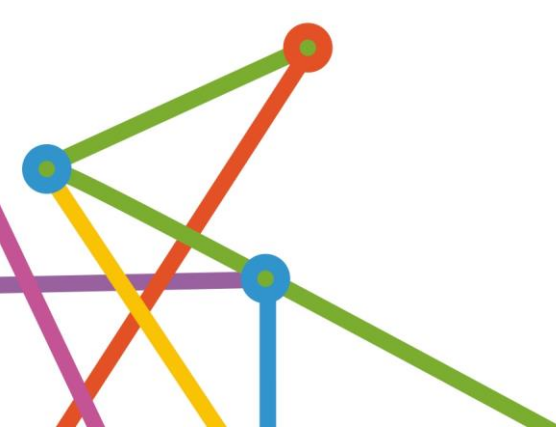




ITC Service Review 2022

Executive Summary & Recommendations



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Executive Summary

WA Primary Health Alliance (WAPHA) is dedicated to improving the health of Aboriginal Western Australians, and their flagship Integrated Team Care (ITC) program helps Aboriginal people with complex chronic diseases to effectively manage their conditions by providing care coordination.

The ITC program is a free service that provides care coordination support, education, financial support, and practical assistance to Aboriginal people in metropolitan Perth and regions across Western Australia. The program is managed by WAPHA and delivered by a number of service providers across the state, in alignment with the program's implementation guidelines.

In December 2021, WAPHA engaged IPS Management Consultants to review the ITC program's delivery and measure the extent to which service providers were delivering the program in alignment with the implementation guidelines. Engagement with ITC clients was out of scope for the review and, as such, claims relating to the client experience, value and success of the program are subjective, and further engagement is required to substantiate some of these claims.

The aims of the review were to assess:

- Alignment of contractual obligations to the Department of Health and Aged Care ITC Program Implementation Guidelines
- Program fidelity to the ITC Program Implementation Guidelines
- Role of Indigenous Health Project Officers (IHPO)
 - Alignment to ITC Program Implementation Guidelines
 - Best positioning for IHPOs

Through a document review and consultations with service providers, WAPHA staff and contract managers, and other health support providers, it was found that contractual obligations and the ITC program implementation guidelines were well aligned.

Due to the comprehensive nature of the implementation guidelines, a strong desire to be compliant and continue to deliver the service, ITC provider activities mostly aligned to the implementation guidelines. Where service delivery deviated from the implementation guidelines, it was found that providers were responding to clients' needs or managing challenges such as travelling vast distances to service clients and a lack of staff resourcing which meant that some activities were not carried out. Overall, however, the aims and objectives of the program remained central to service delivery where service providers contribute to improving health outcomes for Aboriginal people with chronic health conditions and improve access to culturally appropriate health care.

Service providers and most WAPHA staff held the view that IHPOs should remain within their community and ITC team. While some held the view that the IHPO would be better positioned within WAPHA to coordinate activities and promote the program, their community connections are too valuable to successful service delivery.

In conducting the review a number of important thoughts and views were expressed by stakeholders that didn't necessarily align to the aims of the review. Given the importance of the program, the dedication demonstrated in delivery and the need for culturally appropriate support, they have been included for general consideration.

The recommendations below are based on findings and intended to provide guidance to improve alignment to the implementation guidelines, improve service delivery, and ensure the program is best placed to meet future needs.

Recommendations

Recommendations	WAPHA Agreed Actions
<p>1. Service providers be provided with a service delivery guide suited to the local environment that included information such as the community's demographics, health needs and other support programs available to compliment the ITC.</p>	<p>System Integration and Development provide a list of local and relevant sector engagement groups that ITC Service Providers would be able/gain membership to attend to ensure not only to gain full awareness of potential partnership, collaboration, and support program opportunities, but be aware of evolving community needs.</p>
<p>2. WAPHA have a role dedicated to ITC management who is able to provide information, advice, and support to contract managers. This position should also be responsible for managing and approving supplementary services and equipment to ensure consistency and alignment of the guidelines.</p>	<p>The WAPHA Program Improvement Coordinator – Aboriginal Health to provide support to the Contract team on ITC matters.</p> <p>Over 2022/23 the Program Improvement Team – Aboriginal Health Coordinator to examine and undertake ITC practice initiatives to support the consistency and alignment of guidelines components to the ITC sector.</p> <p>Managing and approving supplementary services and equipment to remain the responsibility of the ITC Service Provider.</p>
<p>3. Contract managers and service providers meet on a periodic basis to discuss program delivery. This will ensure contract managers are aware of provider activities on a more frequent basis than six monthly reporting and also provide an opportunity for service providers to discuss any needs, challenges, or opportunities.</p>	<p>Contract Managers to explore local face to face visits with ITC service providers and meeting cadence established.</p> <p>Co-ordination across Contract Management and Program Improvement teams on the establishment of Communities of Practice.</p>
<p>4. ITC providers to better integrate with other service providers in coordinating visits with emphasis on utilising all available transport options for client to attend a service.</p>	<p>Incorporate as standing agenda item at Contract Manager scheduled meetings with ITC Service Providers for discussion/actions and also at local stakeholder engagement co-ordination group meetings with relevant service providers.</p>
<p>5. Consider current implementation guidelines and clarify whether the support is short or long term within contracts.</p>	<p>The ITC service to be a short-term program for eligible clients with a particular focus on:</p> <ul style="list-style-type: none"> – Eligible clients should normally be admitted to the service three to six months with priority to addressing the recommendation of the GP Management Plan and highest area of assessed need. – Assistance and transport to/from appointments. – medical aids and equipment. – focus on self-management outcomes and/or transitioning to another service. <p>Eligible clients can be re-referred by GP or Remote Area Nurse.</p> <p>Progress consultation with ITC providers and clarification via contract variation.</p>

