2012

Evaluation of the GP Super Clinics Program 2007-2008

August 2012

CONSAN

Table of Contents

1 Executive Summary 1

1.1 Policy to Program Implementation 1

1.2 Significant Investment in Infrastructure for Primary Care 2

1.3 Compliance with GP Super Clinics Program Objectives 3

1.4 Areas for Service Development 4

1.5 GP Super Clinics Program Learnings 5

1.6 System Learnings 5

1.7 Summary 6

2 Introduction 7

2.1 Scope of Evaluation 7

2.2 Background 7

2.3 Program Objectives 9

2.4 What is a GP Super Clinic? 9

2.5 The Need for Reform 10

2.6 Primary Care Critical to Health Outcomes and Equity 10

2.7 Models for Primary Care and General Practice 10

3 Evaluation Aims and Methods 12

3.1 Evaluation Aims 12

3.2 Evaluation Methods 12

3.2.1 Methods for Implementation Aspect 12

3.2.2 Methods for Establishment Phase 14

3.2.3 Methods for Operations Aspect 15

3.2.4 Statistical Analyses for Surveys 18

3.3 Sample Sizes 19

3.3.1 Patient Survey 19

3.3.2 Clinician Survey 19
3.4 Structure of This Report 19
4 Implementation Aspect 20
4.1 Policy Alignment 20
4.2 Governance 20
4.3 Compliance with Regulatory Requirements 20
4.4 Capacity Building within the GP Super Clinics Branch 21
4.5 The GP Super Clinics National Program Guide 2008 23
4.6 Evolution of the GP Super Clinics Program 23
4.6.1 The GP Super Clinics National Program Guide 2008 23
4.6.2 Reporting Requirements 24
4.7 Invitation to Apply Processes 24
4.7.1 Consultation in GP Super Clinic Locations 24
4.7.2 Assessment Panels for GP Super Clinics 24
4.8 Factors Impacting on the Implementation of the GP Super Clinics Program 25
5 Establishment Aspect 27
5.1 Outcomes on Project Milestones 27
5.2 Perspectives on Delays 28
5.3 Types of Delays 29
5.3.1 Land Acquisition 29
5.3.2 Development Approval Processes 31
5.3.3 Funding Approval Processes 33
5.3.4 Tender Documentation Processes 33
5.3.5 Appointment of Builder 34
5.3.6 Construction Completion 34
5.4 Building Construction for Delivery of Primary Care 35

5.5 Value for Money 35
6 Operations Aspect 36
6.1 Overview of Participants 36
6.1.1 GP Super Clinic Directors 36
6.1.2 Patients 36
6.1.3 Clinicians 39
6.1.4 Community Stakeholders 40
6.2 Multi-disciplinary and Integrated Care 40
6.2.1 Multi-disciplinary Care 40
6.2.2 Integrated Care 43
6.2.3 Factors Impacting on Provision of Multi-disciplinary and Integrated Care 43
6.2.4 Clinical Governance 45
6.2.5 Self-management 46
6.3 Responsiveness to Local Community 46
6.4 Accessible Primary Health Care 47
6.5 Preventative Care 49
6.6 Effective Use of Information Technology 51
6.7 Recruiting and Retaining the Primary Care Workforce 51
6.8 High Quality Best Practice Care 54
6.9 Viable, Sustainable and Efficient Business Models 55
6.10 Support for Future Primary Care Workforce 55
6.11 Integration with Local Programs and Initiatives 56
7 Discussion – GP Super Clinics Program Maturing 57
7.1 Implementation Aspect - Policy to Program 57
7.1.1 GP Super Clinics Branch Capacity 57
7.1.2 Managing a Long Term Program 58

7.1.3 Recommendations - Implementation Aspect 59
7.2 The Establishment Aspect - Managing Funding for Construction Projects 59
7.2.1 Evolution in Establishment Aspect 60
7.2.2 Managing Delays in the Construction Processes 60
7.2.3 Recommendations – Establishment Aspect 63
7.2.4 Value for Money 64
7.2.5 Recommendations – Value for Money 66
7.3 Progress towards Achieving the GP Super Clinics Program Objectives 66
7.3.1 Multi-disciplinary Care 66
7.3.2 Responsiveness to Local Community Needs 69
7.3.3 Accessible, Culturally Appropriate and Affordable care 70
7.3.4 Preventative Health Care 70
7.3.5 Effective Use of Information Technology 71
7.3.6 Impact on Primary Care Workforce 71
7.3.7 Quality in Primary Health Care 72
7.3.8 Efficient and Sustainable Business Models 74
7.3.9 Support for the Future Primary Care Workforce 74
7.3.10 Integration with Local Programs and Initiatives 75
7.3.11 Recommendations – GP Super Clinics Program Objectives 75
7.4 Operational Aspect Learnings for the GP Super Clinics Program 76
7.4.1 Program Maturation 76
7.4.2 Leadership and Culture 76
7.4.3 Alignment between Clinical and Business Model 77
7.4.4 Assessing Impact and Outcomes 77
7.4.5 Differences in Organisational Models 77
7.4.6 Recommendations – Learnings from the GP Super Clinics Program 78

