phn
CENTRAL AND
EASTERN SYDNEY

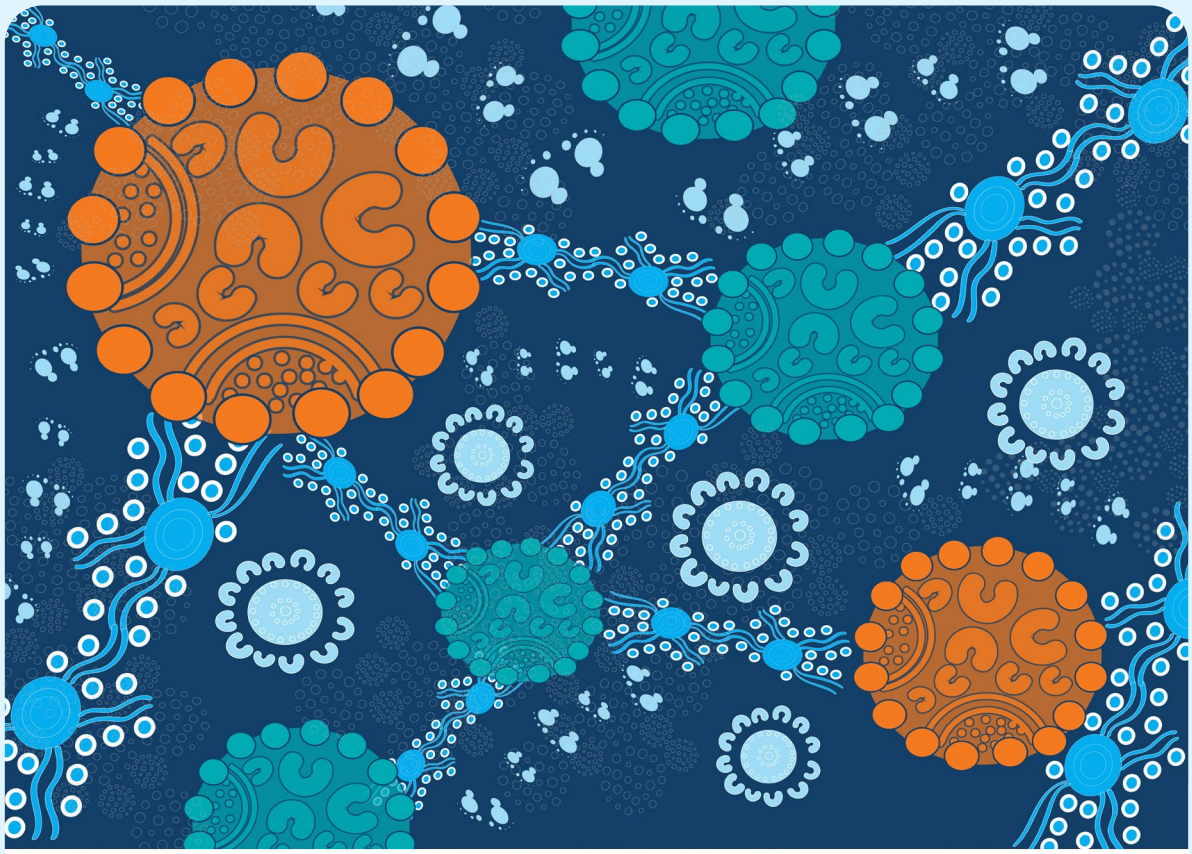
An Australian Government Initiative

Strategic Plan 2022-2024

Central and Eastern Sydney PHN acknowledges the Aboriginal and Torres Strait Islander peoples of this nation.

We acknowledge the Traditional Custodians and Sovereign People of the lands across which we work.

We recognise their continuing connection to land, water and community and we pay respect to Elders past, present and emerging.



Artwork title:

Supporting Our Mob in Health
By Amy Lea Hill-Trindall

Amy Lea Hill-Trindall is a local Aboriginal artist based in the Sutherland Shire, the founder and artist of Dewrang Art.

Story:

The circles represent each health program within the primary health network (PHN). The footprints represent each individual's journey to holistic health and wellbeing.

The lines show the relationship between community and the PHN. Through open communication and mutual respect it empowers individuals and increases healthcare.

The small circles with the wavy lines represent the collaborative support network that is formed through meaningful connections between communities and the primary health network.

