

# Central and Eastern Sydney - Core Funding

2019/20 - 2022/23

## Activity Summary View



### CF 1 - Population health services for priority populations



#### Activity Metadata

##### Applicable Schedule \*

Core Funding

##### Activity Prefix \*

CF

##### Activity Number \*

1

##### Activity Title \*

Population health services for priority populations

##### Existing, Modified or New Activity \*

Modified



#### Activity Priorities and Description

##### Program Key Priority Area \*

Population Health

##### Aim of Activity \*

To reduce the burden of disease and the demand on services by commissioning early intervention community-based services for priority populations

##### Description of Activity \*

This activity includes the following commissioned services:

- Diabetes education:
  - Through a community-based education program to improve capability of people at risk, newly diagnosed, or with uncomplicated type 2 diabetes to self-manage their condition. Programs specifically target people from CALD backgrounds.
  - Through the delivery of community-based education programs that promote greater awareness and improve knowledge of the risk factors associated with diabetes in pregnancy and pre-gestational diabetes for women of child-bearing age from specific CALD communities.
- Viral hepatitis identification: through targeting people living with hepatitis B and C and primary care providers to improve identification and management of care.

- Chronic disease self-management in older people: through the provision of a health literacy, coaching and telemonitoring program in the home.
- Adolescent lifestyle modification program: through delivery of an online healthy lifestyle and weight management education and coaching program.
- Child health early screening: through delivery of early intervention speech pathology services to children with communication issues from Aboriginal and other vulnerable families.
- Cultural support: through delivery of culturally appropriate primary health care to ensure the needs of CALD communities are met focussing on maternal and child health, access to health care, cancer screening, and diabetes.
- Healthy Schools Project: through a partnership with the LHD/N, Department of Education and local services, to commission a community coordinator and navigator to support vulnerable families with primary school aged children to increase access to early intervention and support services.
- Intellectual Disability: through the implementation of a community-based health literacy program for people with ID to improve their capability to access services and providers to improve service integration with primary care.
- Can Get Health: through a partnership with SLHD and UNSW to support CALD communities in the Canterbury LGA to improve health literacy and access to primary healthcare and other services.
- Domestic violence: through prevention strategies targeting anger management and healthy ways to express frustration as well as upskilling community leaders.

## Needs Assessment Priorities \*

CESPHN Needs Assessment 2019/20-2021/22

### Priorities

Needs Assessment Priority	Page Reference
Population health	136
Regional priority populations	137



## Activity Demographics

### Target Population Cohort \*

- Diabetes education: CALD background who are at risk, newly diagnosed, or with uncomplicated type 2 diabetes, women of child-bearing age from specific CALD communities, vulnerable and at-risk populations with diabetes-related foot disease.
- Viral hepatitis identification: people living with hepatitis B and C.
- Chronic disease self-management: Community dwelling people aged 70 years or older with one or more chronic conditions who have had an unplanned hospital admission due to their chronic condition in the past 12 months.
- Adolescent lifestyle modification program: people aged 13 to 17 years who are above a healthy weight.
- Child health early screening: Aboriginal and/or Torres Strait Islander children aged 1-6 years within the northern sector of SESLHD and children aged 0-5 years with a focus on socioeconomically disadvantaged communities including CALD families.
- Cultural support: CALD communities.
- Healthy Schools Collaborative: vulnerable families with primary school aged children in the south eastern Sydney area.
- Intellectual Disability: people with an intellectual disability and local disability service providers.
- Can Get Health: CALD communities in the Canterbury LGA.
- Domestic Violence: vulnerable communities with low social economic status within Randwick, Waverley and Bayside LGAs. The service will also have links to the Aboriginal community.

