kondinin – approximately 300 attendees

Hyden – approximately 160 attendees

Attendance numbers were strong in both towns and did not decline despite fuel cost pressures.

Hyden recorded higher attendance than in previous years, Thanks to BBB Site services staff for donating their time to help with Breakfast and the donation of 3 Banners to use for Anzac Services.

Community Meetings held in Karlgarin, Kondinin and Hyden, it was fantastic to see so many of our community participating and engaging with council on our future.

Council continues to support forthcoming community events and planning initiatives:

-Kondinin CRC Community Lunch and Biggest Morning Tea – 12 May 2026

-Hyden CRC Biggest Afternoon Tea and Bake-Off – 17 May 2026

-Blue Tree Project Community BBQ Kondinin – 23 June 2026

-Brendan Cullen – *The Desert Swimmer* (Mental Health and Succession Planning), Hyden – August 2026 (pending confirmation)

-Planning underway with the Kondinin Art Group for the Kondinin Art Acquisition Prize

-Planning underway for September Markets in Hyden

-Planning underway for Kondinin Twilight Markets

- Looking into the options available for installation of Smiley Face Digital Sped Signs(similar to Narembeen) for installation on the main Highways coming through Kondinin and Hyden Townsites.

The Committee noted the report. Cr Browning noted that the Community Lunch was a great success.

## 10.2 CHIEF EXECUTIVE OFFICER

### 10.2.1 Shire of Kondinin - Medical Services & Aged Care - Advocacy Position

**FILE NUMBER:****DATE:** 14 May 2026**AUTHOR:** Bruce Wright, Chief Executive Officer**AUTHORISED OFFICER:** Bruce Wright, Chief Executive Officer**DISCLOSURE OF INTEREST:** Author - Nil

Authoriser - Nil

**ATTACHMENTS:**

1. Nous Report - Integrated Care Australia Report - *Under Separate Cover*
2. LGRHFA - Information - *Under Separate Cover*

**RECOMMENDATION**

That the Medical and Community Services Committee:

1. Endorses the building on existing work undertaken by the Shire to initiate a comprehensive Shire Health and Aged Care Needs Analysis.
2. Endorses the development of an Integrated Health and Ageing Strategic Policy framework to inform the Council Plan.
3. Endorses and recognises health and aged care as a combined strategic priority, noting the service interdependences within the Shire.
4. Endorses membership and participation in the Local Government Rural Health Funding Alliance (LGRHFA) to strengthen advocacy.

**SUMMARY**

This report seeks Committee endorsement that health services and aged care must be addressed as a single, integrated system essential to the Shire's long-term sustainability.

Local aged care capacity remains critically limited which constrains the ability to meet existing and future demand. Community feedback from the 2026 Shire Community Survey further confirms that residents perceive clear gaps in both aged care and health services, including limited access to aged care facilities, insufficient home care support, and an absence of strategic planning for service expansion.

At the same time, while significant funding exists at the Commonwealth and State levels, there is strong evidence that rural communities are not consistently able to access these resources, and that responsibility for maintaining essential services is increasingly shifting onto local government. Information provided through the Local Government Rural Health Funding Alliance confirms that some rural councils are already contributing substantial proportions of their rate revenue to sustain primary health services due to these systemic funding gaps.

In response to these challenges, this report recommends a structured approach focused on needs analysis, targeted advocacy, alignment with available funding programs and participating in

coordinated national advocacy through the Local Government Rural Health Funding Alliance (which has been established to address these funding and service inequities in rural and regional communities).

## **VOTING REQUIREMENT**

Simple Majority

## **COUNCIL'S ROLE**

### **Advocacy**

When Council advocates on its own behalf or on behalf of its community to another level of government/body/agency.

## **BACKGROUND**

The Shire of Kondinin operates within a regional service environment where aged care and health services are closely linked. Current aged care facilities have a limited scale which in turn restrict any ability to respond to increasing demand in an ageing community.

The local healthcare system functions as an integrated, multi-purpose service model, combining aged care, hospital care and community health services. This structure means that the availability of aged care is directly dependent on the sustainability of local health services, including access to general practitioners and allied health support.

