**Presentation title:**

Adapting to Changing Community Care Need - Evaluation of Patient Data and Activity, Health Service Funding and Evolution of Primary Care Services to adopt service level changes that promote sustainable service delivery in the short, medium and long term. A Case Study of Stanthorpe Health Service recognising the complex interactions of training and workforce systems between Health Service, College - Australian College of Rural and Remote Medicine (ACRRM) and Queensland Country Practice (QCP) JDocs.

**Abstract** (max. 300 words):

Background:

Stanthorpe Health Service is a 42-bed Facility servicing Stanthorpe and wider community across the NSW Border to Tenterfield. The area covers a population of approximately 15000. Stanthorpe Health Service offers full Rural Emergency, Admitted Inpatient, Maternity (Caesarean Level) and Outpatient Services with a significant Primary Care caseload. There is onsite Allied Health and Mental Health Services. Stanthorpe Health Service also offers a Community Health outreach model of Nursing and Allied Health practice. Stanthorpe Health Service hosts 3rd and 4th Year Griffith University Longlook Medical Students and is accredited for Intern and General Practice Registrar Training.

From an activity base reference in 2014, analysis was required to assess the apparent increased pressure on these services over the following triennium.

Method:

An internal review (clinical and operational audit) of Stanthorpe Health Services commenced early 2016 due to rising activity pressure on resourcing and staff factors including fatigue. These main risks determined the need for a review of factors influencing the increase in activity, and hence increased overtime/recall and elevated levels of medical fatigue. A patient based systems review within the health service was conducted via a Patient Level Costing Exercise.

Block and Activity Based Funding streams were analysed and assessed for suitability to meet challenges. Incorporation of Section 19.2 Funding was reviewed to assist in developing integrated service, workforce and training solutions. Through this process communication with ACRRM, QCP, the General Practice community, the Darling Downs and West Moreton Primary Healthcare Network and other key stakeholders such as Churches of Christ Care was maintained.

Results/Conclusion:

Given the challenges, key areas have been identified/addressed. These include;

* Funding Models
* Private Practice Change
* Aged Care
* After Hours
* Maximising Training/Workforce Opportunities
* Efficient Data Capture and Activity Management
* Service and Succession Planning
* Service Value Adding
* HealthPathways

They will be discussed in further detail.