

Rural Activity Paper

AS AT NOVEMBER 2022



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Hunter New England and Central Coast (HNECC) PHN acknowledges the traditional custodians of the lands we walk, live and work upon, and respect First Nations continuing culture and the contribution they make to the life of this vast region.

Aboriginal Nations within our region include: Anaiwan and Nganyaywana; Awabakal; Biripi; Darkinjung; Dunghutti; Geawegal; Kamilaroi; Kuring-gai; Ngarabal; Wonnaru; Worimi.



**FIRST NATIONS
HEALTH**

INTRODUCTION

Since the inception of the Hunter New England and Central Coast Primary Health Network (the PHN) in 2015, primary health care support and services have increased by a value of more than \$45 million. The increase in primary health care support and services to the PHN's rural and remote communities is due to an equitable process for distribution of funding based on needs identified in the PHN's health needs assessment.

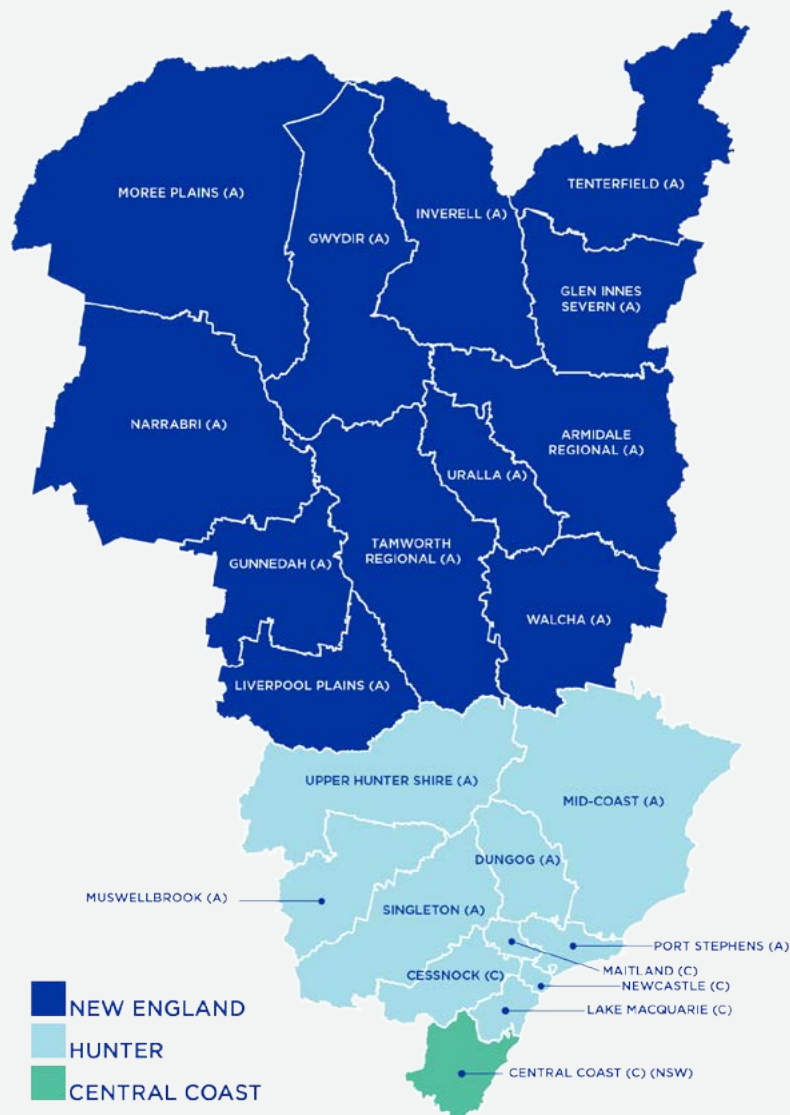
Key increases in rural support and services identified from 2015 to 2022 included:

- Over \$5 million spent in response to drought, bushfires and COVID-19
- Over \$2.5 million invested in grants to meet local community needs
- 3.8 times greater expenditure on mental health services

- 72.2% increase in Health Pathways localised to rural areas
- 6.2 times more funding dedicated to Aboriginal Health Services
- 200% increase in funding for drug and alcohol services

Recently the PHN has established a Rural Health Access team and is developing a Rural Health Access strategy. An upcoming rural initiative of this team is the implementation of the Better Health for the Bush pilot in the Glen Innes Severn LGA.