Regional communities face structural challenges that include workforce shortages, constraints associated with a small population base and limited-service scale and reduced viability for service providers. These challenges mean that without a strategic intervention, service gaps will continue to widen.

### Community Survey

The Shire's 2026 Community Survey provides clear evidence of community concern regarding health and aged care services.

Respondents identified a need for expanded aged care facilities, improved access to services and additional support for older residents. Comments included direct calls for increased aged care housing, improved service access and concerns regarding the limited availability of Yeerakine Lodge. Feedback also identified gaps in home-based care, with respondents noting the absence of support services for elderly residents wishing to remain in their homes.

Importantly, the survey also reflects an expectation that Council will play a role in addressing these issues, particularly where other levels of government are perceived to be absent. At the same time, respondents acknowledged that the Shire has limited financial capacity and should not be required to fully fund these services.

This reinforces the need for a clearly defined strategic role that focuses on advocacy and facilitation rather than direct service provision.

### Funding Framework

Australia's aged care system is primarily funded by the Commonwealth Government, with total expenditure of approximately \$36.4 billion annually. Recent federal budgets include an additional \$3.7 billion investment over four years to expand residential care capacity, support home care reforms and to strengthen the workforce.

Key Commonwealth funding streams include residential aged care subsidies, home care packages and capital funding programs aimed at increasing bed supply, particularly in underserved regions. These provide potential opportunities for regional communities to develop or expand aged care infrastructure where viable proposals can be demonstrated.

At the State level, the Western Australian Government has committed approximately \$140 million toward aged care and related health initiatives, including a \$100 million low-interest loan scheme to support infrastructure development and integrated care models.

Despite these funding streams, access remains a challenge for smaller rural communities which often lack the scale or provider interest required to attract investment. This creates a reliance on local government facilitation or intervention.

The Local Government Rural Health Funding Alliance has confirmed that some rural councils are already contributing significant proportions of their rate revenue to sustain essential health services, highlighting the financial risks to regional local government.

#### Integrated Health and Ageing Strategic Policy Framework

An Integrated Health and Ageing Strategic Policy framework reflects contemporary planning practice by aligning health, aged care and community services into a coordinated, place-based system. This approach is consistent with national and international policy directions, including the Australian Government's integrated care initiatives ([Integrated Care and Commissioning initiative | Australian Government Department of Health, Disability and Ageing](#)), the World Health Organisation (WHO) Integrated Care for Older People (ICOPE) model ([Ageing and Health](#)), and Australia's Rural Health Framework ([National Strategic Framework for Rural and Remote Health](#)), all of which emphasise coordinated, person-centred care and strong local partnerships.

The framework should provide a clear policy position for Council as an advocate and facilitator, supported by evidence of local need, including population trends, service capacity (such as Yeerakine Lodge), and identified gaps in health and aged care. It should also address enabling factors such as workforce, housing and infrastructure, while aligning with available State and Commonwealth funding. Finally, it should set out a practical implementation and advocacy approach, with defined priorities, partnerships and measurable outcomes to guide long-term delivery and inform the Council Plan.

The framework will be developed through a staged, evidence-based process. It will begin with a comprehensive needs analysis, supported by stakeholder engagement to identify service gaps, workforce constraints and future demand. This evidence will inform the preparation of a draft strategic framework outlining Council's policy position, priorities, funding approach and advocacy actions. The framework will then be finalised, adopted and supported by an action plan.

Although not strictly time bound, the following timeline is proposed for consideration:

### Short Term (0–12 months)

Undertake a comprehensive Health and Aged Care Needs Analysis to inform the framework, formalise advocacy priorities, participate in the LGRHFA, and engage with key stakeholders to identify immediate service gaps and risks.

### Medium Term (1–3 years)

Develop partnerships with service providers, align and submit funding applications, and progress planning for expanded aged care capacity and improved service delivery models in line with the strategic framework.

