

}\ Priorities and }\ Performance

ANNUAL REPORT 2023



The Primary Health Network acknowledges the traditional custodians of the lands we walk, reside and work upon. We pay our respects to First Nations people and value the continued connection to culture, country, waterways and contributions made to the life of our vast region.



**FIRST NATIONS
HEALTH**

ABOUT US

With a vision for Healthy People and Healthy Communities the PHN is a not-for-profit organisation funded by the Australian Government. We work with health care providers across the Hunter, New England and Central Coast regions to commission programs and services designed to improve the efficiency and quality of primary health care and create a positive impact in our communities.

We're pleased to share just some of our stories of priorities and performance from the last twelve months in this year's Annual Report.

OUR PURPOSE

To deliver innovative, locally relevant solutions that measurably improve the health outcomes of our communities

OUR VALUES

Respect

We listen to and value the perspectives of others and use them to inform and strengthen everything we do.

Integrity

We employ the highest ethical standards demonstrating honesty, transparency, open communication and fairness.

Innovation

We invest in new and better ways to improve the health system so people stay well and out of hospital.

Cooperation

We work with others towards common goals, encouraging collaboration, support and compassion.

Accountability

We keep our promises and take ownership to get things done. We interact constructively.

Recognition

We acknowledge and share individual and team achievements and successes.

Contents

About Us	4
Our Values	4
Our Purpose	4
Our Year in Numbers	6
Chair Report	8
CEO Report	9
Priorities and Performance	10
Developing Innovative Incentives to Overcome General Practice Workforce Challenges	11
Creating Equity of Access to Mental Health Services	12
Closing The Gap for our First Nations People	14
Supporting and Influencing the use of Digital Health	16
Strengthening Engagement and Support for Allied Health	18
Increasing Services to Care For Older People	20
Embracing Progressive Initiatives to Create a Healthy Community and Workforce	22
Our Board	24
Financials	28

Our year in numbers



\$9.5 million

funding dispersed to 361 general practices through Strengthening Medicare Grants Program



\$64 million

value of services commissioned to address health needs in region's communities



98,000+

clients, including 15,000+ First Nations clients, received health support from 16 commissioned service programs

70,000

unique video views from First Nations 715 Health and Wellness Check social media campaign and increased 715 registrations by 8.1% across general practices

621

PHN activity appearances in traditional media and

8,725 engagements in social media

\$668,000

funding distributed to flood affected communities to build resilience and restore social connection



\$597,000

grant funding distributed to attract and retain health practitioners to improve service access in areas of high need

580

GPs, Nurses, Practice Staff & Allied Health Professionals trained in Domestic Violence identification and referral

32,000

clients, including 6,000+ First Nations clients, received mental health support from commissioned services



8,000

Health professionals participated in 370 professional education events

854,000+

page views on Hunter New England and Central Coast HealthPathways

47,000

new SeNT eReferrals and more than 160,000+ SeNT eReferrals since commencement



It's an honour to be writing my first Report as Chair of the Hunter New England and Central Coast Primary Health Network (the PHN).

My first year has been one of learning. As the PHN closes out its 2018–2023 Strategic Plan, it's inspiring to see the work that has been achieved with the direction of our previous Chair Jane Schwager, the Board, Executive and staff. It's also been a time for providing guidance, alongside the Board and Executive team, to help shape the strategic objectives and vision for the five years ahead, which will build upon the successful foundations laid since the PHN's inception.

Priorities and Performance is a fitting theme for this year's report, as we celebrate and showcase the achievements attained by our staff and teams in identifying unmet needs and exploring innovative ways to achieve better health outcomes for the people across our vast region.

As we continue to recover from COVID-19, respond to ongoing natural disasters, and address shortages in workforce, the PHN has prioritised upskilling and recruiting of health care professionals. Some of the activities I'd like to highlight are our work with Allied Health, including the Allied Health Reconnection Grants, which were offered to encourage primary care Allied Health providers to implement ideas to re-engage or enhance care whilst promoting sector collaboration.

The Domestic Family Violence (DFV) pilot program identified a critical gap in the current DFV environment which was addressed with the development of a program providing timely primary health care, including both physical and mental health, for the victim and their children. The nurse-led outreach service, developed by the PHN, was successfully launched on the Central Coast assisting 50 women and 30 children.

The 2023 Primary Care Quality and Innovation Awards was also a highlight of the year for me. I was inspired by the demonstration of excellence in primary care delivered across our region, and I certainly look forward to the Awards ceremony in 2024.



In addition to my appointment as Chair, three new members joined the Board this year, Professor Stephanie Short from the Central Coast, Dr Rohana Wanasinghe from Narrabri and Ms Tracey McCosker as our Hunter New England Local Health District representative.

Stephanie Short is an honorary professor in the Faculty of Medicine and Health at the University of Sydney with a clinical and academic background. With expertise in health policy analysis, strategic thinking, models of care and health workforce, Stephanie's advice has been welcomed in the development of the new strategic plan.

Dr Wanasinghe, a General Practitioner working in Narrabri, has provided invaluable insights and direction regarding improvements to health care access for rural NSW and increasing the rural health workforce.

As you read through the stories of priority and performance in this report, I'm sure you'll be impressed by the range and the outcomes of our work, achievements made possible by the dedication of many. I express my sincere thanks to our CEO, Richard Nankervis, for his ongoing hard work and dedication as well as my fellow Board members, the Executive team, our PHN staff, our Clinical Councils, Community Advisory Committees, and community members.