This report summarises the HNECC PHN activities to date.



TIMELINE

- 31 PHNs established throughout Australia, 10 PHNs in NSW and 5 PHNs with rural boundaries

2016

- New England Community Advisory Committee actioned the establishment of a Rural Communities Project

2018

- Rural Communities and Strategy Project established in Glen Innes and Tenterfield
- Grants for drought effected rural communities made available

2020

- Final Report from Shipway Consulting submitted – Better Health for the Bush framework developed, improving the dynamics of general practice and primary health care in small rural and remote communities
- Digital Health Grants – bringing general practice and allied health into the digital sphere.
- Rural COVID-19 vaccine roll out, collaborative activities with aboriginal medical services, local councils and universities.
- Workforce and education initiatives – Fundamentals of Practice Management

Mental Health

- Headspace Armidale opened
- Domestic and Family Violence pilot for General Practice launched in Armidale and Tamworth
- Movement Disorder Nurse Specialist Pilot launched in New England
- Best Practice, Equity, Analysis Pilot (BEAP) Pilot Type 2 Diabetes Project launched in New England

2022

- Community Recovery Grants for communities impacted by COVID-19 restrictions and flooding.
- Better Health for the Bush development of a not-for-profit practice in Glen Innes.
- Research publications of Heart Disease in Rural Areas for the Hunter New England region
- Collaborative project with Tamworth Regional Council to inform health promotion and obesity prevention activities.

2015

- HNECC PHN launch first Health Needs Assessment, identifying needs of rural communities

2017

- ENT Telehealth Project commences in Armidale
- Launch of PHN Rural Workforce Scholarships Program for general practice staff, e.g. Well Women's credentialed training for practice nurses & Medical Practice Assist education for reception staff

2019

- Rural Communities Innovation Coordinator based in Glen Innes & Tenterfield employed through agreement with HNE LHD
- Engagement of Shipway Consulting to consult with community and key stakeholders regarding Health needs, access, and possible workforce solutions. Commencement of the evolution of the Better Health for the Bush Framework
- Bushfire recovery grants offered to rural communities to generate social connection.

2021

Recruitment and Retention incentives

- GP Bush grants for the NENW
- River Run Grants for Manning region
- Recruitment Starter grants for GP Practices
- Pilot of the Welcome Ambassador Program
- Launch re-location campaign using social media, Qantas magazine & small-town profiles for prospective health professionals

Workforce and Education Initiatives

- Fundamentals of Healthcare
- First Nations specific Medical Practice Assist Course
- HPMI grants made available to General Practice Staff for virtual continuous professional development and education

Place based activities:

- Glen Innes - Better Health for the Bush model development
- Bingara and Tenterfield general practice support
- Gunnedah project- local council collaborative with HNE LHD, RDN, PHN and local council.
- Coal Services Health - Gunnedah, establishment of co-located primary care clinic.
- Nundle GP Outreach- Three-way partnership between HNE LHD, PHN and Tamworth Aboriginal Medical Services.

Mental Health:

- Headspace Taree Opened

2022/
2023

Better Health For The Bush

The Better Health for the Bush collaborative began working on the initiative in November 2019. In 2020 the collaborative undertook an extensive consultation process across the Mehi, Tablelands and Plains areas involving medical organisations, community members, allied health and the PHN New England North West Clinical Council and Community Advisory Committee.

The consultations identified key areas for further exploration and elaboration as the collaborative developed the BHFTB initiative:

- The critical role of general practitioner (GP) clinical leadership and care navigators
- Attracting registrars, GPs and rural generalists to the regions
- Recruiting allied health and nursing clinicians to the regions
- Working with and leveraging existing programs and frameworks such as the rural generalists procedural program
- Utilising the strengths of local communities and health services

Local solutions are required to address challenges in the delivery of health care in rural communities. At the same time, some of the solutions will be found at a regional or sub-regional level. For those reasons BHFTB is being established across sub-regions while ensuring it is tailored to the needs of local communities. The Tablelands subregion (covering Glen Innes, Inverell and Tenterfield) is the first sub-region where BHFTB is being developed.

