



**Australian Government**

**Department of Health**



An Australian Government Initiative

## **Activity Work Plan 2019-2021:**

### **After Hours and Innovation**

This After Hours and Innovation Activity Work Plan template has the following parts:

1. The After Hours and Innovation Activity Work Plan for the financial years 2019-20 and 2020-2021.

***Northern Queensland PHN***

# 1. (a) Planned PHN activities for 2019-20 and 2020-21 – After Hours Primary Health Care Program Funding

Activity	
ACTIVITY TITLE	AH1 After hours service needs assessment and strategy development
Existing, Modified, or New Activity	New Activity
Program Key Priority Area	After Hours After Hours Primary Health Care Program funding
Needs Assessment Priority	<p>Opportunities, priorities and options:            Improve access to after hours health services Page 104,            Improve co-ordination and collaboration across the region Page 105,            Improved integration and coordination of care for better health outcomes in the after-hours period page 105,            Systems Evaluation and Strategic Partnerships Engagement – expected outcome high quality health needs assessment report Page 105.            Increase community knowledge and understanding of the primary care system page 106, Health behaviours, Aboriginal and Torres Strait Islander health page 109, Increase after-hours access in remote areas, especially for indigenous people in Cape York and Torres Strait page 115.</p>
Aim of Activity	<p>The delivery of equitable health services to all Australians presents many challenges, particularly in remote and very remote areas. An even greater challenge remains the provision of equitable primary health services for people who experience healthcare needs during un-social hours, and who are unable to wait for treatment until regular services are available.</p> <p>While the NQPHN Health Needs Assessment (HNA) broadly provides reliable information on the extent of health needs across the NQPHN region, it is currently unable to capture data at a suitable level of granularity for detailed analysis of specific issues.</p> <p>The aim of this activity is to increase understanding through an in-depth analysis of systems and investigation of the specific area of after hours services and integration. It will identify gaps in provision and address issues relating to disadvantaged groups, rural and remote locations and those populations who have not previously been well served by after hours services. The activity will generate the intelligence required to inform future commissioning of after-hours services, inform the models required to deliver the required outcomes to provide the greatest equitability of health service delivery possible.</p>
Description of Activity	<p>NQPHN will commission the development of a detailed investigation of the after hours environment in northern Queensland resulting in the development of a comprehensive after hours strategy and implementation plan which will inform priorities for future commissioning activity.</p> <p>It is anticipated that the activity will be informed by a detailed, focused assessment of need in priority target groups, supplemented by information gathered from analysis of previously funded programs and of best practice evidence for after hours health service provision.</p> <p>The objectives will be to:</p> <ul style="list-style-type: none"> <li>• understand current service provision and the successes, opportunities, and barriers</li> </ul>

	<ul style="list-style-type: none"> <li>• develop definitions and an understanding of community needs regarding access to after hours services</li> <li>• develop an understanding of the trends and patterns of access to primary health services after hours</li> <li>• identify or develop an appropriate methodology (including data collection tool) to inform future service models related to service provision</li> <li>• develop an understanding of the relationship between access to primary health services after hours and consumer health outcomes (particularly around accessing emergency departments and other tertiary based models of care)</li> <li>• recommend solutions including design of access models to address needs or gaps identified through data collection, involvement with service providers, and consumers.</li> </ul> <p>The strategy is critical to provide clarity on the direction and impetus to future commissioning to ensure that it is well targeted and provides the greatest opportunity to improve access to, and the integration of health services both in the 'after' and 'in' hours periods. This will improve and maintain health outcomes for priority consumers where this has not previously been occurring.</p>
Target population cohort	<p>Disadvantaged groups, including, but not limited to:</p> <ul style="list-style-type: none"> <li>• Aboriginal and Torres Strait Islander people,</li> <li>• people with complex and chronic health conditions</li> <li>• people experiencing mental conditions</li> <li>• people with disabilities</li> <li>• Culturally and Linguistically Diverse (CALD) populations</li> <li>• rural and remote communities</li> </ul>
Indigenous specific	No
Coverage	Whole of the NQPHN region
Consultation	<p>Specific consultation will be undertaken in the course of the strategy development.</p> <p>The strategy will also benefit from previous consultations</p>
Collaboration	The proposed collaboration requirements and methodology will be a key consideration in the evaluation of tenders for this work
Activity milestone details/ Duration	<p>Activity start date: 16/10/2019</p> <p>Activity end date: 3/02/2020</p> <p>Service delivery start date: October 2019</p> <p>Service delivery end date: February 2020</p>
Commissioning method and approach to market	<p><input type="checkbox"/> Not yet known</p> <p><input type="checkbox"/> Continuing service provider / contract extension</p> <p><input type="checkbox"/> Direct engagement. If selecting this option, provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date.</p> <p><input checked="" type="checkbox"/> Open tender</p> <p><input type="checkbox"/> Expression of Interest (EOI)</p>