Contents

Executive summary

Our vision is better health and wellbeing for all

Primary Health Networks (PHNs) work to ensure that all Australians have access to effective and integrated health services, delivering the right care to people, where and when they need it. PHNs drive primary health care reform at the regional level. Our job is to create practical solutions that will deliver local results. Partnerships and networks lie at the heart of this work.

Our Strategic Plan describes our focus on **three key goals:**

Goal 1: Improve the integration of care

We will:

- Build and maintain partnerships between service providers.
- Develop and implement collaborative, regional plans.
- Commission health system integration initiatives.
- Plan and develop pandemic and disaster management capabilities.
- Advocate to improve health system design.

Goal 2: Improve practice in primary health care

We will:

- Develop the capability of the primary health care workforce.
- Engage practices in quality improvement and accreditation.
- Promote, enable and monitor the uptake of digital technologies.
- Provide clinical and service navigation support.

Goal 3: Commission local health and wellbeing services

We will:

- Design and procure services that meet local needs.
- Monitor performance and outcomes to inform future commissioning cycles.

This work will be enabled by responsible governance, effective operations, the engagement of stakeholders and collecting and using evidence.

Our Strategic Plan includes strategies that will be further unpacked in our annual Operational Plan and priorities for the next three years that build and improve upon the work we have already done.

Our Strategy

OUR VISION

Better health and wellbeing for all

OUR PURPOSE

Improve and transform care

WHAT WE WILL DO

Work at the system level	Improve the integration of care	
Work at the service level	Improve practice in primary health care	Commission local health and wellbeing services

HOW WE WILL MAKE THAT HAPPEN

Be a responsive, effective organisation	Govern responsibly	Operate effectively	Engage with stakeholders	Collect and use evidence
Be driven by our values	Collaboration	Integrity	Learning and growth	

About Central and Eastern Sydney PHN

Australia has world-class health services. PHNs work to ensure that all Australians have access to effective and integrated health services, delivering the right care to people, where and when they need it. PHNs receive funding from the Australian Government Department of Health[1].

Primary health care is delivered in the community and accounts for around one-third of health expenditure in Australia[2]. It is often the entry point to the health system and plays a continuing role throughout a person's life, from birth to aged and palliative care[1],[3]. Primary health care includes primary prevention, screening and early intervention, clinical treatment and palliative care. It is delivered by a large workforce across the public, non-government and private sectors, including general practitioners, allied health staff and many other community-based health professionals.

PHNs drive primary health care reform at the regional level. Our job is to create practical solutions that will deliver local results. Partnerships and networks lie at the heart of this work.

PHNs:

- Identify local needs and service gaps.
- Co-design tailored, local and innovative health solutions to address these needs and gaps.
- Tackle complex challenges with a long-term vision for better health and wellbeing.
- Adapt to emerging needs and respond rapidly to emergencies and natural disasters.
- Translate national policies into local solutions.

Key components of our work include:

- Improving the integration and coordination of care at the system level.
- Working directly with local providers to improve practice quality at the service level.
- Directly commissioning additional health and wellbeing services to meet local needs.

