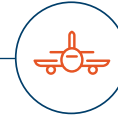


Our Activity Plan 2016-18

Strategic Vision



The key objectives of Primary Health Networks (PHN) are:

- Increasing the efficiency and effectiveness of medical services for patients, particularly those at risk of poor health outcomes; and
- Improving coordination of care to ensure patients receive the right care in the right place at the right time.

PHNs must make informed choices about how best to use its resources to achieve these objectives.

Together with the PHN Needs Assessment and the PHN Performance Framework, PHNs will outline activities and provide measurable performance indicators to the Australian Government and the Australian public with visibility as to the activities of each PHN.



Activity Planning

The Primary Health Network (PHN) Needs Assessment will identify local priorities, which will in turn guide the activities nominated for action in the 2016-18 Annual Plan.

Updated in February 2017, this Activity Work Plan covers the period from 1 July 2016 to 30 June 2018.

Primary Health Networks Flexible, Operational and After Hours Funding

Health Workforce Development and Support

This activity is aimed at building local service capacity, stimulating and enabling market development, especially in rural and remote locations that are underserved.

This activity includes:

- Facilitating collaborative working relationships between pharmacy, allied health, residential aged care facilities and general practice to develop responses to community identified health related needs.
- Facilitate education and knowledge sharing that enhances health outcomes and builds capacity of local health resources.
- Collaborate with organisations that provide Continuing Professional Development to deliver locally relevant education.

- Supporting networks of local practitioners and other organisations to investigate new service delivery options and modalities and enable implementation where appropriate.
- Building community and provider capacity and resilience, deliver face to face sessions on self-care that is inclusive of the health workforce in the region. In addition, access to website, library of videos and case studies, 24 hour phone support and advice, profession specific clinic for general practitioners, support to telehealth consultations.
- Support health workforce sustainability, by identify options for private Allied Health professionals to build business through outreach to underserved locations; Facilitate alternative models of student clinical placements in the region.

Health Pathways

The activity will utilise existing engagement of Community Advisory Committees and the Clinical Council to involve all related providers in the co-design of Clinical Care Pathways to address identified needs and service gaps across the entire Country SA PHN (CSAPHN) region and connect with metro based acute and specialty care.

The activity will involve:

- Engagement regionally to develop and improve localised care pathways.
- Development of culturally appropriate variations of care pathways.
- Implementation and promotion of health pathways portal.



Health Connections platform

The ongoing development and deployment of the Cisco unified communication infrastructure will assist the provision of service, support providers and consumers in the CSAPHN regions, allowing innovative service delivery models in new and existing program delivery, including:

- Increasing occasions of service by specialist providers.
- Provision of a local, supported solution as an enabler for key actions and objectives of approved After Hours technological activities.
- Expansion to the broader primary health sector to provide additional access to allied health and community health organisations.

Aboriginal and Torres Strait Islander health across Country SA

Aboriginal Health is embedded across all CSAPHN activities through an overarching focus on addressing the social determinants of health, while providing a culturally safe and competent commissioning process in collaboration with Communities, Government and Non-Government Organisations. This activity includes the following components:

- Foster and facilitate collaboration between communities, mainstream health and Aboriginal and Torres Strait Islander health sectors.
- Develop the capacity of mainstream practices to deliver culturally competent services in partnership with key stakeholders.
- Build the capacity of Country SA Aboriginal health workforce through collaboration, coordination of continuous professional development and workforce opportunities.
- Identify service gaps and work with key stakeholders to improve culturally appropriate care coordination and patient journey.
- Work with all health sectors to increase access to appropriate Primary Health Care services recognising the diversity of urban, regional and remote needs.
- Identify and support new initiatives and opportunities to improve Aboriginal health outcomes.
- Tailor current funded activities in collaboration with the Aboriginal Community Controlled Health Sector to better meet the health needs of their communities.
- Facilitate the implementation of the Integrated Team Care Program across country SA region.

Integrating Primary Care

The aim of this activity is to enable and support the provision of an integrated primary health care system in country South Australia.

- Implement the Medical Home Model as the organising principle for all CSAPHN commissioned health services.
- Chronic Disease focused allied health services oriented towards the provision of services in the primary health care component of the health care continuum. These services will be integrated via systematic team care coordination mechanisms between general practice, allied health services and other parts of the health system.
- Work with local providers to develop multi-stakeholder cycles of care for key chronic diseases not currently covered by Medicare Benefits Schedule items.
- Provide a framework for Country GP Liaison Officers to improve accountability and enhance care for patients (with complex needs) by shifting focus from internal hospital flows towards a holistic engagement with all components of the health system.
- Transition or migrate all activities to align with the model to establish a clearly demonstrated connection of services provided to clients of local general practice and other providers, enabling a smooth patient journey across the primary health system. Develop and implement systematic coordination mechanisms between general practice, allied health services and other parts of the health system.
- Use evidence-based models of care pathways to develop a Primary Health Care Access Process.
- Enable general practice and allied health service providers to implement and support patients in understanding and effectively self-managing their conditions.
- Enable the Royal Flying Doctors Service (RFDS) to provide a needs-based medical home-type primary health environment, including a range of allied health services, to Aboriginal communities and stations, as well as townships, in remote and very remote SA.
- Investigate options for long-term sustainability of the services funded by CSAPHN as part of this activity.

Health Care Continuum

The aim of this activity is to increase support to people within the CSAPHN region who are at risks of poor health outcomes, or are disadvantaged or vulnerable.

This activity is intended to increase health literacy and promote the uptake of preventative health behaviours and programs aimed at support people with chronic disease. The components of this activity are; Partner with organisations to promote risk mitigation, develop an Immunisation Hub for South Australia in partnership with Adelaide PHN, engage with council in the development and implementation of Public Health Plans, maintain the expanded Country Access to Cardiac Health (CATCH) telephone support service, facilitate clinical management support and support patient self-management, consultation and collaboration on transport issues.



Mental Health Comorbidity Support

Activities will complement and integrate with Primary Mental Health funded programs and Stepped Care ideology while also meeting the unique support and coordination needs of rural and remote communities. Innovative region wide approaches with a focus on sustainability, cost neutrality, wrap around care and community capacity building and resilience.

- Focus on promotion and prevention by providing access to information, advice and self-help resource.
- Increase early intervention through access to lower cost, evidence-based alternatives to face-to-face psychological therapy services.
- Provide wrap-around coordinated care for disadvantaged rural people with complex needs.
- Bridge the gap between acute episode discharge and re-entry to primary mental health services and wrap around supports via coordinated care and appropriate clinical triage.
- Promote a comorbid approach centred on drug and alcohol and shared servicing.

General Practice Support

The overall aim is to increase general practice capacity and quality to enable the development of the medical home model and effective interaction with the broader healthcare community.

This activity will support the general practice function as a whole in its encounter and management of patients, data, systems and process to enable best practice options of patient care.

- Implement digital health changes for the meaningful use of the My Health Record and enabling technologies.
- Increase general practice capacity and sustainability through increased appropriate use of Medicare Benefits Scheme and Incentive payments.
- Support practice nurse and general practice staff with clinical quality improvement and accreditation.
- Support care planning and the Medical Home model changes.
- Support change management and implementation of the MBS review and other future changes.
- Improve data quality and use of clinical information systems.
- Provide clinical care updates, current preventative health information and other resources.
- Facilitate the delivery of continuing professional development to general practice including culturally appropriate training.
- Facilitate support for International Medical Graduates and procedural general practitioners.
- Promote mental wellness of general practitioners.
- Connect general practitioners to medical specialist advice.