### Long Term (3–10 years)

Facilitate the delivery of additional aged care capacity, strengthen local health services, and continue coordinated advocacy to support sustainable funding and long-term service outcomes guided by the framework.

## **FINANCIAL**

Not applicable at this time

## **RISK**

There is a risk that aged care demand will continue to increase without a corresponding increase in service capacity resulting in residents being forced to relocate outside the district. There is also a risk that declining access to primary health services will undermine the viability of existing aged care services, further worsening service gaps.

Financially, there is a growing risk that local government will be required to fund services beyond its core mandate, reducing capacity to invest in infrastructure and essential services.

## **POLICY**

This report seeks endorsement to commence policy development.

## **STATUTORY**

Council's involvement is supported by the Local Government Act 1995 (WA), including its general functions to provide for the wellbeing of the community and within its power, to provide financial assistance where appropriate.

However, Council must ensure that its actions remain within its statutory role and do not result in the assumption of responsibilities that sit with other levels of government.

## **STRATEGIC**

### **Theme**

1. COMMUNITY

### **Goal**

- 1.2 Facilitate and advocate for quality health services, health facilities and programs in the Shire

### **Strategy**

- 1.2.2 Seniors have access to local support services and social programs

**COMMENT**

In the spirit of the Nous report, fragmented systems deliver fragmented outcomes. Integrated care is essential to improving both efficiency and service outcomes, particularly in rural communities where resources are limited. While the Shire does not have the scale or commercial capacity to directly deliver an integrated model, a clear and coordinated strategic approach is now required to underpin advocacy, planning and sustainable service outcomes over the next ten years.

**CONSULTATION**

Shire of Kondinin Community Survey

WACHS

Community Groups

**COMMITTEE RESOLUTION MCSC/26/001**

Moved: Cr Paul Green

Seconded: Cr Toni Smeed

That the Medical and Community Services Committee:

1. Endorses the building on existing work undertaken by the Shire to initiate a comprehensive Shire Health and Aged Care Needs Analysis.
2. Endorses the development of an Integrated Health and Ageing Strategic Policy framework to inform the Council Plan.
3. Endorses and recognises health and aged care as a combined strategic priority, noting the service interdependences within the Shire.
4. Endorses membership and participation in the Local Government Rural Health Funding Alliance (LGRHFA) to strengthen advocacy.

**CARRIED 3/0**

For: Crs Bruce Browning, Paul Green and Toni Smeed

Against: Nil

The Committee discussed issues relating to Yeerakine Lodge and the facility being utilised for nurse accommodation as State and Federal governments have an undersupply of accommodation. The position of WACHS is for the lodge to demonstrate “need” for the aged facility.

The Lodge lease expires in two years and a risk of the facility being converted to nursing accommodation (DIDO) is presented and is contrary to the intent of the facility. Cr Browning expressed a view that perhaps the Kulin & Kondinin Shires could consider placing a nurse to support daily activities, however, the challenge rests with licensing and regulatory compliance.

The Committee recognised that this commitment to a strategic framework will support the Yeerakine Lodge Committee in conducting a survey to determine the need for the facility while concurrently

preparing for advocacy efforts in Canberra (considering the Federal announcement of the possibility of more beds (and packages) being allocated to aged care).

### 10.2.2 Livingston Medical Services Report

**FILE NUMBER:****DATE:**

14 May 2026

**AUTHOR:**

Bruce Wright, Chief Executive Officer

**AUTHORISED OFFICER:**

Bruce Wright, Chief Executive Officer

**DISCLOSURE OF INTEREST:**

Author - Nil

Authoriser - Nil

**ATTACHMENTS:**

1. Livingston Medical - Kondinin & Hyden Medical Centre Report - *Under Separate Cover*

**RECOMMENDATION**

That the Medical and Community Services Committee:

1. Notes the Kondinin & Hyden Medical Services Report prepared by Livingston Medical (attached).
2. Recognises the current high level of service delivery and positive customer feedback associated with Livingston Medical.

**SUMMARY**

This report provides a high-level update on the operations and performance of the Kondinin and Hyden Medical Centres.