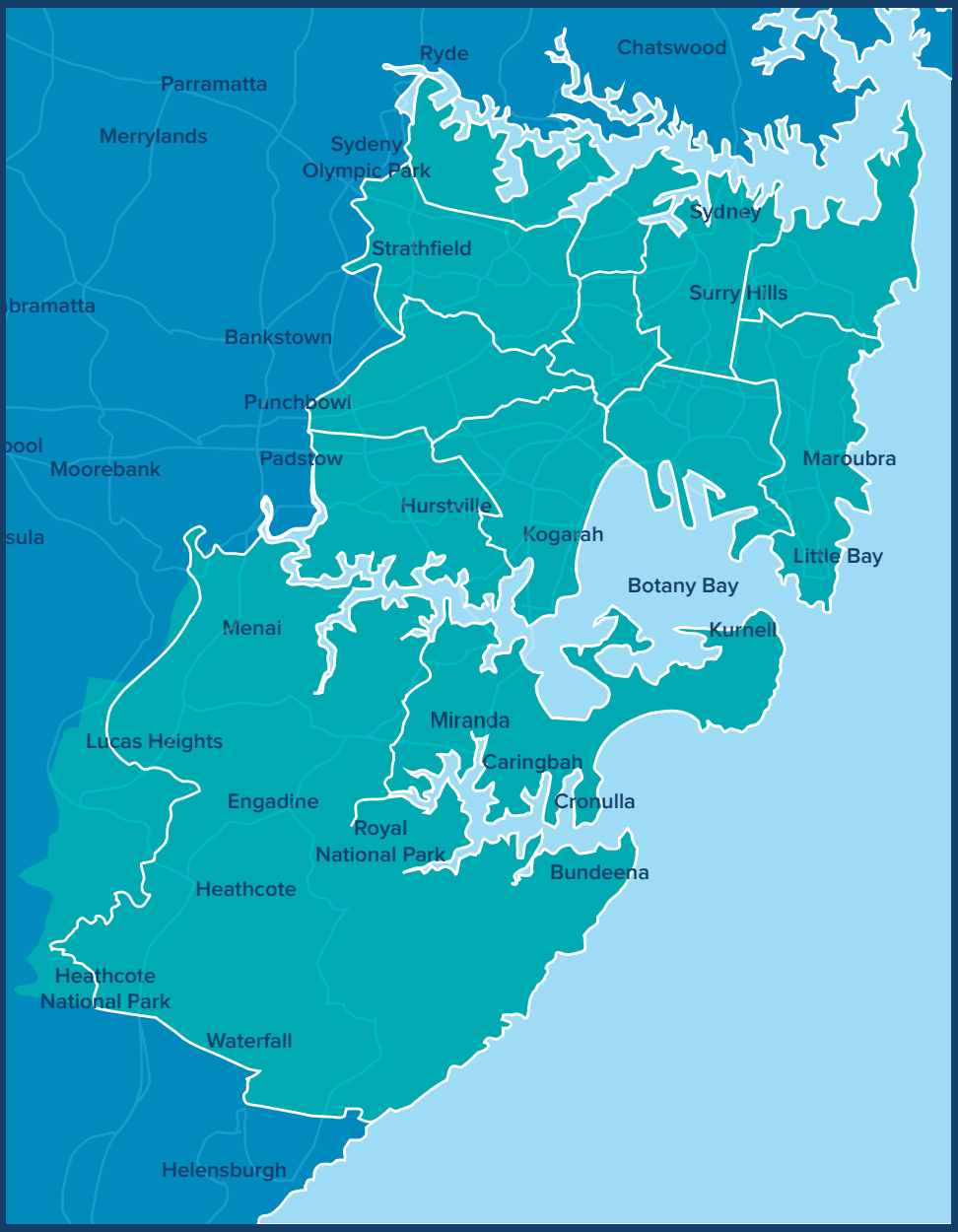
Primary health care complements hospital-based care, and the collaboration between PHNs and other key agencies such as local health districts and specialty health networks is vital. We have a joint commitment[4] towards the following:

- A one health system mindset which supports us to think and act beyond our current healthcare structures and boundaries in healthcare.
- Working together with shared principles and shared focus areas to address shared challenges.
- Planning and evaluating our actions to improve healthcare experiences, population health outcomes and health system cost efficiency.
- A regional focus for planning, commissioning, designing and delivering healthcare backed by the right system support from the State and the Commonwealth.

Read more about PHNs here and about Central and Eastern Sydney PHN here. Read the NSW Primary Health Network - NSW Health Joint Statement[4] here.

Our region

The catchment of Central and Eastern Sydney PHN spans 626 square kilometres. Our region stretches from Strathfield to Sutherland, as far east as Bondi, and also includes Lord Howe Island and Norfolk Island. Our boundaries align with those of South Eastern Sydney Local Health District and Sydney Local Health District.



Norfolk Island
(not to scale)

Lord Howe Island
(not to scale)

Population profile

20% of the NSW population

1.7 million live in our region

17,468 Aboriginal and Torres Strait Islander people live in our region

38% do not speak English at home

7% do not speak English at all

1 in 5 of same-sex couples in Australia

29% population increase between 2016 and 2036

35% NSW homeless population

65% NSW boarding house residents

22% NSW social housing residential dwellings

85 years and over age group

to increase **101%**

between 2016 and 2036

Health services and workforce

2,100 GPs

600 general practice nurses

1,700 pharmacists

>14,000 allied health professionals

4 local health districts and networks

18 public hospitals

1 Aboriginal Medical Service

5 headspace sites

>300 health related community orgs

161 residential aged care facilities

127 services providing home care packages

Workforce numbers have been rounded, read more in our annual Needs Assessment.

