Western NSW - Core Funding
2022/23 - 2026/27
Activity Summary View

CF-COVID-VVP - 1 - COVID-19 vaccination of vulnerable populations

Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

CF-COVID-VVP

Activity Number *

1

Activity Title *

COVID-19 vaccination of vulnerable populations

Existing, Modified or New Activity *

Existing

Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

COVID-19

Aim of Activity *

To provide support and facilitate local solutions to vaccinate vulnerable populations. This will be done in collaboration with vaccination providers across the region
To develop and implement innovative, short-term COVID-19 vaccination activities, tailored to the needs of priority populations in the region.
To develop and implement sustainable vaccination activities, tailored to the needs of the region of vulnerable people.

Description of Activity *

The PHN in partnership with primary care vaccination providers, local organisations, and service providers to, identify the vulnerable populations, and coordinate vaccination clinics or in reach services to ensure access to vaccination for all.

This could include home visits, and organising in reach clinics where needed ie. Abattoirs and disability organisations

Working in partnership with our ACCHS we will be able to collaboratively target some of our Aboriginal communities who do not have access to GP services. This will include a targeted communications campaign. We will work closely with the ACCHS to ensure place-based solutions are sought to maximise vaccination rates. This may include working collaboratively to ensure extra vaccine is available for targeted pop-up clinics.

Commission primary care vaccination providers to support and coordinate activities in their regions that enable the delivery of vaccinations to vulnerable populations. Grants for targeting vulnerable populations in General Practice and Pharmacy.

We will work closely with our RACFs to determine access to vaccination provides, this may be in reach services or Commonwealth VAPP if required as approved through the Department

Reaching out to our Disability sectors and CALD communities to ensure a collaborative approach to vaccination and facilitating access to in reach, home based or appointments with vaccination providers where needed.

Provide financial support to general practice/ ACCHS to identify, engage and provide vaccination to this cohort based on clinical software data, particularly those who are housebound.

Prepare and submit a plan on a page as requested by the Commonwealth and monthly reporting in the portal, highlighting good news stories.

Needs Assessment Priorities *

Needs Assessment

WNSWPHN Needs Assessment 2021/22-2024/25

Priorities

Priority	Page reference
Service access	84
Aged care & older people	44

Activity Demographics

Target Population Cohort

All vulnerable populations as identified by the Commonwealth across the PHN region including Disability, CALD, Homeless, Aged care, Rural and remote people and those who are not eligible for Medicare

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

Activity Consultation and Collaboration

Consultation

Consultation for this program is with all partners including both LHDs, GPs and ACCHS. Meetings and discussions will include representation of the Disability sector, consumer group, local councils and other organisations who will have access to data of or people in this cohort.

Collaboration

Collaboration for this program will include both LHDs, Vaccination providers including GPs and Pharmacy, Department of Health and our Aboriginal partners. We will also have a targeted communication plan that is developed collaboratively to ensure consistent messaging. Local Councils will be part of this collaboration particularly if space is identified to set up clinics.

Activity Milestone Details/Duration

Activity Start Date

30/06/2021

Activity End Date

29/06/2024

Service Delivery Start Date

01/07/2021

Service Delivery End Date

30/06/2024

Other Relevant Milestones

NA

Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No
Continuing Service Provider / Contract Extension: No
Direct Engagement: No
Open Tender: No
Expression Of Interest (EOI): No
Other Approach (please provide details): Yes

Is this activity being co-designed?

No

Is this activity the result of a previous co-design process?

No

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

No

Has this activity previously been co-commissioned or joint-commissioned?

No

Decommissioning

No

Decommissioning details?

na

Co-design or co-commissioning comments

na

CF-COVID-LWC - 1 - Living with COVID

Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

CF-COVID-LWC

Activity Number *

1

Activity Title *

Living with COVID

Existing, Modified or New Activity *

Existing

Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

COVID

Aim of Activity *

To support and strengthen the health system to manage an increase in COVID cases by preparing Primary Care through education and training, providing resources and funding where needed to increase their capacity to monitor patients in the community.

Description of Activity *

The PHN will work in partnership with both LHDs to develop a COVID positive community care pathway. PHNs will engage with GPs and other key stakeholders to ensure that these Community Care Pathways are fit for purpose.

Support the availability and delivery of PPE for Health providers looking after COVID positive patients in the community if there is a deficit in access of supplies.

Educating and training in wearing of PPE, to ensure correct wearing of same and fit testing is available by the PHN.

Resources developed for Clinicians and consumers on how to manage COVID. Instructions for escalation and pathways are updated as required.

The PHN has available a package to assist with managing COVID positive patients at home and undertaking home visits if required. This includes:

• Shared Care platform INCA available to all Health Care providers
• Implementation of the management of COVID in the community care pathway
• Fit testing across the region (including RACFs)
• Options in accessing a clinical service provider to undertake home visits where their GP does not have capacity, or the person does not have a GP.

Needs Assessment Priorities *

Needs Assessment

WNSWPHN Needs Assessment 2021/22-2024/25

Priorities

Priority	Page reference
Health systems and coordination	107
Service access	84

Activity Demographics

Target Population Cohort

All population across the PHN region

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

Activity Consultation and Collaboration

Consultation

Consultation is required with key partners including the LHDs and ACCHS to develop the community care pathway, particularly the CCIC team and clinical leads.
Consultation with GPs and other health provides is important.
Consultation with the Aged Care and Disability Sector to ensure pathway is fit for purpose for residents and staff

Collaboration

Collaboration between Vulnerable population group organisations in identifying areas of need for the cohort if they become positive and need to isolate, wrap around social services need to be engaged with clear management pathways and consultation with these groups will support management of these patients.
Collaborating with the Aboriginal sector is key for ensuring a cultural safe pathway for our region for the Indigenous population.

Activity Milestone Details/Duration

Activity Start Date

30/06/2021

Activity End Date

29/06/2024

Service Delivery Start Date

01/07/2021

Service Delivery End Date

30/06/2024

Other Relevant Milestones

NA

Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No
Continuing Service Provider / Contract Extension: No
Direct Engagement: No
Open Tender: No
Expression Of Interest (EOI): No
Other Approach (please provide details): Yes

Is this activity being co-designed?

Yes

Is this activity the result of a previous co-design process?

No

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

No

Has this activity previously been co-commissioned or joint-commissioned?

No

Decommissioning

No

Decommissioning details?

na

Co-design or co-commissioning comments

GPs and other health provides

CF - 1 - HealthPathways - Clinical Referral Pathways

Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

CF

Activity Number *

1

Activity Title *

HealthPathways - Clinical Referral Pathways

Existing, Modified or New Activity *

Existing

Activity Priorities and Description

Program Key Priority Area *

Aged Care

Other Program Key Priority Area Description

Aim of Activity *

To develop aged care referral pathways relevant to the health needs of your PHN region - or as directed by the Department - for use by clinicians during consultation with patients, to support assessment and referral to local services and supports

Description of Activity *

The PHN will execute a signed agreement with Streamliners, recruit relevant staff including clinical editors and subject matter experts as needed.

The PHN will consult with our Advisory Councils, Clinicians, LHDs, Allied Health, Aged Care Providers and experts, and consumers to develop the models of care identified. These will be based on Best practice guidelines.

The PHN will work closely with Streamliners to ensure technical writing and programming is undertaken.

A quality cycle will be implemented to ensure review, maintenance and up to date information is written into the pathway.

The PHN has clinical editors to oversee and give guidance to the pathway development and identify priority areas for future pathway development.

PHN with partners will increase awareness, engagement, and utilisation of HealthPathways by local health care practitioners

Needs Assessment Priorities *

Needs Assessment

WNSWPHN Needs Assessment 2021/22-2024/25

Priorities

Priority	Page reference
Health systems and coordination	107
Aged care & older people	44

Activity Demographics

Target Population Cohort

All Aged Care populations

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

Activity Consultation and Collaboration

Consultation

Consultation will be sought with Primary Care clinicians, Local Health District key staff, Allied Health, Aged Care providers, Consumers and other relevant stakeholders as required.
Consultation will also be sought from other PHNs and Clinical Editors to guide the process of Health Pathways in the Western region.