WENDY MACHIN, Chairperson

As CEO of the Hunter New England and Central Coast Primary Health Network (the PHN), looking back on the achievements of the past year is highly rewarding. This annual report highlights the challenges we identified as priorities and how we performed to overcome community barriers in accessing primary health care.

A key priority identified in our region (as well as nationwide) is that of workforce shortage in primary health care. The PHN has acknowledged this obstacle by developing innovative incentives to overcome primary care workforce challenges. \$9.5 million was dispersed to 361 general practices through the Strengthening Medicare Grants Program, our Bush GP Grants assisted in the recruitment of more than 10 General Practitioners across the region, and \$597,000 in funding was provided to recruit and retain health practitioners, improving service access in high need areas.

As the demand for primary care services has increased over the past few years, the PHN has increasingly focused services towards those who need them most. This has been exemplified in the approach to equity of access for mental health services. A reform of the Mental Health Services for Priority Populations program led to an increase of over 25,000 psychology sessions being provided for priority populations, ensuring the most financially disadvantaged people across the region have access to the mental health services they require. Additionally, we offered \$50,000 in grant funding targeting the 'missing middle,' a term used to describe people whose needs are not met by current mental health services. We also celebrated the opening of the headspace Youth Mental Health Service at Wyong on the Central Coast.

Closing the Gap for our First Nations people remains high on our priority list. Over the past year we've worked with our communities and health providers to improve access to services, promote health literacy and support the management of health conditions for First Nations people living and working in our region.



Our performance can be highlighted through our highly successful 715 Health and Wellness Check campaign, which reached 70,000 individuals and has led to an increase of 8.1 per cent in 715 billing across the region. Our First Nations Health Access Team also launched the podcast Coffee on Country, connecting with communities with the objective of increasing health literacy.

Remaining a high priority for us is supporting and influencing the use of digital health in primary care. In the past year our digital health team connected with General Practice to generate the Digital Health Maturity Assessment. The assessment results have provided us with a benchmark to demonstrate our ongoing achievements within digital health.

Our priority work has been ongoing while we've welcomed our new Chair, Wendy Machin, and closed-out the 2018-2023 Strategic Plan, which had delivered strongly for the region under our outgoing Chair, Jane Schwager. We are now focusing on our strategic goals and direction for the coming five years, which are ambitious but achievable, and I look forward to sharing this direction in due course.

These and other stories of our priorities and performance are shared in this report, showcasing our swift and innovative responses to localised challenges. I am constantly inspired by the spirit shown by primary care professionals across the region, as well as by the efforts of our PHN team and Board.

I hope you enjoy this year's annual report highlighting the work which lies at the heart of the effective delivery of our vision for Healthy People and Healthy Communities.

Thank you for your continued support of our important work.

Richard Nankervis, CEO

A photograph of two young boys playing in a grassy field. One boy, wearing a light blue shirt and blue jeans, is jumping over a dark horse. The other boy, wearing a blue shirt, is sitting on the grass and looking up at the first boy. A dog is also visible in the background. The scene is set outdoors with trees and a building in the distance.

Priorities and Performance

Since the PHN's inception in 2015 identifying and addressing health priorities has sat at the heart of our work and drives our desire to effect change at both a program and systemic level. As one of our Aims it sits alongside our Purpose to deliver new and locally relevant solutions that measurably improve health outcomes for our communities.

Priorities and Performance is a fitting theme for this year's report as we celebrate and showcase the opportunities created by our staff and teams to explore new and pioneering ways to improve the health system so that people stay well and out of hospital.

DEVELOPING INNOVATIVE INCENTIVES TO OVERCOME GENERAL PRACTICE WORKFORCE CHALLENGES

Workforce challenges have plagued many industries across the country. With the health sector being hit particularly hard the PHN has developed and implemented programs and scholarships to assist with recruiting, retaining and upskilling our health workforce.

Four new GPs join the Hunter, New England and Manning regions, following successful grant program

Following a successful grant offering, the PHN announced the arrival of four new general practitioners (GPs) to the Hunter, New England North West and Manning regions. The GPs have commenced employment in Muswellbrook, Gunnedah, Armidale and Taree.

The four new GPs have been recruited from Sydney, inter-state and internationally. The successful practices include Faulkner Street Medical Practice in Armidale, Barber Street Practice in Gunnedah, Brook Medical Centre in Muswellbrook and Horizon Skin Cancer and Medical Centre in Taree. The grant funding was provided to the practices to use towards the recruitment and retention of the new doctors.

Recruitment videos developed to assist health care practices to recruit and retain staff

The PHN developed a suite of recruitment videos to assist all health care businesses with recruitment. The new recruitment resources provide a 'how to guide' on attracting potential candidates including writing job advertisements, where to advertise and how to retain current staff.

The three short videos are aimed at all health care businesses including General Practice and Allied Health, with all types of roles from administration staff to senior clinicians.

\$100,000 Scholarship for Cervical Screening provided to Hunter New England General Practices

Forty-five rural and remote general practices across the Hunter New England region have received a scholarship to complete the Well Women's Screening Scholarships Project through Family Planning, thanks to \$100,000 in funding from the PHN.

Changes to cervical screening (introduced from 1 July 2022) mean that women can screen themselves within the practice setting. Forty-five nurses from Forty-five practices, initially in rural and remote regions from Cessnock to Tenterfield, will undergo the necessary training to facilitate the screening.

\$9.5 Million injected into General Practice through Strengthening Medicare Grants Program

More than nine million dollars has been provided to 361 general practices across the Hunter, New England and Central Coast regions, under the Commonwealth Government's Strengthening Medicare Grants Program, facilitated by the PHN.

90 per cent of General Practices (totalling 339 practices) applied for the grant offer in the first month, equating to \$8,445,000 in funding for the region.

