

Joint Statement

# WA Collaborative Commissioning Partnership

Delivering a Dynamic, High Quality and  
Responsive Health System for Western Australians

November 2025



Australian Government  
Department of Health, Disability and Ageing



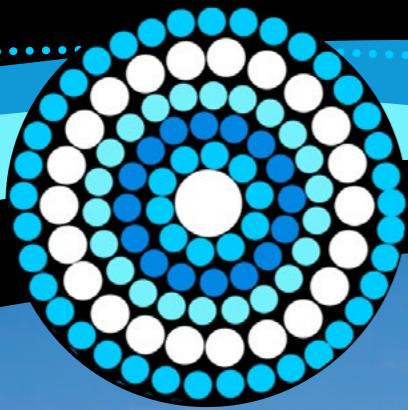
Government of Western Australia  
Department of Health



phn  
PERTH NORTH, PERTH SOUTH,  
COUNTRY WA  
An Australian Government division



Aboriginal  
Health Council  
of Western Australia



Jacinta Anderson is a proud Noongar yorga with family ties to Mineng in the Great Southern, Yuet in the Wheatbelt, and Whadjuk country.

Her artwork reflects culture and connection, using Aboriginal symbols to share stories, honour traditions, and express the strength and spirit of community. She is especially passionate about working with young people, encouraging them to tell their stories through art and deepen their connection to culture.

Jacinta began painting on wooden serving boards, which evolved into commissioned pieces for family and friends. Today, she creates artworks for businesses, develops digital works, and facilitates art workshops. She offers commissioned pieces in both acrylic on canvas and digital formats.



## Foreword

The Australian Government Department of Health, Disability and Ageing (DHDA), the Department of Health, Western Australia (DoH WA), WA Primary Health Alliance (WAPHA) and the Aboriginal Health Council of Western Australia (AHCWA) are committed to working in partnership with other key health sector stakeholders including consumers, the Aboriginal Community Controlled Sector and rural/remote health care and workforce agencies to deliver better integration of health care across Western Australia (WA).

The WA Collaborative Commissioning Partnership (the Partnership) aims to improve the health and wellbeing of Western Australians by working together to deliver a more efficient and effective integrated health system that provides:

- safe, high quality, evidence based, person centred care
- accessible and equitable coordinated services for all (particularly those people most at risk of adverse health outcomes)
- a workforce of skilled and accessible providers who are enabled to work to the top of their scope.

**The vision of the WA Collaborative Commissioning Partnership is to deliver a dynamic, high quality and responsive one health system for all Western Australians.**

DHDA, DoH WA, WAPHA and AHCWA have a long-standing partnership, working together on joint initiatives, programs, and projects to improve the health and wellbeing of people within WA's diverse communities.

In 2023, DHDA provided the impetus, via the National Health Reform Agreement (NHRA) negotiations, to formalise and strengthen our collaborative relationship and focus on joint planning, collaborative commissioning, and shared accountability for outcomes. Through a series of Executive-level meetings, it was agreed to progress the WA Collaborative Commissioning Partnership (the Partnership).

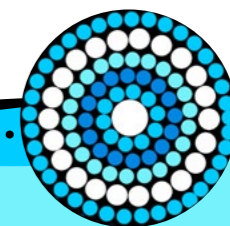
DoH WA is the State's public health services' system manager and funds five Health Service Providers (HSPs): WA Country Health Service; East Metropolitan Health Service; South Metropolitan Health Service; North Metropolitan Health Service; and Child and Adolescent Health Service. HSPs are separate, statutory authorities that are responsible and accountable for the delivery of safe, high-quality, efficient, and economical health services for their health service area.

WAPHA oversees the activities of the three WA Primary Health Networks (PHNs): Perth North; Perth South; and Country WA. PHNs are independent organisations, funded primarily by the Australian Government. PHNs assess the needs of their region and commission tailored health services based on the priority areas decided by the Australian Government.