**VOTING REQUIREMENT**

Simple Majority

**COUNCIL'S ROLE****Executive**

The substantial direction setting and oversight role of the Council. E.g. adopting plans and reports, accepting tenders, directing operations, setting and amending budgets.

**BACKGROUND**

The centres are currently operating in a stable and improving position, with services delivered across both towns on alternating days to ensure consistent weekly access. A key development has been the appointment of Dr Robert Perry, who has been well received by the community and is contributing to growing patient confidence, with some patients returning from surrounding areas.

Service delivery has expanded to include telehealth consultations, tele-psychology, pre-employment medicals, lung function testing and hearing services, supported by the recent addition of a part-time nurse.

The practice is currently managing approximately 630 active patients, with the doctor seeing around 25 patients per day, indicating a steady but growing level of activity.

Overall, the medical centres are demonstrating positive growth and improved service capability, with continuity of care planned through locum arrangements during upcoming leave periods. The current path indicates a strengthening local health service, which is critical to supporting broader community wellbeing and aged care outcomes.

## **STRATEGIC**

### **Theme**

1. COMMUNITY
4. CIVIC LEADERSHIP

### **Goal**

- 1.2 Facilitate and advocate for quality health services, health facilities and programs in the Shire
- 4.2 We are a compliant and resourced Local Government

### **Strategy**

- 1.2.1 Local health facilities, visiting allied health and volunteer health services are retained
- 4.2.2 Financial sustainability in achieving community aspirations

## **COMMITTEE RESOLUTION MCSC/26/002**

Moved: Cr Paul Green

Seconded: Cr Toni Smeed

That the Medical and Community Services Committee:

1. Notes the Kondinin & Hyden Medical Services Report prepared by Livingston Medical (attached).
2. Recognises the current high level of service delivery and positive customer feedback associated with Livingston Medical.

**CARRIED 3/0**

For: Crs Bruce Browning, Paul Green and Toni Smeed

Against: Nil

Cr Green noted that the Tuesday & Thursday consulting days had been well received. The Committee noted that the practice appears to be growing and, in some instances, reports of patients from Kulin attending the Doctor are being reported.

### 10.2.3 Medical & Community Services Committee - Terms of Reference & Action Tracker

**FILE NUMBER:****DATE:** 14 May 2026**AUTHOR:** Bruce Wright, Chief Executive Officer**AUTHORISED OFFICER:** Bruce Wright, Chief Executive Officer**DISCLOSURE OF INTEREST:** Author - Nil

Authoriser - Nil

**ATTACHMENTS:** 1. Terms of Reference - *Under Separate Cover***UPDATE**

The Committee Terms of Reference have been previously endorsed by Council.

The key objectives of the Committee are to:

1. Provide oversight and advice on the delivery and sustainability of medical and health services within the Shire.
2. Support the planning, coordination, and improvement of aged care facilities and services.
3. Advise Council on strategies and initiatives that promote community wellbeing, social inclusion, and resilience.
4. Monitor partnerships, funding, and service delivery arrangements with external health and community service providers.
5. Identify opportunities to improve local access to medical practitioners, allied health professionals, and aged care programs.
6. Ensure that community and aged care services align with the Shire's Strategic Community Plan and Corporate Business Plan (as amended and to incorporate the Council Plan).
7. Advise Council on strategies, plans, and programs that promote community engagement, health, and wellbeing.
8. Support initiatives that encourage volunteering, youth development, seniors' participation, disability access, and inclusion.
9. Monitor and provide input into the implementation of the Community Strategic Plan, or similar strategies.
10. Identify and advocate for funding opportunities, partnerships, and collaborations with government, non-profit, and community organisations.
11. Provide input on the use, development, and management of community facilities, services, and events.
12. Support Council in responding to emerging community issues and priorities.
13. Make recommendations to Council to ensure programs and services are inclusive, accessible, and sustainable.

To assist the Committee to monitor priority actions and outcomes, a tracker has been developed and will be included in future meetings of the committee (attached).

