Table of Contents

PP&TP-EPP-1.0-Endometriosis and Pelvic Pain GP Clinics

Funding Schedule

PHN Pilots and Targeted Programs

Existing Activity

Program Key Priority Area

Population health

Activity Aim

To establish an Endometriosis and Pelvic Pain Clinic within an existing general practice within the CESPHN region.

Description of Activity

The clinic will provide enhanced services for treatment and management of endometriosis and pelvic pain, based on the needs of the community. This will include:

- Providing access for patients to diagnostic, treatment and referral services for endometriosis and pelvic pain
- Providing multi-disciplinary care with a focus on reducing diagnostic delay
- Promoting early access to interventions, care and treatment options for endometriosis and pelvic pain.
- Promoting access to new information, support resources, care pathways and networks
- Upskilling the primary care workforce with expertise in endometriosis and pelvic pain to provide appropriate treatment and management.

Needs Assessment Priorities

Priority	Page reference
Access and coordinated care	41

Activity Demographics

Target Population

Primary care workforce and people who are experiencing endometriosis and/or pelvic pain.

Activity Consultation and Collaboration

GPs, practice nurses / nurse practitioners who specialise in women's health; Allied Health – dietitians, women's health physiotherapists, social workers, psychologists; Aboriginal Health Workers; Bi-cultural Health workers; community support groups.

Activity Milestone Details/Duration

Activity Start Date	31/03/2023
Activity End Date	29/06/2026
Service Delivery Start Date	
Service Delivery End Date	
Other Relevant Milestones	

Activity Commissioning

Expression of Interest (EOI)

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 comments	The model has been designed in consultation and collaboration with experts in women's health, to improve diagnosis, treatment, management, referral and support for endometriosis and chronic pelvic pain.

PP&TP-EPP-Ad-1.0-Endometriosis and Pelvic Pain GP Clinics - Admin

Funding Schedule

PHN Pilots and Targeted Programs

Existing Activity

Program Key Priority Area

Population health

Activity Aim

To administer the Endometriosis and Pelvic Pain Clinics activity

Description of Activity

Operational activities

Needs Assessment Priorities

Priority	Page reference
Access and coordinated care	41

Activity Milestone Details/Duration

Activity Start Date	31/03/2023
Activity End Date	29/06/2026
Service Delivery Start Date	
Service Delivery End Date	
Other Relevant Milestones	

Activity Commissioning

Is this activity being co-designed?	N/A
Is this activity the result of a previous co-design process?	N/A
Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?	N/A
Has this activity previously been co-commissioned or joint-commissioned?	N/A
Decommissioning	N/A
Decommissioning details	N/A
Co-design or co-commissioning comments	N/A

PP&TP-DVP-2.0-PHN Supporting Outreach Healthcare for Victim-Survivors of Family, Domestic and Sexual Violence Pilot

Funding Schedule

PHN Pilots and Targeted Programs

Existing Activity

Program Key Priority Area

Population health

Activity Aim

To enhance the health outcomes of migrant and refugee women and children affected by domestic and family violence (DFV) by providing free outreach health services in refuges and short-term accommodation utilising place-based care.

Description of Activity

The activity comprises two main elements:

- A healthcare team, including General Practitioners (GPs), existing health professionals and a trauma-informed Nurse Practitioner, will provide care at the refuge.
- A Coordinator will support women in navigating services, outreach programs, and referral pathways for specialist services, ensuring integrated and seamless care for this vulnerable population group.

Needs Assessment Priorities

Priority	Page reference
Health and wellbeing of people affected by domestic, family and sexual violence	36
Access and coordinated care	41

Activity Demographics

Target Population

Migrant women, women on temporary visas, including refugees and asylum seekers

Activity Consultation and Collaboration

General practitioners, allied health professionals, nurse practitioners, practice managers, specialist DFV services, refuges, short-term accommodation, DFV victim-survivors, LHDs and LHNs, Ministry of Health.

Activity Milestone Details/Duration

Activity Start Date	03/03/2025
Activity End Date	29/06/2027
Service Delivery Start Date	
Service Delivery End Date	
Other Relevant Milestones	

Activity Commissioning

Open Tender
Expression of Interest (EOI)

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 comments	Co-designed process with refuge services, people with lived experience, primary care providers, migrant and refugee community workers and LHDs.

PP&TP-GCPC-1.0-Greater Choice for At Home Palliative Care (GCfaHPC) program

Funding Schedule

PHN Pilots and Targeted Programs

Existing Activity

Program Key Priority Area

Population health

Activity Aim

The aim of this activity is to:

- Improve and increase access to quality palliative care at home in the community. The aim is to support people who choose to remain at home to receive palliative care and end of life care

The objectives of the Program are to:

- Improve awareness (workforce and community) and access to safe, quality palliative care at home and support end-of-life care systems and services in primary health care and community care
- Enable the right care, at the right time and in the right place to reduce unnecessary hospitalisations
- Generate and use data to support continuous improvement of services across sectors, and
- Use available technologies to support flexible and responsive palliative care at home, including in the after-hours period.

