

Hunter New England and Central Coast - PHN Pilots and Targeted Programs

2019/20 - 2023/24

Activity Summary View



PP&TP-AHPGPE - 401 - 4.01 Allied Health GP Education



Activity Metadata

Applicable Schedule *

PHN Pilots and Targeted Programs

Activity Prefix *

PP&TP-AHPGPE

Activity Number *

401

Activity Title *

4.01 Allied Health GP Education

Existing, Modified or New Activity *

New Activity



Activity Priorities and Description

Program Key Priority Area *

Workforce

Other Program Key Priority Area Description

Aim of Activity *

- Improve General Practice understanding of the importance of providing allied health services to people with dementia and other residents with complex medical needs in Residential Aged Care Facilities (RACFs)
- Provide education and awareness to General Practitioners and their staff to increase their knowledge of new temporary MBS items numbers for allied health and mental health items for residents of aged care facilities, and how they can support residents of RACFs

Description of Activity *

Deliver a minimum of three education sessions to GPs and other Primary Care Providers, including Practice Nurses, in the HNECC PHN region that relate to:

*The importance of providing allied health services to people with dementia and other residents with complex medical needs in Residential Aged Care Facilities (RACFs);
*new temporary MBS allied health and mental health items for residents of aged care facilities, and how they can support residents of RACFs

Needs Assessment Priorities *

Needs Assessment

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
Health needs of an ageing population	42
Increasing prevalence of dementia	42
A lack of health service integration, coordination and information sharing	42
Targeted support for general practice	42
Limited capacity of services to address dementia	42
Reduced access to services for older people	42
Reduced access to services in rural and remote areas	42
Cost barriers to healthcare	42
Support for GPs to play a central role in mental health care	51



Activity Demographics

Target Population Cohort

General Practice staff

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

General Practitioners
Clinical Councils
GP advisors engaged during COVID-19 Pandemic
HNECC PHN education team

Collaboration



Activity Milestone Details/Duration

Activity Start Date

21/02/2021

Activity End Date

29/06/2022

Service Delivery Start Date

22/02/2021

Service Delivery End Date

30/06/2022

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): 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?

Co-design or co-commissioning comments

Where appropriate subject matter experts may be engaged to deliver on specific MBS item education.



PP&TP-AHPAGP - 301 - 3.01 Allied Health Priority Access Group Programs



Activity Metadata

Applicable Schedule *

PHN Pilots and Targeted Programs

Activity Prefix *

PP&TP-AHPAGP

Activity Number *

301

Activity Title *

3.01 Allied Health Priority Access Group Programs

Existing, Modified or New Activity *

New Activity



Activity Priorities and Description

Program Key Priority Area *

Aged Care

Other Program Key Priority Area Description**Aim of Activity ***

To improve the physical health of Residential Aged Care Facility (RACF) residents impacted by COVID-19 and decrease the risks associated with deconditioning among RACF residents (such as falls).

Description of Activity *

The PHN will commission physiotherapists, exercise physiologists and/or occupational therapists to undertake moderate intensity progressive resistance and high challenge balance training group sessions with residents of a RACF in the Mid North Coast LGA affected by an outbreak of COVID-19 (defined as two or more cases). The program will support an initial meeting between the provider and RACF to identify eligible participants, an initial one-on-one suitability and baseline assessment between the provider and each identified resident, plus two hours per week of physical therapy in groups of four participants for up to 26 weeks.

Needs Assessment Priorities ***Needs Assessment**

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
Health needs of an ageing population	42
Reduced access to services for older people	42
Limited availability of early intervention services	51



Activity Demographics

Target Population Cohort

Residents living in aged care facilities - specifically identified by DOH as being impacted by COVID-19 Pandemic.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

SA3 Name	SA3 Code
Taree - Gloucester	10805



Activity Consultation and Collaboration

Consultation

This is a targeted program, consultation has occurred between the PHN, the identified RACF and the identified allied health provider.

Collaboration

Activities for this program have been defined by DOH. Ongoing conversations will occur between all parties to ensure the program is working to expectations and meeting targets.



Activity Milestone Details/Duration

Activity Start Date

14/02/2021

Activity End Date

30/12/2021

Service Delivery Start Date

01/04/2021

Service Delivery End Date

30/09/2021

Other Relevant Milestones

Baseline report due to DOH May 21, 2021



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: Yes

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?