### Indigenous Specific \*

No

## Coverage \*

Whole Region

Yes



## Activity Consultation and Collaboration

### Consultation \*

CESPHN has consulted with a range of stakeholders through relevant advisory and governance groups including relevant LHD staff, GPs, allied health and practice nurses, consumer representatives, childhood and Aboriginal services, families, childcare groups, Diabetes NSW & ACT, Department of Education

### Collaboration \*

- LHDs and LHNs: support promotion of the programs, commissioned provider (speech pathology services, cultural support program)
- GPs and practice nurses: support referral of the target group
- Diabetes NSW & ACT: commissioned service provider (diabetes education)
- Childhood and Aboriginal services: community and cultural liaison role, support promotion of the service
- Childcare centres: support promotion of the service, support screening activities
- Allied health professionals (AHPs): participate in coordination of care, support referral pathways for target population
- High schools: support promotion of the service
- Community based organisations: support promotion of the services, screening activities and referral pathways.
- Local Health District and Network, Department of Education and local services: support health literacy and service navigation.
- Local disability service providers: improve service integration with primary care.
- SLHD and UNSW: improve health literacy and access to primary healthcare and other services.
- The Deli Women and Children's Centre: service provider.



## Activity Milestone Details/Duration

### Activity Start Date \*

1 July 2019

### Activity End Date \*

30 Jun 2022

### Service Delivery Start Date

### Service Delivery End Date

### Other Relevant Milestones

6-month and 12-month performance reports



## Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity: \*

Not yet known: No

**Continuing service provider / contract extension:** Yes

**Direct engagement. Please provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date:** Yes

Service provider has existing infrastructure and expertise to deliver the service

**Open tender:** No

**Expression of interest (EOI):** No

**Is this activity being co-designed? \***

Yes

**Is this activity the result of a previous co-design process? \***

Yes

**Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? \***

Yes

**Has this activity previously been co-commissioned or joint-commissioned? \***

Yes

**Decommissioning \***

Yes

**Decommissioning Details? \***

N/A

**Co-design or co-commissioning details \***

Services have been designed in consultation and collaboration with key stakeholders and experts in the related areas



## CF 2 - Integration and care coordination



### Activity Metadata

**Applicable Schedule \***

Core Funding

**Activity Prefix \***

CF

**Activity Number \***

2

**Activity Title \***

Integration and care coordination

**Existing, Modified or New Activity \***

Modified



### Activity Priorities and Description

**Program Key Priority Area \***

Other (please provide details)

**Other Program Key Priority Area Description**

Integrated and coordinated care

**Aim of Activity \***

To improve experiences for individuals and services providers, health outcomes for the population, and cost efficiency of the health system

**Description of Activity \***

This activity includes the following commissioned services:

- A diabetes collaborative that will provide targeted clinical services to priority groups, enhance service navigation between primary and tertiary healthcare services and promote more consistent care to those with, or at risk of developing diabetes.
- A place-based equity and well-being initiative (known as Communities at the Centre (ComaC)) that is co-designed with the community to reduce health inequities, increase wellbeing and improve health literacy.
- A web-based information portal (HealthPathways) designed to improve navigation of the health system by providing a single point of information for primary health care service providers on how to assess, manage and effectively refer patients to specialists and other community-based services in a timely manner.

**Needs Assessment Priorities \***

CESPHN Needs Assessment 2019/20-2021/22

**Priorities**

Needs Assessment Priority

Page Reference

Population health	136
Access, integration and coordination	138



## Activity Demographics

### Target Population Cohort \*

Diabetes resource hub: people with or at risk of diabetes within the CESPHN region

ComaC: vulnerable residents living in public housing accommodation

HealthPathways: primary, secondary care health professionals, education and social sector workers, and NGOs

### Indigenous Specific \*

No

### Coverage \*

#### Whole Region

Yes



## Activity Consultation and Collaboration

### Consultation \*

CESPHN consults with a range of stakeholders through relevant advisory and governance groups to implement this activity including relevant LHD/LHN staff, GPs, AHPs and practice nurses.

### Collaboration \*

- Relevant LHDs: partner organisations, commissioned service providers, participation in service standardisation activities, participation in governance meetings
- GPs and practice nurses: enhanced coordination of care for chronic disease patients, involved at all stages of pathway development and as users
- AHPs: enhanced coordination of care for chronic disease patients
- Local/national NGOs: provide collaboration, advice, and up to date service criteria and referral guidelines for non-hospital-based services.
- NSW Health ACI: works with clinicians and managers to design and promote models of care that are the basis for much of the content in HealthPathways.