7.5 Primary Health Care System Learnings 78
7.5.1 Measuring Primary Health Care Performance 79
7.5.2 Medicare Benefits Schedule 79
7.5.3 Role of the Universities 80
7.6 Strengths and Limitations 81
7.7 Conclusion 81
8 Appendices 83
8.1 Appendix 1: GP Super Clinics Program Objectives 83
8.2 Appendix 2: Primary and Secondary Evaluation Questions 85
8.2.1 Implementation Aspect Evaluation Questions 85
8.2.2 Establishment Aspect Evaluation Questions 85
8.2.3 Operations Aspect Evaluation Questions 86
9 References 89

List of Tables

Table 1: Localities Identified as GP Super Clinics in 2007 8

Table 2: Numbers and Proportion of Delays Reported by Funding Recipients and Departmental Staff 29

Table 3: Demographic Characteristics of Patient Participants in Survey 37

Table 4: Employment and Health Insurance Characteristics of Patient Participants in Survey.. 37

Table 5: Overview of GP Super Clinics Attendances of Patient Participants in Survey 38

Table 6: Demographic Characteristics of Clinician Participants in Survey..... 39

Table 7: Gender and Discipline Profile of Participants in Clinician Site-visit Interviews 40

Table 8: Overview of Numbers and Employment Status of Clinicians*..... 41

Table 9: Clinicians Ratings of Importance and Extent of Implementation of Key Elements of GP Super Clinics in Providing High Quality care 42

Table 10: Clinicians' Perception of Factors which Support Multi-disciplinary Care..... 43

Table 11: Percentage of Patients Agreeing with Reasons for Attending GP Super Clinic* .. 47

Table 12: Top Six Reasons for Changing to the GP Super Clinic – Survey Comments 48

Table 13: Percentage Patients Reporting Discussion with Clinicians about Preventative Care 50

Table 14: Percentage Clinicians Reporting Discussion with Patients about Preventative Care 50

Table 15: Percentage of Clinicians Reporting Reasons for Working at GP Super Clinics.... 52

Disclaimer

This report has been prepared by Consan Consulting. It is provided to the Department of Health and Ageing, GP Super Clinics Branch based on the data collected in the evaluation of the GP Super Clinics Program 2007-2008 undertaken in 2011.

While due care and diligence has been taken, the results, discussion and recommendations in this report rely on the data collected by Consan Consulting, some of which are reliant on self-report of participants and also are reliant on subjective judgement.

Authors

This report has been prepared by Consan Consulting. The authors include:

Robyn Considine	Director Consan Consulting, Newcastle, NSW
John Tozer	Director of Development Management, J G Service PTY LTD
	Canberra, ACT
Helen Milne	Director Waratah Springs, Canberra, ACT
Mark Chappe	Director, Rider Levett Bucknall, Canberra ACT

Acknowledgements

Consan Consulting acknowledges the contributions of Professor Jenny Reath, Foundation Peter Brennan Chair of General Practice at the University of Western Sydney, Professor Cate D'Este, Professor in Biostatistics at the University of Newcastle and Laureate Professor Rob Sanson-Fisher A.O, Professor of Health Behaviour at the University of Newcastle. Their insights have contributed significantly to the evaluation of the GP Super Clinics Program 2007-2008. We acknowledge the support of the staff of the GP Super Clinics Branch, Department of Health and Ageing in assisting with the requirements for the evaluation. Our appreciation also extends to Dr Gloria Webb for her role in editing this report. Most importantly we would like to thank the GP Super Clinic Directors, the clinicians and the patients, and community stakeholders who have willingly given their time and views, in a variety of ways, for the evaluation.

Ethics Approval

Ethics Committee approval was sought and gained from the Department of Health and Ageing Ethics Committee (Approval Project 11/2011).