Co-design or co-commissioning comments



PP&TP-Op - 601 - 6.01 PP&TP-OPERATIONAL



Activity Metadata

Applicable Schedule *

PHN Pilots and Targeted Programs

Activity Prefix *

PP&TP-Op

Activity Number *

601

Activity Title *

6.01 PP&TP-OPERATIONAL

Existing, Modified or New Activity *

New Activity



Activity Priorities and Description

Program Key Priority Area *

Other Program Key Priority Area Description

Aim of Activity *

Description of Activity *

Needs Assessment Priorities *

Needs Assessment

Priorities



Activity Demographics

Target Population Cohort

In Scope AOD Treatment Type *

Indigenous Specific *

Indigenous Specific Comments

Coverage

Whole Region



Activity Consultation and Collaboration

Consultation

Collaboration



Activity Milestone Details/Duration

Activity Start Date

Activity End Date

Service Delivery Start Date

Service Delivery End Date

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): No

Is this activity being co-designed?

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

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

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

Decommissioning

Decommissioning details?

Co-design or co-commissioning comments



PP&TP - 501 - 5.01 PP&TP Interest



Activity Metadata

Applicable Schedule *

PHN Pilots and Targeted Programs

Activity Prefix *

PP&TP

Activity Number *

501

Activity Title *

5.01 PP&TP Interest

Existing, Modified or New Activity *

New Activity



Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

Aim of Activity *

Interest reported for PP & TP programs
Movement Nurse Disorder
Domestic Violence

Description of Activity *

Interest reported for PP & TP programs
Movement Nurse Disorder
Domestic Violence

Needs Assessment Priorities *

Needs Assessment

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
Health needs of an ageing population	42
High rates of chronic disease	42
A lack of health service integration, coordination and information sharing	42
Lack of prevention and early intervention services	42
High rates of chronic disease hospitalisations	42
Limited availability of early intervention services	51



Activity Demographics

Target Population Cohort

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

Collaboration



Activity Milestone Details/Duration

Activity Start Date

Activity End Date

Service Delivery Start Date

Service Delivery End Date

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): No

Is this activity being co-designed?

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

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

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

Decommissioning

Decommissioning details?

Co-design or co-commissioning comments



PP&TP-DVP - 101 - 1.01 Domestic Violence Pilot



Activity Metadata

Applicable Schedule *

PHN Pilots and Targeted Programs

Activity Prefix *

PP&TP-DVP

Activity Number *

101

Activity Title *

1.01 Domestic Violence Pilot

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

Domestic Violence

Aim of Activity *

This project aims to support and build capacity in the Primary Care workforce to effectively recognise, respond and refer people experiencing domestic and family violence. Through a range of key pilot activities, the project will create sustainable pathways which further imbed primary care into the existing domestic family violence service sector, to ensure primary care's response to this issue is collaborative, services are integrated, and people are getting the right help and the right time.

Description of Activity *

The project has six components that encompass a range of activities:

1. A Domestic Family Violence 'local link' (DFVLL), based in services in three communities - Armidale, Tamworth, Central Coast. The DFVLL has specialist DFV expertise and sector knowledge. They will drive and coordinate local links and referral pathways between GPs/other primary care providers and the DFV sector. They will help identify ways to integrate primary health care into the local DFV sector. The Local Link will co-facilitate with a local GP Melbourne University's evidence-based Readiness Program to 10 General Practices within each specified region. – Please note: The full scope of the DFV Local Link role is currently being designed within the co-design process.
2. Workforce Capacity Building providing training and support for primary health care including:

- Evidence-based whole of practice training for GP staff to identify and respond to the signs of DFV
 - Student Multi-Disciplinary Communities of Practice and training partnerships with universities to equip the next the next generation of health and social care providers.
3. Strategies to support primary health providers to play a practical role in helping victims of DFV get expert help faster.
 4. Local integration, so that the project is tailored for local circumstances.
 5. System influence, tapping into local expertise and using this to make broader system changes.
 6. Continuous improvement by integrating design and evaluation, so that evidence is used to improve iterations of the model in an ongoing way rather than at the end.

Needs Assessment Priorities *

Needs Assessment

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
Rural health disparities	42
A lack of health service integration, coordination and information sharing	42
Locally relevant professional development and education for primary care clinicians	42
Targeted support for general practice	42
Barriers to screening in primary care	42
Reduced access to services in rural and remote areas	42
Reduced access to services for people experiencing homelessness	42



Activity Demographics

Target Population Cohort

Tamworth, Armidale and the Central Coast were chosen because these localities have high incidents of DFV per population.