[Read on for additional insights >](#)



CREATING EQUITY OF ACCESS TO MENTAL HEALTH SERVICES

The PHN identified vulnerable groups within our community who are not receiving mental health support due to barriers including cost and availability. One of the PHN's ongoing priorities has been to create equity of access to mental health services. In the past year the PHN responded by commissioning new services which complement our existing programs as well as diversifying to better reach target populations.

Recovery Grant delivers mental health support for 'missing middle'

A grant program targeting flood-affected communities in the New England region has delivered significant improvements to the mental health and social connectedness of a complex cohort who often fall through the gaps in existing services.

A group of 'missing middle' youth from the Moree, Narrabri and Gunnedah communities displaying signs of psychological distress, suicidal ideation and self-harm were given access to early intervention services.

The services were funded through a \$50,000 grant to the Youth Insearch Foundation from the PHN's Flood Recovery program.

25,000+ Mental health services commissioned for priority populations

The Mental Health for Priority Populations service has been commissioned following a reform of the previous Primary Mental Health Psychological service. The objective of the service is to reach priority populations to ensure the most financially disadvantaged people across the region have access to mental health services.

Renaming the Psychological Therapies Services to Mental Health Services for Priority Populations seeks to clarify this more focused approach.

The Mental Health Services for Priority Populations program will complement other existing mental





Image credit: Evermind

health programs and expand the scope of the current psychological therapies that are delivered in Primary Care, whilst extending the service to better reach target populations.

Forty-three per cent of PHN employees participate in The Lift Project mental wellness program

In 2023 the People & Culture team implemented the PHN's Wellbeing Strategy 2023 to 2025 which is underpinned by the evidence-based Thrive at Work framework. The framework promotes a holistic approach that not only focuses on helping unwell people get well again, but also on helping people stay well and be the best they can be.

The PHN identified The Lift Project, an educational program designed to lift an individual's mood and life to assist in helping staff to thrive. The Lift Project combines scientifically proven strategies from the fields of neuroscience, positive psychology and lifestyle medicine delivered through ten lessons over ten months.

Mental Health Assessment Tool and Training – Video explainer developed

The PHN developed a short video to highlight the benefits of the Initial Assessment and Referral (IAR) tool. The IAR tool is a holistic, decision-making framework that uses the stepped care approach to assist General Practitioners and clinicians in matching consumers with the most appropriate mental health services for their needs.

The PHN provides a two-hour group training workshop to help primary health clinicians understand how to use the IAR-DST (Decision Support Tool), either in-person or online.

headspace Wyong officially opened by the Hon Emma McBride MP

A vital service for young people was officially opened with Assistant Minister for Mental Health and Suicide Prevention, the Hon Emma McBride MP, cutting the ribbon at headspace Wyong.

The official opening coincided with headspace Wyong's first anniversary, having been postponed due to COVID restrictions.

Speaking at the official opening, PHN CEO Richard Nankervis said there has been an increased awareness of and investment in youth mental health.



[Read on for additional insights >](#)

CLOSING THE GAP FOR OUR FIRST NATIONS PEOPLE

The PHN is dedicated to achieving improved access to primary health care and better health outcomes for First Nations communities. Primary health is a fundamental cornerstone of wellness and wellbeing for First Nations people and contributes greatly to achieving Australia's Closing the Gap targets. Over the past year, the PHN strived to close this gap through grants, evaluations and health literacy projects.

715 Health and Wellness Check Campaign

The PHN ran a highly successful 715 Health and Wellness Check Campaign. The campaign provided General Practice with printed collateral alongside a social campaign and in-practice video. The aim of the campaign was to increase the number of 715 Health and Wellness Checks across the region by five to ten per cent.

The video, featuring PHN First Nations Health Access team members Josh Fuller and Robbie Watson, was viewed on Facebook more than 70,000 times and the identified increase in 715 Health and Wellness Checks being requested at GPs sat at 8.1 per cent at the end of the financial year.

The PHN launches First Nations health podcast, *Coffee on Country*

The PHN's First Nations Health Access Team launched *Coffee on Country*, a podcast aimed at raising health literacy among our indigenous community.

Coffee on Country was launched with an initial six episodes, featuring notable indigenous and non-indigenous health professionals and community members discussing topical health concerns and general health awareness.

NAIDOC Week Grants - A celebration

The PHN was pleased to offer the NAIDOC Week grant round designed to support the primary care sector to celebrate NAIDOC week by undertaking cultural safety and awareness capacity building activities





and/or NAIDOC week celebration activities.

The grants were targeted to all primary care providers including General Practice, Allied Health, Commissioned Service providers as well as Aboriginal Medical Services. The grants were used for activities that promoted and celebrated First Nations culture or increased cultural safety within non-First Nations primary care providers.

ITC approach boosting health outcomes for First Nations people

Since 2015 the HNECC PHN has commissioned the Integrated Team Care (ITC) program to provide services to First Nations people with complex chronic health conditions. An evaluation of this key health initiative, underpinned by the National Agreement on Closing the Gap, this year has found the program is achieving its desired outcome of improving life outcomes experienced by Indigenous Australians.

Key findings of the evaluation, undertaken by Nama Jalu Consulting, show the ITC program is highly regarded by all stakeholders and clients overwhelmingly reported the importance of the program and the multifaceted impact it had on their lives.

Community of Practice developed for First Nations Mental Health workers

With COVID-19 creating social isolation and increasing pressure on the social and emotional wellbeing of health professionals, a need was identified to provide support to retain staff within commissioned services and build stronger relationships with and between service providers.