Health issues and needs

The overall health status of Central and Eastern Sydney PHN residents is higher than the national average – life expectancy is higher, there are fewer potentially avoidable deaths and deaths among infants and young children, and lower rates of premature mortality, potentially preventable hospitalisations, chronic diseases, fair or poor self-reported health and psychological distress.

However, there are considerable health inequities and other challenges to be addressed, including but not limited to:

- Poorer health outcomes in certain locations, particularly areas with lower socioeconomic status, and among some groups including (but not limited to) Aboriginal peoples, culturally and linguistically diverse (CALD) communities, people with disability, people experiencing homelessness or at risk of homelessness, people who identify as lesbian, gay, bisexual, transgender, intersex and queer (LGBTIQ+) and people in contact with the criminal justice system.
- The highest rates of sexually transmissible infections in NSW.
- Lower than national average rates of some protective behaviours such as immunisation and screening and a high proportion of our community with sedentary lifestyles.
- High rates of mental ill health with services noticing an increase in demand, wait times and duration of interventions required.
- High rates of drug and alcohol issues with alcohol use being the most common reason for accessing treatment services in the region, and opioids, methamphetamines and cannabis also common reasons for seeking treatment.
- An ageing population and an increasingly urgent need for strategies to address issues such as frailty, dementia, mental health, drug and alcohol use and social isolation.
- Poor access to palliative care services and support such as advance care planning.
- Barriers to access, including service coverage, culturally appropriate and inclusive primary care services, low patient health literacy, issues with identifying and navigating services, and poor communication of patient information between health care providers.

The COVID-19 pandemic has highlighted health issues and needs in our region, such as particular challenges for our most vulnerable populations in accessing information and vaccinations. In many ways, the pandemic has rewritten the agenda for primary health care, presenting the sector with both challenges and opportunities[5]. This has strongly informed the development of this plan.

Read more in our annual Needs Assessment.

Achieving our vision

Our vision is better health and wellbeing for all

Our purpose is to improve and transform care in the following ways:

- We work at the system level to improve the integration of care.
- We work at the service level to improve practice in primary health care.
- We commission local health and wellbeing services to meet identified local needs.
- We enable this important work through responsible governance, effective operations, engaging with stakeholders and by collecting and using evidence to evaluate our current activities and shape those we plan for the future.

Our core values:

- **Collaboration:** We are committed to working together and adopting a positive, solutions focused approach.
- **Integrity:** We follow through and do what we say we will do.
- **Learning and Growth:** We are creative and open to new ideas and change.

This is a long-term vision, and some results may not be demonstrable within a single planning cycle. Nonetheless, we will maintain our focus on the bigger picture with particular attention to the following:

- People and places experiencing disadvantage and inequities. This includes Aboriginal and Torres Strait Islander peoples, people from CALD backgrounds, communities and populations experiencing socio-economic disadvantage, and people from vulnerable or marginalised groups.
- Complex issues including ageing, mental health, drug and alcohol use, disability, and the impact of social isolation on health and wellbeing.
- Prevention and early intervention including a focus on social determinants of health and health literacy.
- A digitally enabled health care system and capable primary care workforce.

Our work will be monitored and evaluated against indicators that reflect the Quadruple Aim[6].

The Quadruple Aim

- Better health outcomes such as fewer preventable deaths and hospitalisations, reduced health risks and reduced health inequities.
- Improving the experience of consumers and carers through better integration, coordination and by encouraging a person-led approach.
- Improving the provider experience including clinician and staff satisfaction, flexibility and scope for innovation, and building a strong quality improvement culture.
- Improving value for money with a strong focus on evidence-based practice, accountability, cost-efficiency and sustainabilty.