## Activity Milestone Details/Duration

### Activity Start Date \*

30 Jun 2019

### Activity End Date \*

29 Jun 2021

### Service Delivery Start Date

## Service Delivery End Date

## Other Relevant Milestones

6-month and 12-month performance reports



## Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity: \*

Not yet known: No

Continuing service provider / contract extension: Yes

Direct engagement. Please provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date: No

Open tender: No

Expression of interest (EOI): Yes

Other approach (please provide details): No

Is this activity being co-designed? \*

No

Is this activity the result of a previous co-design process? \*

Yes

Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? \*

Yes

Has this activity previously been co-commissioned or joint-commissioned? \*

Yes

Decommissioning \*

No

Decommissioning Details? \*

N/A

Co-design or co-commissioning details \*

Diabetes Collaborative: A partnership between CESP HN, SLHD, SESLHD and St Vincent's Hospital in which partnership representatives form the governing committee and collaboratively plan and evaluate diabetes service improvements.  
ComaC: A partnership between CESP HN, SESLHD and local consumers and organisations, in which partnership representatives form the governing committee and collaboratively plan and evaluate the delivery of services.



## HSI 1 - Planning and system integration



### Activity Metadata

#### Applicable Schedule \*

Core Funding

#### Activity Prefix \*

HSI

#### Activity Number \*

1

#### Activity Title \*

Planning and system integration

#### Existing, Modified or New Activity \*

Modified



### Activity Priorities and Description

#### Program Key Priority Area \*

Other (please provide details)

#### Other Program Key Priority Area Description

Planning and system integration

#### Aim of Activity \*

To ensure the health system works in a more coordinated way through partnerships and evidence based practice

#### Description of Activity \*

This activity includes:

- Supporting stakeholder engagement and partnerships including the Clinical Leaders Network, Primary Care Partnership, Disability Network, annual strategy workshop, external representation on hospital clinical councils, and engagement with member organisations.
- Distributing accessible health promotion communications and marketing materials to improve health literacy.
- Developing and implementing joint plans for regional priority populations such as CALD communities and refugees, homelessness health, domestic and family violence.
- Completing ongoing needs assessments to identify the health needs and service gaps for the region, annual activity work plans and 6 and 12 month performance reports.
- Implementing an organisation-wide monitoring and evaluation framework.
- Governing data we hold, including data quality improvement initiatives and migrating data into the national PHN data storage solution.

#### Needs Assessment Priorities \*

CESPHN Needs Assessment 2019/20-2021/22



## Priorities

Needs Assessment Priority	Page Reference
Access, integration and coordination	138



### Activity Demographics

#### Target Population Cohort \*

People and places experiencing disadvantage and inequities

#### Indigenous Specific \*

No

#### Coverage \*

##### Whole Region

Yes



### Activity Consultation and Collaboration

#### Consultation \*

CESPHN consults with its advisory groups, member networks, consumer and community groups, peak bodies, NGOs, allied health professionals, general practices, universities, SLHD, SESLHD SVHN, SCHN, and other PHNs

#### Collaboration \*

LHDs and LHNs: consult through membership on relevant governance groups including the Primary Care Partnership Committee

Other PHNs: joint funders and governance partners of the national PHN data storage solution (Primary Health Insights)

Research institutes: program planning and evaluation

NGOs: support promotion of services.



