



Country WA PHN Activity Work Plan

PHN Pilots and Targeted Programs

**Summary View
2022/2023 – 2025/2026**

**Presented to the Australian Government Department of Health
and Aged Care**

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PP&TP-GCPC 1000 - Greater Choice for At Home Palliative Care Project

Activity Title

Greater Choice for At Home Palliative Care Project

Activity Number

1000

Activity Status

Modified

PHN Program Key Priority Area

Aged Care

Aim of Activity

The aims and objectives of the expansion of this program are:

1. Improve awareness (workforce and community) and access to palliative care at home and support end-of-life care systems and services in primary care and community care.
2. Enable the right care at the right time and in the right place to reduce unnecessary hospitalisations.
3. Generate and use data to support continuous improvement of services across sectors.

Description of Activity

The Greater Choice for At Home Palliative Care Program will recruit up to two Full Time Equivalent (FTE) staff members in 2021-22 to 2024-25.

The Great Southern Greater Choice for At Home Palliative Care pilot activity was successfully completed in June 2022.

Compassionate Communities model of care has been adopted by the City of Albany which is now recognised as a "Compassionate City" with the development of a Compassionate Communities Charter. The Great Southern has participated in an evaluation exercise resulting in the production of a video outlining the pilot activity which will be available to all PHNs. All other resources produced by the pilot have been transitioned to Palliative Care WA and are available via their website.

In 2021-2022, a Needs Assessment was developed to describe the current level of palliative care need within WA and, access to palliative care services, including uptake of Advance Care Planning (ACP). The Needs Assessment utilised available evidence at a national and state level as well as information accessed through formal and informal engagement with key stakeholders across health, community, and palliative care sectors. This work was limited by the absence of data at a national, state or PHN level relating to palliative care activity provided by general practitioners (GP) and Primary Care.

The Needs Assessment supported the development of initiatives for the PHN, aimed at improving access to palliative care and includes activities to:

- Build capacity and capability of GPs to identify palliative care needs in patients with (progressive) chronic conditions through existing patient data.
- Complete a Palliative and End-of-Life Care – specific “Learning Needs Analysis to support and deliver a targeted training program in collaboration with jurisdictional and national workforce education programs.
- Develop and implement a continuous quality improvement program related to palliative and end of life care provision in general practice.
- Improve the uptake of Advance Care Planning (ACP) in general practice.
- Increase awareness of ACP and end of life choices for Aboriginal people by building capacity in Aboriginal Health Services.

These activities will be undertaken in the Goldfields health region of the Country WA PHN with the intention to develop resources and programs that can be implemented across the whole PHN.

During 2022-23 to 2024-25, the project will focus on:

- Implementation of the Palliative and End of Life Care Plan of activities identified from the 2022 Needs Assessment.
- Monitoring and evaluation of the Palliative and End of Life Care Plan including collaboration and participation in the national evaluation, which will be conducted by PwC on behalf of the Department of Health and aged Care.
- Qualitative and quantitative data collection outcome measurement and review, to inform quality improvement.
- Reporting Project outcomes

Country WA PHN Needs Assessment

Priorities

Page reference

Improve access to coordinated culturally appropriate primary care for Aboriginal people.	15
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Target Population Cohort

Primary care workforce - general practitioners, general practice staff and Aboriginal Health Service staff.

Indigenous Specific Comment

One of the five planned activities within the expansion will target Aboriginal and Torres Strait Islander people in the region.

The activity has been developed through stakeholder engagement in the region which included attendance at an Aboriginal camp in a remote area of the region.

Consultation

The PHN consulted with and continues to engage with a range of stakeholders in the planning and delivery of the Greater Choices for At Home palliative Care Program, including:

- Aboriginal organisations/communities
- General practitioners and general practice staff
- WA Country Health Service
- Nursing staff at Kalgoorlie hospital and Leonora MPS
- Gwandalan Project
- Palliative Care Australia
- Palliative Care Outcomes Collaborative

Collaboration

Collaboration is ongoing with:

- Palliative and Supportive Care Education WA
- Program of Experience in the Palliative Approach
- WA Country Health Service Palliative Care Team
- Goldfields Health Professionals Network

Coverage

Local government area of Goldfields within Country WA PHN

Activity Duration

Activity Start Date

1 March 2018

Activity End Date

30 October 2025

Activity Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25
Greater Choice for At Home Palliative Care	\$554,801.06	\$300,000.00	\$300,000.00

PP&TP-GP 2000 - PHN Strengthening Medicare General Practice Grants Program

Activity Title

PHN Strengthening Medicare General Practice Grants Program

Activity Number

2000

Activity Status

New activity

PHN Program Key Priority Area

Population Health

Aim of Activity

To support general practice to make improvement to their practices, to expand patient access and support safe, and accessible, quality primary care.