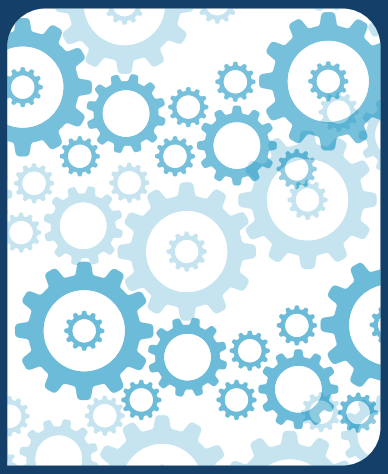
What we will do

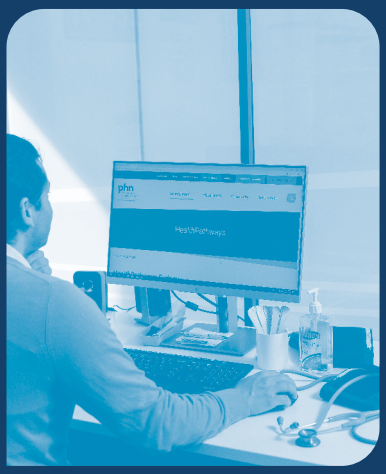
Goal 1: **Improve the integration of care**

What we want to achieve

- ✓ Stronger local partnerships
- ✓ Better communication between local service providers
- ✓ Less fragmentation and better coordination
- ✓ Timely and coordinated responses to pandemic and disaster events
- ✓ A simpler, more equitable health care system

The health care system is complex. One of our core functions is to drive and deliver an agenda of reform to improve the integration of care. This will provide a better experience of care that is less fragmented and easier for consumers, carers and service providers to navigate. Integrated care is both person-centred and person-led and leads to better health outcomes for all.





Strategies

- **G1.1** Build and maintain partnerships between service providers.
- **G1.2** Develop and implement collaborative, regional plans.
- **G1.3** Commission health system integration initiatives.
- **G1.4** Plan and develop pandemic and disaster management capabilities.
- **G1.5** Advocate to improve health system design.

Priorities for the next 3 years

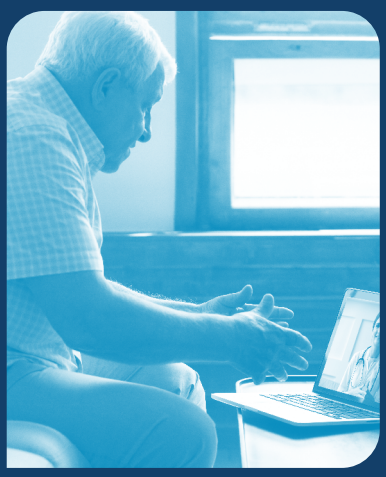
- Strengthen the linkages between aged care and other parts of the health system.
- Implement our Regional Mental Health and Suicide Prevention Plan and explore additional joint planning opportunities such as disability, drug and alcohol and the First 2000 Days.
- Establish collaborative commissioning with local health districts and networks.
- Increase the use of HealthPathways and build in e-Referrals as a key component.
- Support vaccination and the management of COVID-19 patients in the community in partnership with local health districts and networks.
- Advocate for better communication between service providers when transferring and sharing care.

Goal 2: **Improve practice in primary health care**

What we want to achieve

- ✓ A stronger and more supported local primary health care workforce
- ✓ Progressive improvements in service quality and patient experience
- ✓ More accessible, efficient and virtually enabled health care delivery
- ✓ Better delivery of care to those who need it the most

We support the primary health workforce and local services through professional development and training, access to information and resources, and networking and leadership opportunities. This work at the service level has a practical focus, reflecting and responding to real-world challenges and solutions.



Strategies

G2.1 Develop the capability of the primary health care workforce.

G2.2 Engage practices in quality improvement and accreditation.

G2.3 Promote, enable and monitor the uptake of digital technologies.

G2.4 Provide clinical and service navigation support.

Priorities for the next 3 years

- Provide more support for the Aboriginal, CALD and peer workforce.
- Build primary health care competency and confidence to use digital technologies, notably video tools for telehealth.
- Build and grow the capacity of practice nurses.
- Tailor support to better suit our diverse mix of large practices and solo practitioners.
- Increase support for allied health professionals including community pharmacists.
- Encourage greater use of outcome and experience measures in primary health care.
- Increase access to My Health Record by all services and consumers.
- Increase the emphasis on prevention and early intervention as part of routine practice.

Goal 3: **Commission local health and wellbeing services**

What we want to achieve

- ✓ Appropriately targeted work that addresses local gaps and needs, notably to improve health equity for priority populations
- ✓ Effective integration of commissioned services into the local service landscape
- ✓ High quality and efficient service delivery

Service commissioning* flows from a gap analysis of the local service landscape and the ability to drive change. Service solutions are procured to meet identified local needs. This is a pragmatic, solutions-focused undertaking that emphasises service access and equity for those who need it the most.

