

ANSWERS TO ESTIMATES QUESTIONS ON NOTICE

HEALTH AND AGEING PORTFOLIO

Additional Estimates 2010-11, 23 February 2011

Question: E11-149

OUTCOME 5: Primary Care

Topic: GP SUPER CLINICS

Written Question on Notice

Senator Fierravanti-Wells asked:

- a) For each of the 64 GP Super Clinics which of the five criteria for choosing a location were met?
- b) Were all the criteria given equal weighting?
- c) Was a record kept of the decision and analysis of the competing locations?
- d) How many locations were considered for the first round?
- e) How many locations were considered for the second round?
- f) Was a location which met four or five criteria more favourable than a location which met one or two?
- g) Did the Minister decide on locations on her own?
- h) If so why was the Department not involved?

Answer:

- a) The GP Super Clinics sites were identified under the following principles, as identified in the *GP Super Clinics National Program Guide 2010*:
 - poor access to health services;
 - poor health infrastructure;
 - where a GP Super Clinic could help take pressure off emergency departments;
 - high levels of chronic disease and /or populations with high needs, such as large numbers of children or the elderly; and
 - areas currently experiencing, or anticipated to experience, rapid population growth.Please refer to the table attached for responses against each site, as per the criteria listed above. Data obtained from:
<http://www.doctorconnect.gov.au/internet/otd/Publishing.nsf/Content/locator> (at time of location announcement); <http://www.publichealth.gov.au>; and the socioeconomic indexes for areas score as per the Australian Bureau of Statistics 2006 Census data.
- b, c, d, e, f, and g)
The selection of GP Super Clinics locations was a Government decision.
- h) The Department was not involved in the selection of locations, as the locations were announced under caretaker provisions during the 2007 and 2010 elections. It would not have been appropriate to involve the Department under caretaker provisions. Noting that in 2009, five sites were identified by the Government from unsolicited proposals.

Location	Criterion met
ACT	
Canberra, ACT	Poor access to health services/infrastructure Could help take pressure off emergency departments High growth area
NSW	
Blacktown, NSW	Could help take pressure off emergency departments High levels of chronic disease and/or populations with high needs High growth area
Blue Mountains, NSW	Poor access to health services
Broken Hill, NSW	Poor access to health services/infrastructure Could help take pressure off emergency departments High levels of chronic disease and/or populations with high needs
Coffs Harbour, NSW	Could help take pressure off emergency departments High levels of chronic disease and/or populations with high needs High growth area
Grafton, NSW	Poor access to health services High levels of chronic disease and/or populations with high needs
Gunnedah, NSW	Poor access to health services High levels of chronic disease and/or populations with high needs
Jindabyne, NSW	Could help take pressure off emergency departments High levels of chronic disease and/or populations with high needs
Lismore, NSW	Could help take pressure off emergency departments High levels of chronic disease and/or populations with high needs
Liverpool, NSW	Could help take pressure off emergency departments High levels of chronic disease and/or populations with high needs High growth area
North Central Coast, NSW	High growth area Poor access to health services High levels of chronic disease and/or populations with high needs
Nowra, NSW	Could help take pressure off emergency departments High levels of chronic disease and/or populations with high needs
Port Macquarie, NSW	High levels of chronic disease and/or populations with high needs High growth area

Location	Criterion met
Port Stephens, NSW	Poor access to health services High growth area High levels of chronic disease and/or populations with high needs
Queanbeyan, NSW	High growth area Poor access to health services
Raymond Terrace, NSW	Poor access to health services/infrastructure High levels of chronic disease and/or populations with high needs
Riverina, NSW	Poor access to health services High levels of chronic disease and/or populations with high needs
Shellharbour, NSW	Poor access to health services High levels of chronic disease and/or populations with high needs
Southern Central Coast, NSW	Poor access to health services/infrastructure Could help take pressure off emergency departments High levels of chronic disease and/or populations with high needs
Southern Lake Macquarie, NSW	Poor access to health services High levels of chronic disease and/or populations with high needs
Tweed Heads, NSW	Could help take pressure off emergency departments High levels of chronic disease and/or populations with high needs
NT	
Darwin, NT	Poor access to health services/infrastructure Could help take pressure off emergency departments High levels of chronic disease and/or populations with high needs High growth area
Palmerston, NT	High growth area Poor access to health services High levels of chronic disease and/or populations with high needs
QLD	
Brisbane Southside (hub and spoke model), QLD	High growth area High levels of chronic disease and/or populations with high needs (one location)
Bundaberg, QLD	High growth area High levels of chronic disease and/or populations with high needs
Caboolture, QLD	Poor access to health services/infrastructure Could help take pressure off emergency departments High levels of chronic disease and/or populations with high needs High growth area

