

Innovative Models of Care (IMOC) Program – Sustainable Rural Healthcare Hub

Northern District Community Health will deliver the Sustainable Rural Healthcare Hub: a network of six small health services clustered geographically across the region.

Round 4: Northern District Community Health Sustainable Rural Healthcare Hub

Location: Central/North-west Victoria (MM5)

Funding: \$1.4 million over 4 years from 2024

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The activity will fund a consortium led by the Northern District Community Health (NDCH) to implement a Sustainable Rural Healthcare Hub. This is a network of six small health services across Buloke, Loddon and Gannawarra Shires in Central/North-west Victoria. The consortium members will consist of Murray PHN, Inglewood & Districts Health Service, Boort District Health, East Wimmera Health Service.

The multi-site multidisciplinary rural health team will be co-led by a GP and nurse practitioner (NP) at the six Hubs. This will start with one day per fortnight per Hub. Onsite staffing for each Hub includes a GP, NP, Care Coordinator, and a Registered/Enrolled Nurse. Back-up cover is available from other Hubs. The allied health professionals from Kerang and local health services will provide team-based care onsite and through telehealth. Comprehensive primary healthcare services will be delivered into Residential Aged Care Homes (RACH) and Urgent Care Centres (UCC). Telehealth will reduce patient travel, enabling easier access to specialists and multidisciplinary case conferencing specialising in complex chronic disease management. Training pathways will be embedded, and all team members will work to full rural generalist scope.

Healthcare Hub locations are provided in Table below.

Hub	Town	Site	Population	Median age
1	Kerang	Small 2-5 GP FTE general practice and community health	3,960	51
2	Quambatook	Community health site	229	59
3	Pyramid Hill	Community health site	598	46
4	Charlton	Solo GP general practice, rural public hospital RACH and UCC	1,095	56
5	Boort	Solo GP general practice, rural public hospital RACH and UCC	940	57
6	Inglewood Wedderburn	Solo GP general practice, rural public hospital RACH and UCC	886 951	55 58

The outcomes and benefits of this model are:

- Six networked Healthcare Hubs providing multidisciplinary team-based primary care clinics in underserved, ageing rural communities with high rates of chronic disease and critical workforce shortages;
- A sustainable primary healthcare employment model for multidisciplinary workforce at full rural generalist scope;
- A succession plan for rural and aging solo GPs to maintain primary care service access in small rural towns;
- Improved access to allied health providers for comprehensive primary healthcare and best practice in chronic disease management and palliative care;
- Cost savings of integrated planning with shared funding; and
- High-quality evidence and economic analysis to inform adaptable design, scalability and support wider implementation of the model in other rural regions with thin markets and workforce pools.

The grant funds will support the recruitment of a project manager, a First Nations identified researcher, and additional researchers. Further, the grant will fund mentoring, data access, training, communications material and content creation. An independent evaluation will deliver high-quality evidence to support application in similar rural regions with small, isolated communities and market failure.

The project will be implemented by June 2024.