The PHN completed a review, redesign and tender exercise of the Indigenous Mental Health program. This process saw several new First Nations Mental Health service providers commissioned.

To provide an effective means of communication between the new service providers and the PHN, a Community of Practice and Cultural Immersion program was established. This enabled the service providers to engage with each other and the PHN in order to build partnerships and strengthen their capacity to work effectively with the community.

[Read on for additional insights >](#)



SUPPORTING AND INFLUENCING THE USE OF DIGITAL HEALTH

Remaining a high priority for the PHN is supporting and influencing the use of digital health in primary care. In the past year our Digital Health team connected with General Practice to generate the digital health maturity assessment. The assessment results have provided us with a benchmark to demonstrate our ongoing achievements within digital health. Other achievements included the continued uptake of electronic referrals among our primary health clinicians.

Digital Health Assessment reveals solid foundations for improvements in digital maturity

The PHN completed a comprehensive digital health maturity assessment of more than 300 health facilities revealing a higher score of digital maturity across the HNECC region in comparison to other PHN regions.

The Digital Health Maturity Assessment is a tool for measuring the relative digital capabilities of general practices, aboriginal medical services, allied health practices and residential aged care facilities. The assessment uses a customisable, survey-based approach to address questions of infrastructure, technology, meaningful use, readiness and willingness for digital change, digital literacy and clinical leadership.

Following assessment, health services were placed into an appropriate maturity level. Results were used to better understand the spectrum of digital health maturity across health sectors to improve the PHN's digital health change and adoption approach.



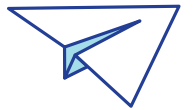


Digital Health; The PHN Highlights Innovation and Impact

With a vision for Healthy People and Healthy Communities, the PHN developed its Digital Health Strategy in 2021 to deliver improved health outcomes through strong digital health foundations that lead to accessible, equitable, safe, effective and sustainable digitally-enabled models of care.

In 2022 the PHN summarised the achievements from this strategy with the release of the Digital Health Innovation and Impact report. The report highlights the key achievements since the strategy development in 2021.

100,000 Electronic Referrals has Hunter New England region leading in digital technology



Since its launch, the SeNT eReferral system has seen 100,000 referrals electronically transmitted to over 450 Hunter New England Local Health District and private health providers across the region, providing security, reducing errors and saving both administrative and clinical time. Over 95% of eligible general practices in the region are currently accessing the SeNT eReferral system.

SeNT eReferrals is a component of the Integrated Care Enablers partnership between the PHN and Hunter New England Local Health District, exploring how digital health technology can be best utilised to connect primary care and tertiary care to deliver better health outcomes for our communities.

[Read on for additional insights >](#)



STRENGTHENING ENGAGEMENT AND SUPPORT FOR ALLIED HEALTH

Our PHN identified an opportunity for PHNs to play a key role in supporting the Allied Health sector as an important part of an integrated health system. This included having an increased focus towards wellbeing and prevention within the health system. In addressing this priority, the PHN has supported Allied Health through initiatives including the development of the National Allied Health Engagement Framework, targeted professional education, and Business Skills Workshops.

Allied Health data and quality improvement (BEAP) project findings published

Allied health professionals make significant contributions in the care of patients with type 2 diabetes mellitus (T2DM). However, the value of this care is not well known due to limited access to collective data sets.

The PHN developed a quality improvement pilot project aiming to demonstrate the value of allied health care to patients with a chronic disease (T2DM). The pilot, conducted with five allied health practices from various professions, tested the concept that current software technology can be used to aggregate allied health clinician and patient-reported disease measures from various sources.

The data revealed that existing software could be used to collect and store de-identified, aggregated allied health data from various practices and professions in a central data repository, from which evidence-based reports could be developed.

Business Skills Workshops for Allied Health professionals a huge success

The PHN completed a series of Business Skills Workshops for Allied Health professionals which were held across our PHN region in the Central Coast, Taree, Hunter Valley and Inverell. Participants were promised to walk away from the workshop, with a range of tools





ready to apply to their business including a one-page “Vision Map,” a Business Improvement Plan that laid out strategies to save time and increase profit, and a simple dashboard structure to measure and monitor performance to ensure goals are met.

The workshops were a huge success with some of the best feedback and evaluation results for professional education that the PHN has seen.

Allied Health in Primary Care Engagement Framework

A new framework developed to strengthen engagement between Primary Health Networks and the Allied Health sector was launched by the National PHN Cooperative. The National PHN Allied Health in Primary Care Engagement Framework (The Framework) will serve as a roadmap for improved and collaborative ways of working.

Allied Health Peak Bodies and practitioners, State/Territory and Federal government and PHNs have all played a crucial role in shaping the development of the Framework over the past year. This input has been invaluable in informing future engagement strategies to support allied health contributions to consumer and community health outcomes.

Allied Health Reconnection Grants enhance multidisciplinary care

Among the many health impacts of the COVID-19 pandemic, the disruption of access to health care was significant for many patients, particularly those with chronic conditions. In recognition of this, the PHN launched the Allied Health Reconnection Grants in March 2023 seeking to enhance opportunities for clinicians to work together in a multidisciplinary patient-centred approach.

The grants in the amount of \$20,000 to \$50,000, encouraged primary care Allied Health providers to implement ideas to re-engage or enhance care whilst promoting collaboration with other health providers.

[Read on for additional insights >](#)



INCREASING SERVICES TO CARE FOR OLDER PEOPLE

One of the PHN's most urgent priorities is to increase services to older Australians to delay their entry into Residential Aged Care Facilities (RACFs), reduce avoidable hospitalisations and improve equitable access to the services that older people require. Over the past year the PHN has worked towards achieving these goals through pilot programs and community education.