<p>6. If the program is clarified as short term to result in self- management, ensure service providers are provided with all culturally appropriate support programs to enable transition if required.</p>	<p>In addition to agreed action for Recommendation 1: Outcomes for this recommendation incorporated as part of the local stakeholder collaboration health group membership. Incorporate as regular agenda item for monitoring and discussion at ITC Provider and contract manager meetings.</p>
<p>7. Further research is recommended to gain an understanding of the referral process and client outcomes associated with the ITC program. Also, the extent to which the IHPOs are aware of and refer clients from the ITC program into other applicable programs.</p>	<p>As per Recommendation 2, the Program Improvement Coordinator - Aboriginal Health will have these items identified as further exploration for the program improvement work to be conducted during 2022/23.</p>
<p>8. Review current budgeting and fund allocation to ensure that service providers are able to offer competitive salaries to Aboriginal staff. This could be achieved by re-allocating existing funding to salaries and reducing funding to other areas of the program.</p>	<p>Ensure ITC Service Provider and Contract Manager agenda includes budget planning and financial performance. WAPHA to undertake a review of ITC funding allocation across individual contracts and regions ensuring this aligns with total grant from the Australian Government, and review of budgets that ensures workforce needs are met as a priority in allocations. National evaluation of ITC services to be commissioned by the Australian Government which will also have bearing on recommendation – due mid-2023.</p>
<p>9. Specify IHPO staff capacity in terms of working on the ITC program if employed 1 FTE in program.</p>	<p>This is an operational decision for the service provider to ensure that there is adequate resources and staffing arrangements to deliver the service in accordance with the Agreement.</p>
<p>10. Emphasise the importance of the ITC provider/IPHO developing and maintaining a close relationship with GPs and specify the benefits to service providers and clients. Particularly in supporting the referral process, improving communication between service providers and GPs and better servicing clients by improved understanding of other programs that may be available through the GP.</p>	<p>The Program Improvement Coordinator - Aboriginal Health will have these items identified as further exploration for the program improvement work to be conducted during 2022/23. This position will work closely with teams across the PCI&D portfolio as well as with service providers via the Practice Connect and Practice Assist websites where it is identified that GP notification/engagement is required. Contract Managers to continue to review reports and at regular contract meetings have this as an agenda to see the level of work and interaction at the GP/ITC interface.</p>
<p>11. Specified amount of 3% be used for training by service providers as a priority.</p>	<p>Specific Program Improvement initiatives occurring during 22/23. Requires identification of training opportunities for ITC Service Providers and to be budgeted in 23/24. Contract Managers will help identify these in partnership with each ITC Service Provider and agree on a fair and reasonable training costs that will be outlined in their submitted budgets.</p>

<p>12. Review and adjust the IHPO role and list of responsibilities to ensure that it is reasonable within the Western Australian context while still within the national guidelines.</p>	<p>Contract Managers to clarify the core functions of the IHPO role in consultation with ITC Service Providers beyond the role of overseeing the ITC program.</p> <p>A key is the promotion of the following to GPs in the region:</p> <ul style="list-style-type: none"> - MBS Items - The ITC Program and what it can offer their clients - PIP IHI Info - Comprehensive Care - Safety and Quality Goals - Cultural Competence in Caring - Identifying Aboriginal Patients - Creating Safe and Welcoming Environment - Effective and Safe Communication
<p>13. A dedicated Aboriginal resource, similar to the Aboriginal health team, be established within WAPHA to support ITC service providers, and taking on some of the responsibilities currently allocated to the IHPOs, and the contracts team. IHPOs to remain with their service provider (links to recommendation 2)</p>	<p>It is not feasible to remove role components and responsibilities from the IHPO role based on the ITC Service Provider.</p> <p>A WAPHA Program Improvement Coordinator role exists in support of ITC Service Providers.</p>
<p>14. WAPHA conduct an evaluation of ITC program delivery utilising a realistic framework to ensure place-based elements are considered.</p>	<p>The Australian Government have committed to a national review of the ITC program during 22-23.</p>

Future Research and Evaluation

This review focused on the ITC program's delivery in terms of alignment to the implementation guidelines, program fidelity and the role of IHPO. The scope did not include the client experience or extent to which client needs are being met.

Throughout the report, there are points raised by stakeholders that were beyond the scope of this review but have been included and provide a good foundation for an evaluation of service delivery that should include the client experience and the program's impact on family and community.

An evaluation of the ITC program should also include an exploration of other services that are available and utilised by ITC service providers and ITC clients and the extent to which service providers collaborate and refer clients across various programs. Service providers would also benefit from a service mapping activity which could be an output of an evaluation.

Recommendation: WAPHA conduct an evaluation of ITC program delivery utilising a realistic framework to ensure place based elements are considered.