AHCWA is the leading authority for Aboriginal comprehensive primary health care in Western Australia. AHCWA exists to support and act on behalf of 23 Member Aboriginal Community Controlled Health Services (ACCHS) across the state, offering support, advocacy, and influence; building capacity, and strengthening the Sector to improve health outcomes for Aboriginal people and their communities.

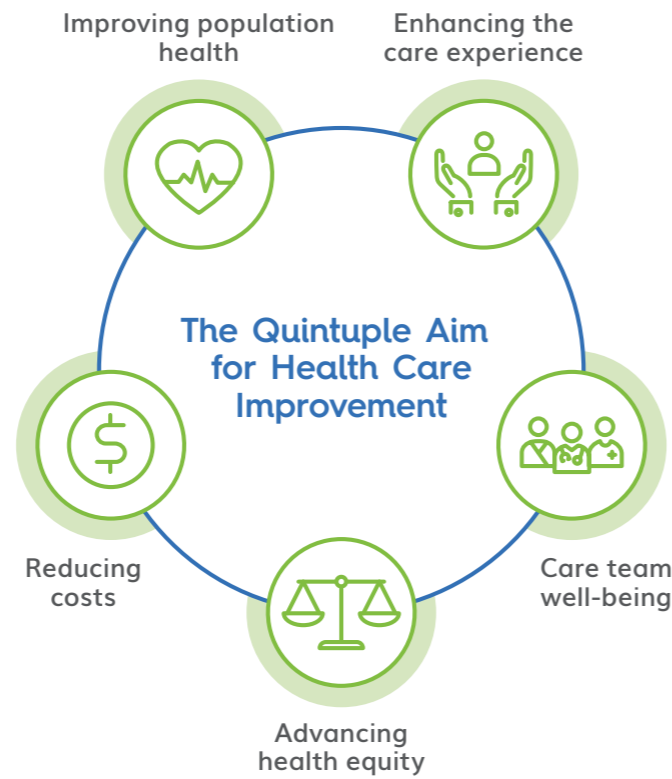
In developing the WA Collaborative Commissioning Partnership Joint Statement (WA Joint Statement), the four parties considered individual and collective strategic directions, the broader policy context including the NHRA, Future Focused Primary Health Care: Australia's Primary Health Care 10 Year Plan 2022-2032, the WA Sustainable Health Review, Closing the Gap and Priority Reforms, and learnings from other Australian states and territories and national exemplars.

The WA Joint Statement expresses our commitment to maturing our collaboration to respond to challenges and realise the emerging opportunities of our contemporary health system. The collaborative intent aims to deliver multiple benefits to the WA health system by aligning current and emerging health policy context with the Quintuple Aim of successful health care reform.





# Quintuple Aim of Successful Health Care Reform



## Our Shared Commitment

The WA Joint Statement sets out a shared commitment between the parties to advance:



### One health system mindset

A one health system mindset that supports us to think and act beyond our current structures and boundaries in health care.



### Working together

Working together with shared principles and focus areas to address mutual challenges and capitalise on opportunities.



### Statewide focus

A statewide focus (with regional specificity where needed) for joint planning, collaborative commissioning, and shared accountability for outcomes backed by the right system support from the WA and Australian Governments.



### Planning and evaluating

Planning and evaluating our actions to deliver a high quality, equitable health system that strives to continuously improve consumers experiences, population health outcomes, and health system cost efficiencies.

The Partnership will build on previous and current WA health initiatives delivered by the partner members to provide a consistent and coordinated commissioning framework across WA health services. The Partnership will agree on priority areas and work to improve health equity through service delivery based on need. It will target priority population groups and move care away from specialist centres back into the community. It will use data and technology to improve access to services and, where appropriate, improve continuity of care between primary and acute care settings.