Strategies

G3.1 Design and procure services that meet local needs.

G3.2 Monitor performance and outcomes to inform future commissioning cycles.

Priorities for the next 3 years

- Include lived experience perspectives more effectively in commissioning co-design, including consultation with consumer advisory groups.
- Engage more Aboriginal, CALD and peer workers in commissioned service delivery.
- Explore opportunities for a greater focus on place-based interventions, particularly as a holistic, long-term strategy in disadvantaged communities.
- Improve the monitoring of outcome and experience measures.
- Ensure strong clinical governance.

** "Commissioning" on this page refers specifically to the commissioning of local health and wellbeing services. Central and Eastern Sydney PHN also undertakes other types of commissioning.*

How we will make that happen

Enabler 1: **Govern responsibly**

What we want to achieve

- ✓ Responsive and responsible governance
- ✓ Transparent, timely and efficient processes
- ✓ Governance that reflects our organisational values, vision, and goals
- ✓ Strong networks to inform and improve our work

We strive to maintain a transparent and responsive governance structure that ensures accountability for our legislative, regulatory and reporting requirements as well as proactive strategic oversight of our work. Our governance structure incorporates allied health, community and general practice. Seven member networks are eligible to nominate and elect directors to the EIS Health Limited Board, ensuring that each group has a strong and independent voice. Our governance structure is also supported by our Clinical and Community Councils. Our website provides more detailed information.

Strategies

E1.1 Maintain an effective governance structure.

E1.2 Ensure compliance with legislative, regulatory and reporting obligations.

E1.3 Manage risk effectively.

Priorities for the next 3 years

- Increase diverse representation in the membership of our governance groups, at every level.
- Improve communication within and between the governance groups, with a focus on being timely and constructive.
- Leverage strong networks to inform and improve our work.

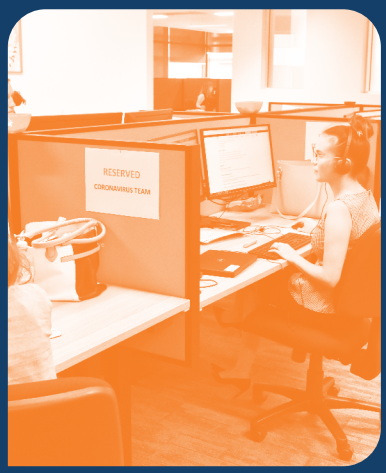
Enabler 2: **Operate effectively**

What we want to achieve

- ✓ A proactive and agile workplace culture that reflects our values
- ✓ A strong, well-supported workforce
- ✓ Responsible financial management that makes the best use of our valuable resources
- ✓ Operational accountability

A proactive, flexible and adaptive approach is needed to support operations, particularly in our evolving service delivery landscape. This requires an understanding of operational needs, execution of strategies to address them, and nurturing a culture that will sustain them into the future. Our effective operations rely upon:

- A well-trained and supported workforce.
- A strong workplace culture that reflects our values.
- An engaged team that provides regular and constructive feedback on operational matters.
- Corporate systems, policies and processes that enable the work to be done effectively and efficiently.
- Appropriate transparency and regular review to ensure accountability.



Strategies

E2.1 Implement contemporary, flexible and proactive people and culture strategies.

E2.2 Provide a flexible working environment with modern and effective infrastructure and systems.

E2.3 Administer the business operations and manage resources in a safe, effective and responsible manner.

Priorities for the next 3 years

- Increase proactive workforce planning.
- Increase our focus on the financial security and sustainability of our organisation.
- Build on the successes that arose from the COVID-19 pandemic, notably the agility and flexibility of our operations and the use of digital solutions to operational issues.

Enabler 3: **Engage with stakeholders**

What we want to achieve

- ✓ Effective and timely communication
- ✓ Inclusive engagement including co-design with service providers, consumers and other partners

Supported by the governance framework described earlier, the engagement of stakeholders is integral to everything that we do. Different elements of engagement occur in virtually all aspects of our work, but it is our centralised and coordinated efforts that are reflected in this third enabler here. This underpinning work includes:

- Stakeholder communication strategies.
- Various engagement strategies and plans.
- Stakeholder surveys.
- Program advisory committees.
- Strategic events.
- Co-design processes.

