



Clarence Community Health Centre

Fact Sheet

What is the proposal?

- Core services at the Clarence Community Health Centre are set to be expanded through combined projects by the State and Federal Governments in line with recommendations in the Tasmanian Health Plan.
- Additional services available on site will include:
 - An Integrated Care Centre providing a focus on providing a centre for people on the Eastern Shore with complex conditions and chronic diseases, with Funding from the State Government of \$13million.
 - A GP Super Clinic funded by the Australian Government with up to \$5.5 million.
 - Other community based health services, government and non government
- The site will also provide a major education and teaching centre for medical, nursing and other health professionals in partnership with the University of Tasmania.

This is a great opportunity for the Eastern Shore and for the future of Tasmanian health care in general as Clarence will be leading the way in the south of the State for integrated, innovative care.

Where to from here?

- The next step will be for an extensive community consultation process with general practitioners, other local service providers and the public to be undertaken over the next six months to ensure all views and concerns are heard.
- This process will also examine options for an appropriate management structure.
- A detailed service model will be developed to foster integration of services.
- The GP Super Clinic will be the first stage of the development and will be developed in partnership between the Commonwealth and the State.
- The focus will be foremost on developing the services and this will be followed by design and construction of the new facility.

What advantages will the proposed Integrated Care Centre bring?

- **Easier access to a wider range** of services not currently available on the Eastern Shore (These could include antenatal care, renal dialysis, chemotherapy, minor injuries clinic depending on the outcome of the consultation and planning process.)
- **Improved referral capability** for health providers who will be able to **refer patients with complex conditions and/or co-morbidities** to the chronic disease focussed Integrated Care Service
- **Integrated and coordinated care** will be the focus of the service model.
- The partnership with the University of Tasmania means students will learn how to provide **team based care within a community setting**



The Integrated Care Centre will further augment services by:

- Focussing on wellness, maintaining people in a healthy state, preventing relapses and reducing the need for admission to hospital
- Targeting chronic disease especially patients with complex conditions and/or co-morbidities who cannot be managed in usual primary care settings.
- Including acute care type services where appropriate and safe to do so in a local setting

Timelines are expected to be:

- **July to December 2008**
 - Service planning completed
 - Governance models identified
 - Potential partnerships identified
 - Functional brief completed
- **January 2009 – Sept 2009**
 - Business case to Government
 - Detailed design completed
 - Tender process for construction completed
- **December 2009**
 - Operationalise stage one.
- **December 2010**
 - Construction and commissioning completed
 - Operationalise Integrated Care Centre.

How will the Integrated Care Centre work with the GP Super Clinic:

Integrated Care Centres seek to better integrate community and primary based care with hospital care. They are focussed on a smaller number of people with complex and chronic conditions and co morbidities who are often frequent users of the hospital system, but who if treated appropriately can be managed outside hospital.

GP Super Clinics are a commonwealth program. They seek to link General Practice better with state funded community health services, and with other private primary health providers such as allied health. They support a team based care approach where a range of professions work with doctors to provide a more comprehensive care program.

In both models there is a considerable degree of flexibility and both will be able to adapt to local conditions. With a combined approach, and with the cooperation of local health providers, the two models can be developed in such a way that they provide better health care to the whole population in the area.