Collaboration

Collaboration will be with the relevant Clinical experts, other PHNs and Clinical Leads/ Editors, and Streamliners.
Collaboration with the Aged Care Sector and Health Clinicians across the partners

Activity Milestone Details/Duration

Activity Start Date

28/02/2022

Activity End Date

29/06/2025

Service Delivery Start Date

01/03/2022

Service Delivery End Date

30/06/2025

Other Relevant Milestones

NA

Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No
Continuing Service Provider / Contract Extension: No
Direct Engagement: No
Open Tender: No
Expression Of Interest (EOI): No
Other Approach (please provide details): Yes

Is this activity being co-designed?

Yes

Is this activity the result of a previous co-design process?

No

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

No

Has this activity previously been co-commissioned or joint-commissioned?

No

Decommissioning

No

Decommissioning details?

na

Co-design or co-commissioning comments

Consultation will also be sought from other PHNs and Clinical Editors to guide the process of Health Pathways in the Western

region.

CF - 1 - CF 1 – Keeping Healthy Puura Manti Program (Chronic Disease Management)

Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

CF

Activity Number *

1

Activity Title *

CF 1 – Keeping Healthy Puura Manti Program (Chronic Disease Management)

Existing, Modified or New Activity *

Existing

Activity Priorities and Description

Program Key Priority Area *

Population Health

Other Program Key Priority Area Description

Aim of Activity *

The aim of the activity is to improve patient-centred care and prevent potential hospitalisations for people with chronic disease.

Description of Activity *

Following an extensive co-design process the Keeping Health Puura Manti Program (KHPMP) was developed to address Chronic Disease priorities across the region. The evidence-based model of care continues to embed service enhancements and working in partnership with general practice and Aboriginal medical services. It supports better management of lifestyle related chronic diseases such as Diabetes, Cardiovascular Disease, Respiratory Disease, Renal Disease and some Cancers in a general practice setting.

The program provides services where there is no alternative funding or services available for chronic disease prevention and management and currently targets people with two or more chronic diseases or at high risk of developing chronic diseases.

WNSW PHN has commissioned three service providers across three regions: Central West, Western and Far West to deliver KHPMP in Western NSW. Community based services to be commissioned through the program have been determined in collaboration with the commissioned service providers based on the identified needs of each lot and hot spot, and the availability of practitioners.

In 24/25 WNSW PHN will undertake a review to identify if any improvements are required to the model and implement necessary changes.

Needs Assessment Priorities *

Needs Assessment

WNSWPHN Needs Assessment 2021/22-2024/25

Priorities

Priority	Page reference
Aboriginal Health (Inc. Chronic Disease)	67
Service access	84
Chronic disease management & prevention	30

Activity Demographics

Target Population Cohort

The Keeping Healthy Puura Manti Program for chronic disease management and prevention will be made available to:
● people over the age of 15 years with two or more chronic diseases; or
● that have preconditions that will most likely develop into two or more chronic diseases within the next 6- 12 months; or
● have a family history of two or more chronic diseases that indicates an intergenerational connection and have preconditions that will most likely develop into chronic diseases within the next 6-12 months.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Bourke - Cobar - Coonamble	10501

Activity Consultation and Collaboration

Consultation

Consultation with Aboriginal, Community & Clinical Councils of WNSW PHN. Consultation with the Western NSW Local Health

District (WNSW LHD) & Far West Local Health District (FW LHD) & ACCHOs and AMSs regarding integrated care sites and avoiding duplication.

Collaboration

There will continue to be significant collaboration with primary health care providers, the two Local Health Districts (LHDs) and NSW RDN for the Chronic Disease activity. This collaboration will be a key component in developing a Regional Chronic Disease Management Plan.

Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2025

Service Delivery Start Date

July 2019

Service Delivery End Date

June 2025

Other Relevant Milestones

Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No
Continuing Service Provider / Contract Extension: Yes
Direct Engagement: No
Open Tender: No
Expression Of Interest (EOI): No
Other Approach (please provide details): Yes

Is this activity being co-designed?

No

Is this activity the result of a previous co-design process?

Yes

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

No

Has this activity previously been co-commissioned or joint-commissioned?

No

Decommissioning

No

Decommissioning details?

Co-design or co-commissioning comments

WNSW PHN has undertaken an extensive co-design process that included input from key stakeholders including the 5 PHN Councils, Community Aboriginal Health providers and the establishment of the CDMPP Co-design Advisory Group.

CF - 1 - Dementia Consumer Pathway Resource

Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

CF

Activity Number *

1

Activity Title *

Dementia Consumer Pathway Resource

Existing, Modified or New Activity *

Existing

Activity Priorities and Description

Program Key Priority Area *

Aged Care

Other Program Key Priority Area Description

Aim of Activity *

To develop dementia specific health pathways - for use by clinicians and other primary care providers during consultation with patients, to support assessment and referral to local services and supports.
This activity will be undertaken with input from Dementia Australia to ensure the pathways are both nationally consistent at a high level and reflective of individual services and supports within individual PHN regions.
It will also be informed by broad local consultation including with, but not limited to, local primary care clinicians, other health, allied health, aged care providers and consumers (their families and carers) about the current gaps and opportunities in the model of care for people living with dementia.

Description of Activity *

The PHN will execute a signed agreement with Streamliners, recruit relevant staff including clinical editors and liaise with subject matter experts as needed.

The PHN will evaluate and continually improve their dementia HealthPathways and relevant consumer resources. This will be in consultation with our Advisory Councils, Clinicians, LHDs, Allied Health, Aged Care Providers and experts identified.

The PHN will work closely with Streamliners to ensure technical writing and programming is undertaken.

The PHN will frequently review, update and maintain referral HealthPathways content, as new services and best practice evidence for dementia care evolves

PHN with partners will increase awareness, engagement, and utilisation of HealthPathways by local health care practitioners. Training and education will be provided to local health practitioners on the pathways.

Develop, review, maintain and enhance localised consumer resources that support older people and their carers and families to understand and make informed choices about health and aged care services that may be of benefit to them.

Needs Assessment Priorities *

Needs Assessment

WNSWPHN Needs Assessment 2021/22-2024/25

Priorities

Priority	Page reference
Health systems and coordination	107
Service access	84
Aged care & older people	44

Activity Demographics

Target Population Cohort

This pathway may cross over all adult populations particularly our elderly

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

Activity Consultation and Collaboration

Consultation

Consultation will be sought with Primary Care clinicians, Local Health District key staff, Allied Health, Aged Care providers,

Consumers and other relevant stakeholders.
Consultation will also be sought from other PHNs and Clinical Editors to guide the process of Health Pathways in the Western region.
Consultation with Dementia Australia

Collaboration

Collaboration will be with a Clinical Governance group, other PHNs and Clinical Leads/ Editors, Streamliners and relevant subject matter experts.
Collaboration with the Aged Care Sector and Health Clinicians across the partners
Collaboration with Dementia specific organisations to guide best practice models of care, management and treatment options

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Activity Milestone Details/Duration

Activity Start Date

28/02/2022

Activity End Date

29/06/2025

Service Delivery Start Date

01/03/2022

Service Delivery End Date

30/06/2025

Other Relevant Milestones

NA

Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No
Continuing Service Provider / Contract Extension: No
Direct Engagement: No
Open Tender: No
Expression Of Interest (EOI): No
Other Approach (please provide details): Yes

Is this activity being co-designed?

Yes

Is this activity the result of a previous co-design process?

No

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

No

Has this activity previously been co-commissioned or joint-commissioned?

No

Decommissioning

No

Decommissioning details?

na

Co-design or co-commissioning comments

Dementia Australia

CF - 3 - CF 3 – Access to Eye Health for Prevention and Management of Chronic Disease

Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

CF

Activity Number *

3

Activity Title *

CF 3 – Access to Eye Health for Prevention and Management of Chronic Disease

Existing, Modified or New Activity *

Existing

Activity Priorities and Description

Program Key Priority Area *

Population Health

Other Program Key Priority Area Description

Aim of Activity *

The aim of the activity is to increase access to eye health services for people with or at risk of chronic disease and enable better management of these conditions, preventing potential hospitalisations.

Description of Activity *

Outback Eye Service (OES)

The 'Outback Eye Service' (OES) is an outreach eye service for patients located in regional NSW. The OES delivers regular eye clinics including (consultations, diagnosis, treatment and monitoring of eye disease), providing a comprehensive ophthalmology / optometry service. This clinic is conducted in a primary care setting within general practice, Aboriginal Medical Centres or community centres.