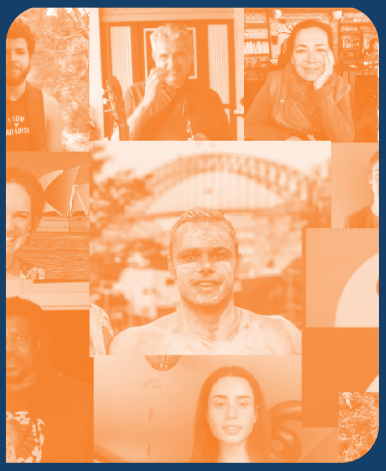
Strategies

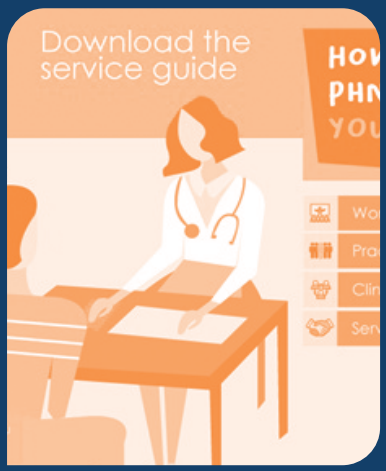
E3.1 Communicate our work and broader health initiatives with stakeholders.

E3.2 Consult, involve and collaborate with stakeholders on the focus, design and delivery of our work.

Priorities for the next 3 years

- Develop clearer messaging around our strategic priorities so that key partners and communities better understand the role that the PHN plays in primary health care.
- Improve engagement with allied health professionals.
- Increase our focus on community engagement, particularly to engage more effectively with Aboriginal and CALD communities and people with lived experience.





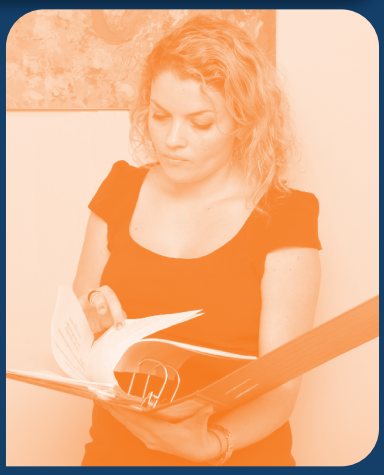
Enabler 4: **Collect and use evidence**

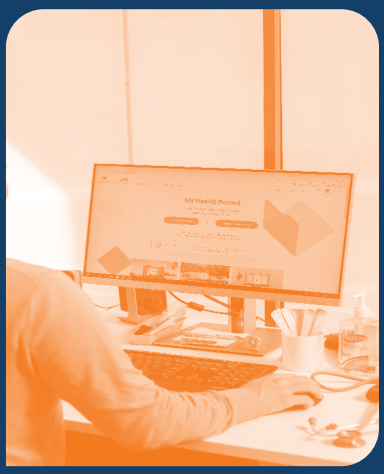
What we want to achieve

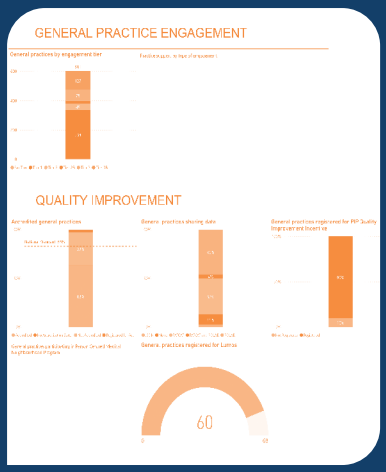
- ✓ An appropriate response to emerging local needs
- ✓ A strong focus on evidence-based practice and research

As with stakeholder engagement, the broad concept of collecting and using evidence flows through all of our work. This enabler describes the coordinated, central work to underpin this. This includes:

- Centralised intelligence gathering and synthesis, such as our annual Needs Assessment and monitoring and evaluation of PHN activities.
- Intelligence sharing with others including our commissioned service providers, local health districts and networks.
- Identification of gaps and opportunities for research.
- Engaging and supporting local primary care researchers.







Strategies

E4.1 Collect, collate and analyse health intelligence to establish local needs and opportunities for action.

E4.2 Monitor, evaluate and report on our work.

E4.3 Conduct, commission and support research that is driven by the needs of primary care.