### Activity Milestone Details/Duration

#### Activity Start Date \*

1 July 2019

#### Activity End Date \*

30 Jun 2021

#### Other Relevant Milestones

Updates to needs assessment (ongoing), revisions to activity work plans (by mid-February each year), 6 month Performance Report (by March each year), 12 month Performance Report (by September each year), annual strategy day held in October



## Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity: \*

Not yet known: No

Continuing service provider / contract extension: No

Direct engagement. Please provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date: No

Open tender: No

Expression of interest (EOI): No

Other approach (please provide details): Yes

Internal delivery

Is this activity being co-designed? \*

Yes

Is this activity the result of a previous co-design process? \*

Yes

Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? \*

No

Has this activity previously been co-commissioned or joint-commissioned? \*

No

Decommissioning \*

No

Decommissioning Details? \*

N/A

Co-design or co-commissioning details \*

Activities have been designed in consultation and collaboration with key stakeholders and experts in the related areas



## HSI 2 - Digital health adoption



### Activity Metadata

**Applicable Schedule \***

Core Funding

**Activity Prefix \***

HSI

**Activity Number \***

2

**Activity Title \***

Digital health adoption

**Existing, Modified or New Activity \***

Existing



### Activity Priorities and Description

**Program Key Priority Area \***

Digital Health

**Aim of Activity \***

Increase digital health uptake and the meaningful use of specific digital health systems / technologies among health care providers

**Description of Activity \***

This activity will support general practices and health professionals to use digital health systems and participate in information sharing by:

- Supporting general practices and other health professionals to adopt secure messaging technologies, to receive /send correspondence electronically
- Providing support to general practices to receive discharge summaries from LHDs/LHNs and private hospitals via HealtheNet and other digital technologies
- Facilitating the implementation of technologies that enable two-way communication between LHDs/LHNs and other health professionals, primarily general practice
- Exploring the feasibility of electronic shared care planning tools
- Systematically embedding the use of My Health Record into routine patient care, particularly in RACFs
- Providing general practices with access to data extraction and analysis tools to support continuous quality improvement activities
- Facilitating the uploading of accurate shared health summaries to the My Health Record and the inclusion of accurate information in eReferrals and Smart Forms.

The expected outcomes are an increased number of health professionals meaningfully using digital health systems / technologies and an increased number of practices sharing data with the PHN and participating in quality improvement activities.

## Needs Assessment Priorities \*

CESPHN Needs Assessment 2019/20-2021/22

### Priorities

Needs Assessment Priority	Page Reference
Access, integration and coordination	138



### Activity Demographics

#### Target Population Cohort \*

General practices and health professionals

#### Indigenous Specific \*

No

### Coverage \*

#### Whole Region

Yes



### Activity Consultation and Collaboration

#### Consultation \*

CESPHN consults with its advisory groups, member networks, consumer and community groups, peak bodies, NGOs, allied health professionals, general practices, pharmacists, medical specialists, SESLHD, SLHD, SVHN, SCHN, eHealth NSW, Australian Digital Health Agency (ADHA), external training organisations, software vendors and other PHNs.

#### Collaboration \*

- General practices including GPs, practice nurses and practices managers, allied health professionals, medical specialists, pharmacists: participation and adoption in the use of specific health systems and participation in data sharing and data quality improvement activities
- Advisory groups, member networks, consumer and community groups: provide advice and support in digital health integration and activities
- Aged care and RACFs: encourage integrated coordination of care for older Australians through My Health Record, improved GP access to RACF electronic health records and improved communication with hospitals
- Private hospitals: assist in the implementation and review in a range of activities to address issues impacting the timeliness, accuracy and quality of electronic discharge summaries and the adoption of secure messaging
- ADHA: responsible for national digital health services and systems.
- eHealth NSW: provides statewide leadership on the shape, delivery and management of ICT-led healthcare and implements change and adoption
- Software vendors: partners in the delivery of interoperable solutions in coordination with healthcare professionals
- External training organisations: support health care providers to use digital health systems to improve patient care and information sharing
- SESLHD, SLHD, SVHN, SCHN: facilitate implementation of technologies that enable two-way communication between LHDs/LHNs and other health professionals, and data linkages

- RACGP: provide guidelines for data quality in general practice and standards for accreditation
- Research organisations: opportunities to collaborate on population health research supported by data to achieve better patient health outcomes
- Other PHNs: leverage existing digital health activities and collaborate with other PHNs enabling open sharing of content, specifically those in geographical proximity to CESP HN.