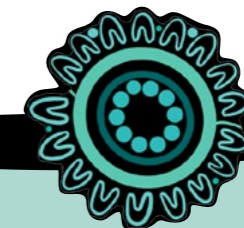
### Key Policy Alignment: National Health Reform Agreement, Future Focused Primary Health Care: Australia's Primary Health Care 10-year Plan 2022-2032, National Agreement on Closing the Gap and Priority Reforms and WA Sustainable Health Review.

The Partnership will deliver better integration across WA's health system to align with the:

- National Health Reform Agreement** including Schedule E and Schedule F of the *Addendum to the 2020-25 NHRA*:
  - Better joint planning: ensuring that PHNs are considered in statewide planning; and that in turn, PHNs consider statewide plans in their planning (E30).
  - More integrated governance: PHNs and HSPs will be expected to share a mechanism for joint governance where possible (E31).
  - Better coordination between health, disability and aged care systems to ensure positive outcomes for people through access to appropriate services, and reductions in avoidable hospital admissions, time spent in hospital and premature residential care admissions (F1).
- Future focused primary health care: Australia's Primary Health Care 10 Year Plan 2022- 2032**:
  - Access: Support equitable access to the best available primary health care services
  - Close the Gap: Reach parity in health outcomes for Aboriginal and Torres Strait Islander people.
  - Keep people well: Manage health and wellbeing in the community.
  - Continuity of care: Support continuity of care across the health care system.
  - Integration: Support care system integration and sustainability.
  - Future focus: Embrace new technologies and methods.
  - Safety and quality: Support safety and quality improvement.
- National Agreement on Closing the Gap and Priority Reforms**
  - Enable Aboriginal and Torres Strait Islander people and governments to work together to overcome the inequality experienced by Aboriginal and Torres Strait Islander people and achieve life outcomes equal to all Australians.
  - Empower Aboriginal and Torres Strait Islander people to share decision-making authority with governments to accelerate policy and place-based progress through formal partnership arrangements.
  - Strengthen and sustain the Aboriginal and Torres Strait Islander community-controlled sector to deliver high-quality services that meet community needs.
  - Support Aboriginal and Torres Strait Islander people to access and use locally relevant data to monitor progress, set priorities, and drive their own development
- WA Sustainable Health Review**, recommendations 10 and 3:
  - WAPHA, DoH WA and partnerships between PHNs and HSPs to facilitate joint planning, priority setting, and commissioning of integrated care.
  - Reduce inequity in health outcomes and access to care with focus on Aboriginal people.

The partner agencies see the Partnership as supporting current partner agreements, programs, projects, and services at regional and state levels and facilitating how we work together on new ones. The WA Joint Statement can be used to guide how we will work together at regional, state, and national levels, inform shared governance arrangements and agreements, and facilitate shared ownership, accountability, initiation, implementation, and evaluations of programs, projects and services.

By working as one health system in WA we can make more impactful and positive change in the health of WA people, especially those most at risk of poor health outcomes related to their socio-economic status, cultural background, or where they live. When we align our shared goals, resources, and investment, and prioritise person-centred health care, we have the greatest chance of success.



