

Our Year Our Stories

A Snapshot of highlights
and achievements



About Us

Hunter New England Central Coast Primary Health Network (HNECC PHN) is a not for profit organisation primarily funded by the Commonwealth government to improve the efficiency and effectiveness of the primary health care system by commissioning services. The term “primary health care” generally covers all healthcare services provided outside of the hospital environment.

What We Do

- We work to achieve better access to primary health care by identifying and addressing service gaps
- We commission (fund) providers to deliver and improve health services for patients identified as being most in need of primary health care
- We aim to improve patient journeys by supporting GPs and primary care clinicians to deliver services that help patients avoid hospital care and promote self care
- We support the development of innovative models of care to help clinicians attain the highest standards in performance, safety and quality
- We work with general practices to understand and make meaningful use of Digital Health systems

For further information about our organisation, our programs and our commissioning of services please visit our website www.hneccphn.com.au



A year of consolidation and achievements

Richard Nankervis CEO

Over the past year we have worked hard to consolidate the foundations laid down in our inaugural year. We have learnt from our experience in successfully transitioning the services delivered by Medicare Locals and significantly increased the range of services offered across our region. We now contract more than fifty providers to deliver a diverse range of primary care services that include mental health, drug & alcohol, Aboriginal health, after hours care, rural allied health, health screening and immunisation.

A key to our success in managing this large increase in providers and contracts has been a clear commitment to a planned and consultative approach. The commissioning framework we have adopted is based on the Quadruple Aim approach and this is helping us develop a culture of collaboration and partnership between the PHN and providers in our region.

While commissioning is a key function of the PHN it is not the only role we play and over the past year we have undertaken a range of other initiatives that are improving the primary care sector across our region.

A key initiative resulting from our commissioning work has been an investment of resources to improve the capacity of our local health systems to deliver effective, evidence based treatment and support for patients, particularly in the areas of mental health and Aboriginal health.

We continue to support general practices and allied health providers

with a dedicated team of Practice Support and Development Officers. In partnership with practices we are working on quality improvement processes and of the 427 general practices in our region over half have signed data sharing agreements. Over 4 000 clinicians attended one of our continuing education programs and the dedicated education section of our website was viewed over 20 000 times.

Our support for innovation in health care has seen the development of our Innov8 program which has been design to foster health development initiatives to improve local health outcomes. In workforce development we have had significant success in addressing workforce shortages on the Central Coast Peninsula area.

Of course a key focus for us remains clinical engagement. This year we introduced a stakeholder engagement framework that has allowed us to effectively engage primary care clinicians to ensure their insight is included at all levels of our decision-making processes.

On the following pages we only have room to provide a snapshot of the great work our dedicated staff are undertaking. It is also important to acknowledge that none of these achievements would happen without the great support provided by our corporate services team. As CEO I am justifiably proud of the opportunities our whole team is creating across our region for people and communities to improve their health.

HNE eReferral Solution

Marilyn Reed - eReferral Project Lead

With our partners at the Hunter New England Local Health District we are working to develop an electronic referral process that will improve the communication and transfer of referral information between GPs and Specialists.

Currently in our region 28 practices are trialling an eReferral process that will:

- reduce time waiting from referral to appropriate care
- address appropriateness of referrals by alignment with HealthPathways agreed referral criteria
- improve the communication of standard demographic and clinical information;

- be embedded into existing clinical workflows in both general practice and speciality services for ease of use

The eReferral solution is being phased in over a three year period using an iterative approach to allow ongoing improvement.

A key achievement of the project has been reducing rejection rate of referrals for the LHD's Referral Information Management System (RIMS) from 15% to less than 1%. With RIMS receiving around 150 000 documents in 2016 it is very easy to see that the potential savings eReferral offers our local health system is enormous.



Aboriginal Health and Wellbeing Needs Assessment

John Manton - Aboriginal Health Manager

There are many factors that contribute to the disproportionate burden of disease experienced by Aboriginal people.

In the past year we completed an Aboriginal Health Needs Assessment to identify local health priorities and guide the activities of the PHN to achieve better health outcomes for Aboriginal communities across our region.

A key finding from our assessment was a call from our local Aboriginal workforce to improve the capacity of primary care providers to deliver evidence based treatment and support that is culturally safe.

In response our Aboriginal health team has been working with stakeholders and providers to improve their understanding of the role culture and social context plays in improving the of health Aboriginal people.

As a result we are confident that service integration across our region will improve and better coordination will lead to more effective primary care services that will help close the gap in health disadvantage.



Drug & Alcohol Treatment Services

Miranda Halliday - Drug and Alcohol Policy and Planning Officer

PHNs have been tasked to plan and commission drug and alcohol treatment services in the primary care sector.

In the past year we have undertaken a regional needs-based assessment that has allowed us to identify priorities for drug and alcohol treatment in our region.

Key issues identified were:

- increasing service delivery capacity for vulnerable populations
- Increased pre & post residential drug and alcohol treatment support services

- Increased treatment and support for people identified as experiencing co-occurring harmful substance use and mental illness
- Increased service delivery capacity of the ACHOs

As a result of our priority identification we've commissioned the following services

- 1260 new treatment places
- 6 new Drug and Alcohol Services
- 20 additional residential beds
- New Aboriginal Withdrawal Management Services
- More Supported Aftercare Programs



Peoplebank

Kevin Rigby - Strategic Initiatives & Relationship Manager

Our community advisory committees play an important role in helping us understand the health issues affecting people across our large and diverse region. Committee members give us suggestions on how health and wellness might be improved; what they think is working and what is not.