The service is provided in Bourke, Lightning Ridge, Walgett, Brewarrina and Cobar. The majority of these patients are Aboriginal people with high rates of chronic disease.
This service increases access to essential eye health services to people living in remote communities, providing critical primary care optometry services, relevant for early detection and management of chronic conditions (in addition to secondary and tertiary eye care).

The OES is co-funded with the Fred Hollows Foundation. The OES is delivered by the Department of Ophthalmology at the Prince of Wales Hospital (as part of the South Eastern Sydney Local Health District). The clinic provides comprehensive ophthalmic services to patients, including:

• Optometry;
• Ophthalmology;
• Eye surgery; and
• Patient referrals to the Prince of Wales Hospital for complex clinical cases.

Patient clinical services and case management is co-ordinated by the staff of the OES. The service is delivered by a team of health professionals that includes; an ophthalmologist, registrar, orthoptist, ophthalmic nurse, aboriginal eye health nurse, optometrist and optical dispenser.

Needs Assessment Priorities *

Needs Assessment

WNSWPHN Needs Assessment 2021/22-2024/25

Priorities

Priority	Page reference
Aboriginal Health (Inc. Chronic Disease)	67
Service access	84
Chronic disease management & prevention	30

Activity Demographics

Target Population Cohort

People living in Bourke, Lightning Ridge, Walgett, Brewarrina and Cobar requiring eye services, related to chronic conditions, early intervention and management.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

SA3 Name	SA3 Code
Bourke - Cobar - Coonamble	10501

Activity Consultation and Collaboration

Consultation

Consultation with Aboriginal, Community & Clinical Councils of WNSW PHN. Consultation with the Western NSW Local Health District (WNSW LHD) & Far West Local Health District (FW LHD) & ACCHOs and AMSs regarding integrated care sites and avoiding duplication.

Collaboration

There will be significant collaboration with primary health care providers, the two Local Health Districts (LHDs) for this activity. The WNSW PHN will work with stakeholders on the development of a Regional Plan for Chronic Disease to strengthen alignment and integration of programs in the region.

Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2025

Service Delivery Start Date

July 2019

Service Delivery End Date

June 2025

Other Relevant Milestones

Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No
Continuing Service Provider / Contract Extension: Yes
Direct Engagement: No
Open Tender: No
Expression Of Interest (EOI): No
Other Approach (please provide details): No

Is this activity being co-designed?

No

Is this activity the result of a previous co-design process?

No

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

Yes

Has this activity previously been co-commissioned or joint-commissioned?

Yes

Decommissioning

No

Decommissioning details?

na

Co-design or co-commissioning comments

na

CF - 4 - CF 4 - Early Intervention for Children

Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

CF

Activity Number *

4

Activity Title *

CF 4 - Early Intervention for Children

Existing, Modified or New Activity *

Existing

Activity Priorities and Description

Program Key Priority Area *

Population Health

Other Program Key Priority Area Description

Aim of Activity *

Improve access to key services (primarily speech pathology) for early intervention to improve outcomes for children diagnosed with developmental delay.

Description of Activity *

Early intervention and provision of key services is critical to improve outcomes for children with developmental delay. In WNSW PHN region, access to these services is not always available in a timely and accessible way, particularly in communities where the proportion of young children is relatively high and in remote locations.

WNSW PHN will fund allied health services (primarily speech pathology and occupational therapy) to pre-school and early primary school age children as an early intervention chronic disease initiative. These services are for children identified at risk of developmental delays and are delivered in schools and early learning services by visiting health professionals.

This activity will improve access to key services for children diagnosed with developmental delay by:

• Working with our existing partnerships to develop an understanding of current initiatives and gaps in service delivery for children assessed as requiring Speech Pathology intervention;
• Providing access to child speech and language development services for pre-school aged children in high need areas with no

alternative services;
• To ensure continuity with primary health care relevant assessment information will be forwarded to the child's GP;
• Work collaboratively with the Rural Doctors Network, Western NSW Local Health District and Far West Local Health District to ensure the relevant data is collected to measure outcomes and impact of these services.
• WNSW PHN will undertake a mapping exercise to understand the current service availability and service gaps across the region to inform allocation of supports.
• WNSW PHN will explore and look to implement novel, technology based interventions to support service access across regional, rural and remote locations that struggle to with access to clinicians.

Needs Assessment Priorities *

Needs Assessment

WNSWPHN Needs Assessment 2021/22-2024/25

Priorities

Priority	Page reference
Service access	84
First 2000 days of life	22

Activity Demographics

Target Population Cohort

Pre-school and school aged children in the WNSW PHN region with developmental delay.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Blue Mountains - South	12402
Bathurst	10301
Lachlan Valley	10302
Lower Murray	10902
Lithgow - Mudgee	10303
Orange	10304
Broken Hill and Far West	10502
Dubbo	10503
Bourke - Cobar - Coonamble	10501

Activity Consultation and Collaboration

Consultation

Consultation with the Western NSW Local Health District (WNSW LHD) & Far West Local Health District (FW LHD) & Rural Doctors Network NSW (RDN NSW).

Collaboration

This activity will collaborate with Local Health District and RDN NSW early intervention activities.

Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2025

Service Delivery Start Date

July 2019

Service Delivery End Date

June 2025

Other Relevant Milestones

Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No
Continuing Service Provider / Contract Extension: Yes
Direct Engagement: No
Open Tender: No
Expression Of Interest (EOI): No
Other Approach (please provide details): Yes

Is this activity being co-designed?

No

Is this activity the result of a previous co-design process?

No

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

No

Has this activity previously been co-commissioned or joint-commissioned?

No

Decommissioning

No

Decommissioning details?

na

Co-design or co-commissioning comments

na

CF - 5 - CF 5 - First 2000 Days

Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

CF

Activity Number *

5

Activity Title *

CF 5 - First 2000 Days

Existing, Modified or New Activity *

Existing

Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

First 2000 Days

Aim of Activity *

The First 2000 Days Alliance Model will aim to bring together key stakeholders under an Alliance model and work together in partnership to develop and implement integrated strategies that support the health and wellbeing of young children, 0-5 years, through a place-based collective approach with a focus on continuous quality improvement. The First 2000 days is a priority area for both Western & Far West Local Health Districts and the WNSWPHN. The Western NSW Health Collaboration has agreed to the Alliancing approach to facilitate positive outcomes including, strong clinical and community leadership and shared accountability for outcomes.

Description of Activity *

The project will use existing research, key findings from scoping groups, and subject matter experts to identify and focus on a single population need for the First 2000 Days. Further the project will take the identified need and use the Alliance Continuous Quality Cycle (CQI) model to measure, analyse ,create, plan and implement the most important strategies.

Needs Assessment Priorities *

Needs Assessment

WNSWPHN Needs Assessment 2021/22-2024/25

Priorities

Priority	Page reference
Service access	84
First 2000 days of life	22

Activity Demographics

Target Population Cohort

Youth cohort 0 to 5 years.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

Activity Consultation and Collaboration

Consultation

Stakeholder engagement and consultation activities have included presentations to the Western NSW Leadership Collaborative (members include Western & Far West CEOs, NSW RDN CEO & PHN CEO) who have agreed to the Alliancing approach. Meetings with key staff working in First 2000 Days at Western & Far West LHD to discuss current services, gaps in services and how services can better integrate. Presentation to the WNSWPHN Clinical Councils on the Alliance Model. Other consultation will include Aboriginal stakeholders groups across WNSWPHN including ACCHOs and Regional Assemblies and Key Consumer and community groups.

Collaboration

Governance will include the Alliance Leadership Team (ALT) members will consist of an Independent Chair, Western NSW Leadership Collaborative group (members listed above), Lead Clinicians, and Aboriginal and Community representation. An Alliance Operations Team will be established to lead the activity and strategies. An interactive workshop will be held with key stakeholders to identify the Area of focus.

Activity Milestone Details/Duration

Activity Start Date

30/06/2022

Activity End Date

29/06/2025

Service Delivery Start Date

01/07/2022

Service Delivery End Date

30/06/2025

Other Relevant Milestones

NA

Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: Yes
Continuing Service Provider / Contract Extension: No
Direct Engagement: No
Open Tender: No
Expression Of Interest (EOI): No
Other Approach (please provide details): No

Is this activity being co-designed?

Yes

Is this activity the result of a previous co-design process?

No

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

Yes

Has this activity previously been co-commissioned or joint-commissioned?