This will be achieved through investment by the Australian Government Department of Health and Aged Care to eligible general practices and Aboriginal Community Controlled Health Services to invest in innovation, training, equipment and minor capital works, to improve patient access.

The investment is known as the Strengthening Medicare-General Practice Grants Program, with intended outcomes:

- Increase take-up of contemporary digital health solutions including video telehealth, secure data storage and interoperable software that supports seamless, secure communication of patient data.
- Increase the proportion of COVID Positive and other respiratory patients treated in a general practice setting (by increasing practices' capacity to treat more of these patients).
- Increase the number of accredited general practices.

Grants to general practices will be distributed by the Primary Health Network (PHN), who will establish, administer and manage the awarding of Strengthening Medicare Grants Program to accredited and non-accredited general practices.

Grants to eligible Aboriginal Community Controlled Health Services will be administered and managed through the National Aboriginal Community Controlled Health Organisation (NACCHO).

Description of Activity

The Strengthening Medicare-General Practice Grants Program invites general practice to apply for one-off grants, based on practice size and accreditation status, to invest in innovation, training, equipment and minor capital works.

Grants of between \$25 and \$50K will be available to practices against one or more of these streams:

- Enhance Digital Health Capability – (IT hardware and software upgrades) to fast track the benefits of a more connected healthcare system in readiness to meet future standards.
- Upgrade Infection prevention/control arrangements – to ensure infectious respiratory disease (e.g., COVID, influenza) patients can be safely seen face to face, and/or
- Maintain and/or achieve Accreditation against the Royal Australian College of General Practitioners Standards for General Practice, under the General Practice Accreditation Scheme – to promote quality and safety in general practice.

Three tiers of funding for practices will be available through the grants program:

- Small practice tier (up to 6 FTE Medicare GPs) eligible for one-off grants - \$25,000.
- Medium practice tier (7 to less than 15 FTE Medicare GPs) eligible for one-off grants - \$35,000.
- Large practice tier (15+ FTE Medicare GPs) eligible for one-off grants - \$50,000.
- Unaccredited practices will only be eligible for one-off grants - \$25,000.

Individual practices will make the decision on what they will spend the grant monies (within the guidance provided).

The PHN will support the implementation of the Strengthening Medicare – General Practice Grants Program by:

- Opening of the grant opportunity to eligible general practices in the Country WA PHN.
- Promotion of the grant opportunity through existing channels of communication to general practices.
- Engaging a digital process for grant application and distribution of funds (using content from templates provided by the Department of Health and Aged Care) and leveraging the PHNs digital technology (SRM and ASPIRE).
- Managing enquiries and supporting general practice applicants using a range of

support content and tools throughout the application process.

- Recording and reporting on key monitoring metrics within the GP Grants Program in line with the Department of Health and Aged Care guidelines.
- Assisting the Department of Health and Aged Care in ad-hoc requests as required during the duration of the program.
- Advising and supporting the Department of Health and Aged Care on compliance against the program guidelines and provide support with information and insights.
- Obtaining end-of-program financial acquittals, financial declarations, and self-reported outcomes on the use of grant funding from general practice grant recipients and reporting to the Department of Health and Aged Care.
- Contributing to and supporting the Department of Health and Aged Care leading evaluation activities on conclusion of the GP Grant Program.

Country WA PHN Needs Assessment

Priorities

Page reference

Support primary health care providers to manage chronic disease populations and build capacity for patient self-management. (Goldfields, Midwest, Wheatbelt, South West,)	15
Improve access to coordinated culturally appropriate primary care for Aboriginal people. (Goldfields/Kimberley)	15
Ensure primary care services are available for people with chronic conditions that provide a holistic approach to management including improving self-management. (Kimberley)	43

Target Population Cohort

Royal Australian College of General Practitioners accredited and non-accredited general practices.

Indigenous Specific Comments

Eligible Aboriginal Community Controlled Health Services will be able to apply for the grants through the National Aboriginal Community Controlled Health Organisation (NACCHO), who will administer and manage the program in relation to Aboriginal Community Controlled Health Services.