In Scope AOD Treatment Type *

Indigenous Specific *

Yes

Indigenous Specific Comments

The pilot is not specifically or exclusively aimed at providing service only to Aboriginal people, however due to high rates of DFV in Aboriginal communities and high Aboriginal populations within the specified regions, the pilot will work to ensure service and equity is available to the community's most vulnerable.

Therefore, the Tamworth Local Link position has been advertised as an Aboriginal Identified Position to ensure the pilot ensures cultural safety and inclusion.

Coverage

Whole Region

No

SA3 Name	SA3 Code
Wyong	10202
Gosford	10201
Armidale	11001
Tamworth - Gunnedah	11004



Activity Consultation and Collaboration

Consultation

Tamworth Family Support Services
Violence Abuse and Neglect Team – Hunter New England Local Health District
Tamworth Base Hospital Social Workers
Lived Experience
Local GP's
Local Practice Nurses
Armidale Women's Shelter
Armidale Family Support
Domestic Family Violence Police Liaison Officers
Violence Abuse and Neglect Team – Central Coast Local Health District
Aboriginal Health Access Team – Primary Health Network
Armajun Aboriginal Medical Service
Relationships Australia
Central Coast DFV Network
*** More consultation to occur as the pilot is mid-way through a co-design.

Collaboration

HNECC PHN will collaborate with a range of organisations to deliver on the outcomes of the initiative. Such organisations include:

- Violence, Abuse and Neglect Team – Hunter New England Local Health District
- Violence, Abuse and Neglect Team – Central Coast Local Health District
- Family and Community Services
- General Practitioners
- Practice Nurses
- Local Women and Children's Refuge
- Local Youth Services
- DFV Police Liaison Officers
- Maternal and Child Health Nurses
- Aboriginal Health Workers
- Women's Domestic Violence Court Support Service



Activity Milestone Details/Duration

Activity Start Date

30/06/2020

Activity End Date

29/06/2022

Service Delivery Start Date

June 2021

Service Delivery End Date

30/06/2022

Other Relevant Milestones

December 2020 – March 2021 – Commissioning DFV Local Link Services x 3

February 2021 – April 2021 – Co-Design x 2 (Tamworth / Armidale and Central Coast)

May 2021 - Local GP's and DFV Local Link's receive Melbourne University's The Readiness Program training

July 2021 – June 2022 – Whole of Practice Training commences. Target of 10 practices per region.

July 2021 – June 2022 – Student Interdisciplinary Communities of Practice and training activity commences.

November 2021 – Non-Fatal Strangulation Training Commences (Partnership with HNE Local Health District)

July 2021 - June 2022 – Professional development opportunities for GP's and Speech Pathologists in working with children who have experienced Domestic Family Violence.

June 2021 – June 2022 – HealthPathways developed and or refined in the areas of:

- Non-fatal strangulation
- Domestic Family Violence
- Developmental Language Disorder

January 2021 – June 2022 – National Evaluation



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): 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?

No

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

No

Decommissioning

No

Decommissioning details?

Co-design or co-commissioning comments

HNECC PHN are embarking on a robust 6 stage co-design process. This investment in co-design will ensure that service delivery in each region is a strategic, sustainable, and localised service, delivering high impact activities.

The co-design stage will be completed in May 2021.

To enhance and accelerate pilot learnings, the DFVLL's in each region will meet every three months to share program learnings through Participatory Action Research learning cycles. This process will enable the pilot to be responsive and thus iterate as required, to deliver strong and sustainable outcomes.



PP&TP-MDNP - 201 - 2.01 Movement Nurse Disorder Pilot



Activity Metadata

Applicable Schedule *

PHN Pilots and Targeted Programs

Activity Prefix *

PP&TP-MDNP

Activity Number *

201

Activity Title *

2.01 Movement Nurse Disorder Pilot

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

Targeted Pilot activity

Aim of Activity *

The intended outcomes for this pilot are:

- Improve access to specialised movement disorder clinical care (focus on Parkinson's Disease) and coordinated person centered support support for those (and their carers) with a neurological movement disorder
- Improve health outcomes for people living with movement disorders
- Improve understanding and ability to respond to neurological disorders in primary care
- Enhance education and training opportunities for nurses to better care for people living with movement disorders
- Enhance GP knowledge in working with people with Parkinson's Disease.