No

Decommissioning

No

Decommissioning details?

na

Co-design or co-commissioning comments

Further details on co-design and co-commissioning will be identified at the interactive workshop, once the area of focus for First 2000 Days has been identified by key stakeholders. The Alliance will apply a collective approach that addresses health issues in targeted localities.

CF - 6 - CF 6 - Sustainable Primary Care - CF

Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

CF

Activity Number *

6

Activity Title *

CF 6 - Sustainable Primary Care - CF

Existing, Modified or New Activity *

Modified

Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

Providers of Primary Health Care

Aim of Activity *

The aim of this activity is to address the challenges faced by the Western NSW (WNSW) region, which greatly affect healthcare delivery and community well-being. These challenges encompass geographical vastness, socioeconomic disadvantage, low population density, transportation and access difficulties, workforce shortages, Indigenous health disparities, reduced Medicare Benefits Schedule (MBS) utilisation, digital health disparities, an aging population, mental health disparities, and infrastructure limitations.

In response to these sustainability challenges confronting primary care in WNSW, the WNSW Primary Health Network (WNSW PHN) is embarking on a focused three-year program. This initiative aims to evaluate and implement place-based, co-designed primary care services, while concurrently executing complementary initiatives to address the identified challenges. The Sustainable Primary Care Program (SPCP) by WNSW PHN serves as a cornerstone of these efforts.

At its core, the SPCP aspires to deliver tangible benefits, including:
• Improved Patient Experience
Enhancing the quality and accessibility of care to enrich the patient journey.
• Better Health Outcomes
Driving measurable improvements in health outcomes, particularly for underserved populations.
• Clinician Well-being

Supporting healthcare professionals to thrive in their roles, fostering a sustainable workforce.
• Cost Savings
Optimising resource allocation and operational efficiencies to achieve sustainable healthcare delivery.
• Health Equity
Promoting equitable access to high-quality care, irrespective of geography or socioeconomic status.
• Community-Centred General Practices
Implementing initiatives to foster sustainable general practices within communities, promoting long-term health and well-being for all residents.

In summary, our concerted efforts within the SPCP aim to catalyse positive transformations in primary care delivery, fostering healthier, more resilient communities across Western NSW.

Description of Activity *

The goal of this initiative is to meticulously evaluate and implement place-based, co-designed primary care services tailored to the unique needs of the region. The primary objective of the SPCP is to develop and implement sustainable primary care initiatives, enhancing the quality, accessibility, and effectiveness of healthcare services while ensuring equitable access for all residents.

Guiding Principles
The Sustainable Primary Care Program (SPCP) operates on a set of core principles aimed at driving effective, sustainable, and responsive healthcare initiatives in the WNSW region. These principles underscore our commitment to collaboration, innovation, and excellence.

1. Collaborative Partnership
Prioritising collaboration across organisations to tackle complex healthcare challenges jointly.
2. Human-Centric Approach
Elevating the human experience in health and healthcare, ensuring patient-centered care and clinician well-being.
3. Cultural Responsiveness
Committing to culturally responsive practices, recognising and respecting the diverse needs and preferences of our communities.
4. Strategic Focus
Meticulously designing initiatives to avoid duplication with prior or ongoing efforts, ensuring efficient resource allocation.
5. Innovative Thinking
Embracing creativity and innovation to accelerate the adoption of best practices and drive positive change in healthcare delivery.

Integrated Workstreams
The SPCP operates through three cohesive workstreams, bolstered by robust project management:
1. Sustainability Enabler
Driving initiatives to fortify the sustainability of primary care services, addressing financial challenges and workforce dynamics.
2. Community Engagement
Actively involving stakeholders and communities in co-creating solutions aligned with local needs and priorities.
3. Place-based Solutions
Developing tailored interventions to address specific challenges of each locality, harnessing local strengths to foster community resilience and promote sustainable healthcare practices.

Key Activities
1. Sustainability Enabler
• Conduct comprehensive business sustainability reviews for 108 general practices in the region.
• Provide tailored assistance to practices needing immediate support.
• Organise workshops, webinars, and knowledge-sharing sessions to foster innovation.
2. Place-based Solutions
• Conduct thorough assessments of specific challenges and service gaps within each Local Government Area (LGA).
• Collaborate closely with local stakeholders to identify, test, and implement co-designed models of care.
• Emphasise community engagement and capacity-building efforts.

Future Focus
Moving forward, the SPCP will focus on sustaining and building upon achievements, expanding initiatives to reach more communities, strengthening partnerships and collaboration, and monitoring and evaluating effectiveness.

Needs Assessment Priorities *

Needs Assessment

WNSWPHN Needs Assessment 2021/22-2024/25

Priorities

Priority	Page reference
Health Workforce	115
Health systems and coordination	107

Activity Demographics

Target Population Cohort

General population

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

Activity Consultation and Collaboration

Consultation

We aim to engage a diverse array of stakeholders to ensure that SPCP is informed by a comprehensive understanding of local needs and priorities. Our consultation efforts will encompass various stakeholders, including:
• Collaborating with local government bodies to align initiatives with regional development plans and community priorities.
• Engaging with residents to understand their healthcare experiences, preferences, and needs.
• Consulting with owners and managers of general practices to gather insights into operational challenges and opportunities for improvement.
• Partnering with Aboriginal Community Controlled Health Organisations (ACCHOs) to address Indigenous health disparities and incorporate culturally responsive practices.
• Working closely with health authorities to coordinate efforts and leverage existing resources.
• Involving nurse practitioners in the development of innovative care delivery models and workforce strategies.
• Collaborating with pharmacists and allied health professionals to enhance integrated care and service delivery.

• Engaging with organisations serving vulnerable populations to ensure inclusivity and accessibility.
• Consulting with registered nurses to understand frontline perspectives and inform workforce development strategies.
• Partnering with educational institutions to support ongoing professional development and training initiatives.

Through this consultative approach, we aim to gather diverse perspectives, foster collaboration, and co-create solutions that address the complex healthcare challenges faced by the Western NSW region.

Collaboration

In our place-based planning efforts, we will collaborate closely with key stakeholders, including the Local Health Districts (LHDs) and the Rural Doctors Network (RDN). Across each of the 27 Local LGAs, we will convene representatives from various facets of the healthcare ecosystem, such as general practitioners, ACCHOs, allied health professionals, pharmacists, hospitals, community leaders, and consumers. Together, we will engage in a co-design process to develop tailored solutions that address the unique healthcare needs of each locality within the Western NSW region.

Activity Milestone Details/Duration

Activity Start Date

30/06/2022

Activity End Date

29/06/2025

Service Delivery Start Date

01/07/2022

Service Delivery End Date

30/06/2025

Other Relevant Milestones

NA

Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No
Continuing Service Provider / Contract Extension: No
Direct Engagement: No
Open Tender: No
Expression Of Interest (EOI): No
Other Approach (please provide details): Yes

Is this activity being co-designed?

No

Is this activity the result of a previous co-design process?

No

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

No

Has this activity previously been co-commissioned or joint-commissioned?

No

Decommissioning

No

Decommissioning details?

na

Co-design or co-commissioning comments

The co-design plan for the SPCP fosters collaboration among diverse stakeholders to tailor primary care initiatives to the specific needs of WNSW communities.

Key Components:
1. Engage stakeholders from various sectors, including local councils, community members, healthcare providers, and educational institutions.
2. Host interactive sessions for stakeholders to share insights, identify challenges, and co-create solutions.
3. Conduct comprehensive assessments to pinpoint local priorities and challenges, guiding the development of targeted initiatives.
4. Establish feedback mechanisms to continuously refine solutions based on stakeholder input and evolving community needs.
5. Empower stakeholders through training and knowledge-sharing to sustain initiatives and drive positive change.

By embracing this co-design approach, the SPCP aims to create impactful, community-driven solutions that enhance access to high-quality healthcare services across Western NSW.

HSI - 1 - HSI 1 - Workforce Support to Improve Practices and Improve the Quality of Primary Health Care

Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

HSI

Activity Number *

1

Activity Title *

HSI 1 - Workforce Support to Improve Practices and Improve the Quality of Primary Health Care

Existing, Modified or New Activity *

Existing

Activity Priorities and Description

Program Key Priority Area *

Workforce

Other Program Key Priority Area Description

Aim of Activity *

• To support a skilled and engaged primary health workforce to deliver care that meets the needs of the communities in the WNSW PHN area.
• Improved quality of care, efficiency and sustainability in general practice and Aboriginal Medical Services.
• A primary health care workforce strategy that is sustainable, addresses local challenges in rural areas and minimises gaps in workforce availability.