A draft project plan was developed in February 2021 and further refined in July 2021. Subsequently, a co-design approach further refined the collective understanding of the problem and finalised the plan to implement BHFTB in the Tablelands sub-region.

Place Based Activity

Glen Innes Place Based Work (2022)

The PHN has been collaborating with the Glen Innes Local Government to assist with workforce. On June 17, 2022 the PHN continued stakeholder engagement with the Hunter New England Local Health District (HNELHD), University of New England (UNE), *Attract, Connect, Stay* and key GPs. This work sits within the Better Health for the Bush pilot model, which is partnered with HNELHD and UNE.

- Commenced discussion regarding partnership, co-op model or similar for a sustainable primary care service to the Community.
- Financial model with options developed and presented to current GP principals and owners, August 2022. Further refinement of options for model in September 2022. Finalisation of new GP service model October 2022.
- PHN funds have been allocated to 22/23FY to establish the service.

Bingara and Tenterfield Place Based Work (2022)

On August 3, 2022 Rural and Remote Medical Services Ltd (RaRMS) announced their discontinuation of support of several general practices across NSW effective midnight 30th September 2022. Bingara Medical Centre and Naas Street Medical Centre were two of the seven impacted practices. On notice of the RaRMS discontinuation, the PHN responded rapidly with intense support by key PHN staff to assist the practice to successfully transition to a new enterprise. Support from the PHN included;

- Projection of potential income generation for the practice
- Mentoring for adopting planned care for patients with chronic disease
- Consultation and development of community messaging
- Consultation on progressing to a mixed billing model
- Weekly meetings to review progress and offer support
- Mental health and wellbeing support through Access EAP's members assistance program
- Support to set up clinical audit tool to maximise patient and business outcomes
- Provision of an IT grant to enable the practice to set up adequate hardware/software

Feedback from the practices included:

“ KNOWING THE PHN HAS BEEN THERE GUIDING US ON THIS JOURNEY HAS BEEN LIKE A **safety net** BENEATH THE PRACTICE ”

“ WITHOUT THE **resources** THE PHN HAS PROVIDED, I WOULD NOT HAVE KNOWN ALL THE CONSIDERATIONS TO TRANSITION ”

“ YOU HAVE GIVEN US SOME GREAT IDEAS ABOUT HOW TO GENERATE INCOME AND **ensure our practice is sustainable** AND CAN CONTINUE TO PROVIDE CARE TO THE COMMUNITY ”

Gunnedah Project (2021)

The Gunnedah project is a collaboration with Rural Doctors Network, Gunnedah Council, HNE Local Health District, the PHN, and GP Synergy. The collaboration has assisted with a number of projects in the community including:

- The establishment of Tamworth Aboriginal Medical service (TAMs) in the town's rural health building, enabled with a PHN small grant
- Attraction of three new GPs
- Implementation of a nurse practitioner model

Coal Services Health (2022)

The PHN is facilitating work and relationship between Coal Services Health Gunnedah, and the HNELHD who are collaborating together on a number of projects.

- Coal Services Health has now a co-located primary care clinic in Gunnedah
- New premises opened September 6th 2022



The opening of the new Coal Services premises



The team at TAMs in Gunnedah

Nundle General Practice Outreach Service (2022)

In a three-way partnership between the LHD, PHN and TAMs the provision of a GP outreach service to the Nundle community (60km from Tamworth) has commenced. TAMs are providing a GP and Practice Nurse on a fortnightly basis to the small community to provide a primary health care service that has been absent for two years.