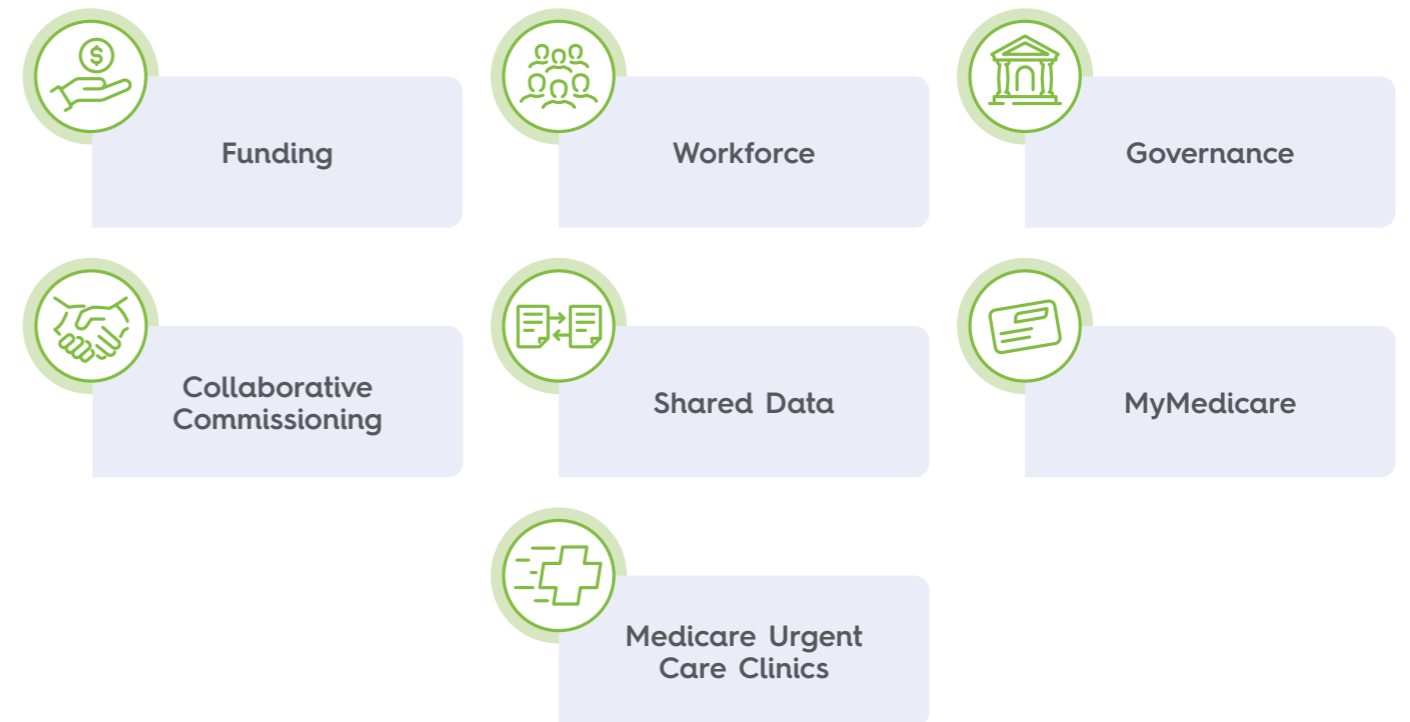
# A One Health System Mindset

## WA Co-commissioning Enablers



## Priority Area Enablers

We will continue to promote and facilitate collaboration on enablers to achieve success in priority areas. These include, but are not limited to:



# Vision

Our vision for the Partnership is to deliver a dynamic, high quality and responsive one health system for all Western Australians. We will work together as equals to plan and build the future of health care in Western Australia. We will do this by focusing on:

## Reduce Duplication

The Partnership will collaborate on population health strategies, health service planning, regional commissioning, and shared service delivery to identify and reduce duplication. Doing so will increase the efficiency and reach of the health care system, particularly for the most vulnerable communities. Moving forward, this will mean working together from the outset and encouraging Partnership participation to establish a cohesive, rather than duplicative approach.

## Enabling Care in the Community

There is an opportunity to deliver more place-based solutions within community settings in WA to support health care delivered locally where appropriate. This must be inclusive of culturally appropriate care, integrating pathways of care into, and out of, the community setting, supporting health literacy and taking a person-centred focus to ensure people receive the right care in the right place at the right time.

## Pooled Funding

The Partnership will drive collaborative commissioning activities in WA by providing the opportunity to pool funding to reduce duplication, simplify and better integrate service provision. Areas of exploration and innovation will include funding cycles; funding drivers, mechanisms, and processes; financial incentives; competing funding priorities across organisations, and policy/legislative barriers.