Description of Activity *

General Practice Support and Education
Western NSW PHN offers a comprehensive Continuing Professional Development (CPD) program across our region.
WNSW PHN fosters a model of integrated education whilst also providing profession specific opportunities as required.
Peer learning is encouraged via our ECHO networks and Unique accredited CPD opportunities are offered in multiple sites across Western NSW.
To enable greater accessibility for rural and regional communities the WNSWPHN CPD Team provide education via locally facilitated online CPD sessions, many of which can be accessed on demand via our website.

The WNSW PHN assists GPs and general practice staff with professional and multi-disciplinary team-oriented care, quality systems training, workforce recruitment and retention support, and technology-based learning opportunities. WNSW PHN has a highly

experienced Practice Support and Improvement Team who provide direct support to general practices and other health professionals across the region. This support includes assistance with:
New initiatives from the Department of Health and Ageing ie. MyMedicare
• Sustainability Reviews
Practice management
• Health IT optimisation
• Information management
• Quality improvement and change management methodology
Accreditation assistance
• Chronic disease management
Closing the Gap targets
• Business optimisation
• Clinical support
• Training for staff
• Preventative health
• Communication and integration between providers
• Immunisation & cold chain management
• Workforce support
• Practice data extraction and analysis to drive improvement

Support activities are based on The 10 building blocks of high-performing primary health care which identifies and describes the essential elements of primary health care to facilitate high performance with an additional 2 blocks with a Rural Lens Cultural Safety & Sustainability.

This work is a program to build capacity of our primary care providers and having providers working at the highest level of their scope in a more coordinated and supported way.

Primary Healthcare Workforce Strategy
WNSW PHN will continue to build on the work that has been carried out to date in developing a regional, integrated approach to primary health workforce planning.

Through our partnerships with the NSW Rural Doctors Network, Western and Far West Local Health Districts and Bila Muuji Aboriginal Corporation Health Service, WNSW PHN will continue to focus on the implementation of the activities under this strategy.

The goal is to ensure the primary healthcare workforce capability is sustainable and aligned to the changing needs of the rural communities across the WNSW PHN region and to ensure that gaps in workforce availability are minimised. This will be achieved through a coordinated and integrated long term approach.

Support the objectives of the PHN Strategy (2023-24), through new funding streams and more coordinated and integrated care.

Needs Assessment Priorities *

Needs Assessment

WNSWPHN Needs Assessment 2021/22-2024/25

Priorities

Priority	Page reference
Digital Health	108
Health Workforce	115
Health systems and coordination	107
Aboriginal Health (Inc. Chronic Disease)	67
Service access	84
Chronic disease management & prevention	30

Activity Demographics

Target Population Cohort

All General Practices and Aboriginal Community Controlled Health Services, moving into more Multidisciplinary teams including Allied Health & Pharmacy.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

No but includes ACCHOs and AMS's

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Blue Mountains - South	12402
Bathurst	10301
Lachlan Valley	10302
Lower Murray	10902
Lithgow - Mudgee	10303
Orange	10304
Broken Hill and Far West	10502
Dubbo	10503
Bourke - Cobar - Coonamble	10501

Activity Consultation and Collaboration

Consultation

The Practice Support & Improvement Team meet with Practice teams to development Practice Engagement plans to work on areas of importance to the practice. This will be post evaluation of the sustainability audits.

Building block frameworks are revised and updated after engagement of practices. Updates are given to the PHN councils and PHN Board for further consultation and feedback.

The Primary Health Workforce Strategy has been developed in consultation with 35 stakeholders.

The capability program will include consultation and participation with practices and ACCHS.

The education program works in collaboration with all providers including specialists; LHDs, State based organisations. This program has GP advisors overseeing the program.

Collaboration

These activities are delivered in close collaboration with General Practice, ACCHS and Allied Health Providers to ensure that the support delivered addresses the current needs.

The GP practices are willing to work with the WNSW PHN to support General Practice Accreditation and WNSW PHN works closely with the General Practice Accreditation providers.
WNSW PHN also works with the Australian Digital Health Agency to support the digital health agenda, with Department of Health to support the Practice Incentive Program, as well as with quality prescribing and Closing the Gap compliance activity.

WNSW PHN works closely with other NGOs, Government agencies and education institutions to develop quality professional development opportunities and leverage existing programs. Key partners include the Western and Far West LHDs, the School of Rural Health Sydney University, ACCRM, Royal Australian College of General Practice and others.
WNSW PHN collaborates broadly with national health associations to promote other professional development opportunities that are relevant for regional practitioners.

The Primary Health Care Workforce Strategy is undertaken in collaboration with Western & Far West NSW LHD, NSW Rural Doctor's Network, and over 35 other regional stakeholders. Key partners being the NSW Rural Doctors Network, Western and Far West Local Health Districts and Bila Muuji Aboriginal Corporation Health Service.

Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2025

Service Delivery Start Date

July 2019

Service Delivery End Date

June 2025

Other Relevant Milestones

Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No
Continuing Service Provider / Contract Extension: No
Direct Engagement: No
Open Tender: No
Expression Of Interest (EOI): No
Other Approach (please provide details): Yes

Is this activity being co-designed?

No

Is this activity the result of a previous co-design process?

Yes

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

No

Has this activity previously been co-commissioned or joint-commissioned?

No

Decommissioning

No

Decommissioning details?

na

Co-design or co-commissioning comments

na

HSI - 2 - HSI 2 - Digital Health

Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

HSI

Activity Number *

2

Activity Title *

HSI 2 - Digital Health

Existing, Modified or New Activity *

Existing

Activity Priorities and Description

Program Key Priority Area *

Digital Health

Other Program Key Priority Area Description

Aim of Activity *

Embedded utilisation of digital health strategies to improve clinical outcomes and experience in primary care.
Empowered primary care workforce confidently using digital health technologies to enhance care.
Local solutions designed within and across sectors to improve access to efficient and effective care.

Description of Activity *

Primary healthcare providers will be supported to adopt, change and utilise digital health technologies to assist in the provision of quality and timely care and sharing of information.
Digital health technologies including (but not limited to):
* Secure messaging including the adoption of electronic referrals and smart form technology
* Integrated / Shared Care Planning tools
* Support and training on embedding the use of the My Health Record system
* Telehealth / Videoconferencing
* Electronic ordering of pathology and diagnostic imaging requests
* Electronic Prescribing and real time prescription monitoring

Establish a digital health maturity assessment platform to effectively measure the relative maturity of general practices, ACCHOs, and residential aged care facilities. Results are used to improve the digital health change and adoption approach used by the PHN

when working with individual health services, supporting change techniques that are specific to individual and local health service needs.

Support will be provided to providers by way of education and training, primarily by the Digital Health Team with additional support from the Practice Support and Improvement Team; either remotely or in person as needed.

Needs Assessment Priorities *

Needs Assessment

WNSW PHN Needs Assessment 2019/20-2021/22 V3

Priorities

Priority	Page reference
Digital Health	128
Workforce and service access	124

Activity Demographics

Target Population Cohort

General Practices, Aboriginal Controlled Community Health Organisations, Specialist Practices and Allied Health Practices including Community Pharmacies.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Across the PHN area including Aboriginal Medical Services and other Aboriginal health support services.

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Blue Mountains - South	12402
Bathurst	10301
Lachlan Valley	10302
Lower Murray	10902
Lithgow - Mudgee	10303
Orange	10304
Broken Hill and Far West	10502
Dubbo	10503
Bourke - Cobar - Coonamble	10501

Activity Consultation and Collaboration

Consultation

WNSWPHN consults with its advisory groups, member networks, peak bodies, NGOs, allied health professionals, general practices, pharmacists, medical specialists, Western NSW LHD, Far West NSW LHD, eHealth NSW, Australian Digital Health Agency (ADHA), external training organisations, software vendors and other PHNs.