Consultation

The PHN will lead the local communication and engagement strategy targeted to practices and local GP peak bodies.

Approved by the Australian Government Department of Health and Aged Care, June 2023

The PHN will also engage with Practice Principals and Practice Managers via Practice Assist and practice support teams to support the roll out of Grants.

Collaboration

The PHN will collaborate with the Department of Health and Aged Care, local GP peak bodies and general practices. Collaboration with GP Peak bodies to support the roll out of the grants to general practice.

Coverage

Country WA PHN region

Key Milestones

- Consultation process with RACF staff before May 2023.
- Prepare draft After Hours Plan for RACF by July 2023.
- Prepare draft of After Hours Plan for individual resident by July 2023.
- Preparation of education package for participating RACFs on after hours care options and processes for residents by December 2023.

Activity Duration

Activity Start Date

1 March 2023

Activity End Date

31 December 2024

Service Delivery Start Date

1 April 2023

Service Delivery End Date

30 June 2024

Activity Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25
PHN Strengthening Medicare – General Practice Grants Program	\$4,612,722.14	\$455,988.18	\$0.00
PHN Strengthening Medicare – General Practice Grants Program - Admin	\$48,463.79	\$43,338.68	\$0.00

PP&TP-EPP 4000 - PHN Endometriosis and Pelvic Pain GP Clinics

Activity Title

PHN Endometriosis and Pelvic Pain GP Clinics

Activity Number

4000

Activity Status

New activity

PHN Program Key Priority Area

Population Health

Aim of Activity

To support general practice clinics to improve access for patient's diagnostic treatment and referral services for endometriosis and pelvic pain, build the primary care workforce to manage this chronic condition and provide improved access to new information and care pathways.

The Department of Health and Aged Care 2022-23 Budget committed \$16.4million over four years to support the establishment of targeted Endometriosis and Pelvic Pain GP Clinics (GP Clinics) in the primary care setting. The intention of these GP clinics is to maximise the role of the GP led multidisciplinary care team in the management of endometriosis and pelvic pain, and to embed the GP as a core part of the care pathway for this chronic condition, optimising the role of primary care.

Endometriosis can be difficult to diagnose and that delay between the onset of symptoms and diagnosis averages 7 years. These GP clinics will provide more people with access to multi-disciplinary care with a focus on improving diagnostic delay and to promote early access to intervention, care and treatment

Description of Activity

The Department of Health and Aged Care announced Pioneer Health Albany as the Endometriosis and Pelvic Pain Clinic within the Country WA PHN.

The Primary Health Network (PHN) will support Pioneer Health Albany to utilise funding to provide enhanced services for the treatment and management of endometriosis and pelvic pain, based on the needs of the community, including but not limited to:

Approved by the Australian Government Department of Health and Aged Care, June 2023

- Recruitment of specialised staff, including nurse practitioner and allied health professionals.
- Capital costs such as fit-out costs for pelvic physiotherapy areas and associated equipment.
- Resources, training and development.

GP Clinics are not intended to duplicate resources of investment already available to the community, instead are expected to:

- Improve access for patients to diagnostic, treatment and referral services for endometriosis and pelvic pain.
- Provision of access to new information, support resources, care pathways and network.
- Provision of an appropriately trained workforce with expertise in endometriosis and pelvic pain.
- Directly benefiting patients from rural and regional areas.
- Providing enhanced support to priority populations.
- Increase access to support services, either through a nurse navigator or referral pathway.

The PHN will support data collection for program monitoring and continuous evaluation. This will be completed using Primary Sense data providing support for GP clinics for regular quantitative and qualitative data collection and outcome measurements, including baseline data. This data will be used for program evaluation of the GP clinics commencing 2024-25.

Perth South PHN Needs Assessment

Priorities

Page reference

Investigate successful alternatives to the provision of primary care in Emergency Departments in country regions.	56
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Target Population Cohort

Women with endometriosis and pelvic pain

Consultation

The PHN will work with the Pioneer Health Albany

Collaboration

The PHN will collaborate with Pioneer Health Albany and other stakeholders as they are identified.

Coverage

Country WA PHN

Activity Duration

Activity Start Date

1 March 2023

Activity End Date

31 December 2026

Activity Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26
Endometriosis and Pelvic Pain GP Clinics	\$160,000.00	\$180,000.00	\$180,000.00	\$180,000.00
Endometriosis and Pelvic Pain GP Clinics - Admin	\$38,374.00	\$16,764.00	\$71,902.00	\$11,764.00

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