## Activity Milestone Details/Duration

**Activity Start Date \***

1 July 2019

**Activity End Date \***

30 Jun 2021



## Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity: \*

**Not yet known:** No

**Continuing service provider / contract extension:** Yes

**Direct engagement. Please provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date:** No

**Open tender:** No

**Expression of interest (EOI):** No

**Other approach (please provide details):** Yes

Internal delivery

**Is this activity being co-designed? \***

No

**Is this activity the result of a previous co-design process? \***

No

**Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? \***

No

**Has this activity previously been co-commissioned or joint-commissioned? \***

No

**Decommissioning \***

No

**Decommissioning Details? \***

N/A

Co-design or co-commissioning details \*

N/A



## HSI 3 - Improve population health



### Activity Metadata

Applicable Schedule \*

Core Funding

Activity Prefix \*

HSI

Activity Number \*

3

Activity Title \*

Improve population health

Existing, Modified or New Activity \*

Modified



### Activity Priorities and Description

Program Key Priority Area \*

Population Health

Aim of Activity \*

To provide population health support to primary health care providers to improve the health outcomes of the local population

Description of Activity \*

CESPHN will support primary health care providers relating to:

- Cancer control including supporting health care providers to systematically implement screening and prevention activities for breast, cervical and bowel cancer, focusing on communities/population groups with lower participation rates.
- Immunisation including education on cold chain management, supporting newly opened general practices to set up their Vaccine Account Number for ordering vaccines, and working with Public Health Units to disseminate disease alerts and respond to disease outbreaks.
- Sexual health including supporting gay friendly practices, building capacity in managing transgender health needs, viral hepatitis needs and youth needs
- Child and maternal health including supporting health care providers to participate in the GP Antenatal Shared Care Program (ANSC), as well as provide lifestyle and weight management strategies in pregnancy, perinatal mental health, breast feeding, and childhood screening for developmental delays.

## Needs Assessment Priorities \*

CESPHN Needs Assessment 2019/20-2021/22

### Priorities

Needs Assessment Priority	Page Reference
Population health	136
Workforce	138



### Activity Demographics

#### Target Population Cohort \*

Primary care workforce

#### Indigenous Specific \*

No

### Coverage \*

#### Whole Region

Yes



### Activity Consultation and Collaboration

#### Consultation \*

CESPHN consults with its stakeholder advisory groups, member networks, consumer and community groups, peak bodies, NGOs, allied health professionals, general practices, universities, SLHD, SESLHD SCHN, SCHN, and other PHNs

#### Collaboration \*

Cancer Institute NSW – collaborate to implement the cancer screening toolkit in general practice  
LHDs – program partners, governance  
General practice – implementation of quality improvement activities  
Relevant NGOs – program partners, support promotion of the programs, referral pathways  
Research Institutes – academic expertise, evaluation



### Activity Milestone Details/Duration

#### Activity Start Date \*

1 July 2019

#### Activity End Date \*

30 Jun 2021



## Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity: \*

Not yet known: No

Continuing service provider / contract extension: No

Direct engagement. Please provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date: No

Open tender: No

Expression of interest (EOI): No

Other approach (please provide details): Yes

Internal delivery

Is this activity being co-designed? \*

Yes

Is this activity the result of a previous co-design process? \*

Yes

Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? \*

Yes

Has this activity previously been co-commissioned or joint-commissioned? \*

Yes

Decommissioning \*

No

Decommissioning Details? \*

N/A

Co-design or co-commissioning details \*

Multiple partners participating in preparing a research grant relating to viral hepatitis.





## HSI 4 - Improve aged care



### Activity Metadata

#### Applicable Schedule \*

Core Funding

#### Activity Prefix \*

HSI

#### Activity Number \*

4

#### Activity Title \*

Improve aged care

#### Existing, Modified or New Activity \*

Modified



### Activity Priorities and Description

#### Program Key Priority Area \*

Aged Care

#### Aim of Activity \*

To build the capability and capacity of the primary health care workforce and carers to ensure appropriate and safe care of older people in the community.

