



KEY MESSAGES

Emerging models of integrated primary health care centres: How they optimise access and integration and what influences this

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Policy context

Coordinated and accessible primary health care (PHC) systems are associated with improved health outcomes, particularly for those living with chronic disease. However, many consumers still experience poorly coordinated care.

There is some evidence that multidisciplinary integrated primary health care centres (IPHCCs) can improve access and integration. Since 1999 the Australian and State/Territory governments have invested in new organisational models designed to strengthen the integration between multidisciplinary PHC providers, albeit within the existing PHC structural and funding arrangements. We studied how six IPHCCs in two Australian States have managed to achieve accessible and integrated care for people with chronic conditions.

Key messages

- > IPHCCs were providing access to a broader range of allied health, and in some cases medical specialist, services than traditional general practices.
- > IPHCC ownership and size were strong drivers of access arrangements. The breadth of access within centres was influenced by the IPHCC model.
- > Co-location makes informal communication and information sharing easier for professionals of different disciplines. Formal integration arrangements between co-located organisations, services and clinicians were more developed in State health models than GP Super Clinics.
- > IPHCCs have developed incrementally, with specific developments reflecting opportunities afforded by the model; ownership imperatives (for-profit and not-for-profit) and context (history, relationships, and the need to find a niche in order to maintain financial viability).
- > Improved access and provision of integrated multidisciplinary care for people with chronic conditions requires the following action:
 - Alternative payment models (capitation, blended funding) to improve access for 'at risk' groups with chronic and complex conditions.
 - Public/private partnership models involving Local Health Networks (LHNs) to enhance equitable access for the local population with chronic conditions.
 - Primary Health Networks to act as a bridge between IPHCCs and LHNs; support integration developments within IPHCCs and provide multidisciplinary continuing professional development activities that include allied health and LHNs.

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