What is Palliative Care? The PHN releases community explainer video

A priority across the broader community, as identified in the PHN's Palliative Care Needs Assessment, is to increase awareness of end of life issues and improve health and death literacy. To assist in meeting this need, the PHN developed an educational video *What is Palliative Care?* for National Palliative Care Week.

It is with improved knowledge and understanding that people feel more empowered to advocate for their needs and preferences which in turn can improve their experience of care. The PHN has been involved in the delivery of a range of projects in this area including the facilitation and delivery of education and the development of resources and incentive programs to improve the coordination of palliative care in the primary care sector.





PHN Launches Frailty Early Intervention Program

In June 2023, the PHN launched an early intervention pilot program for General Practices to participate in a frailty screening program using the FRAIL Scale, a validated screening tool.

Incentive payments were provided to enable Practice staff to participate in training workshops and regular meetings with frailty experts, to enhance their understanding of frailty identification and offer opportunities and referral options to change the frailty trajectory. The program enables GPs to provide better patient care in conjunction with other medical and allied health professionals.

Pilot of Nurse Practitioners in Aged Care

Hunter Primary Care, in partnership with the PHN, researched, developed, and implemented a pilot Aged Care Nurse Practitioner (NP) service to increase access to and the effectiveness of primary care services for people living in RACFs.

The NP model is designed to provide residents with both a proactive and responsive person-centred model of care to provide timely clinical assessment and management. A nurse practitioner provides a regular outreach service to residents with whom they have an established and ongoing relationship and is familiar with the resident's baseline health status and care goals.

The pilot NP program was conducted in six RACFs in the Hunter region with proactive weekly visits and built-in capacity to respond to unexpected health events. The program is ongoing.

[Read on for additional insights >](#)



EMBRACING PROGRESSIVE INITIATIVES TO CREATE A HEALTHY COMMUNITY AND WORKFORCE

Chronic disease is the leading cause of death and disability worldwide, impacting significantly on health budgets. A priority for the PHN is embracing progressive initiatives to create a healthy community and workforce. Some of the initiatives introduced over the past year include the development of the preventive health framework and the Bounce into Better Health and Wellbeing campaign.

The PHN Publishes Preventive Health Framework

Chronic disease is the leading cause of death and disability worldwide, impacting significantly on health costs. Key risk factors associated with chronic disease include poor diet, physical inactivity, tobacco smoking, excessive alcohol consumption, high body mass and high blood pressure. These risk factors are largely preventable and can be reduced or eliminated through behavioural change or managed with medical treatments.

To this end, the PHN published a Preventive Health Framework. The framework aims to leverage established systems and associated projects to inspire healthier people and communities. The framework will also support increased understanding of how primary health care clinicians (allied health, general practitioners, nurses, pharmacy) all contribute to a person's wellbeing.

Pilot program to fill critical gap identified for victims of domestic family violence

A critical gap in the current domestic family violence (DFV) environment was identified and addressed with the development of a pilot program providing timely primary health care, including both physical and mental health, for the victim and their children.

The nurse-led outreach service, developed by the PHN, has been successfully launched on the Central Coast and operated over the past twelve months. The program, operating across three





women's refuge sites, has assisted 50 women and 30 children to access the health care they need

Bounce into Better Health & Wellbeing - Campaign Launched

The PHN launched "Bounce into Better Health & Wellbeing", a campaign designed to encourage and raise awareness of the benefits of healthy lifestyles and to support local primary health practitioners' preventive care efforts.

The Bounce into Better Health & Wellbeing campaign is supporting the Hunter New England and Central Coast areas and provides primary health professionals access to tools and resources to improve preventive care of patients across the region.

Diversity Inclusion and Belonging a priority for the PHN

As part of the PHN's 2022-2025 Diversity, Inclusion and Belonging Strategy, we developed an internal LGBTQIA+ Ally Collaborative. This group acts to promote an inclusive work environment where Lesbian, Gay, Bisexual, Transgender and Queer employees and their families are accepted and valued and enjoy a workplace free of prejudice and discrimination.

The volunteer employee-led group endorsed the PHN's 2022 & 2023 ACON Pride in Health & Wellbeing Membership and LGBTQIA+ awareness training for staff. Collaborative co-Chair, Charles Broadfoot, was recognised for his efforts with his work peers in establishing the collaborative with a 2023 Australian Pride in Health + Wellbeing Award.

[Read on for additional insights >](#)



Our Board





Ms Wendy Machin
CHAIRPERSON

Experienced non-executive Director and Chair, Wendy Machin is the Chairperson of the Hunter New England and Central Coast Primary Health Network (PHN).

Wendy currently sits on Boards in the public, private and NFP sector. She is a Director of Heritage Bank, Golf Australia, Vice Chair of the NSW Nationals party and also operates her own beef cattle property on the mid north of NSW where she was born and raised.

Wendy's early and formative years were in politics, serving 11 years in the NSW Parliament as Deputy Speaker of the House, a Minister and a Shadow Minister, along the way becoming the first Australian woman to have a baby in office as a Minister.

Prior to her Board career Wendy worked in-house as Director of Corporate Affairs in Australia's largest funeral corporation, now known as InvoCare. She has also been the Executive Director of the Urban taskforce, an advocacy body for urban developers.

Elizabeth Ward



Elizabeth Ward is a Physiotherapist, AHTA Accredited Hand Therapist and President of the NSW Physiotherapy Council (HPCA). She is a PHN Board member, a member of the PHN Central Coast Clinical Council

and of the Central Coast LHD Clinical Council. She is a member of the PHN Allied Health Reference Group and holds positions in other PHN committees.