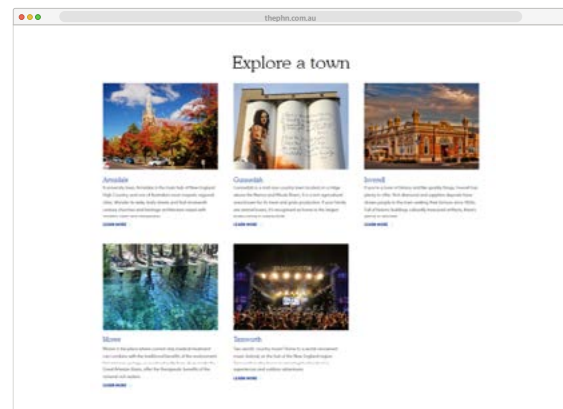
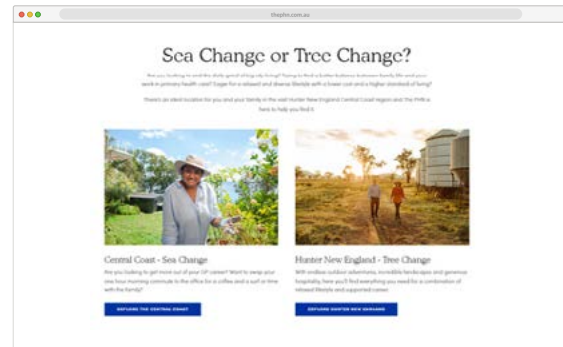


Relocation Campaign

The PHN has adopted a number of strategies to attract general practitioners to the Hunter New England Central Coast Region.

“Consider a Move” Landing Page (2022)

Our relocation page has been developed to showcase each of our regional areas. Featuring a welcome message from the local mayor, the page outlines the town’s amenities, restaurants, schools, and more.



Social Campaign (2022)

A dedicated social campaign was developed and run across Australia's major capital cities including Sydney, Melbourne and Brisbane. Several thousand views leading to several hundred click throughs of our landing page highlighted the impact of this campaign.



Other Campaign Inclusions

QANTAS magazine advertisement – Full page advertisement outlining the best the region has to offer featured during the month of May on all QANTAS flights and in QANTAS lounges across Australia.

Local life manuals – A comprehensive town directory, outlining services such as supermarkets, hairdressers, schools, restaurants, recreational activities and more. The manuals were gifted to the town's new GPs.

Piloting the Welcome Ambassador program – The Welcome Ambassador links with the new GP and their family to assist with relocation and establishment, including finding a home, enrolling children in school etc.

General Practice Registrar Support

Scholarships (2020 – 2022)

Our rural towns of Inverell, Moree and Gunnedah welcomed seven GP registrars this February through a successful incentive program. The program, led by the PHN in collaboration with GP Synergy, funded scholarships to attract and appropriately place registrars throughout the region.

The aim of the rural registrar incentive program was to identify and overcome barriers for registrars

wishing to experience regional practice to assist in alleviating the workforce shortage. The scholarships provide financial assistance for the registrars, as well as ongoing education, training and wellbeing support.

Originally offering six scholarships, seven were granted due to demand. Two registrars have elected to Inverell, two to Moree and three to Gunnedah – previously none of which had a GP registrar in over six months.

>> <https://www.nbnnews.com.au/2022/01/27/seven-gp-registrars-headed-to-the-north-west/>

2022 Registrar Scholarship Summary

Term One 2022 – Investment by the PHN was \$80,000

- Provided GP Registrars to seven practices which included:
 - Inverell x 2
 - Moree x 2
 - Gunnedah x 3
- Provided Visiting Medical Officer (VMO) coverage in Gunnedah and Inverell

Term Two 2022 – Investment by the PHN was \$70,000 (collaboration with GP Synergy)

- Provided GP Registrars to six practices which included:
 - Inverell x 2
 - Moree x 2
 - Gunnedah x 2
- Provided VMO coverage in Gunnedah and Inverell

Registrar Networking Dinners (2019 – 2022)

The workforce registrar network dinners, initiated and driven by the PHN were launched as a welcome to trainee doctors as they set up in their new hometown.

During August 2022 welcome dinners were held in Cessnock, Central Coast, Inverell, Newcastle, Armidale, Narrabri, Tamworth and Tuncurry with representatives from the PHN, GP Synergy, Rural Doctors Network, the Central Coast LHD and Hunter New England LHD in addition to town mayors. All registrars received a welcome gift.



Distribution Priority Area Assistance

Prior to the Government's Distribution Priority Area (DPA) announcement, the PHN was integral to general practice in the advocacy, development and submission of DPA papers across the region. This work resulted in

- DPA allocated to all Modified Monash Model (MMM)3 and (MMM)4 areas including Singleton Muswellbrook and Narrabri.
- DPA exceptional circumstances assistance given to 39 practices across the PHN footprint.