## Developing Shared Models of Care

The Partnership will work towards building and maturing shared health pathways and models of care across settings. This will require partners to share and collaborate around a broad range of health system enablers including:

- governance and decision-making
- design of health care pathways to improve movement between primary, acute care and community settings
- design of communications, information, and data sharing mechanisms
- training and education to build capacity and capability, particularly in primary health care and general practice.

## Data Sharing and Linkage

Enhanced health data is a key priority in the NHRA long-term health reforms roadmap. Enormous gains can be realised in prioritising data sharing between acute and primary care entities and understanding the value of patient-level data to plan, deliver, and evaluate within, and across, services. The Partnership is committed to building and strengthening the collaborative work in data sharing and linkage already underway.

## Enhancing Digital Approaches

Emerging digital approaches present an exciting opportunity for the health care system in WA, with the potential to increase integration, improve the patient experience, support health literacy, expand the reach of health care, and increase cost-effectiveness. Specific opportunities include real-time sharing of clinical information across care boundaries, virtual health care, remote monitoring and care, and improved utility of the secondary use of data.

# WA Collaborative Commissioning Partnership Working Groups: Allocation of Priority Areas of Responsibility

## Working Group 1: Governance, Planning and Funding

- Joint governance frameworks, funding models and collaborative planning to ensure equity of access for priority populations, including:
  - Aboriginal people.
  - People experiencing, or at risk of, homelessness.
  - LGBTIQ+ people.
  - Older people.
  - People experiencing economic hardship.
  - People from culturally and linguistically diverse (CALD) backgrounds.
  - People living in rural and remote areas.
  - People living with disability.

## Working Group 2: Care in the Community

- Targeted support of the primary care workforce (thin and failed markets).
- Promotion and support of team-based multidisciplinary care for complex and chronic conditions, through early intervention and management in primary and acute care.

## Working Group 3: Data and ICT

- Utilise data and ICT to drive an innovative and integrated approach to meeting the complex health needs of priority populations across the primary, acute and community care-based sectors.

# WA Collaborative Commissioning Partnership Governance



## WA Collaborative Commissioning Partnership Committee (Partnership Committee)

The Partnership Committee will provide strategic leadership to support better coordinated and connected health care and services for the people of WA. It will be responsible for facilitating joint decision making and drive key health reforms for the Partnership priorities and work plans in accordance with the Joint Statement. It will oversee and support the work of the WA Collaborative Commissioning Partnership Implementation Oversight Steering Committee and related working groups, and it will advocate for agreed resources to progress the Partnership work.

## WA Collaborative Commissioning Partnership Implementation Oversight Steering Committee (Implementation Oversight Steering Committee)

The Implementation Oversight Steering Committee (IOSC) will provide an advisory and leadership role to implement the work of The Partnership. It will enable connections across The Partnership priority area working groups, including guiding work plans, to ensure consistency of approach and alignment with the WA Joint Statement and The Partnership agenda. It will support working groups by removing barriers to enable the progression of work plans.

The IOSC will report to the Partnership Committee and be the first line of reporting for priority area Working Groups. It will be responsible for providing strategic policy recommendations and communicating any resourcing requirements identified to the Partnership Committee. Once established, the IOSC will finalise their Terms of Reference.

## Working Groups

Working groups will report to the IOSC. Each working group has been allocated responsibility of at least one Partnership priority area. Working groups will develop a work plan and Position Paper to drive key health reforms in their allocated priority area/s and make recommendations to the IOSC. Once established each working group will finalise their Terms of Reference.

As The Partnership priorities change overtime according to emerging community needs, working group work plans will need to be flexible to accommodate new priorities. The Joint Agreement Governance and Project Officer will support the work of the Committees and working groups.



Joint Statement WA Collaborative Commissioning  
Partnership - November 2025

---

**Acknowledgement**

We acknowledge and pay respect to the Traditional Owners and Elders of this country and recognise the significant importance of their cultural heritage, values and beliefs and how these contribute to the positive health and wellbeing of the whole community.

---

✉ [WACCP@wapha.org.au](mailto:WACCP@wapha.org.au)