Collaboration

General practices and Aboriginal Controlled Community Health Organisations including GPs, practice nurses and practices managers, allied health professionals, medical specialists, pharmacists to guide participation and adoption in the use of specific digital health systems.
Advisory groups to provide advice and support in digital health integration and activities.
Aged care Providers to encourage integrated coordination of care for older Australians through My Health Record and improved communication with hospitals.
Australian Digital Health Agency to ensure our digital health activities are aligned with the National Digital Health Strategy.
eHealth NSW as the statewide leadership group on the shape, delivery and management on ICT-led strategies and implements change and adoption at a NSW level.
Far West and Western LHD's to facilitate implementation of technologies that enhance communication and clinical information sharing between the LHD's and primary care providers.
Other PHNs to leverage existing digital health activities and collaborate with other PHNs enabling open sharing of content and lessons learned.

Activity Milestone Details/Duration

Activity Start Date

30/06/2022

Activity End Date

29/06/2025

Service Delivery Start Date

July 2022

Service Delivery End Date

June 2025

Other Relevant Milestones

Digital Health Maturity Assessment campaign runs from 9 May to 30 June 2024

Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No
Continuing Service Provider / Contract Extension: No
Direct Engagement: No
Open Tender: No
Expression Of Interest (EOI): No
Other Approach (please provide details): Yes

Is this activity being co-designed?

No

Is this activity the result of a previous co-design process?

No

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

No

Has this activity previously been co-commissioned or joint-commissioned?

No

Decommissioning

No

Decommissioning details?

na

Co-design or co-commissioning comments

na

HSI - 4 - HSI 4 – Immunisation and Cancer Screening

Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

HSI

Activity Number *

4

Activity Title *

HSI 4 – Immunisation and Cancer Screening

Existing, Modified or New Activity *

Existing

Activity Priorities and Description

Program Key Priority Area *

Population Health

Other Program Key Priority Area Description

Aim of Activity *

• To maintain and/or improve childhood Immunisation coverage rates across the WNSW PHN especially in the Aboriginal population.
• Provide annual Immunisation CPD for immunisation providers and Aboriginal Health Practitioners to strengthen quality of immunisation services
• Work collaboratively with Public Health Units to promote immunisation QI activities in general practice and Aboriginal Health Services
• Support general practice and Aboriginal Health Services to improve immunisation coverage in adult population focusing on NIP vaccines with a focus on at risk / vulnerable population
• Promote and support general practices and Aboriginal Community Controlled Health and Medical Services to integrate the National Cancer Screening Register into clinical information systems to strengthen QI activities
• Support general practice and Aboriginal Health Services to improve cancer screening participation rates
• Strengthen collaboration between WNSW PHN, Caner Institute NSW, BreastScreen NSW, Local Health Districts and other agencies that have responsibilities in cancer screening to identify opportunities to improve participation rates in cancer screening.

Description of Activity *

Work with General Practice, ACCHO's and Aboriginal Medical Services (AMSs) to identify in their data the under screened and overdue patients. Support clinical software process change to promote screening and vaccination participation including data

cleaning utilizing AIR and NCSR
• Improve systems and processes for timely recall & reminder systems
• Increase the recording of immunisation on the Australian Immunisation Register through data cleaning, support immunisation service occasions and working collaboratively with PHU and immunisation providers
• WNSW PHN will assist and support capacity building in primary health care
• WNSW PHN will collaborate and partner with the NCIRS and LHD to provide upskilling and education for GPs and nurses in Immunisation.
• PHN will collaborate with Multicultural Support Services to deliver face to face education sessions tailored to specific language groups to enhance knowledge and understanding of healthy living practices and promote cancer screening participation for eligible people

Needs Assessment Priorities *

Needs Assessment

WNSWPHN Needs Assessment 2021/22-2024/25

Priorities

Priority	Page reference
Aboriginal Health (Inc. Chronic Disease)	67
Chronic disease management & prevention	30

Activity Demographics

Target Population Cohort

All patient populations across the PHN with particular focus on Aboriginal and Torres Strait Islander populations.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Blue Mountains - South	12402
Bathurst	10301
Lachlan Valley	10302
Lower Murray	10902
Lithgow - Mudgee	10303
Orange	10304
Broken Hill and Far West	10502
Dubbo	10503
Bourke - Cobar - Coonamble	10501

Activity Consultation and Collaboration

Consultation

Stakeholder engagement with other providers and services is an important factor in increasing our Cancer screening and Immunisation numbers. This will include both Local Health Districts, NSW Cancer Institute, Cancer Council NSW and local community groups. (Aboriginal Lands Councils and Community groups).

Collaboration

- Partner with Far West & Western LHDs to identify and target areas of low coverage.
- Work with the ACCHO's and AMSs to identify children who are not up to date with their immunisations.
- Collaborate with the LHD, Breastscreen, the NSW Cancer Institute and Cancer Council NSW to share program promotion.
- Collaborate with local community groups to enhance information and literacy of screening and immunisations

Activity Milestone Details/Duration

Activity Start Date

30/06/2022

Activity End Date

29/06/2025

Service Delivery Start Date

01/07/2022

Service Delivery End Date

30/06/2025

Other Relevant Milestones

Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No
Continuing Service Provider / Contract Extension: No
Direct Engagement: No
Open Tender: No
Expression Of Interest (EOI): No
Other Approach (please provide details): Yes

Is this activity being co-designed?

No

Is this activity the result of a previous co-design process?

No

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

No

Has this activity previously been co-commissioned or joint-commissioned?

No

Decommissioning

No

Decommissioning details?

na

Co-design or co-commissioning comments

na

HSI - 5 - HSI 5 - Cultural Safety in Primary Health Care

Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

HSI

Activity Number *

5

Activity Title *

HSI 5 - Cultural Safety in Primary Health Care

Existing, Modified or New Activity *

Existing

Activity Priorities and Description

Program Key Priority Area *

Aboriginal and Torres Strait Islander Health

Other Program Key Priority Area Description

Aim of Activity *

Cultural safety is increasingly used in organisations representing and or providing services to Aboriginal and Torres Strait Islander peoples.
The purpose of WNSWPHN Cultural Safety Framework implementation activities are to drive and influence improvement in health outcomes for Aboriginal people and help prevent systemic racism and discrimination in primary health care. All activities extend on work already undertaken in developing our WNSWPHN Cultural Safety Framework.

This activity aims to:
• Improve the ability of WNSW PHN to commission culturally safe services
• Provide high quality culturally safe, responsive and accessible primary health care for Aboriginal and Torres Strait Islander people
• Raise awareness about the barriers to equitable outcomes for Aboriginal people
• Strengthen partnerships with the primary health care sector
• Improve capacity of General Practice and ACCHOs to provide culturally responsive health care for Aboriginal people.

Description of Activity *

Cultural Safety education training for WNSW PHN staff, stakeholders and commissioned service providers. The content will be founded on WNSWPHN Cultural Safety Framework, provided within local context, include relevant primary health care case studies and build on Cultural Safety work already undertaken by WNSW PHN. The education program will be provided by an

appropriated trained, qualified, accredited facilitator/training organisation, procured in alignment with WNSW PHN procurement policy.

Minimum standards for cultural safety in primary health care. This activity will include research investigation of quality improvement standards for cultural safety, partnerships with key stakeholders including accreditation bodies, to ensure alignment with existing frameworks. Implementation of standards for continuous quality improvement in general practice and primary health care services, including commissioned service providers.

Continue development and implementation of an Aboriginal Health Stakeholder and Community Engagement guide (internal use) to improve WNSW PHN processes for engagement, co-design and cultural safety in commissioned services.

o The process guide will align with the WNSWPHN Cultural Safety Framework and have relevance to a WNSWPHN regional context
o There will be an education training component related to Cultural engagement process guide

This activity includes implementation of our Reconciliation Action Plan for WNSW PHN. In addition, the activity will see review and renewal of the WNSW PHN Cultural Safety Framework as required.

Needs Assessment Priorities *

Needs Assessment

WNSWPHN Needs Assessment 2021/22-2024/25

Priorities

Priority	Page reference
Aboriginal Health (Inc. Chronic Disease)	67

Activity Demographics

Target Population Cohort

Primary health care and other health care workforce in Western NSW, commissioned service providers.

In Scope AOD Treatment Type *

Indigenous Specific *

Yes

Indigenous Specific Comments

Whilst this activity targets local health services, if they are perceived as culturally safe Aboriginal and Torres Strait Islander people are more likely to access the health care and services they require. Evidence and experience tell us that healthcare works best where the patient and the clinician can share their knowledge and understanding.