Priorities for the next 3 years

- Explore opportunities for more local collaborations such as shared mapping and gap analyses.
- Increase collaboration with other PHNs to create value from data including data quality improvements.
- Engage more widely with others including other PHNs and universities to improve methods for gap analyses and evaluation of outcomes.
- Conduct more systematic evaluation of services.
- Build stronger partnerships with researchers and research organisations, with a particular focus on translational research.
- Increase the involvement of primary health professionals and practices in research activities.

Supporting plans and other key documents

This Strategic Plan describes the high-level scope of our work and is then supported by a wide range of other documents. These include the following:

- The Central and Eastern Sydney PHN Needs Assessment identifies the health and service needs of our region. It considers needs across the lifespan and priority groups, as well as the functioning of the primary care system in terms of accessibility, coordination, integration and the workforce.
- The Central and Eastern Sydney PHN Reconciliation Action Plan reinforces our commitment as an organisation to fostering positive relationships with Aboriginal and Torres Strait Islander peoples and communities, and ensuring our practices and programs reflect this vision
- Lessons from COVID-19: challenges and opportunities for primary care reflects on the challenges, learnings and strategic opportunities that have arisen from providing leadership and promoting a resilient response to cope with a rapidly changing landscape. A key aim of this paper is to support Central and Eastern Sydney PHN in its response to COVID-19 and to assist preparations for other medical or environmental changes that may occur in the future.
- Activity Work Plans (AWPs) outline how we are addressing the health and service needs of our region. These plans are informed by our needs assessment and are reviewed and updated annually.
- A new plan for working with and for Culturally and Linguistically Diverse communities is currently in development, in recognition of our diverse community, with more than one in three residents speaking a language other than English at home.
- Our Digital Health Strategic Plan provides a framework to establish our region as a leader in digital health, to allow us to align with national and state priorities to achieve critical mass, sustainability and the meaningful use of digital health amongst local stakeholders.
- The Central and Eastern Sydney PHN Hepatitis Strategy aims to achieve the best possible care for people living with Hepatitis B virus (HBV) and Hepatitis C virus (HCV).

We work closely with others across our region, reflecting our commitment to improving the integration of care across one health system. Examples of collaborative planning include the following:

- The Regional Mental Health and Suicide Prevention Plan has been developed in partnership with South Eastern Sydney Local Health District, Sydney Local Health District, St Vincent's Health Network, Sydney Children's Hospital Network, Being NSW, Mental Health Carers NSW and Mental Health Coordinating Council.
- The Intersectional Homelessness Health Strategy is a joint initiative of South Eastern Sydney Local Health, Sydney Local Health District, St Vincent's Health Network, Central and Eastern Sydney Primary Health Network, Department of Communities and Justice - Sydney, South Eastern Sydney and Northern Sydney District and City of Sydney.
- The Inner West Sydney Youth Health Wellbeing Plan is a collaboration of Sydney Local Health District, NSW Department of Family and Community Services, Central and Eastern Sydney PHN and NSW Department of Education.

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The following key documents have also informed the development of this plan and will further contribute to its delivery.

From Central and Eastern Sydney PHN:

- EIS Health Limited Constitution
- Central and Eastern Sydney PHN Data Governance Framework
- Central and Eastern Sydney PHN Commissioning Framework
- Central and Eastern Sydney PHN Evaluation Framework
- Central and Eastern Sydney PHN Clinical Governance Framework

Broader strategic references:

- Australian Government: Future focused primary health care: Australia's Primary Health Care 10 Year Plan 2022-2032 (consultation draft)
- PHN Cooperative. PHNs of the Future (unpublished White Paper)
- NSW Health and NSW Primary Health Networks: Working together to deliver person-centred healthcare
- NSW Health Strategic Priorities and development of the NSW Future Health Strategy
- Draft PHN Program Performance and Quality Framework
- Draft Supporting Healthy Ageing: The role of PHNs

phn
CENTRAL AND EASTERN SYDNEY
An Australian Government Initiative

Tower A, Level 5, 201 Coward Street, Mascot NSW 2020
Phone: 1300 986 991
Email: info@cesphn.com.au

www.cesphn.org.au

Central and Eastern Sydney PHN is a business unit of EIS Health Ltd ABN 68 603 815 818

@cesphn company/central-and-eastern-sydney-phn facebook.com/cesphn @cesphn