

MEDIA RELEASE

New primary healthcare services designed in partnership with community

13 July 2023

New primary healthcare services, designed by the people who will use them, will be launched by Gippsland Primary Health Network on 1 July 2023.

The trial project, a first for Gippsland, has its foundations in the Australian Government's vision for national primary health care reform, delivering the type of service people say they want from healthcare providers – they don't want to travel long distances for appointments; they don't want to tell their story multiple times; and they don't want to get lost in the system.

Key feedback from the Gippsland PHN Health Needs Assessment 2022-2025 also found consumers wanted improved access to more coordinated approaches to health care, which includes health professionals working together as team to better address their multiple needs.

Gippsland PHN Acting Chief Executive Officer, Angela Jacob, said Gippsland had a high prevalence of chronic conditions, high levels of socio-economic disadvantage and lower access to allied and other health services when compared to other regions in Victoria. Gippslanders often experience barriers to access and disparities in health outcomes.

"Our community voices were saying the same things," Mrs Jacob said. "People want health services and health professionals to work together, and even if they live in a remote area, they want the same access as their city counterparts."

In an extensive consultation process, including workshops, surveys and face-to-face engagement, Gippsland PHN asked people what "good healthcare" looks like for them without any barriers.

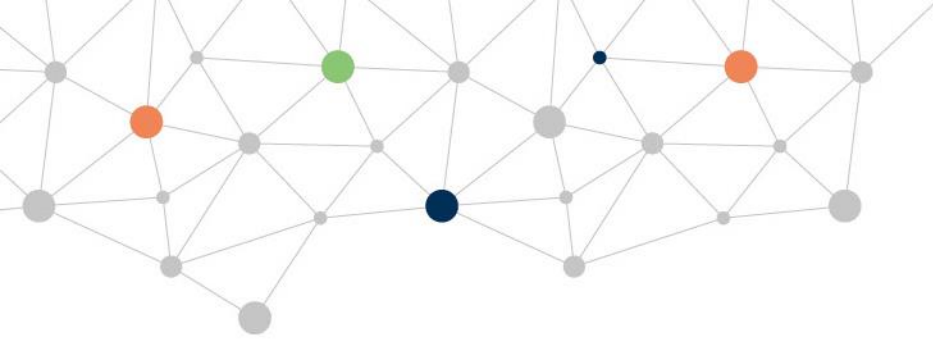
The same approach was used with health professionals. Doctors, nurses, allied health professionals, pharmacists, ambulance and hospital staff were around the one table, providing feedback on how a new model of wrap-around care could be delivered.

In response to the feedback, a service model was designed to include a care coordinator at the centre, organising multiple appointments and coordinating care across health services, health professionals, community organisations and social services.

The pilot services will be rolled out in the Latrobe Valley and East Gippsland for two years and evaluated with potential to extend across other Gippsland Local Government Areas in the future.

The Latrobe Valley model is a clinic for children from disadvantaged backgrounds that provides care coordination, transport assistance and a multi-disciplinary approach to address family needs.

The East Gippsland model addresses the desire of people living in remote areas for affordable and accessible health care in their local community; care that is not seen as "second rate" because it is in a rural area.



Mrs Jacob said the process of developing this new model of care in response to community voices had taken almost 18-months.

“But the result is a contemporary, innovative, safe model of care that can be more accessible; one that uses workforce more effectively, is more efficient, and be available to everyone,” she said.

“This approach to what we call Community Led Integrated Health Care is determined by the community experiencing the health need. A range of health disciplines will work together to deliver comprehensive care that addresses as many of the patient's needs as possible.

“The new model identifies needs, priorities and importantly, agenda for change; it builds on existing strengths and services available to deliver team-based care with professionals working to top of their scope of practice. It will deliver new ways of health professionals working together as multidisciplinary primary health care teams, in agile ways, especially in rural settings.”

What people told us:

“I want regular and affordable access to health care... within my local community.”