The intended outcomes of the Program and this grant opportunity are to:

- Improve the capacity and responsiveness of services to meet local needs and priorities
- Improve patient access to quality palliative care services available in the home and improve the capacity of carers to support people at home.
- Improve coordination of care for patients, across health care providers and integration of palliative care services in their (PHN) region.

Description of Activity

1. Employment of a full-time equivalent staff member to implement the objectives of the Program.
2. Undertake regional palliative care and end of life needs assessment
3. Review, develop and enhance palliative care and end of life health pathways
4. RACH, practice nurse, and aged care worker education and training
5. GP education and training, including the development of palliative care and end of life and advance care planning QI workbooks for general practice
6. Development of palliative care consumer resources and service directory to increase awareness and assist navigation of local palliative care services

Needs Assessment Priorities

Priority	Page reference
Access and coordinated care	41
Older People	35

Activity Demographics

Target Population

Primary care workforce, community service providers and people who live in the CESPHN region.

Activity Consultation and Collaboration

Consultation is being undertaken with local health districts and specialty care network palliative care departments, carers, peak bodies for consumers, community service providers, primary care clinicians, local councils, and a range of public, private and not-for-profit organisations involved in palliative care.

Activity Milestone Details/Duration

Activity Start Date	08/12/2021
Activity End Date	30/06/2029
Service Delivery Start Date	
Service Delivery End Date	
Other Relevant Milestones	

Activity Commissioning

Not Yet Known

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 comments	Commissioned activities determined in consultation and collaboration with key stakeholders and experts in the palliative care field. The activities will also consider and build upon the established evidence base.

PP&TP-PCEP-1.0-PHN Primary Care Enhancement Program

Funding Schedule

PHN Pilots and Targeted Programs

Modified Activity

Program Key Priority Area

Population health

Activity Aim

To build the capability and capacity of local primary care providers to meet the complex needs of people with intellectual disability (ID), improve access to equitable preventative healthcare, reduce chronic disease and support people with ID to build healthy lives.

Description of Activity

The activity comprises the following main elements:

- Service navigation to support primary care providers in health system navigation and referrals, to link providers with the most appropriate specialist services for their patients.
- Community engagement to promote the rights of people with ID.
- Improve access to health care services, improve health literacy, and ownership of health outcomes.
- Incentivised training program and quality improvement activities for primary care providers on best practice care for people with ID, Medicare annual health assessments, chronic disease management plans, preventative health screening, and reasonable adjustments into primary care practices.
- Advocacy and stakeholder engagement to support system integration between primary, secondary and tertiary health services and across the disability and health sectors.
- Training programs and quality improvement activities for dental practices to improve workforce capability to deliver inclusive and equitable care for people with intellectual disability.

Needs Assessment Priorities

Priority	Page reference
Health and wellbeing of people with disability	38
Access and coordinated care	41

Activity Demographics

Target Population

Primary care providers, practice managers and practice staff in the CESPHN region, disability sector, community services, oral health professionals and people with lived experience of intellectual disability, their families and carers.

Activity Consultation and Collaboration

General practitioners, allied health professionals, SLHD and SESLHD Specialist Intellectual Disability Health Teams, people with lived experience, their families and carers, Council for Intellectual Disability, The University of New South Wales (UNSW) 3DN, National Centre for Excellence in Intellectual Disability Health, disability sector, oral health professionals and community organisations.

Activity Milestone Details/Duration

Activity Start Date	30/08/2020
Activity End Date	29/06/2026
Service Delivery Start Date	
Service Delivery End Date	
Other Relevant Milestones	

Activity Commissioning

Direct Engagement
Other approach (please provide details)

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 comments	The model has been designed in consultation and collaboration with key stakeholders and experts in the ID field. The model also considers and builds upon the established evidence base.

PP&TP-DVP-1.0-Domestic and Family Violence Pilot

Funding Schedule

PHN Pilots and Targeted Programs

Existing Activity

Program Key Priority Area

Population health

Activity Aim

To build the capacity of local primary care providers to recognise and respond to domestic and family violence (DFV) and strengthen integration with broader social and community services.

Description of Activity

The activity comprises two main elements:

- A specialist DFV educator who will provide a range of education options for primary health care professionals, including individual sessions, small group learning and other primary care professional development events.
- A specialist DFV navigator who will provide a referral service to link primary care providers with appropriate DFV services and secondary consultations to assist health professionals to support their patients.

Needs Assessment Priorities

Priority	Page reference
Health and wellbeing of people affected by domestic, family and sexual violence,	36
Access and coordinated care	41

Activity Demographics

Target Population

Primary care and community workforce

Activity Consultation and Collaboration

General practitioners, allied health professionals, practice nurses, practice managers, specialist DFV services, Aboriginal programs, DFV victim survivors, LHDs and LHNs, Ministry of Health.

Activity Milestone Details/Duration

Activity Start Date	12/05/2020
Activity End Date	29/06/2027
Service Delivery Start Date	
Service Delivery End Date	
Other Relevant Milestones	

Activity Commissioning

Open Tender

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 comments	The model has been designed in consultation and collaboration with key stakeholders and experts in the DFV field. The model also considers and builds upon the established evidence base. In order to enhance the navigation service provided to primary care practitioners, the navigation element of the program has now been commissioned to a specialist DFV service.