Area of Need Assistance

Letters of support have been provided for regional/rural areas including:

2021

- Taree
- Quirindi
- Muswellbrook
- Port Stephens
- Karuah
- Narrabri

2022

- Muswellbrook
- Cessnock x3
- Wee Waa



COMMISSIONED SERVICES

In 2022, 18 services were commissioned by the PHN, ranging from mental health, First Nations health, primary care nurses, allied health, drug and alcohol, general practice support, health literacy and aged care support.

During the 2021-22 financial year the PHN commissioned more than \$80 million in contract value of services across the region.

GRANTS

The PHN has offered several rounds of General Practice workforce recruitment grants, which have demonstrated that financial incentives motivate GPs and registrars to move locations and that DPA status and health workforce certificates are key issues that need ongoing review. The grants contained a number of funding streams:

Bush GP Grants – New England Region

In a bid to recruit seven new general practitioners (GPs) to the state's NENW, the PHN announced grant funding of \$280 000 in March 2022. The Bush GP Grant funding was available to general practices in the Upper Hunter Plains and New England North West regions, to assist in the recruitment and retention of new GPs.

Stage 1 Recruitment Starter Grants (2022)

The \$2,500 Recruitment Starter Grants are designed to support General Practice in their recruitment activities. They may be used to implement new or innovative recruitment strategies, develop employee value propositions, develop recruitment videos, update recruitment adverts, or retain the services of a recruitment consultant. Stage one of the grant funding included 20 recruitment grants.

Stage 2 GP Incentive Grants (2022)

The GP incentive grants are provided to the General Practice upon signing a contract for a new GP from outside the PHN rural region for a two year/minimum, three days per week. The grant supports General Practice to negotiate with the GP and provides funds to assist with negotiations.

Stage 3 Welcome Ambassador Grants (2022)

To increase the likelihood of relocating GPs and their families settling in well to new towns, each practice receiving the GP incentive grant was also allocated a Welcome Ambassador service.

The grants have been fully subscribed with all seven new GPs recruited and commencing their role in their new practice:

- 1 x Quirindi Health Centre
- 1 x Bridge Medical, Narrabri
- 1 x Better Health South, Tamworth
- 1 x East Ave, Glen Innes
- 1 x Wee Waa
- 1 x Armajun
- 1 x St Elmo's – provisionally allocated for start date of Jan 2023

>> <https://www.nbnnews.com.au/2022/03/28/funding-boost-to-lure-gps-to-the-bush/>

Example of the Recruitment Starter Grant by Gloucester Medical Centre:



River Run Grants – Manning Region

The River Run GP recruitment grants were offered in March 2022. The grant round was offered to Taree LGA, Gloucester LGA, Forster-Tuncurry LGA, Dungog LGA and included:

- Five – Recruitment Starter Grants – \$2,500 per general practice (available in selected LGAs)
- Three – River Run GP Incentive Grants – \$25,000 per general practice (available in selected LGAs)
- Three – Welcome Ambassador service – valued up to \$5,000 (available in selected LGAs)

Two GP incentive grants were fully subscribed with Taree – Healthhub.

Digital Health Grants

In 2021-22 more than 300 general practices, allied health practices and residential aged care facilities across the Hunter, New England and Central Coast regions benefited from \$1.6 million in digital health grants. The highly popular Health-e Together digital health grants were offered to the practices and facilities this year and were fully subscribed within the grant round. The grants, offered in \$5,000 bundles, provided funding to improve digital health capabilities and enablers such as telehealth systems, upgrades of website, online booking systems, e-referral/e-prescription and/or cyber security training.

Within the general practice stream, approximately 25% of the grant funding was provided to practices in rural and regional areas. An example of how the digital grant funds were utilised – featured here.

nbnnews.com.au/2022/07/28/funding-gives-tamworth-physio-a-boost-in-tech/

Flood Recovery Grants

In May 2022, the PHN provided \$325,000 in flood recovery grants to promote wellbeing for Hunter, New England and Central Coast residents. The community wellbeing and flood recovery grants of between \$5,000 and \$50,000 were provided to Non-Government Organisations (NGOs) and community groups to deliver projects and initiatives that promote mental wellbeing and resilience.