Elizabeth has completed a Bachelor of Science (UNSW), Post Graduate Diploma of Physiotherapy (USyd), Master of Public Health (USyd) majoring in health care management and health promotion, Master of Health Science (Physiotherapy) (USyd), and is a Graduate of the Australian Institute of Company Directors. Elizabeth is Practice Principal and Director of Coastal Physiotherapy Group Pty Ltd and Coastal Hand Clinic. She is a Director of Core Health Pty Ltd, and Partner, Erina Sports and Spinal Physiotherapy.



Dr David Briggs AM
DEPUTY CHAIRPERSON

David has a Bachelor of Health Administration, Master of Health Management (hons), PhD (UNE) and an honorary Doctorate in Public Health (Naresuan University, Thailand).

David is a Fellow of the Australasian College of Health Service Management, a Foundation Fellow of the Hong Kong College of Health Service Executives, Adjunct Professor, Faculty of Medicine and Health, University of New England, Adjunct Professor, ASEAN Institute of Health Development, Mahidol University, Thailand and Honorary Editor in Chief of the ASEAN Journal of Health Development.

David has extensive senior management experience in the public health sector, which includes Chair, New England Medicare Local, CEO of a large Area Health Service, General Manager of a District Health Service, and CEO of a 300-bed acute regional referral hospital. He has had extensive experience in both rural and community health services and in the accreditation of health and aged care services. David is currently engaged in consultancy, research and publications in the health sector, most recently in primary health care, in the Asia Pacific as well as Australia. In 2020 David was recognised as a Member of the Order of Australia (AM) for significant service to health services, medical administration and to education.

Dr Trent Watson



Dr Trent Watson is CEO of Ethos Health, a multidisciplinary health and safety business based in Newcastle and the Hunter region. Trent combines this work with a number of appointments including Conjoint Senior

Lecturer in the School of Health Sciences, University of Newcastle, Chair of the NSW Mineral Council Obesity subcommittee and media spokesperson with the Dietitians Association of Australia.

Trent was a former Director (2012 – 2015) and Chairperson (2014 – 2015) of the Hunter Medicare Local. Trent completed his undergraduate studies and PhD in nutrition and dietetics at the University of Newcastle, and has continued his research interests in workplace health, with a special interest in obesity, obesity-related lifestyle disease, and fatigue.



Scott McLachlan

Scott is the Chief Executive of the Central Coast Local Health District and has held leadership roles in health, both private and public health systems, for over 20 years.

Having been raised in country NSW he understands the highly complex landscape of the health care environment and the unique challenges of health care delivery in Australia. He is passionately motivated every day to head up improving health outcomes for the community through authentic engagement, strong collaboration with clinicians, strategic partnerships and fostering and leading innovation.

Bradley Twynham



Brad is a Technology Entrepreneur and Innovator, Strategy Consultant and Investor/Board Director with over 25 years working and consulting in the areas of enterprise technology adoption

and enterprise operating model transformation.

Brad has previously acted in roles ranging from CEO to Corporate Development to Technology Strategy Consulting and is currently an investor in a number of companies focused on preventative health care. He sits on a number of Boards and acts as a Board Advisor.

Brad is a Senior Lecturer at Western Sydney University in the Bachelor of Entrepreneurship Program and is the Entrepreneur in Residence at several high-profile Technology Startup Incubators. He is a Board Member of the Central Coast Montessori Primary School, and a member of The Institute of Company Directors and Director Institute.

Dr Anita Watts



Anita is a proud Wiradjuri woman, currently working part time as a GP in a large mainstream urban general practice in Newcastle.

From 2005 to 2019 Anita was a Senior lecturer at the University of Newcastle, teaching Aboriginal and Torres Strait Islander Health with a special interest in the provision of health care to underserved communities.

She previously worked in the Aboriginal Community Controlled Sector and continues to work in close partnership with community-controlled health organisations.

Anita is the current NSW and ACT representative of the Aboriginal and Torres Strait Islander Health Council of the Royal Australian College of General Practitioners (RACGP) and was a previous board member of the Australian Indigenous Doctors Association.

Dr Rohana Wanasinghe

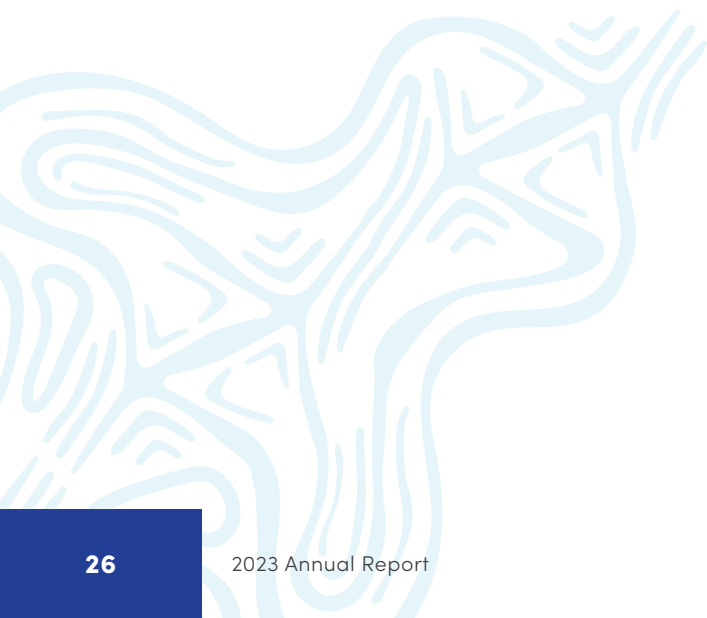


Rohana has been a Rural Generalist for the past 8 years and has a passion for rural health care. Together with his wife, Dilini, they are the owners of the Bridge Medical Centre in Narrabri.