Of course it is not possible for us to have a community advisory committee in every town across our region. This is where Peoplebank plays an important role. Peoplebank is an online consultation platform we introduced during the year to allow us to hear from many more community members across our region and let them join in the conversation about improving local health. Peoplebank is an important part of our efforts to improve

local health outcomes and to consult about what works, and also what needs to change.

The true benefits of Peoplebank were highlighted when more 500 online responses were received during the development of our Regional Mental Health and Suicide Prevention Plan. This feedback was integral in helping us build a profile of the mental health and wellbeing of our community. It has helped us to more accurately map current care pathways to determine where service gaps are and to identify barriers that are preventing access to care.

We encourage anyone living in our region to register with Peoplebank by visiting <http://peoplebank.hnecphn.com.au>



HealthPathways

Evan Morris - HealthPathways Officer

HealthPathways is an online health information portal for GPs and other primary health clinicians, that is used at the point of care. It provides information on how to assess and manage medical conditions, and how to refer patients to local specialists and services in the most timely way.

As HealthPathways is a dynamic collaboration between local primary health care clinicians and the Local Health District there are separate portals for both the Hunter New England and Central Coast regions.

Our region was the first area in Australia to introduce HealthPathways and we continue to lead the country in implementing the program into clinical practice. There are currently 262 localised pathways in the HNE region and 206 on the Central Coast.

In the past year we have successfully expanded the reach of HealthPathways into the rural areas of our region. HealthPathways utilisation in the New England area has increased significantly with HealthPathways site traffic increasing by more than 50% and a 10% increase in new users.



Improving Cervical Cancer Screening

Kath Duggan - Cancer Screening Project Officer

In the past year we partnered with Family Planning NSW to support Practice Nurses to undertake the Well Women's Cervical Screening course. The partnership was instigated in response to low cervical screening rates within the New England and North West areas of our region.

Ten Nurses participated in one off bespoke training to increase capacity within the general practice workforce. Following the completion of the training, the nurses became qualified to undertake cervical screening and work towards addressing low rates of cervical screening.

Population-based cancer screening programs lead to early detection of cancer in asymptomatic individuals and enables treatment at earlier stages of disease and results in a subsequent reduction in illness and mortality. By increasing workforce skill and capacity we are hopeful we will see an increase in cervical screening participation rates.

Removing barriers to cancer screening by improved access to quality health services will help us to achieve our vision of healthier people and healthier communities.

Hunter New England Central Coast Mid North Coast Research Hub

Catherine Turner - Executive Manager Quality Commissioning & Improvement

This year our region's strength in innovative research was rewarded when we were chosen by the National Health and Medical Research Council (NHMRC) to become a Centre for Innovation in Regional Health (CIRH). One of only two such centres in the country.

The healthcare research and innovation hub will align clinicians with health and medical researchers and support the translation of research so it drives clinical innovation across regional and rural communities in NSW.

Joining the PHN as members of the research hub are; the Hunter New

England, Central Coast and Mid North Coast Local Health Districts, the Universities of Newcastle and New England, Hunter Medical Research Institute and the Calvary Mater Newcastle Hospital. The Hub's footprint comprises six per cent of the Australian population and ten per cent of Australia's Aboriginal and Torres Strait Islander population.

The Hub is an exciting opportunity for us to develop innovative solutions to improve health care equity in our region by bringing together and integrating biomedical research, population health prevention strategies and healthcare provision.



Mental Health programs

Leah Eddy - Mental Health Stepped Care & Services Integration Officer

Over the past year we have been working with GPs, psychologists, nurses, allied health providers, mental health services, those with lived experience and local communities to deliver a broad range of mental health programs that focus on safe, effective, quality mental health care service delivery.

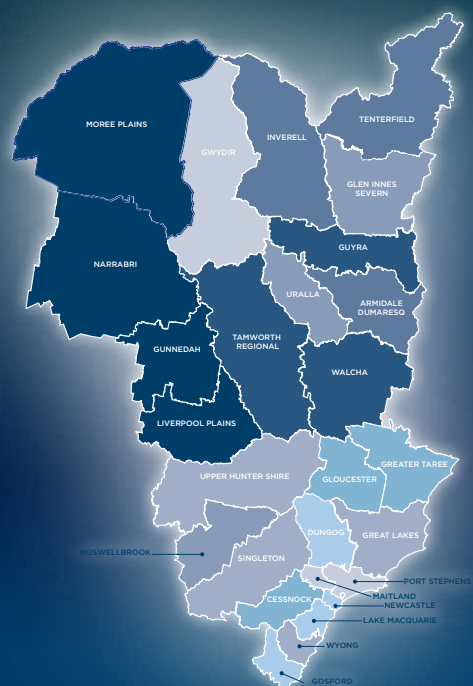
In 2016-17 more than 37 000 occasions of service were delivered across a variety of programs including:

- Primary Health Network Mental Health Service (PHNMHS)
- Mental Health Nurse Incentive Program (MHNIP)
- headspace

- **Aboriginal specific programs**
 - o Peer Navigation
 - o Care Coordination
 - o Counselling
 - o Group program
- **Suicide prevention**
 - o Comprehensive Suicide Prevention Service(CSPS)
 - o Farmlink
 - o Lifespan
- **Aboriginal Suicide Prevention**
 - o Family Wellbeing Program
 - o Identity with Integrity
 - o We Yarn
 - o Suicide Preparedness and Postvention



Our Region



phn
HUNTER NEW ENGLAND
AND CENTRAL COAST

An Australian Government Initiative

For further information please visit www.hneccphn.com.au

HNECC PHN acknowledges the traditional owners and custodians of the lands that we live and work on as the First People of this Country

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