#### Description of Activity \*

CESPHN will support primary health care providers by:

- Promoting the administration of 75+ Health Assessments
- Promoting GP uptake of MBS Items to visit patients in RACFs
- Building capability to provide palliative care, participate in population health surveillance of prevalent chronic conditions, support patients with preparation of advanced care plans, contribute to aged mental health care plans, support local Geriatric Flying Squads
- Providing a dementia support train-the-trainer program that upskills RACF staff and carers in the care of older people living with dementia.

#### Needs Assessment Priorities \*

CESPHN Needs Assessment 2019/20-2021/22

#### Priorities

Needs Assessment Priority	Page Reference
Older Australians	137
Workforce	138



## Activity Demographics

### Target Population Cohort \*

Carers, primary care providers, and RACF staff involved with the care of older people.

### Indigenous Specific \*

No

### Coverage \*

#### Whole Region

Yes



## Activity Consultation and Collaboration

### Consultation \*

CESPHN consults with its advisory groups, member networks, consumer and community groups, peak bodies, NGOs, allied health professionals, general practices, universities, SLHD, SESLHD SCHN, SCHN, and other PHNs

### Collaboration \*

CESPHN will collaborate with a range of stakeholders through relevant advisory and governance groups to implement this activity including:

- Relevant LHD staff - tender evaluation and advisory group
- Mental Healthcare providers
- RACFs, primary care clinicians and community aged and palliative care services – ongoing advisory and feedback
- Carers of older people.



## Activity Milestone Details/Duration

### Activity Start Date \*

1 July 2019

### Activity End Date \*

30 Jun 2021



## Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity: \*

Not yet known: Yes

Continuing service provider / contract extension: No

**Direct engagement. Please provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date:** No

**Open tender:** No

**Expression of interest (EOI):** No

**Other approach (please provide details):** No

**Is this activity being co-designed? \***

No

**Is this activity the result of a previous co-design process? \***

No

**Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? \***

No

**Has this activity previously been co-commissioned or joint-commissioned? \***

No

**Decommissioning \***

No

**Decommissioning Details? \***

N/A

**Co-design or co-commissioning details \***

N/A



## HSI 5 - Workforce development



### Activity Metadata

**Applicable Schedule \***

Core Funding

**Activity Prefix \***

HSI

**Activity Number \***

5

**Activity Title \***

Workforce development

**Existing, Modified or New Activity \***

Modified



### Activity Priorities and Description

**Program Key Priority Area \***

Workforce

**Aim of Activity \***

To develop the primary health care workforce to ensure appropriate and safe care

**Description of Activity \***

Activities include:

- Delivering continuing professional development (CPD) education for a range of primary care providers (GPs, practice nurses, allied health professionals, practice admin staff) to maintain registration with their respective peak bodies or regulating authority (RACGP, APNA, AHPRA, AAPM).
- Developing and implementing the Small Group Learning (SGL) program across the CESP HN region.
- Other education and training initiatives that deliver workshops and online educational materials on topics such as chronic disease management, asthma management, disability and the NDIS.

**Needs Assessment Priorities \***

CESPHN Needs Assessment 2019/20-2021/22

**Priorities**

Needs Assessment Priority	Page Reference
Workforce	138



## Activity Demographics

### Target Population Cohort \*

Primary care providers

### Indigenous Specific \*

No

### Coverage \*

#### Whole Region

Yes



## Activity Consultation and Collaboration

### Consultation \*

CESPHN consults with GPs, AHPs, practice staff through surveys, event evaluation forms, advisory committees and member networks to identify educational needs.

### Collaboration \*

Prince of Wales Private Hospital, St Vincent's Private Hospital and Clinic and Royal Hospital for Women: partner, shared responsibility of CPD activities

Chris O'Brien Lifehouse: offers speakers and venue to run events

SLHD and RPA: partner for events

NDIS, general practice staff, NGOs: program governance

Asthma Australia: development of quality improvement activity

General practice nurses: implementation of quality improvement activities, leadership development.