The Committee noted the information report with a particular reference to inviting the DON from Kondinin Hospital and the OIC of the Kondinin Police Station to future meetings – noting that this
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meeting was specifically designed to determine the reporting structure, agenda and objective of the newly created Committee.

In consideration of the information report and supporting documentation, the Committee entered a focussed discussion. The Chair and Committee acknowledged that this meeting is convened after a hiatus following the change of CEO's and the combination of previous Committees to create the Medical & Community Services Committee. The Committee discussions focussed on the determination of an appropriately aligned strategic agenda of the Committee.

In developing a reporting framework, the Committee agreed on the following (subject to amendment as required) data to be presented in the form of a simple spreadsheet (subject of adoption by the Committee) providing appropriate information relative to:

#### Service Overview & Activity

- GP visiting scheduled and wherever possible and appropriate, session numbers
- Patient utilisation of GP and allied health services
- Allied health services frequency and type
- Community services delivered

#### Facility Performance

- Issues impacting service delivery of community service functions
- Usage levels

#### Community Feedback & Experience

- Community complaints and compliments
- Key concerns identified
- Service gaps

#### Workforce & Service Sustainability

- Service provider risks
- Community service risks
- Partnerships

#### Advocacy & Grants

- Opportunities

#### Health & Community Outcomes

- Service utilisation and growth
- Community engagement
- Visitor servicing

#### Risk & Compliance

- Identification of high-risk services and activities
- Compliance risks

- Service failure risks
- Mitigations

#### Key Issues & Decisions Required

- Items requiring Council direction
- Budget pressures
- Emerging risk or urgent requirements

#### Strategic Review – Policy & Strategy

- Status and updates for:
  - Customer Service Charter
  - Public Health Plan
  - Alignment with the long-term financial plan & strategic community plan
- Policy & Strategy Review program
- Risk Management
- Identification of gaps and required updates

### **10.2.4 Medical & Community Services - Meeting Schedule - 2026**

#### **FILE NUMBER:**

**DATE:** 14 May 2026

**AUTHOR:** Bruce Wright, Chief Executive Officer

**AUTHORISED OFFICER:** Bruce Wright, Chief Executive Officer

**DISCLOSURE OF INTEREST:** Author - Nil

Authoriser - Nil

**ATTACHMENTS:** Nil

#### **RECOMMENDATION**

That the Medical and Community Services Committee:

1. Endorses the Medical & Community Services Committee 2026 meeting schedule to include:

<b>Date</b>	<b>Time</b>	<b>Location</b>
22 July 2026	1pm	Council Chambers Kondinin
23 September 2026	1pm	Hyden CRC
18 November 2026	1pm	Hyden CRC

#### **SUMMARY**

This report seeks Committee endorsement of the proposed meeting schedule for the Medical & Community Services Committee for the remainder of 2026.

It is proposed that Committee meetings be held on the following dates:

22 July 2026 – 1.00pm, Council Chambers Kondinin

23 September 2026 – 1.00pm, Hyden CRC

18 November 2026 – 1.00pm, Hyden CRC

All meetings are proposed to be held prior to the Ordinary Meeting of Council on each respective date.

**VOTING REQUIREMENT**

Simple Majority

**COUNCIL’S ROLE**

**Advocacy**

When Council advocates on its own behalf or on behalf of its community to another level of government/body/agency.

**Executive**

The substantial direction setting and oversight role of the Council. E.g. adopting plans and reports, accepting tenders, directing operations, setting and amending budgets.

**STRATEGIC**

**Theme**

1. COMMUNITY

**Goal**

1.2 Facilitate and advocate for quality health services, health facilities and programs in the Shire

**Strategy**

1.2.1 Local health facilities, visiting allied health and volunteer health services are retained

1.2.2 Seniors have access to local support services and social programs

**COMMITTEE RESOLUTION MCSC/26/003**

Moved: Cr Toni Smeed

Seconded: Cr Paul Green

That the Medical and Community Services Committee:

1. Endorses the Medical & Community Services Committee 2026 meeting schedule to include:

Date	Time	Location
22 July 2026	1pm	Council Chambers Kondinin
23 September 2026	1pm	Hyden CRC
18 November 2026	2pm	Hyden CRC