Rohana completed his MBBS and MS (General Surgery) in Sri Lanka followed by the completion of his FRACGP in Australia. In addition to working at his general practice, Rohana works at the Narrabri District Hospital, servicing the emergency department and general surgery, including some obstetrics.

Rohana is the chair of the Barwon Division of General Practice and has been one of the directors for the last 4 years. Rohana is a general practice registrar supervisor and was awarded the GP Synergy award Supervisor of the Year, for the Hunter New England/Northwest region in 2021 and RACGP Supervisor of the Year in 2022.

Rohana is dedicated to improving health care access for rural NSW, which includes increasing the rural health workforce.





Stephanie Short

Stephanie is an honorary professor in the Faculty of Medicine and Health at the University of Sydney with a clinical and academic background, initially as a registered physiotherapist, then as an

academic health sociologist and academic manager.

Stephanie has served on the Board of Directors of the Community Health Association of NSW, and as Company Director for KU Children’s Services (which operates over 130 early childhood services across Australia). She currently serves on the Board of the Central Coast Community Women’s Health Centre and Dying with Dignity New South Wales, and is a Senior Advisor on the Design, Reform and Implementation of Health Practitioner Regulation across countries to the World Health Organization in Geneva.

Stephanie has particular expertise in health policy analysis, strategic thinking, models of care and health workforce.

Tracey McCosker



Tracey McCosker PSM is Chief Executive of Hunter New England Local Health District (HNELHD). She has worked in the NSW public health system for over 30 years and previously held the positions of Director of Finance,

Director of Corporate Services and Director of Clinical Services with HNELHD. She started her health career as Business Manager for the Hunter Area Pathology Service, now part of NSW Health Pathology.

Tracey was appointed Chief Executive of NSW Health Pathology in 2012 after developing a business model for an integrated statewide public pathology service. In 2018 Tracey was awarded an Australian Public Service Medal for her outstanding service to public health in NSW. She has a Bachelor of Commerce (Newcastle University) and a Master of Business Administration (University of Southern Queensland). She is a Member of the Australian Institute of Company Directors.

Tracey is committed to leading a Caring, Connecting and Pioneering organisation that consistently models its RITE (Respect, Innovation, Teamwork, and Excellence) values. She values being involved with and leading organisations that make a positive difference in people’s lives.



Edwina Sharrock OAM

Managing director and founder of online digital health tech company Birth Beat, Edwina Sharrock OAM is a passionate health advocate focused on advocating for the advancement of primary health care.

A firm believer that high quality, sustainable primary health care is critical to ensuring regional communities thrive, the Tamworth-based influencer embraces technology and innovation as the keys to addressing the health challenges in regional and rural communities.

Ms Sharrock was a founding member of the PHN’s Hunter New England Rural Clinical Council and is now the PHN’s Board representative for that group.

She has a distinguished list of achievements, including being named as one of the Australian Financial Review’s 100 Women of Influence and NSW Telstra Small Business Woman of the Year in 2019, and recently Australia’s fellow of the Cartier Women’s Initiative – an annual international entrepreneurship program.

“Being based in Tamworth, I know that there are particular health challenges in our regional and rural communities, and this increases with geographical remoteness.

“High quality, sustainable primary health care is a critical factor to ensure our communities thrive,” Ms Sharrock said.



81%

INVESTED IN
COMMUNITY

\$100m
TOTAL INCOME

\$2.5m
TOTAL EQUITY

Financials



HNECC Limited

ABN 51 604 341 362

Financial Statements

For the Year Ended 30 June 2023

Statement of Surplus or Deficit and Other Comprehensive Income For the Year Ended 30 June 2023

		2023	2022
	Note	\$	\$
Revenue from contracts with customers	4	97,741,751	78,646,503
Other income from ordinary activities	4	2,114,642	877,967
Program services expenses		(80,888,525)	(63,161,621)
Employee benefits expenses		(13,155,830)	(11,443,311)
Other operating expenses		(1,604,503)	(1,593,219)
Software expenses		(1,700,129)	(1,842,481)
Occupancy expenses		(147,282)	(295,435)
Board expenses		(356,519)	(332,201)
Depreciation and amortisation expense		(492,290)	(258,154)
Motor vehicle expenses		(117,897)	(131,709)
Consumable expenses		(58,199)	(259,834)
Travel and accommodation expenses		(214,752)	(214,182)
Finance costs and interest paid		(45,662)	(2,510)
Surplus / (deficit) before income tax		1,074,805	(10,187)
Income tax expense	2(a)	-	-
Surplus / (deficit) after income tax		1,074,805	(10,187)
Other comprehensive income		-	-
Total comprehensive income		1,074,805	(10,187)

