

Evaluation of a pilot project to increase access to allied health services in four rural communities in South West Victoria

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Background: Based on the identification of an allied health service delivery gap by local rural health services and general practices, Barwon Medicare Local (BML) developed a Medicare Benefits Schedule (MBS) funded model implementing a multi-disciplinary approach to diabetes care in rural communities. A team of allied health providers (diabetes educator, podiatrist, dietitian) contracted through Colac Area Health (CAH) provided face to face and tele-health visits in four rural communities in South West Victoria from 1 Feb-30 June 2015. This project was evaluated by BML in June to assess barriers and enablers to implementation, client and GP satisfaction and short term effectiveness.

Method: A mixed methods evaluation design was used. Service utilisation data was collected from CAH and general practices and survey data was collected from clients (n=20) and general practices (n=5) involved in the project. A focus group was undertaken with the allied health providers (n=3) and an interview conducted with CAH.

Results: Across the 4 communities there was an increase in the number of; individual clients seen, occasions of service, tele-health services delivered and claims for chronic disease management MBS items. Over 90% of clients surveyed were satisfied with the services delivered and would use them again in the future. GPs were satisfied with the level of support, information and engagement received throughout the project. Allied health providers and GPs outlined the benefit of the project in delivering these services closer to people homes.

Discussion: Evaluation data collected was used to inform recommendations to guide development of the project for a further 12 months, during which time further evaluation including the financial sustainability of this model will be undertaken. Understanding the barriers and enablers to this model will be crucial in determining its potential replicability in other rural areas where gaps in service delivery have been identified.