**CARRIED 3/0**

For: Crs Bruce Browning, Paul Green and Toni Smeed

Against: Nil

### 10.2.5 Proposed Renaming of Koorikin Road, Kondinin

**FILE NUMBER:****DATE:** 14 May 2026**AUTHOR:** Bruce Wright, Chief Executive Officer**AUTHORISED OFFICER:** Bruce Wright, Chief Executive Officer**DISCLOSURE OF INTEREST:** Author - Nil

Authoriser - Nil

**ATTACHMENTS:**

1. Mr Don Pegrum - Correspondence to the Shire - *Under Separate Cover*
2. Landgate - Policies and Standards for Geographical Naming in Western Australia - *Under Separate Cover*

**RECOMMENDATION**

That the Medical and Community Services Committee:

1. Supports in principle the proposed renaming of Koorikin Road to Pegrum Road and the reassignment of the Koorikin Road name to Kulin Rock Road North; and
2. Authorises Administration to undertake the required process in accordance with the Landgate Policies and Standards for Geographical Naming in Western Australia.

**OR**

1. Declines to support the proposed renaming of Koorikin Road on the basis that it does not meet the requirements of the Landgate Policies and Standards for Geographical Naming in Western Australia, specifically:
  - The policy discourages unnecessary renaming of established roads
  - No compelling public interest or safety reason has been demonstrated

**SUMMARY**

Council has received a request from Mr Don Pegrum to rename Koorikin Road to Pegrum Road, and to reassign the name "Koorikin Road" to a section of Kulin Rock Road North.

The proposal is based on recognition of the Pegrum family's long-standing farming history in the area and an intention to better align road names with local historical context.

The request constitutes a renaming of an existing road, which must be assessed against the (Landgate) Policies and Standards for Geographical Naming in Western Australia.

In its current form, the application is unlikely to satisfy the Landgate criteria for renaming and accordingly, the Committee is presented with two options for consideration:

- Option 1 is valid if the Committee seeks to test community support before deciding
- Option 2 is valid if the Committee is satisfied that the application does not meet the prescribed requirements of Landgate.

## **VOTING REQUIREMENT**

Simple Majority

## **COUNCIL'S ROLE**

### **Advocacy**

When Council advocates on its own behalf or on behalf of its community to another level of government/body/agency.

## **BACKGROUND**

Council has received a written request from Mr Don Pegrum seeking the renaming of Koorikin Road to Pegrum Road, along with a related proposal to reassign the name "Koorikin Road" to a section of Kulin Rock Road North.

The proposal is based on the historical connection of the Pegrum family to the area, noting that the family has been farming within the Shire since the 1920s and continues to have a direct association with land along Koorikin Road. The applicant has indicated that the proposal is intended to recognise this long-standing contribution and to better reflect the historical context of the locality.

Renaming a road is a formal process governed by the Landgate Policies and Standards for Geographical Naming in Western Australia, which provide a legislative and policy framework for the naming and renaming of roads, localities and geographic features. These policies are designed to ensure that naming decisions are made in the public interest, maintain clarity for emergency services and navigation, and preserve the cultural and historical integrity of place names across the State.

Within this framework, road names are intended to be enduring, and proposals to change existing names are generally discouraged unless a clear and compelling justification can be demonstrated, such as public safety, duplication or service delivery issues. The policies also emphasise the importance of community consultation and broad community support for any renaming proposal, particularly where existing residents and property addresses may be affected.

Accordingly, the proposal must be considered not only in terms of its historical merit, but also against the broader policy requirements relating to necessity, community impact and compliance with established naming standards.

It should also be noted that a number of roads throughout the Shire bear the names of adjacent farming families. These naming conventions are considered to reflect historical practices and are likely to have occurred prior to the introduction of the Land Administration Act 1997 (WA) and the Landgate Policies and Standards for Geographical Naming in Western Australia, first released in 2017 and subsequently updated in November 2020. These current frameworks place more stringent requirements on the renaming of existing roads and the use of commemorative naming.