HNECC Limited

ABN 51 604 341 362

Statement of Financial Position As at 30 June 2023

	Note	2023 \$	2022 \$
ASSETS			
CURRENT ASSETS			
Cash and cash equivalents	6	30,628,910	19,326,400
Trade and other receivables	7	855,454	1,258,680
Other assets	8	2,916,344	1,669,194
TOTAL CURRENT ASSETS		34,400,708	22,254,274
NON-CURRENT ASSETS			
Property, plant and equipment	9	143,227	-
Right-of-use assets	10	1,035,649	190,930
Other assets	8	217,751	85,792
TOTAL NON-CURRENT ASSETS		1,396,627	276,722
TOTAL ASSETS		35,797,335	22,530,996
LIABILITIES			
CURRENT LIABILITIES			
Trade and other payables	11	10,734,665	6,819,181
Lease liabilities	12	500,286	177,057
Employee benefits	13	1,258,424	1,092,928
Contract Liabilities	14	19,755,143	12,712,606
TOTAL CURRENT LIABILITIES		32,248,518	20,801,772
NON-CURRENT LIABILITIES			
Lease liabilities	12	599,687	18,290
Employee benefits	13	427,202	263,811
TOTAL NON-CURRENT LIABILITIES		1,026,889	282,101
TOTAL LIABILITIES		33,275,407	21,083,873
NET ASSETS		2,521,928	1,447,123
FUNDS			
Accumulated Surplus		2,521,928	1,447,123
TOTAL FUNDS		2,521,928	1,447,123

HNECC Limited

ABN 51 604 341 362

Directors' Declaration

The Directors of the Company declare that:

1. The financial statements and notes, as set out on pages 18 to 37, are in accordance with the *Australian Charities and Not-for-profits Commission Act 2012* and:
 - (a) comply with *Australian Accounting Standards - Simplified Disclosures*; and
 - (b) give a true and fair view of the financial position as at 30 June 2023 and of the performance for the year ended on that date of the Company.
2. In the Directors' opinion, there are reasonable grounds to believe that the Company will be able to pay its debts as and when they become due and payable.

This declaration is made pursuant to subsection 60.15(2) of the *Australian Charities and Not-for-profits Commission Act 2012* and in accordance with a resolution of the Board of Directors.

Director:



Director:



Dated 16 October 2023

HNECC Limited

ABN 51 604 341 362

Auditor's Independence Declaration

I declare that, to the best of my knowledge and belief, during the year ended 30 June 2023 there have been no contraventions of:

- (i) the auditor independence requirements as set out in the *Australian Charities and Not-for-profits Commission Act 2012* in relation to the audit; and
- (ii) any applicable code of professional conduct in relation to the audit.



Cutcher & Neale Assurance Pty Limited
(An authorised audit company)



M.J. O'Connor
Director

NEWCASTLE

9 October 2023

HNECC Limited

ABN 51 604 341 362

Independent Audit Report to the members of HNECC Limited

Report on the Audit of the Financial Report

Opinion

We have audited the accompanying financial report of HNECC Limited (the Company), which comprises the statement of financial position as at 30 June 2023, the statement of surplus or deficit and other comprehensive income, the statement of changes in funds and the statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies, and the Directors' Declaration.

In our opinion, the accompanying financial report of the Company is in accordance with the *Australians Charities and Not-for-profits Commission Act 2012*, including:

- (i) giving a true and fair view of the Company's financial position as at 30 June 2023 and of its financial performance for the year ended; and
- (ii) complying with *Australian Accounting Standards - AASB 1060: General Purpose Financial Statements - Simplified Disclosures* and Division 60 of the *Australian Charities and Not-for-profits Commission Regulation 2022*.

Basis for Opinion

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Report* section of our report. We are independent of the Company in accordance with the auditor independence requirements of the *Australian Charities and Not-for-profits Commission Act 2012* and the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 *Code of Ethics for Professional Accountants* (including Independence Standards) (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

We confirm that the independence declaration required by the *Australian Charities and Not-for-profits Commission Act 2012*, which has been given to the Directors of the Company, would be in the same terms if given to the Directors as at the time of this auditor's report.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Information Other than the Financial Report and Auditor's Report Thereon

The Directors are responsible for the other information. The other information obtained at the date of this auditor's report is limited to the Directors' report.

Our opinion on the financial report does not cover the other information and accordingly we do not express any form of assurance conclusion thereon.

HNECC Limited

ABN 51 604 341 362

Independent Audit Report to the members of HNECC Limited

In connection with our audit of the financial report, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial report or our knowledge obtained in the audit or otherwise appears to be materially misstated.

If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

Responsibilities of Directors for the Financial Report

The Directors of the Company are responsible for the preparation of the financial report that gives a true and fair view in accordance with *Australian Accounting Standards - AASB 1060: General Purpose Financial Statements - Simplified Disclosures* and the *Australian Charities and Not-for-profits Commission Act 2012* and for such internal control as the Directors determine is necessary to enable the preparation of the financial report that gives a true and fair view and is free from material misstatement, whether due to fraud or error.

In preparing the financial report, the Directors are responsible for assessing the Company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the Directors either intend to liquidate the Company or to cease operations, or have no realistic alternative but to do so.

Auditor's Responsibilities for the Audit of the Financial Report

Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Australian Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of the financial report.

As part of an audit in accordance with the Australian Auditing Standards, we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial report, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Company's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the Directors.

HNECC Limited

ABN 51 604 341 362

Independent Audit Report to the members of HNECC Limited

- Conclude on the appropriateness of the Director's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Company's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial report or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Company to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial report, including the disclosures, and whether the financial report represents the underlying transactions and events in a manner that achieves fair presentation.

We communicate with the Directors regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

We also provide the Directors with a statement that we have complied with relevant ethical requirements regarding independence, and to communicate with them all relationships and other matters that may reasonably be thought to bear on our independence, and where applicable, related safeguards.



Cutcher & Neale Assurance Pty Limited
(An authorised audit company)



M.J. O'Connor
Director

NEWCASTLE

17 October 2023

phn
HUNTER NEW ENGLAND
AND CENTRAL COAST

An Australian Government Initiative

**PRIMARY
HEALTH
NETWORK**