“I want to work out how the health system works and how to get the health care I need.”

“I [want] a one stop shop where you tell your story once.”

“I want to be heard and respected.”

“I want affordable, ongoing care.”

“I would like to see targeted funding to focus on prevention not cure.”

“I want to access health related supports for the physical and mental consequences of my chronic disease related conditions.”

“I want my team to talk with each other. I don't want information lost.”

“(I want a system where) Rural health is not seen as second rate.”

“I want to be able to afford to look after my health.”

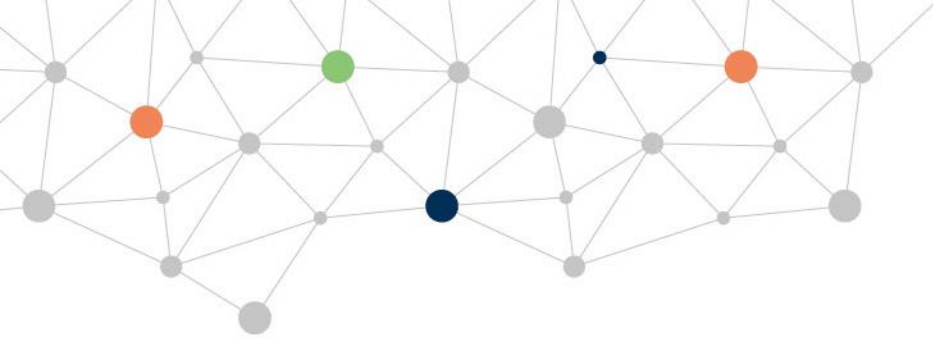
Two innovative models of care

Latrobe Valley: care hub for disadvantaged children and families

People want to tell their “story” to health and social services only once. They don't want the stress of organising multiple appointments with doctors and social support networks while navigating the public transport system because they have no way of getting there.

A new service will be rolled out in the Latrobe Valley from 1 July 2023 to address these problems; where children and their families can attend and have their health and social needs met at one place.

The Latrobe Valley is an area of high social and economic deprivation, where the vulnerability profile of the youngest community members continues to impact health and wellbeing outcomes throughout their life.



A clinic for children from disadvantaged backgrounds will be established that provides care coordination, transport assistance and a multi-disciplinary approach to address some of the issues that can impact on people's ability to access health services.

Latrobe Community Health Service (LCHS) has proposed this new model of care being funded Gippsland Primary Health Network. Based at Churchill, this innovative clinic will be an integrated health and welfare service model for vulnerable children and families in Latrobe.

LCHS will work closely with Berry Street to deliver the service. When a person visits the hub, the first meeting will be with both a Care Coordinator and Social Service Navigator who will provide coordination of health care, social services and even transport needs.

East Gippsland: Taking first rate care to remote communities

Residents of the remote area of Deddick Valley in East Gippsland have no health services and travelling for medical care can mean a four-hour round trip to Bairnsdale or more than eight to Melbourne.

People living in towns like Bendoc, Tubbut and Goongerah want affordable and accessible health care in their local community; care that is not seen as "second rate" because it is in a rural area.

But that will all change with a new model of care, including the use of augmented reality, that will take the health services to the communities. Orbost Regional Health and the Deddick Valley Isolated Community Group have joined forces to address the issues facing remote areas with funding from Gippsland Primary Health Network.

Under the new model of care, Service Hubs will be set up in local communities. A care coordinator will visit these to support residents with chronic health conditions, monitoring and evaluating their symptoms and connecting them to specialists for diagnosis.

The care coordinator will support residents with disabilities in identifying and advocating for their needs, helping with access to services, funding and care plans. They will also support families experiencing violence, new parents and young children by identifying patients at risk.

Many residents report of delaying care because of the travel constraints, time and financial burden. By bringing services physically into Service Hubs in the community and creating supported access to specialists via telehealth and Microsoft HoloLens, these barriers will be reduced. This can even be provided in a person's home if necessary.

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