## Activity Milestone Details/Duration

### Activity Start Date \*

1 July 2019

### Activity End Date \*

30 Jun 2021

### Other Relevant Milestones

Annual calendar of events developed by February



## Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity: \*

**Not yet known:** No

**Continuing service provider / contract extension:** Yes

**Direct engagement. Please provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date:** No

**Open tender:** No

**Expression of interest (EOI):** No

**Other approach (please provide details):** Yes

Internal delivery

**Is this activity being co-designed? \***

Yes

**Is this activity the result of a previous co-design process? \***

Yes

**Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? \***

No

**Has this activity previously been co-commissioned or joint-commissioned? \***

No

**Decommissioning \***

No

**Decommissioning Details? \***

N/A

**Co-design or co-commissioning details \***

Activities have been designed in consultation and collaboration with key stakeholders and experts in the related areas



## GPS 1 - Quality improvement in general practice



### Activity Metadata

#### Applicable Schedule \*

Core Funding

#### Activity Prefix \*

GPS

#### Activity Number \*

1

#### Activity Title \*

Quality improvement in general practice

#### Existing, Modified or New Activity \*

Existing



### Activity Priorities and Description

#### Program Key Priority Area \*

Workforce

#### Aim of Activity \*

To support general practices in continuous quality improvement and capacity building

#### Description of Activity \*

CESPHN undertakes a range of activities, including (but not limited to) face to face training and education visits, email/phone support and provision of resources to support the primary care workforce in the following areas:

- Accreditation under the RACGP 5th Edition Standards
- Uptake of Practice Incentive Payments including Quality Improvement, After Hours, Indigenous Health Incentive, ePIP, PNIP and health assessments (e.g. MBS items 715)
- Newly opened, closing or amalgamating practices and retiring GPs
- Expanding workforce, such as co-located allied health, and orientation of GP registrars, GPs, practice nurses, practice staff, and medical students
- Implementation of GP Engagement Strategy in order to tier general practices to identify and support according to level of engagement.
- CESPHN will utilise practice engagement tools to develop tailored support and lay the foundations for the person centred medical neighbourhood (PCMN) model of care to targeted practices. The PCMN model of care is CESPHN's localised model designed to build the capacity and capability of general practices.

#### Needs Assessment Priorities \*

CESPHN Needs Assessment 2019/20-2021/22

#### Priorities

Needs Assessment Priority	Page Reference
Access, integration and coordination	138
Workforce	138



## Activity Demographics

### Target Population Cohort \*

Primary care workforce

### Indigenous Specific \*

No

### Coverage \*

#### Whole Region

Yes



## Activity Consultation and Collaboration

### Consultation \*

CESPHN consults with RACGP, Australian Primary Care Nurses Association, Australian Association of Practice Managers, Australian Health Practitioner Regulation Agency, CESPHN community health network, GP Synergy, universities and research institutions within the CESPHN region, GPs, general practice and allied health staff

### Collaboration \*

GPs, practice nurses, practice managers/staff, general practice accrediting bodies, SESLHD, SLHD, software vendors (including Pen CS and POLAR GP)



## Activity Milestone Details/Duration

### Activity Start Date \*

1 July 2019

### Activity End Date \*

30 Jun 2021



## Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity: \*

Not yet known: No



Continuing service provider / contract extension: No

Direct engagement. Please provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date: No

Open tender: No

Expression of interest (EOI): No

Other approach (please provide details): Yes

Internal delivery

Is this activity being co-designed? \*

No

Is this activity the result of a previous co-design process? \*

No

Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? \*

No

Has this activity previously been co-commissioned or joint-commissioned? \*

No

Decommissioning \*

No

Decommissioning Details? \*

N/A

Co-design or co-commissioning details \*

N/A



# CHHP 1 - Cancer management in general practice



## Activity Metadata

### Applicable Schedule \*

Core Funding

### Activity Prefix \*

CHHP

### Activity Number \*

1

### Activity Title \*

Cancer management in general practice

### Existing, Modified or New Activity \*

Existing



## Activity Priorities and Description

### Program Key Priority Area \*

Population Health

### Aim of Activity \*

To support the capacity of general practice to enhance the management of people with newly diagnosed and end stage cancer, by supporting communication and care coordination between primary care and hospital based cancer services.