Description of Activity *

The project has 5 components:

1. A central hub (Tamworth) and spoke outreach service for people living with Parkinson's Disease (potentially expanding to other neurological diseases upon pilot analysis and reflection, after the implementation phase).
2. A new Nurse Specialist role, responsible for program management and clinical governance (Scope currently being developed and refined through co-design process)

3. A new part-time Aboriginal Nurse/Health Worker co-located with the Nurse Specialist. The scope is being developed through co-design however broadly we suspect this worker will assist in providing culturally appropriate care, linking with Aboriginal communities and Aboriginal Medical Services and or provide further research into Aboriginal people with Parkinson's.
4. In-practice case conferencing (including telehealth) to build local capacity.
5. A range of professional development strategies including mentoring, education, scholarships, and a local community of practice.
6. Project guidance and support from an expert advisory group

Needs Assessment Priorities *

Needs Assessment

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
Health needs of an ageing population	42
A lack of health service integration, coordination and information sharing	42
Limited availability of early intervention services	51



Activity Demographics

Target Population Cohort

Whilst the pilot/nurse is in the implementation phase (the first 12 months), it will deliver services to people with Parkinson's Disease in Tamworth.

Parkinson's disease is a high prevalence complex, neurodegenerative and disabling condition that requires a coordinated approach to managing the health needs of people as their disease progresses.

The skill set and knowledge required from a nurse is extremely specialist (Advanced Level) and currently unavailable in the Tamworth region. The pilot has made provision to provide build capacity in the proposed nurse by providing tertiary level training, clinical placements and mentoring in the Parkinson's domain.

Once the pilot moves out of implementation, it will deliver hub and spoke clinics within the New England/North Western regions. Upon analysis of pilot learnings, reach and impact at the 12-month mark, the pilot will decide whether to broaden its scope to work with people with other neurological movement disorders. It is not feasible for the nurse to build capacity in other neurological domains whilst in implementation or perhaps even program maintenance.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

SA3 Name	SA3 Code
Tamworth - Gunnedah	11004



Activity Consultation and Collaboration

Consultation

The pilot has consulted with:

- Parkinson's NSW
- Australasian Neurological Nurses Association (ANNA)
- Hunter New England Local Health District
- Rural Fit Pty Ltd
- Parkinson's Tamworth
- Local GP's
- Neurologists
- Health Consultants
- Lived Experience and Carers
- Practice Nurses
- Pharmacists
- Exercise Physiologists
- Charles Sturt University
- Aboriginal Health Team – Tamworth Base Hospital

Collaboration

Through the co-design process the PHN is actively working with:

- Rural Fit
- Hunter New England Local Health District
- Local Neurologists
- Hunter LHD Parkinson's Nurse
- Co-Chair of Neurology – John Hunter Hospital
- Tamworth Neurologists
- Tamworth GP's
- Parkinson's NSW
- Charles Sturt University



Activity Milestone Details/Duration

Activity Start Date

30/06/2020

Activity End Date

30/12/2022

Service Delivery Start Date

June 2021

Service Delivery End Date

30/06/2023

Other Relevant Milestones

6 phase Co-Design Process – February – April 2021

Nurse Recruitment – April – June 2021

Service Delivery – Nurse Implementation Phase June 2021 – June 2022

Service Delivery - Pilot commencing Hub and Spoke Services June 2022 – June 2023

Sustainability/Capacity Building Activities – 2 x Capacity Building Events aimed at GP’s and Nurses within the New England Region (2022 and 2023). Community Nurse Scholarships advertised in 2021.

National Evaluation – February 2021 – February 2023



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): 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

Decommissioning details?

Co-design or co-commissioning comments

The PHN is currently halfway through a robust co-design process to further develop and localise the pilot. The nature of this endeavour requires a sophisticated service design that includes multi-agency consultation, collaboration and strategic service integration.

The co-design will inform the:

- Nurse's scope of practice
- Clinical governance requirements/medical reporting lines
- Aboriginal Health Workers scope of practice
- Overarching pilot governance
- Data collection requirements
- Develop local integration agreements e.g., how will this Allied Health located nurse work across different settings e.g., hospital/LHD, aged care, specialist rooms and general practice.
- Develop education and professional development opportunities for the Nurse and Aboriginal Health Worker
- How to strategically build capacity in the region through provision of scholarships and conferences

The co-design process is talking to key stakeholders such as the HNE LHD, Consumers, Neurologists, Allied Health, PHN staff, GP's, Practice Nurses, Parkinson's NSW, Australasian Neurology Nurses Association (ANNA) and Charles Sturt University.