

# Western NSW - PHN Pilots and Targeted Programs 2023/24 - 2027/28 Activity Summary View



## PP&TP-EPP - 5 - PHN Endometriosis and Pelvic Pain GP Clinics



### Activity Metadata

**Applicable Schedule \***

PHN Pilots and Targeted Programs

**Activity Prefix \***

PP&TP-EPP

**Activity Number \***

5

**Activity Title \***

PHN Endometriosis and Pelvic Pain GP Clinics

**Existing, Modified or New Activity \***

Existing



### Activity Priorities and Description

**Program Key Priority Area \***

Other (please provide details)

**Other Program Key Priority Area Description**

Endometriosis and pelvic pain

**Aim of Activity \***

The key program objectives are to support clinics to provide multi-disciplinary care with a focus on improving diagnostic delay and to promote early access to intervention, care and treatment options for endometriosis and pelvic pain. The secondary aim over time is built on investment in resources and initiatives, undertaken as part of the program, and/or to implement new activities.

**Description of Activity \***

PHN will support GP clinics to provide enhanced services for the treatment and management of endometriosis and pelvic pain, based on the needs of the community, including but not limited to:

- recruitment of specialised staff, including nurse practitioner and allied health professionals;
- capital costs such as fit-out costs for pelvic physiotherapy areas;
- associated equipment; and
- resources, training and development.

Provide data for program monitoring and continuous evaluation.  
 Support GP clinics for regular quantitative and qualitative data collection and outcome measurements, including baseline data.  
 Contribute to and provide data and information for a comprehensive program evaluation of the GP clinics

**Needs Assessment Priorities \***

**Needs Assessment**

WNSW PHN - Health Needs Assessment - 2024/25 to 2026/27

**Priorities**

Priority	Page reference
Greater health literacy of people with chronic diseases their family or caregivers is required to improve understanding medical information, treatment regimens, and the importance of self-management.	123
Greater communication between multi-disciplinary team and information being available in MyHealth is required to provide up to date medical history and reduce time chasing information.	123
Care coordination, shared care, information sharing and integration of services needs to occur to allow patients to move between services, particularly to meet the needs of First Nations People	265



**Activity Demographics**

**Target Population Cohort**

Women or people with a uterus who have endometriosis or pelvic pain or need access to other specialised services including nurse practitioner and allied health professionals.

**In Scope AOD Treatment Type \***

**Indigenous Specific \***

No

**Indigenous Specific Comments**

## Coverage

### Whole Region

Yes



## Activity Consultation and Collaboration

### Consultation

WNSW PHN to work closely with the General Practice that was successful in this program to support stakeholder engagement and consultation

### Collaboration

WNSW PHN to work closely with the successful General Practice in collaborating with other specialised services and staff, including nurse practitioner and allied health professionals



## Activity Milestone Details/Duration

### Activity Start Date

31/03/2023

### Activity End Date

29/06/2026

### Service Delivery Start Date

1/04/2023

### Service Delivery End Date

30/06/2026

### 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: 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?**

No

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

No

**Decommissioning**

No

**Decommissioning details?**

na

**Co-design or co-commissioning comments**

na



## PP&TP-GCPC - 1 - PHN Palliative Care - Greater Choice for At Home Palliative Care



### Activity Metadata

**Applicable Schedule \***

PHN Pilots and Targeted Programs

**Activity Prefix \***

PP&TP-GCPC

**Activity Number \***

1

**Activity Title \***

PHN Palliative Care - Greater Choice for At Home Palliative Care

**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 \***

The review and continuance of Greater Choice for At Home Palliative Care (GCfAHPC) program, using the SHARE (Shared Health and Advance Care Record for End-of-life choices) toolkit, and activities to increase community death literacy and increase numbers of advance care directives. Increase skills and knowledge of primary health care clinicians.

**Description of Activity \***

These activities include the following:

- Maintenance and updating of the existing Electronic Palliative Approach Framework (ePAF).
- Participating and contributing to workshops for WNSW PHN to collaborate and discuss innovative ideas that can be used to design and develop effective models in the WNSW PHN region utilising national palliative projects and existing GCfAHPC pilot projects.
- WNSW PHN to lead a codesign process to bring stakeholders – consumers, families, and health workers together to improve palliative care services across the region.
- Improve clinical handover through the development of resources and upskilling of the health workforce by the Integration Officers Palliative Care based on best practice (including effective clinical handover ISBAR tool resources and the Yellow Envelope hospital transfer form) to compliment the ePAF.
- Implement a multi-faceted approach to palliative care education with the aim of diminishing the stigma surrounding palliative care and increasing the completion rate of Advance Care Directives (ACD) within our region.

- Increase rates of death literacy in community and map regional death literacy needs.
- Monitor and maintain the HealthPathways suite for palliative care
- Conduct workshops to upskill GPs, nurse practitioners and RACH clinical care staff.

## Needs Assessment Priorities \*

### Needs Assessment

WNSW PHN - Health Needs Assessment - 2024/25 to 2026/27

#### Priorities

Priority	Page reference
Healthcare professionals working in rural communities require greater support to address isolation and need a broader skill set compared to their urban counterparts.	263
Older adults in rural and remote areas need to receive timely diagnosis and access essential care from specialists such as geriatricians and mental health professionals.	253
A reduction in rates of all cause hospitalisations and potentially preventable hospitalisations for First Nations people to reduce the disparity in health outcomes for First Nations people in region	66
Care coordination, shared care, information sharing and integration of services needs to occur to allow patients to move between services, particularly to meet the needs of First Nations People	265



## Activity Demographics

### Target Population Cohort

The target population cohort are patients with a known life-limiting illness (such as incurable cancer, end-stage heart failure, end-stage COPD, end-stage renal failure, incurable neurological disease, etc) who are identified as being in the last 6 to 12 months of life. This activity also impacts on the family and carers of these patients.

The target clinician population includes General Practitioners, Primary Health Care Nurses, MPS Nurses, RACF Nurses, Specialist Palliative Care Teams, NSW Ambulance Officers, Hospital Doctors and Nurses, Local Health District staff and Primary Health Network staff that are involved in the clinical care of patients and their carers in the last year of life.

### In Scope AOD Treatment Type \*

### Indigenous Specific \*

No

### Indigenous Specific Comments

## Coverage

### Whole Region

Yes



## Activity Consultation and Collaboration

### Consultation

Consultation has been occurring throughout the project with RACF's as well as with the PHN Councils, palliative care specialist and the Western & Far West LHDs.

### Collaboration

This proposal addresses recommendations within National Palliative Care Strategy, NSW Agency of Clinical Innovation (ACI) PEO LC Blueprint, NSW Rural Health Plan and NSW Integrated Care Strategy (ICS). It links with work already undertaken in the locality in partnership with NSW Health, ACI and University of Sydney Department of Rural Health, Broken Hill (BHUDRH).



## Activity Milestone Details/Duration

### Activity Start Date

30/10/2021

### Activity End Date

29/06/2029

### Service Delivery Start Date

01/04/2018

### Service Delivery End Date

30/06/2029

### 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: Yes

Direct Engagement: No

Open Tender: No

**Expression Of Interest (EOI):** No

**Other Approach (please provide details):** No

**Is this activity being co-designed?**

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**Decommissioning**

No

**Decommissioning details?**

na

**Co-design or co-commissioning comments**

na