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Blue Mountains - South	12402
Bathurst	10301
Lachlan Valley	10302
Lower Murray	10902
Lithgow - Mudgee	10303
Orange	10304
Broken Hill and Far West	10502
Dubbo	10503
Bourke - Cobar - Coonamble	10501

Activity Consultation and Collaboration

Consultation

Stakeholder engagement and consultation activities will include collaboration and feedback review with WNSW PHN Aboriginal, Community & Clinical Councils and revision improvement checks with alliance partnerships e.g. Western NSW Local Health District (WNSW LHD) and Far West Local Health District (FW LHD), Agency of Clinical Innovation network associations, NSW/ACT PHN Aboriginal Health and network partnerships as well as update Regional ACCHO, General practice, Primary health and community review update checks and evaluations.

Collaboration

The WNSW PHN Aboriginal Health Council will be the key collaborators for this activity. WNSW PHN will work in partnership with accreditation bodies and relevant associations for the development of minimum standards for cultural safety. There is also the opportunity to co-develop such standards with other PHNs through the ACT/NSW Aboriginal Health Network.

Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2025

Service Delivery Start Date

July 2019

Service Delivery End Date

June 2025

Other Relevant Milestones

Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: Yes
Continuing Service Provider / Contract Extension: No
Direct Engagement: No
Open Tender: No
Expression Of Interest (EOI): No
Other Approach (please provide details): Yes

Is this activity being co-designed?

Yes

Is this activity the result of a previous co-design process?

Yes

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

No

Has this activity previously been co-commissioned or joint-commissioned?

No

Decommissioning

No

Decommissioning details?

na

Co-design or co-commissioning comments

na

HSI - 6 - HSI 6 - Data, Service Planning, Monitoring and Stakeholder Engagement

Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

HSI

Activity Number *

6

Activity Title *

HSI 6 - Data, Service Planning, Monitoring and Stakeholder Engagement

Existing, Modified or New Activity *

Existing

Activity Priorities and Description

Program Key Priority Area *

Population Health

Other Program Key Priority Area Description

Aim of Activity *

• To enable data-driven decision making for PHN commissioned service and including commissioning, planning of primary health care services and general practice support, resulting in the right services being delivered where they are needed the most.
• Data to drive quality improvement in primary health care services and support robust evaluation of programs.
• Service planning, design and evaluation that is informed by effective engagement with key stakeholders including health care providers, community and consumers.

Description of Activity *

Data and Performance
Activities include the collection, management, analysis and presentation of data in a usable format to support evidence-based decision making within the PHN on both a regional and sub-regional level. These activities include the analysis of general practice data, commissioned service data, population health data, demographics, workforce, stakeholder and service mapping. Data quality audit and improvement activities will be conducted to support WNSW PHN evaluate and report on outcomes.
Development of data reports and dashboards to assist the monitoring and measuring the performance and effectiveness of the commissioned services. Establishment of data storage and analytics platform to enable the data collection, storage and reporting of primary health care services in the region.

WNSW PHN will continue its data-driven quality improvement program with general practice and AMSs expanding its General

Practice Data Information Platform, utilising PEN extracted data. This will involve working with general practice on new improvement measures, useful reporting and preparing the platform for use with QI PIP.

Stakeholder and Community Engagement
WNSW PHN will continue engagement activities focusing on primary health care providers, consumers and stakeholders in our region, which is vital for informing service planning, design and evaluation of services. An Engagement and Digital Media Officer works across teams to support engagement activities and to ensure information collected through engagement is captured and used effectively. WNSW PHN will be developing new platforms through which to engage with a broader range of health consumers and community members across the vast distances in our region.

WNSW PHN will implement an Aboriginal Health Engagement Strategy that recognises appropriate protocols and structure of engagement for the 14 nations within our PHN area. People who identify as Aboriginal and Torres Strait Islander make up 10.5% of our population, therefore a strategic approach is needed to enhance engagement with these communities that will improve the cultural safety of primary health care services in our region.

These activities will be primarily delivered by WNSW PHN staff, with support from specialist consultants and software providers as needed. WNSW PHN will continue to work closely with Local Health Districts and the Health Intelligence Unit and other stakeholders to avoid duplication in data collection and consultation wherever possible.

Needs Assessment Priorities *

Needs Assessment

WNSWPHN Needs Assessment 2021/22-2024/25

Priorities

Priority	Page reference
Health systems and coordination	107

Activity Demographics

Target Population Cohort

Whole of region. Community and consumers, primary health care providers and stakeholders in Western NSW.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

This activity covers the whole population of WNSW PHN, of which 10.5% identify as Aboriginal and Torres Strait Islander. There are components of this activity that target Aboriginal and Torres Strait Islander people including:
• Aboriginal Stakeholder and Community consultation for service design, ongoing validation of health needs and evaluation of services.
• Data collection and analysis focusing on Aboriginal health priorities and outcomes.
• Engagement with Aboriginal Community Controlled Health Organisations and Aboriginal Medical Services for data-driven quality improvement initiatives.

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Blue Mountains - South	12402
Bathurst	10301
Lachlan Valley	10302
Lower Murray	10902
Lithgow - Mudgee	10303
Orange	10304
Broken Hill and Far West	10502
Dubbo	10503
Bourke - Cobar - Coonamble	10501

Activity Consultation and Collaboration

Consultation

The WNSW PHN completed a detailed region-wide needs assessment in 2018 which included consultation workshops with community, service providers and Aboriginal community and stakeholders. These workshops were supported by further consultation through a phone and online survey. This process highlighted areas for further investigation as well as scope for further targeted consultation to inform services.

Collaboration

WNSW PHN collaborates with a range of stakeholders for data collection and analysis to avoid duplication and develop a detailed understanding of the health needs and services in our region including regular collaboration with the Far West LHD, Western NSW LHD, Health Intelligence Unit, NSW Rural Doctors Network, NSW Ministry of Health, Australian Hospitals and Healthcare Association and Australian Government Agencies.

Our approach to stakeholder engagement is informed by advice from our Clinical, Community and Aboriginal Health Councils as well as discussions with LHDs. WNSW PHN will work closely with Consumer Health Forums Australia to develop new models for community engagement.

Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2025

Service Delivery Start Date

July 2019

Service Delivery End Date

June 2025

Other Relevant Milestones

Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No
Continuing Service Provider / Contract Extension: No
Direct Engagement: No
Open Tender: No
Expression Of Interest (EOI): No
Other Approach (please provide details): Yes

Is this activity being co-designed?

No

Is this activity the result of a previous co-design process?

No

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

No

Has this activity previously been co-commissioned or joint-commissioned?

Yes

Decommissioning

No

Decommissioning details?

na

Co-design or co-commissioning comments

na

HSI - 8 - HSI 8 – Regional Chronic Disease Management and Prevention Planning

Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

HSI

Activity Number *

8

Activity Title *

HSI 8 – Regional Chronic Disease Management and Prevention Planning

Existing, Modified or New Activity *

Existing

Activity Priorities and Description

Program Key Priority Area *

Population Health

Other Program Key Priority Area Description

Aim of Activity *

Work with the two Local Health Districts and other stakeholders on coordinated planning for a regional response to chronic disease management and prevention.

Description of Activity *

This activity will involve WNSW PHN leading a strategic approach to Chronic Disease Management in the WNSW region and will include collaboration across sectors to develop a Regional Chronic Disease Management Framework. This activity will ensure that there is a collaborative regional approach to chronic disease management.

Needs Assessment Priorities *

Needs Assessment

WNSWPHN Needs Assessment 2021/22-2024/25

Priorities

Priority	Page reference
Health systems and coordination	107
Chronic disease management & prevention	30

Activity Demographics

Target Population Cohort

People at high risk of developing chronic disease, and those who already have a chronic disease diagnosis. Young children and families.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Blue Mountains - South	12402
Bathurst	10301
Lachlan Valley	10302
Lower Murray	10902
Lithgow - Mudgee	10303
Orange	10304
Broken Hill and Far West	10502
Dubbo	10503
Bourke - Cobar - Coonamble	10501

Activity Consultation and Collaboration

Consultation

Consultation with Aboriginal, Community & Clinical Councils of WNSW PHN. Consultation with the Western NSW Local Health District (WNSW LHD) & Far West Local Health District (FW LHD), NSW Rural Doctors Network (RDN) & ACCHOs regarding integrated care sites and avoiding duplication.

