

Northern Queensland Primary Health Network

Activity Work Plan

Urgent Care Clinics

2024/25 - 2027/28

Updated August 2025





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Disclaimer

All activities captured in this Activity Work Plan are identified in the Joint Regional Needs Assessment conducted by Northern Queensland Primary Health Network and have been approved by the Department of Health, Disability, and Ageing.

UCC-MUCC – 1 – Activity 1.1: Cairns Medicare UCC

Activity priorities and description

Program key priority areas

Population Health.

Aim of activity

The Australian Government is setting up Medicare Urgent Care Clinics (Medicare UCCs) to ease hospital pressure and provide more healthcare options for urgent but non-life-threatening needs. These clinics will offer free services, extended hours, and accept walk-ins.

This initiative aims to:

- ensure timely treatment for urgent, non-life-threatening conditions
- provide safe, high-quality care
- coordinate care effectively
- offer a positive experience for patients and their carers
- alleviate pressure on emergency departments
- encourage the use of UCCs over emergency departments for non-life-threatening conditions
- · form partnerships with various health organisations
- maintain cost-effectiveness.

The goal is to enhance urgent care in the Cairns region, improving access for patients who can't get timely care from their regular general practitioner.

Description of activity

Following the comprehensive codesign in 2023, Northern Queensland Primary Health Network (NQPHN) is supporting ongoing relationship and referral pathway development between the Urgent Care Clinics (UCCs), their local Hospital and Health Services (HHS's), the Queensland Ambulance Service, and local general practices.

The Urgent Care Clinic contract for Cairns was awarded to Edmonton Family Medical Centre (Balance!) following a competitive tender process, where they were deemed to meet the required design principles.

Funding is allocated in line with specified allocations (Item D, Budget - Urgent Care Clinics Schedule Funding Agreement).

Contract management for the UCC focuses on the provider meeting and complying with the UCC Operational Guidelines and UCC Design Principles as developed and provided by the Department of Health, Disability, and Ageing and NQPHN.

NQPHN will:

- support close cooperation between the Medicare UCC, primary care services, the local emergency department, and the local health system
- undertake local communication activities to increase community awareness and understanding of the available services and conditions that are appropriate to be managed at the Medicare UCC
- support the Medicare UCC in upskilling and refreshing practitioners in clinical competencies
- notify the Commonwealth of any contractual non-compliance (including Medicare UCC 19.2)
 and work with Department of Health, Disability and Aged as required
- document, action, and notify the Commonwealth of any critical incidents in a timely manner
- continue to monitor risk, quality, and safety, informing the Commonwealth when required

The 2025/26 financial year description of activities

- Ensure the UCC continues to meet the UCC Design Principles.
- Assist clinics in understanding operational requirements as outlined in the UCC Operational Guidance.
- Promote close cooperation between the Medicare UCC, primary care services, local emergency departments, and the local health system.
- Facilitate collaboration to establish referral pathways with local emergency departments, the Queensland Ambulance Service (QAS), and other healthcare providers.
- Participate in relevant local and national Medicare UCC governance arrangements, including the national Community of Practice.
- Continue local communications activities to increase community awareness and understanding of the services available and the conditions appropriate for management within a Medicare UCC.
- Help the clinic understand their compliance responsibilities and provide relevant advice and education as needed.
- Continue to support clinics in completing new data fields as required.
- Notify the Commonwealth of any contractual non-compliance and, where relevant to the Medicare UCC's 19(2) Direction, work with the Department of Health and Aged Care as needed.

UCC-MUCC – 2 – Activity 1.2: Townsville Medicare UCC

Activity priorities and description

Program key priority areas

Population Health.

Aim of activity

The Australian Government is setting up Medicare Urgent Care Clinics (Medicare UCCs) to ease hospital pressure and provide more healthcare options for urgent but non-life-threatening needs. These clinics will offer free services, extended hours, and accept walk-ins.

This initiative aims to:

- ensure timely treatment for urgent, non-life-threatening conditions
- provide safe, high-quality care
- coordinate care effectively
- offer a positive experience for patients and their carers
- alleviate pressure on emergency departments
- encourage the use of UCCs over emergency departments for non-life-threatening conditions
- form partnerships with various health organisations
- maintain cost-effectiveness.

The goal is to enhance urgent care in the Townsville region, improving access for patients who can't get timely care from their regular general practitioner.

Description of activity

Following the comprehensive codesign in 2023, NQPHN will support ongoing relationship and referral pathway development between the Urgent Care Clinics, their local Hospital and Health Services (HHS's), the Queensland Ambulance Service (QAS), and local general practitioners.

The contract for Townsville was awarded to Eastbrook Medical following a competitive tender process conducted at the same time. The Townsville contract novated from Eastbrook to Bupa on 31 January 2025.

Funding is allocated in line with specified allocations (Annexure D - UCC Funding Schedule).

Contract management for the Urgent Care Clinic focuses on the provider meeting and complying with the UCC Operational Guidelines and UCC Design Principles as developed and provided by the Department of Health, Disability, and Ageing (DHDA) and NQPHN.

NQPHN will:

- support close cooperation between the Medicare UCC, primary care services, the local emergency department, and the local health system
- undertake local communication activities to increase community awareness and understanding of the available services and conditions that are appropriate to be managed at the Medicare UCC

support the Medicare UCC in upskilling and refreshing practitioners in clinical competencies

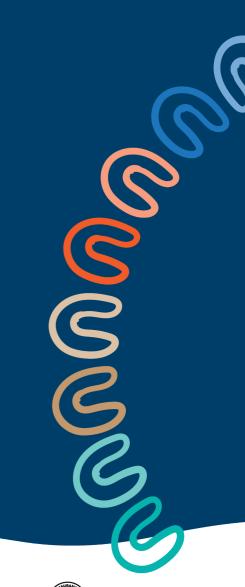
Whilst these activities are specific to the Cairns Urgent Care Clinic, the same process will apply and run concurrently with the establishment of the Queensland Health funded Townsville Medicare Urgent Care Clinic.

- notify the Commonwealth of any contractual non-compliance (including Medicare UCC 19.2)
 and work with DHDA as required
- document, action, and notify the Commonwealth of any critical incidents in a timely manner
- continue to monitor risk and quality & safety, informing the Commonwealth when required.

The description of activities for 2025/26

NQPHN will:

- ensure the UCC continues to meet the UCC Design Principles
- assist clinics in understanding operational requirements as outlined in the UCC Operational Guidance (Annexure E)
- promote close cooperation between the Medicare UCC, primary care services, local emergency departments, and the local health system
- facilitate collaboration to establish referral pathways with local emergency departments, the Queensland Ambulance Service (QAS), and other healthcare providers
- participate in relevant local and national Medicare UCC governance arrangements, including the national Community of Practice
- continue local communications activities to increase community awareness and understanding of the services available and the conditions appropriate for management within a Medicare UCC
- help clinics understand their compliance responsibilities and provide relevant advice and education as needed
- continue to support clinics in completing new data fields as required
- notify the Commonwealth of any contractual non-compliance and, where relevant to the Medicare UCCs 19 (2) Direction, working with DHDA as needed.





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