The grants, funded by the NSW Government and facilitated by the PHN, were offered to the community with over 30 applications and 12 projects being selected for funding. Projects receiving funding provided activities, initiatives and programs for people in Narrabri, Central Coast, Marlee, Wollombi Valley, Gunnedah, Moree, Yarramalong, Cessnock, Singleton and Muswellbrook. The target groups range from youth, financially disadvantaged, culturally and linguistically diverse, First Nations and general population.

Community Recovery and Reconnection Grants

In 2022-23 funding was allocated to support communities impacted by COVID-19 restrictions, the PHN have awarded over \$65,000 to 13 community groups to provide activities, initiatives or programs that aim to support social and community connections, wellbeing as well as resilience building for their community and individuals. The communities targeted with this funding include Armidale, Guyra, Kootingal, Limbri, Woolbrook, Walcha and Yarrowitch.

EDUCATION & PROFESSIONAL DEVELOPMENT

The Hunter New England Central Coast PHN provides comprehensive, ongoing education for GPs in both face-to-face and virtual formats. The below provides an overview of rural and remote education over the past 12 months:

JULY 21 – DEC 21	JAN 22 – PRESENT
✓ 103 Events	✓ 178 events
✓ 14,007 Participants registered	✓ 8,058 participants registered
✓ 6,809 attendees	✓ 5,094 attendees
✓ 4,882 post event participation	✓ 2,064 post event participation

Education Hunter Postgraduate Medical Institute (2022)

PHN provide grant funding to HPMI annually of \$80,000 for the provision of Education for GPs registrars, nurses, practice managers, administration, and allied health.

- The majority of events are livestreamed to regional and rural areas
- 13 scholarships provided to MMM3-MMM7 practices for membership @ \$1,000 per scholarship via an expression of interest process

Educational Scholarships (2018 – 2022)

Medical Practice Assist (MPA)

- Since 2018 PHN has provided scholarships for Medical Practice Assistants
- Average 30 scholarships per year
- 2022 intake 30 students

Aboriginal and Torres Strait Islander specific MPA course

- Currently in development
- UNE Partnership support

Fundamentals of Health Care 2022

- Target audience medical receptionists
- 85 scholarships allocated value \$495
- Webinar series with additional full day livestream

Fundamentals of Practice Management 2021

- Target audience practice managers
- 42 scholarships allocated value @ \$495 per participant
- Attendance at four webinars
- Attendance for full day livestream

Successful Models

New England Northwest Ear Nose & Throat (ENT) telehealth project (2018 – 2022)

In 2017 over 23% of rural patients aged 0-16 were travelling over 50 kilometres to John Hunter Hospital (JHH) for Ear, Nose and Throat (ENT) appointments. A model was developed for Armidale and Tamworth that utilised telehealth systems to work with local interested GPs to assess and securely forward patient assessment and referral information to the John Hunter Hospital (JHH) ENT specialists. Once reviewed a telehealth consultation is arranged with the patient, GP and ENT specialist.

The JHH ENT specialists developed training materials, clinical resources, and store-and-forward technology for local GPs. Assistance was provided by the HNELHD clinical telehealth team to support the installation and use of telehealth technology at remote sites. In 2022 the project successfully concluded with a VMO appointment of an ENT Specialist in Tamworth Base Hospital.

Diabetes Remote Monitoring (2021 – 2022)

The diabetes remote monitoring pilot aims to stabilise blood glucose levels through use of continuous glucose monitors, for patients who use insulin therapy for the management of Type 2 Diabetes Mellitus. This occurred in six general practices in the PHN region, which included a practice in the Moree area. The evaluation demonstrated the following:

- patients' outcomes through PAM-10 scores and HbA1c levels
- positive experience for clinicians' in having conversations and assisting managing type 2 diabetes and,
- return on investment represents a \$66 return per \$1 invested in the intervention.

Pilot Models

Primary Care Domestic Family Violence Program (2021 – 2022)

Domestic Family Violence (DFV) is well recognised in Australia as a social issue, what is less recognised is its significant health impacts. DFV is the leading contributor to the burden of disease for women aged 18-44 years of age, higher than smoking, obesity, and alcohol misuse. The PHN is leading a range of initiatives focused on getting help to people experiencing domestic and family violence faster.

