



Gold Coast Hospital and Health Service

Gold Coast Primary Health Care Protocol

December 2015

1 Purpose

The purpose of this protocol is to build on the existing formal partnership between the Gold Coast Hospital and Health Service (GCHHS) and the Primary Healthcare Network (PHN), engaging other leading primary care organisations on the Gold Coast.

It will serve as the foundation for all organisations to work collaboratively to improve the health and wellbeing of the Gold Coast population. The protocol recognises the important roles that both acute and primary care sectors play in the delivery of health services. By strengthening relationships and integration of health sectors, key objectives can be achieved which align with other performance requirements such as those set by the National Health Performance Authority. The protocol also aligns with the strategic outcomes outlined within the Bilateral Plan for Primary Health Care Services in Queensland.¹

This protocol is published in accordance with the requirements of the Hospital and Health Boards Act 2011 and the Hospital and Health Boards Regulation 2012.

2 Background

The range of healthcare providers and services involved in the delivery of primary health care across the Gold Coast is quite diverse. Medical, nursing and allied health professionals deliver services in a myriad of settings including general practice, pharmacies, community based clinics and centres, aged care facilities and more frequently within consumer's homes. Other certified healthcare providers are involved in supporting the activities of daily living for consumers, including the provision of home or centre based respite for carers. Services are also tailored to address specific requirements for multicultural and Aboriginal and Torres Strait Islander communities. Health information and education is also made accessible through health promotion events held at various venues across the Gold Coast, through support groups or online through Internet websites.

With all this available support, the demand for health and wellbeing services continues to grow largely due to an aging population and the increasing burden of chronic disease. Despite the considerable achievements within both the acute and primary care sectors, the inability to adequately address consumer demand remains challenging, creating an overreliance on the acute care sector placing more strain on already overwhelmed emergency departments and acute care beds.

As healthcare is operating in an environment of significant and constant change, models of care must adapt in order to respond effectively to the changing needs of the Gold Coast community. These new models of care must support optimal communication, innovation and collaboration within and between the acute and primary sectors to reduce unnecessary service duplication, which promotes inefficient use of stretched resources and ultimately poor health outcomes for the Gold Coast community.

¹ Bilateral Plan for Primary Health Care Services in Queensland (2013. Background paper prepared by Policy and Planning Branch, QDoH (Version: Final for Consultation)

One of the achievements of the partnership to date has been the establishment of the Gold Coast Integrated Care Program which is a four year proof of concept endeavoring to demonstrate

- patient centred holistic care
- Improved quality of care for patients
- Optimised chronic disease management
- A focus on prevention in partnership with general practice
- A cost effective model of care
- A reduced need for acute hospital utilisation.

The Gold Coast Integrated Care Program is an important undertaking and is governed by its own Steering Committee. This Committee reports directly to the Board of the GCHHS and the GCPHN.

3 Guiding Principles

- The vision, values and strategic plans for all organisations covered under this protocol will be mutually respected;
- Leadership is required across all sectors;
- Recognition from all services providers that a cross sectoral, multidisciplinary approach is required to meet the health care needs of the Gold Coast population;
- Openness and transparency between and among sectors is required to support successful collaboration, with shared accountability for outcomes and strong joint governance arrangements.
- Successful execution will require a spirit of cooperation, working collaboratively and with respect;
- Effective communication includes inclusive, meaningful interactions and sharing of information in a timely manner;
- All services work towards effective integration of information systems and service delivery in a sustainable manner;
- Partnership opportunities should be optimized among the public, private and non- government organisations;
- Care is supported through the use of evidence-based guidelines;
- Workforce capacity across all health sectors needs to be developed and supported.