## **FINANCIAL**

The proposed road renaming does not have a direct financial impact at this stage. However, should the proposal proceed, costs would be incurred in relation to community consultation, administration, signage replacement and potential updates to addressing systems. Under the Landgate policy, non-essential name changes may also attract service charges which should be met by the Applicant.

## **RISK**

Policy compliance.

It is understood that similar applications within the Shire have failed.

## POLICY

Landgate - Policies and Standards for Geographical Naming in Western Australia

## STATUTORY

Land Administration Act 1997

Under the Land Administration Act 1997, the Minister for Lands has ultimate authority for the naming and renaming of roads in Western Australia, with Landgate undertaking the assessment and approval process in accordance with the Policies and Standards for Geographical Naming in Western Australia.

## STRATEGIC

### Theme

4. CIVIC LEADERSHIP

### Goal

4.2 We are a compliant and resourced Local Government

4.1 Skilled, capable and transparent team

### Strategy

4.2.1 External audits and reviews confirm compliance with relevant Local Government legislation

4.1.3 We engage with the community on key projects and we provide regular, transparent communication

## COMMENT

The proposal demonstrates genuine historical interest and local significance; however, under the Landgate Naming Policies, renaming existing roads requires a significantly higher threshold than historical recognition alone.

Without evidence of a compelling public interest reason, or broad community support, the proposal is unlikely to meet the required policy standards in its current form.

Mr Pegrum has been consulted and advised that the Landgate Policies and Standards for Geographical Naming in Western Australia may present constraints to the success of the proposal. Notwithstanding this advice, the applicant has expressed a desire to proceed, on the basis that community consultation be undertaken to determine the level of local support.

## CONSULTATION

Mr Pegrum

### COMMITTEE RESOLUTION MCSC/26/004

Moved: Cr Paul Green

Seconded: Cr Toni Smeed

That the Medical and Community Services Committee:

1. Declines to support the proposed renaming of Koorikin Road on the basis that it does not meet the requirements of the Landgate Policies and Standards for Geographical Naming in Western Australia, specifically:
  - The policy discourages unnecessary renaming of established roads
  - No compelling public interest or safety reason has been demonstrated

**CARRIED 3/0**

For: Crs Bruce Browning, Paul Green and Toni Smeed

Against: Nil

The Committee identified that cursory inquiries made by the Presiding Member did not identify support for the proposed name change. The proposal will require further name changes in the area which is not reasonably practicable. Cr Green noted that unnamed roads throughout the Shire require consideration in relation to naming.

Cr Browning identified an alternative to the renaming by offering an opportunity to have a Kondinin township street named in honour of the family if the opportunity arises.

The Committee recognised that the commitment of time and resources to progressing this proposal with a highly probable outcome of the proposal being rejected; is not a reasonable allocation of Shire resources.

This recommendation will be referred to Council for consideration.

## 10.2.6 Hyden Medical Services - Relocation

**FILE NUMBER:****DATE:** 19 May 2026**AUTHOR:** Bruce Wright, Chief Executive Officer**AUTHORISED OFFICER:** Bruce Wright, Chief Executive Officer**DISCLOSURE OF INTEREST:** Author - Nil

Authoriser - Nil

**ATTACHMENTS:** 1. Trading Post Hyden - Floor Plans - *Under Separate Cover***RECOMMENDATION**

That Medical and Community Services Committee:

1. Supports and endorses the relocation of Livingston Medical Services from the Hyden Medical Centre to Shop 8 within the Hyden Trading Post complex.
2. Supports and endorses the Shire entering into lease arrangements for: shop 8 (sub-leased or occupied by Livingston Medical Services), and shops 9 and 10 for Shire operational use, including library, tourism and community services.
3. Notes that the proposed rental arrangement is cost neutral, with combined rental costs equivalent to the current expenditure for the Hyden Medical Centre and library premises.
4. Supports and endorses the allocation of \$20,000 in the 2026-2027 budget to undertake minor refurbishments to Shop 8
5. Endorses the Chief Executive Officer to: finalise and execute lease agreements and any associated documentation, and to undertake any minor fit-out or transition works required to facilitate the relocation

**SUMMARY**

This report seeks Committee support and endorsement of the relocation of Livingston Medical from the WACHS-operated Hyden Medical Centre to the Hyden Trading Post complex.