### Description of Activity \*

The following activities will be undertaken:

- Create a GP support line(s) to assist GPs and practice nurses with advice and service navigation in relation to cancer management
- Create new General Practice (GP) nurse liaison positions to better manage the needs of cancer patients in the community by supporting GP involvement in shared cancer and palliative care management
- Create a network of allied health professional staff aligned to existing hospital and community cancer and palliative care teams, GPs, and GP networks, to improve care and management for patients.

The expected outcomes are:

- Enhanced capacity of primary care providers to manage of people with newly diagnosed and end stage cancer
- Improved communication and care coordination between cancer specialists and primary care providers.

### Needs Assessment Priorities \*

CESPHN Needs Assessment 2019/20-2021/22

### Priorities

Needs Assessment Priority

Page Reference

Population health	136
Access, integration and coordination	138
Workforce	138



## Activity Demographics

### Target Population Cohort \*

Primary care workforce

### Indigenous Specific \*

No

### Coverage \*

#### Whole Region

Yes



## Activity Consultation and Collaboration

### Consultation \*

GPs, Allied Health Professionals, NGOs, Practice Nurses, Practice Managers, Cancer Specialists, Community Service Providers, Consumers, CESP HN Community Health Network, CESP HN Clinical Council, Sydney LHD and South Eastern Sydney LHD.

### Collaboration \*

GPs, NGOs, Practice Nurses, Cancer Specialists, Community Service Providers, Consumers, Sydney LHD, South Eastern Sydney LHD, St Vincents Hospital Network Sydney - co-design and governance.



## Activity Milestone Details/Duration

### Activity Start Date \*

1 July 2019

### Activity End Date \*

31 Dec 2022



## Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity: \*

Not yet known: No

Continuing service provider / contract extension: No

**Direct engagement. Please provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date:** No

**Open tender:** No

**Expression of interest (EOI):** Yes

**Other approach (please provide details):** No

**Is this activity being co-designed? \***

Yes

**Is this activity the result of a previous co-design process? \***

No

**Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? \***

No

**Has this activity previously been co-commissioned or joint-commissioned? \***

No

**Decommissioning \***

No

**Decommissioning Details? \***

N/A

**Co-design or co-commissioning details \***

GPs, NGOs, Practice Nurses, Cancer Specialists, Community Service Providers, Consumers, Sydney LHD, South Eastern Sydney LHD, St Vincent's Hospital Network Sydney were involved in the co-design process.



## COVID 1 - COVID respiratory clinics



### Activity Metadata

**Applicable Schedule \***

Core Funding

**Activity Prefix \***

COVID

**Activity Number \***

1

**Activity Title \***

COVID respiratory clinics

**Existing, Modified or New Activity \***

New Activity



## COVID 2 - COVID workforce support



### Activity Metadata

**Applicable Schedule \***

Core Funding

**Activity Prefix \***

COVID

**Activity Number \***

2

**Activity Title \***

COVID workforce support

**Existing, Modified or New Activity \***

New Activity



## RACF 1 - COVID RACF vaccinations



### Activity Metadata

**Applicable Schedule \***

Core Funding

**Activity Prefix \***

RACF

**Activity Number \***

1

**Activity Title \***

COVID RACF vaccinations

**Existing, Modified or New Activity \***

New Activity



## PHC 1 - Primary health care pilot – domestic violence pilot



### Activity Metadata

**Applicable Schedule \***

Core Funding

**Activity Prefix \***

PHC

**Activity Number \***

1

**Activity Title \***

Primary health care pilot – domestic violence pilot

**Existing, Modified or New Activity \***

New Activity