4 Key Objectives

Current objectives for 2015-2018 are as follows:

- 4.1 Ensure joint participation in population health needs identification and service planning in collaboration with PHN and the GCHHS, including progressing the outcomes of the GCPHN Health and Well Being Plan and the GCHHS Strategic Plan;
- 4.2 Develop mutually agreed programs including pathways to improve the integration and coordination of care between acute and primary care sectors for identified target groups with specific focus on:
 - a) Improving access to services so that consumers receive timely care in the most appropriate setting;
 - b) Avoiding preventable hospital admissions;

- c) Improving transfer of care processes across settings;
- d) Developing appropriate communication systems and processes utilising available technology to support integration;

4.3 Work collaboratively to develop integrated care services.

5 Current Partnerships within Primary Care

GCHHS and GCPHN have existing formal and informal relationships with a number of key primary care partners including:

Partnership with	Aim
General Practice Gold Coast (GPGC)	GPGC is a general practice member based organisation with a mission to lead, improve and integrate health care through quality general practice. GPGC supports general practices to improve the health of the rapidly growing Gold Coast population in a changing environment and expanding city.
Gold Coast Primary Care Partnership Council (PCPC)	Gold Coast PCPC developed as a voluntary collaboration to establish effective partnerships with key health & other community stakeholders from government and non-government sectors to ensure integrated planning, delivery and evaluation to meet the needs of the Gold Coast community and improve health and health related outcomes.
Karulbo: Aboriginal and Torres Strait Islander Partnership Advisory Council	Kalwun Health Service, Krurungal and Indigenous Health (QH) have worked together over the past few years to improve collaboration between each of the services & also to increase their profiles within the Gold Coast region.
Multicultural Health Advisory Group	This group meets to increase capacity to engage & partner with culturally and linguistically diverse (CALD) background communities & develop strategies for involving CALD consumers/ communities in the activities of the Gold Coast.
GCPHN Allied Health Advisory Group (AHAG)	This group meets to improve integration through improved engagement among all allied health professionals and through leading innovative practice in integrated primary health care.
Community Nurses Advisory Group	This group represents NGO nursing services on the Gold Coast.
Leading Aged Services Australia - Qld (LASAQ) - GC Regional Group	LASAQ is the peak body for Leading Age Services, Queensland. It is part of the new national body, which represents all service providers (not-for-profit, community, state or commercially based) and is essential to enable the sector to shape the agenda for aged services and housing for older Australians.

6 Implementation

- 6.1 This protocol will build on the existing strong history of GCHHS partnering with the primary care sector;
- 6.2 The PHN and GCHHS Executive Steering Committee is a formal body tasked with translating the intent of the PHN/GCHHS Collaboration Agreement. This includes monitoring progress against set objectives, sharing information with key partners regarding progress against set objectives and allowing opportunity for two-way feedback to assist with identifying service gaps;
- 6.3 All key partners are able to have input into the determination of key objectives for inclusion in the PHN / GCHHS Collaboration Agreement and then advised of final outcomes to assist with alignment of service provision where able;
- 6.4 There are currently strong linkages between GCHHS, GCPHN, GPGC and PCPC. Identification of other key partners within the primary care sector not represented within these groups needs to occur to ensure adequate and appropriate communication flows among all key primary care providers.

7 Key Performance Indicators (KPI's), Targets and Accountability

The PHN – GCHHS Executive Steering Committee sets annual objectives and targets, to achieve the broad aims of the Primary Care Protocol. Outcomes and targets are detailed in Appendix 1 which has been informed by the Colboration Agreement.

8 Agreement Term and review

GCHHS is currently undertaking a wide-ranging review of the services it provides and the manner in which service provision occurs. This review will inform the strategic direction of the GCHHS and its strategic plan for 2013 – 2017.

The formal partnership agreement with the Primary Healthcare Network is reviewed annually.

It is within this context that GCHHS envisages a cementing of its partnership with the PHN and other primary care partners as described in this Primary Healthcare Protocol.

Appendix 1

Primary Healthcare Network and GC Hospital and Health Service Annual Partnership Agreement 2013-

14 Objectives and Targets

OBJECTIVE 1:

Ensure joint participation in population health needs identification and service and workforce planning in collaboration with GCPHN and HHS Boards including progressing the outcomes of the PHN Health and Well Being Plan and the GCHHS Strategic Plan.