Collaboration

The WNSW PHN will work with stakeholders on the development of a Regional Plan for Chronic Disease Management and Prevention to strengthen alignment and integration of programs in the region.

There will continue to be significant collaboration with primary health care providers, the Far West (FWLHD) and Western NSW Local Health Districts (LHDs) (WNSW LHD) and the NSW RDN for the Regional Chronic Disease Management and Prevention Planning activity.

Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2025

Service Delivery Start Date

October 2019

Service Delivery End Date

June 2025

Other Relevant Milestones

Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No
Continuing Service Provider / Contract Extension: No
Direct Engagement: No
Open Tender: Yes
Expression Of Interest (EOI): Yes
Other Approach (please provide details): Yes

Is this activity being co-designed?

No

Is this activity the result of a previous co-design process?

No

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

No

Has this activity previously been co-commissioned or joint-commissioned?

No

Decommissioning

No

Decommissioning details?

na

Co-design or co-commissioning comments

na

HSI - 10 - HSI 10 - Sustainable Primary Care - HSI

Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

HSI

Activity Number *

10

Activity Title *

HSI 10 - Sustainable Primary Care - HSI

Existing, Modified or New Activity *

New Activity

Activity Priorities and Description

Program Key Priority Area *

Population Health

Other Program Key Priority Area Description

Aim of Activity *

The Western NSW (WNSW) region faces some unique challenges that impact health services and the health of the community, including:
• Geographical vastness
• Areas of socioeconomic disadvantage
• Low population density
• Transport and access challenges
• Difficulties in recruitment and retention of health professionals
• Financial instability of health services
• Reduced per capita MBS utilisation

Due to the substantial sustainability challenges for primary care in WNSW, the WNSW PHN is prioritising a three-year program of work to assess and implement place-based co-designed primary care services.
A range of other initiatives are also currently being implemented to address these known challenges. The WNSW PHN Sustainable Primary Care Program (SPCP) will complement existing initiatives.
The six principles supporting the way we work across the SPCP:

• Collaborative across organisations using relational approaches

• Elevating the human experience in health and healthcare
• Culturally responsive
• Non duplicative with previous/existing initiatives and consultations
• Fostering creating thinking and accelerating good practice

Three concurrent workstreams of the SPCP will be implemented, underpinned by strong project management:
• Sustainability Accelerator
• Engagement
• Place-based solutions

The ultimate aim of the program is to provide:
• Improved patient experience
• Better health outcomes
• Clinician wellbeing
• Lower costs
• Health equity

Description of Activity *

Sustainable Primary Care - Phase 2

The PHN will develop and implement long term, sustainable primary care initiatives offering the right care, in the right place, at the right time with the right team.

Phase 2 of Sustainable Primary Care will commence in 2023 and will be a continuation of the initial program with some additions. There will be an implementation of a communications and engagement plan that relates to the results of the surveys that have been completed in Phase 1. There will also be a continued intense focus on the reviews of General Practices where the highest need is identified as WNSWPHN works with these practices to ensure long term sustainability. There will be further assessments done on these practices that will include a more in-depth assessment in the form of a Pulse Survey as well as a Digital survey to ascertain the digital maturity of the General Practice. Support will be provided by WNSWPHN existing teams to develop long term plans to assist and support General Practices. There will be a requirement from the WNSWPHN to have an agile approach with the ability to quickly implement sustainability assessment tools that are appropriate for each individual General Practice. LGA profiles will also be developed in this phase across WNSW which will be a critical document describing local stakeholders to inform a region-specific engagement and communications approach.

Needs Assessment Priorities *

Needs Assessment

WNSWPHN Needs Assessment 2021/22-2024/25

Priorities

Priority	Page reference
Health Workforce	115
Health systems and coordination	107

Activity Demographics

Target Population Cohort

General population

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

Activity Consultation and Collaboration

Consultation

We will consult a wide range of stakeholders including local councils, community members, General Practice owners, ACCHOs, Local Health Districts, Nurse Practitioners, Pharmacy, Allied health professionals, other service providers (disability, aged care), registered nurses and education providers.

Collaboration

We will be undertaking place-based planning in partnership with key stakeholders including the Local Health Districts and Rural Doctors Network. In each of our 27 LGAs we will bring together all parts of the health system - GPs, ACCHOs, allied health, pharmacy, hospitals, community leaders and consumers to co-design place-based solutions.

Activity Milestone Details/Duration

Activity Start Date

31/12/2022

Activity End Date

29/06/2025

Service Delivery Start Date

01/01/2023

Service Delivery End Date

30/06/2025

Other Relevant Milestones

NA

Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No
Continuing Service Provider / Contract Extension: No
Direct Engagement: No
Open Tender: No
Expression Of Interest (EOI): No
Other Approach (please provide details): Yes

Is this activity being co-designed?

No

Is this activity the result of a previous co-design process?

No

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

No

Has this activity previously been co-commissioned or joint-commissioned?

No

Decommissioning

No

Decommissioning details?

na

Co-design or co-commissioning comments

na

CF-COVID-PCS - 6200 - B.6.2 COVID-19 Primary Care Support

Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

CF-COVID-PCS

Activity Number *

6200

Activity Title *

B.6.2 COVID-19 Primary Care Support

Existing, Modified or New Activity *

Existing

Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

COVID-19

Aim of Activity *

To provide support for Australia's COVID-19 Vaccine and Treatment Strategy to the primary, aged care and disability sectors. This will ensure all eligible populations will have access to vaccination in a timely manner.

Description of Activity *

Provide support to GPRC's, General Practices, ACCHs, RACFs, and disability facilities as required.

Liaise with LHD on planning vaccination gaps across the PHN region (this includes the need to fill gaps across the region with pop up clinics) based on data.

Facilitate the EOI process for vaccination across the General Practices and GPRCs identifying gaps across the region.

Support vaccine delivery sites in their establishment and operation, including where appropriate, performing functions of assurance and assessment of suitability and ongoing quality control support. This includes access to education and training as required.

Coordinate vaccine roll out within the RACFs , coordinate delivery of the vaccine, reporting back to the Department and follow up on adverse reactions and missing doses. This includes in reach services to ensure all eligible residents have access to vaccination or

VAS providers organised in partnership with the Department of Health.

Liaise with key delivery partners in securing vaccinations across the PHN region ensuring cold chain management maintained.

Coordinate vaccine rollout within GPRCs and General Practice
Support vaccination rollout in the ACCHs

Support vaccine delivery to be integrated within local health pathways to assist with coordination.

Ensuring consistent communications are sent between Department, and all primary health providers of the vaccination roll out.

This activity will be delivered by the primary care team in the PHN in partnership with our LHDs, ACCHS, RACFs, GPRCs. Pharmacy and other organisations as required.

Ensure a communication plan is aligned with this rollout to ensure all communities have access to timely up to date information

Needs Assessment Priorities *

Needs Assessment

WNSWPHN Needs Assessment 2021/22-2024/25

Priorities

Priority	Page reference
Health Workforce	115
Service access	84

Activity Demographics

Target Population Cohort

All population as prioritised by the Department through the stages for the Vaccination program

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

Activity Consultation and Collaboration

Consultation

Consultation with key partners including General Practice; Local Councils and Local Health Districts for identification of GPRC and vaccination sites.
Consultation with partners such as ACCHS; LHDs and Pharmacy.
Consultation with RACFs
Consultation or feedback from Consumers

Collaboration

Collaboration across all sectors, all PHNs and all levels of Government including Local; State and Commonwealth.
Collaboration with General Practice, GPRC's, ACCHs, RACFs and Disability services
Collaboration with various Health Departments
Collaboration with all media platforms to ensure timely distribution of information

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Activity Milestone Details/Duration

Activity Start Date

31/03/2021

Activity End Date

29/06/2024

Service Delivery Start Date

March 2021

Service Delivery End Date

June 2024

Other Relevant Milestones

Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No
Continuing Service Provider / Contract Extension: No
Direct Engagement: No
Open Tender: No
Expression Of Interest (EOI): No
Other Approach (please provide details): Yes

Is this activity being co-designed?

No

Is this activity the result of a previous co-design process?

No

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

No

Has this activity previously been co-commissioned or joint-commissioned?

No

Decommissioning

No

Decommissioning details?

na

Co-design or co-commissioning comments

na