

CONFERENCE ABSTRACT

A New Solution to Health and Wellbeing Care in a Rapidly Growing High Rise Inner City Neighbourhood

17th International Conference on Integrated Care, Dublin, 08-10 May 2017

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Introduction: Green Square, a suburb within the inner city of Sydney is undergoing a major urban transformation. Growing from a small base of 3,000 people in 1999 to a community of 61,000 people by 2031 presents significant planning challenges and opportunities for innovation through collaboration and integration.

Change Implemented: A major change is required in the health and social infrastructure to provide for this new underserved and emerging community. The unique opportunity is to develop an innovative community based health and wellbeing service based on an Australian version of the US Patient Centred Medical Home (PCMH) embedded in a well-functioning "Health and Medical Neighbourhood". The impetus is provided by a grant of \$16 million for a new building.

The Green Square primary and community health service will integrate primary care, specialist services, community health, other government and non-government agencies. The Green Square urban development also provides a unique opportunity to develop a comprehensive collocated health and wellbeing precinct, which includes diagnostic services, pharmacy and private medical, dental and allied health services.

Targeted Population: A key concept is to ensure the centrality and empowerment of patients, consumers, families and communities as partners in promoting health and wellbeing. Other service partners include the primary health network, four major Sydney universities, the City of Sydney council, non-government organisations and private local health providers.

Timeline: The development of the community and local provider-informed model of care will be undertaken from 2016-2019. New community services will commence in 2017. The new building will open in 2019.

Highlights: Devised through a series of community, local provider and partner consultations and ongoing collaborations, the new model of care will include:

- Integrated community-based clinical service delivery, including chronic disease management, through multidisciplinary teamwork which includes an integral role for general practice;

- A population health approach to illness prevention and health improvement, including a focus on vulnerable populations;
- Research and research translation informing the development and delivery of clinical services;
- Community-based multidisciplinary primary care teaching and education; and
- An Academic Primary Care unit which will have a role in education research and dissemination of clinical evidence and service delivery models to other primary care practices and services.

Sustainability: The challenge will be developing an integrated model of care that will be flexible, community driven, can grow over time and respond adequately to improve the health and wellbeing of the evolving community.

Transferability: This process to develop the model of care is transferable as is the model itself. The model will be fully evaluated by the academic partners.

Keywords: empowerment; academic primary care; partnerships; urban development; population health