Through partnering with the NSW state based Women's Domestic Violence Court Advocacy Service (WDVCAS), the PHN is building bridges between the primary care and specialist DFV sectors, whilst training General Practice to recognise, respond and refer their patients who are experiencing DFV.

Movement Disorder Nurse Specialist Pilot (2021 – 2022)

The PHN are piloting a Movement Disorder Nurse Specialist (MDNS) pilot in the New England North West. The primary care model provides a hub and spoke nurse outreach program for people living with Parkinson's disease in rural and remote regions, providing individualised support for patients and their carers around how to best manage their condition. The pilot program additionally provides education and capacity building opportunities for local primary care practitioners in best practice and care for people living with Parkinson's disease.

Best Practice, Equity, Analysis Pilot (2021 – 2022)

The BEAP (Best Practice, Equity, Analysis pilot) was developed with the purpose to test the concept that current software technology can improve allied health clinician experience in data input and in sharing of that information to other health care providers. Longer term, this may lead to the development of and access to evidence-based reporting data sets to demonstrate the impact of various allied health interventions when treating patients living with chronic disease and support Quality Improvement (QI). The pilot was conducted with five allied health practices from various professions (i.e., physiotherapist, podiatrist, exercise physiologist, dietician and accredited diabetes educator). A technical and process workflow were developed to collect clinician reported clinical measures (CM), Patient Reported Outcome Measures (PROM's) and Patient Reported Experience Measures (PREM's) from Type 2 diabetes (2TDM) patients.

Care Monitor Platform (2021 – 2022)

Care Monitor is a shared care platform that enables GP's, nurses and the LHD to remote monitor patients that are in the low risk Covid 19 category. This mobilises additional workforce to respond to any spikes in local cases and help ensure patients can be safely and effectively cared for at home.

Care Monitor creates an effective way to coordinate complex clinical pathways, care planning, medication management and patient engagement. Features of Care Monitoring include:

- Multidisciplinary shared care planning and management
- Population health management dashboard and reporting
- Realtime remote health monitoring
- Clinical pathways and care plans
- Workflow management
- Patient engagement



PARTNERSHIPS

The PHN addresses workforce needs in close collaboration with the Rural Doctors Network, through a partnered work plan. The Better Health for the Bush strategy is partnered with HNELHD and UNE. In addition, the PHN maintains working relationships with a wide variety of councils, universities, research organisations and government bodies to form mutually beneficial collaborations which improve the health outcomes of the people with our PHN region. Some of these partnerships include:

Universities and Local Regional Councils

- Rural based research
- HealthyRHearts – UoN
- Ethics approved for the “Heart Disease in rural areas of the Hunter New England region of New South Wales”
- Rural Based – Cardiovascular working group initiatives
- Tamworth Regional Council pilot proposal, providing healthier food options at council sporting facilities & consider modelling, and mapping of the food environment to inform planning for health promotion and obesity prevention

Longitudinal integrated clerkship with University of New England

- Provision of \$38,000 by the PHN
- To grow rural generalists in the New England region
- Based on apprenticeship model of experiential learning in a rural community
- 2021-2022 Year 5 students attached to practice in Inverell (19-week blocks)
- Looking to expand to Moree pending available funding

Small Town Workforce Planning

The PHN continues to collaborate with NSW RDN to deliver added value through the development and implementation of an integrated partnership. This approach strategically utilises PHN and RDN resources to improve access to quality primary healthcare for people in the PHN region.

Integrated Care Activities

Thirteen special projects and over fourteen Hunter New England Integrated Care Partnership projects were supported by the PHN in the 2021-22 financial year, with over \$700,000 invested by the PHN across the region. Special projects range from addressing resilience, access to healthcare, general practice support, health literacy and refugee resettlement. Alliance projects involve a partnership with HNE LHD for joint work on best models of care for diabetes, COPD, palliative care, dementia, and perinatal care.



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HUNTER NEW ENGLAND
AND CENTRAL COAST

An Australian Government Initiative

**PRIMARY
HEALTH
NETWORK**