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# Telehealth GP Service

Initiative Type

Service Improvement

Status

Sustained

Added

19 March 2019

Last updated

11 July 2019

URL

<https://clinicaexcellence.qld.gov.au/improvement-exchange/telehealth-gp-service>

## Summary

Central West Hospital and Health Service (CWHHS) implemented an innovative project with the aim of providing Telehealth GP services to complement existing remote outreach services utilising the unique model of HHS employed doctors providing all GP services in the district. The model of care allows for utilisation of the GP telehealth service by the remote communities for consultations when the GP was not physically present in the community for a face-to-face visit. The implementation of the

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project involved community consultation and liaison with all key stakeholders including the CWHHS Pharmacist, General Practitioners, Barcaldine GP practice, Primary Health Centre (PHC) employees and local community Pharmacies. The project worked with these key stakeholders in the development of appropriate telehealth consultation processes, and visited each facility to provide onsite education on documentation, billing and appointment processes and install any new equipment required. The opportunity arose to expand the project scope to the Longreach and Blackall Hub remote communities due to a lower number of consultations than anticipated via the Barcaldine Hub.

#### Key dates

Oct 2017

Jun 2018

#### Implementation sites

Central West HHS - Longreach Hospital, Barcaldine, Alpha, Jericho, Aramac, Muttaborra, Isisford, Blackall, Tambo hospitals and GP medical centres

#### Partnerships

Telehealth Support Unit, Healthcare Improvement Unit, Clinical Excellence Queensland

## Key Contacts

Louise Poole

2057

[paul.blee.hiu](mailto:paul.blee.hiu)

Assistant Director of Nursing Primary Health

Central West Hospital and Health Service

(07) 4652 5512

## **Aim**

To provide Telehealth GP services to complement existing remote outreach services utilising Hospital and Health Service employed doctors providing all the GP services in the district.

## **Benefits**

- Increased access to safe and high-quality care with a GP of their choice.
- Timely intervention and improved continuity of care.
- Improved health outcomes for remote communities provided in a safe and sustainable way.
- Increased support to the Primary Health Care nursing staff and improvement in quality of life for the general practitioner.

## **Background**

This project provides an opportunity to increase GP services to remote communities in the Central West HHS without distance being a barrier.

## **Solutions Implemented**

Although the project did not see the desired number of patients utilise this service, the service has opened other Telehealth opportunities that will be of benefit to our patients moving forward i.e. the concept of three-way Telehealth for specialist appointments and using GP Telehealth to service outreach clinics under circumstances where the doctor is unable to travel due to weather (road closures) to remote communities. The benefit for patients being seen via Telehealth in addition to improved health care was the convenience of not having to travel to Barcaldine for a medical consultation if the doctor was not visiting their facility until the following week, and having the choice of what doctor they would prefer to see including access to a female GP. The service also strengthens the evidence for the Commonwealth Government to consider expanding available MBS telehealth items for GPs.

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## **Evaluation and Results**

Patient satisfaction surveys were provided to each patient that attended a Telehealth GP appointment throughout this project. There have been 63 patient surveys received from the 85 patients seen, which has been recorded on the feedback register. 45 patients (71 per cent) stated that they would recommend this service to others and 6 patients (10 per cent) have said that they would not recommend this service but have further noted that this is only because they would prefer a face-to-face consultation. Based on patient feedback it appears that most patients were open to having another Telehealth appointment and were satisfied in using this service however, this project certainly could have been utilised more than it was by increased encouragement/awareness from Medical and Nursing staff. Something that could have been done differently is the initial communication about this service by having a group stakeholders meeting to map the service in place of individual meetings, so that everyone is on the same page with the requirements of the project. This would have allowed the opportunity for facilities to discuss workload barriers as a team and overcome concerns together.

## **Lessons Learnt**

This project has increased staff knowledge on how to use telehealth equipment, and consultation with facilities has identified the need for additional telehealth specialist services for patients in these remote communities that has now been sourced. Overall this project, although not utilised to its full potential, has created a platform of possibilities that could improve delivering care in the Central West HHS.

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