Location	Criterion met
Cairns, QLD	High growth area High levels of chronic disease and/or populations with high needs
Emerald, QLD	Poor access to health services/infrastructure Could help take pressure off emergency departments High growth area
Gladstone, QLD	High growth area
Gold Coast, QLD	Could help take pressure off emergency departments High levels of chronic disease and/or populations with high needs High growth area
Ipswich, QLD	High growth area High levels of chronic disease and/or populations with high needs
Mackay, QLD	Poor access to health services/infrastructure Could help take pressure off emergency departments High growth area
Mt Isa, QLD	Poor access to health services High levels of chronic disease and/or populations with high needs
Redcliffe, QLD	Poor access to health services High growth area Could help take pressure off emergency departments High levels of chronic disease and/or populations with high needs
Strathpine, QLD	High growth area
Sunshine Coast, QLD	Could help take pressure off emergency departments High levels of chronic disease and/or populations with high needs High growth area
Townsville, QLD	High growth area
Townsville (Northern Beaches) , QLD	Could help take pressure off emergency departments High levels of chronic disease and/or populations with high needs High growth area
Wynnum, QLD	Poor access to health services/infrastructure Could help take pressure off emergency departments High levels of chronic disease and/or populations with high needs High growth area
SA	

Location	Criterion met
Adelaide, SA	Could help take pressure off emergency departments High levels of chronic disease and/or populations with high needs High growth area
Modbury, SA	Poor access to health services Could help take pressure off emergency departments
Mt Barker, SA	Could help take pressure off emergency departments High growth area
Noarlunga, SA	High growth area High levels of chronic disease and/or populations with high needs
Playford North, SA	High growth area Poor access to health services High levels of chronic disease and/or populations with high needs
TAS	
Burnie, TAS	Poor access to health services High levels of chronic disease and/or populations with high needs
Clarence (Hobart Eastern Shores site A) , TAS	Poor access to health services High levels of chronic disease and/or populations with high needs
Devonport, TAS	Poor access to health services High levels of chronic disease and/or populations with high needs
Sorell (Hobart Eastern Shores site B), TAS	Poor access to health services High levels of chronic disease and/or populations with high needs
VIC	
Ballan, VIC	Poor access to health services High levels of chronic disease and/or populations with high needs
Bendigo, VIC	Poor access to health services High levels of chronic disease and/or populations with high needs
Berwick, VIC	High growth area
Cobram, VIC	Could help take pressure off emergency departments High levels of chronic disease and/or populations with high needs
Geelong, VIC	Poor access to health services High levels of chronic disease and/or populations with high needs
Hume City, VIC	High levels of chronic disease and/or populations with high needs High growth area

Location	Criterion met
Melbourne West	Could help take pressure off emergency departments High levels of chronic disease and/or populations with high needs High growth area
Portland, VIC	Poor access to health services High levels of chronic disease and/or populations with high needs
South Morang, VIC	High growth area Poor access to health services
Wallan, VIC	High growth area
Wodonga, VIC	Poor access to health services High levels of chronic disease and/or populations with high needs
WA	
Cockburn, WA	High growth area Poor access to health services High levels of chronic disease and/or populations with high needs
Karratha, WA	Poor access to health services/infrastructure Could help take pressure off emergency departments High growth area
Midland, WA	High growth area Poor access to health services
Northam, WA	Poor access to health services/infrastructure Could help take pressure off emergency departments High levels of chronic disease and/or populations with high needs
Rockingham, WA	Poor access to health services/infrastructure Could help take pressure off emergency departments High levels of chronic disease and/or populations with high needs High growth area
Wanneroo, WA	High growth area Poor access to health services