Outcomes	Targets	Responsible Person
Primary Healthcare Network and the Gold Coast Health and Hospital Service (GCHHS) will work together at a Board level to agree on strategic priorities requiring action at the primary/ acute care interface with regard to relevant national and state strategies, policies, agreements and standards and the Gold Coast Health and Wellbeing plan.	Evidence of joint service planning, review and reporting against GC Health and Wellbeing plan between PHN and GCHHS Boards	CEOPHN
The multi-sectorial Executive Steering Group (ESG) is maintained to oversee the implementation of the strategic objectives	Executive Steering Group convening as per TOR.	CEO PHN
A Lead Clinician Group (LCG) provides clinical advice and guidance to the ESC.	The Lead Clinician Group has provided advice that has informed the implementation of key projects and work plans.	PHN

<p>Joint planning to investigate service models to support integrated service models for frail care including;</p> <p>Dementia Care Chronic Disease Palliative / End of life care</p>	<p>Older person strategy developed which will inform the 2016/17 annual plans including;</p> <ul style="list-style-type: none"> • Priority needs/ gaps • Identified service options • Prioritised proposals for further development 	<p>GCPHN: Integration PM</p> <p>GCHHS: GM DEMS</p>
<p>Aboriginal and Torres Strait – Karulbo – Joint planning to investigate annual program of work.</p>	<p>Joint plans developed including;</p> <ul style="list-style-type: none"> • Priority needs • Identified service options • Prioritised proposals for development 	<p>GCPHN: Director of Strategy and Systems Improvement</p>
<p>Planning with GCHHS and NGO Mental Health to determine GC Model of Care from July 2016 to support integrated care for those with high and complex needs. Prepare business to Commonwealth early 2017.</p>	<p>Joint plans developed including;</p> <ul style="list-style-type: none"> • Priority needs • Identified service options <p>Prioritised proposals for development</p>	<p>GCHHS: GM Mental Health and GCPHN: Director of Strategy and Systems Improvement</p>
<p>Joint Planning to determine education training and research including;</p> <p>Delivery of training events targeted at linking GCHHS specialist service with primary care services</p> <p>Explore utilization of PCGC Health GC website Health knowledge portals</p>	<p>Joint plans developed which include KPIS</p>	<p>GCPHN: Director of Strategy and Systems Improvement</p> <p>GCHHS: GM Mental Health and GCPHN: Integration PM and Planning Stakeholder Management</p> <p>GCHHS: GM CASS</p>

Joint planning to support:

- Gold Coast Implementation Plan
- Cancer Screening
- Prevention and promotion

Plans developed which include roles and responsibilities and KPIs.

GCPHN: Primary
Healthcare PM
and Planning and
Stakeholder
Engagement PM
GCHHS:GM Cass

OBJECTIVE 2

Develop mutually agreed programs including pathways to improve the integration and coordination of care between acute and primary care sectors for identified target groups with specific focus on:

- a) Improving access to appropriate services so that consumers receive timely care in the most appropriate setting;
- b) Avoiding preventable admissions;
- c) Improving transfer of care processes through a person's health episode;
- d) Developing appropriate communication systems and processes utilizing available technology to support integration.

Outcomes	Targets	Responsible Person
COPD After Hours care service is provided through referral form Chronic Disease.	Provide data on; Number of clients referred Number of clients that did not have a hospital admission	GCPHN: Integration Program Manager GCHHS GM DEMS
There is effective colocation of Partners in Recovery (PIR) Facilitators in the ED at Gold Coast University Hospital	Improved referral pathways between the HHS, PIR and community mental health services for consumers and carers.	GCPHN: PIR Program Manager GCHHS: GM MHSS
Integrated Care are reported and monitored the GCIC Strategic and Clinical Advisory Committee including representing from PCGC		GCHHS: ED Centre for Health Innovation GCPHN: CEO

Outcomes	Targets	Responsible Person
Transfer of care is supported by ; Maintaining and updating GP referral templates for SOPD	Audit of quality of referrals is undertaken quarterly. Referral templates sent electronically 80%	GCPHN: Integration Project Manager Planning Stakeholder Manager & GCHHS:
EDS completion	100% during	As above
EDS sent electronically	80% during	As Above
SOPD letters completed	100% during	As Above

Outcomes	Targets	Responsible Person
SOPD letters sent electronically	80% during	GCPHN: Integration Project Manager Planning Stakeholder GCHHS; GM CASS
Hospital based health professionals have identifier to enable access to PCEHR.	50%	
SOPD categorisation guidelines maintained	<hr/>	
OPD discharge guidelines developed		
SOPD wait list data maintained		