**VOTING REQUIREMENT**

Simple Majority

**COUNCIL'S ROLE****Advocacy**

When Council advocates on its own behalf or on behalf of its community to another level of government/body/agency.

**Executive**

The substantial direction setting and oversight role of the Council. E.g. adopting plans and reports, accepting tenders, directing operations, setting and amending budgets.

## BACKGROUND

The Shire has received feedback from multiple patients regarding acoustic privacy issues within the Hyden Medical Centre, with consultation conversations reportedly audible from the main foyer.

Additionally, the current facility: lacks space for expansion and cannot adequately accommodate visiting allied health providers.

It is proposed that Livingston Medical relocate to Shop 8 within the Hyden Trading Post complex (Floor plans attached). The premises provides: dedicated reception, private consulting room(s) and improved patient confidentiality.

At the same time, it is proposed that the Shire will lease Shop 9 and Shop 10 and vacate the current library facility.

### Spatial Outcomes

Area	Estimated Size
Shop 8 – Medical	58 sqm
Shop 9 – Shire use	144 sqm
Total	202 sqm

This additional space will enable: expanded library services, enhanced tourism information services, the creation of meeting / community rooms, provide additional space for allied health service delivery and administrative and reception capacity.

Benefits include, but are not limited to:

**Community Benefits** of improved patient privacy and dignity. Better health service access, including allied health. Increased community service capacity

**Operational Benefits** of consolidation of services into a modern, flexible space. Improved customer experience. Better utilisation of Shire assets.

**Economic & Visitor Benefits** of an expanded and modernised tourism presence, enhanced visitor engagement and the activation of the Trading Post precinct.

## FINANCIAL

Current costs to the Shire:

WACHS Facility - \$660 per month

Library - \$1,200 per month

The Trading Post proprietor has agreed to lease Shop 8, 9 and 10 for a combined equivalent rental.

## RISK

Nil

## POLICY

Nil

## STATUTORY

Nil

**STRATEGIC****Theme**

1. COMMUNITY

**Goal**

- 1.2 Facilitate and advocate for quality health services, health facilities and programs in the Shire

**Strategy**

- 1.2.1 Local health facilities, visiting allied health and volunteer health services are retained

**COMMENT**

The proposed relocation presents a cost-neutral, high-benefit outcome for both medical services and broader community use, addressing known facility limitations while enabling future growth.

**CONSULTATION**

Trading Post Proprietor – who has concurrently consulted with current tenants.

Administration Staff

**COMMITTEE RESOLUTION MCSC/26/005**

Moved: Cr Toni Smeed

Seconded: Cr Paul Green

That Medical and Community Services Committee:

1. Supports and endorses the relocation of Livingston Medical Services from the Hyden Medical Centre to Shop 8 within the Hyden Trading Post complex.
2. Supports and endorses the Shire entering into lease arrangements for: shop 8 (sub-leased or occupied by Livingston Medical Services), and shops 9 and 10 for Shire operational use, including library, tourism and community services.
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5. Endorses the Chief Executive Officer to: finalise and execute lease agreements and any associated documentation, and to undertake any minor fit-out or transition works required to facilitate the relocation

**CARRIED 3/0**

For: Crs Bruce Browning, Paul Green and Toni Smeed

Against: Nil

Crs Green & Browning noted that the proposal will achieve a good outcome for the Shire within existing financial parameters.

## **11 BUSINESS OF AN URGENT NATURE**

Nil

## **12 CLOSE OF MEETING**

### **12.1 DATE OF NEXT MEETING**

To be held at Kondinin Shire Chambers at 1pm on Wednesday 22 July 2026 .

### **12.2 CLOSURE**

The Meeting closed at 1.34pm.