	<input type="checkbox"/> Other approach (please provide details)  2a. Is this activity being co-designed? No  2b. Is this activity this result of a previous co-design process? No  3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? No  3b. Has this activity previously been co-commissioned or joint-commissioned? No
Decommissioning	1a. Does this activity include any decommissioning of services? Yes, potentially  1b. If yes, provide a description of the proposed decommissioning process and any potential implications. This will be articulated in the implementation plan

Activity	
ACTIVITY TITLE	AH2 Strategy informed commissioning activity – Improved access to after hours health services
Existing, Modified, or New Activity	New Activity
Program Key Priority Area	After Hours After Hours Primary Health Care Program funding
Needs Assessment Priority	Opportunities, priorities and options: Improve access to after hours health services Page 104, Improve co-ordination and collaboration across the region Page 105, Improved integration and coordination of care for better health outcomes in the after-hours period page 105, Systems Evaluation and Strategic Partnerships Engagement – expected outcome Increase community knowledge and understanding of the primary care system page 106, Health behaviours, Aboriginal and Torres Strait Islander health page 109, Increase after hours access in remote areas, especially for indigenous people in Cape York and Torres Strait page 115.
Aim of Activity	Improving after hours services within the region has been identified as a priority need. The aim of the activity is to respond to the findings of the after hours strategy and implementation plan to confirm identified priorities, respond to opportunities, and implement service models and solutions to address the priority needs and gaps identified.
Description of Activity	The precise activities will be identified through the detailed needs assessment and after hours strategy implementation plan. (Refer AH-1 above) NQPHN will provide an amended AWP that outlines the priority commissioning activities that align with the outcomes of the review, for approval.
Target population cohort	Aboriginal and Torres Strait Islander people, aged, homebound, and palliative care patients, Populations at risk of poor health outcomes

	Remote and very remote communities Priority populations not currently well served during after hours period
Indigenous specific	No
Coverage	Whole of the NQPHN region
Consultation	Consultation undertaken during after hours strategy development
Collaboration	Opportunities for collaboration, co-design and co-commissioning will be informed by after hours strategy development
Activity milestone details/ Duration	Activity start date: 2/03/2020 Activity end date: 30/06/2021
Commissioning method and approach to market	<input checked="" type="checkbox"/> Not yet known <input type="checkbox"/> Continuing service provider / contract extension <input type="checkbox"/> Direct engagement. If selecting this option, provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date. <input type="checkbox"/> Open tender <input type="checkbox"/> Expression of Interest (EOI) <input type="checkbox"/> Other approach (please provide details) <p>2a. Is this activity being co-designed? No Unknown</p> <p>2b. Is this activity this result of a previous co-design process? Yes Potentially, depending on the strategy development methodology</p> <p>3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? No Unknown</p> <p>3b. Has this activity previously been co-commissioned or joint-commissioned? No</p>
Decommissioning	No Unknown

Activity	
ACTIVITY TITLE	AH3 After hours disadvantaged services
Existing, Modified, or New Activity	Existing Activity  Residential Aged Care GP linkage Systems evaluation and strategic partnership engagement After hours disadvantaged services Home visiting services quality improvements Workforce development & support (telehealth) Mareeba Primary health development
Program Key	After Hours
Priority Area	After Hours Primary Health Care Program funding

Needs Assessment Priority	<p>Opportunities, priorities and options:          Improve access to after hours health services Page 104,          Improve co-ordination and collaboration across the region Page 105,          Improved integration and coordination of care for better health outcomes in the after-hours period page 105,          Systems Evaluation and Strategic Partnerships Engagement – expected outcome          High quality health needs assessment report Page 105.          Increase community knowledge and understanding of the primary care system page 106, Health behaviours, Aboriginal and Torres Strait Islander health page 109, Increase after-hours access in remote areas, especially for indigenous people in Cape York and Torres Strait page 115</p>
Aim of Activity	<p>Improving after hours services within the region has been identified as a priority need. Having access to appropriate after hours services for patients who cannot see their regular GP in the after hours period is essential until such a time that they are able to secure a follow-up appointment with their regular GP.</p> <p>Within the NQPHN region a high proportion of the population live outside the regional centres in remote and very remote areas. Many are identified as vulnerable populations. The region has a high proportion of Aboriginal and Torres Strait Islander people. Service delivery in much of the area is both challenging and costly. Many communities have limited access to GPs or other primary health services which creates pressure on emergency departments to provide for routine treatment including during after hours periods. NQPHN aims to support activities which will reduce pressure on emergency departments and provide appropriate service options which encourage consumers to access suitable after hours services. Accessible and appropriate after hours services prevent unnecessary and costly primary health care being sought from emergency departments.</p> <p>NQPHN also aims to increase efficiency and effectiveness, by enhancing integrated systems that will help support after hours service. NQPHN will provide opportunities to provide effective solutions and support to after hours service provision, which addresses service gaps, removes access to barriers, meets the prioritised needs of the vulnerable populations especially for rural and remote communities, in culturally safe and appropriate ways.</p>
Description of Activity	<p>A key focus of this activity will be primary health care workforce development solutions focussing on increasing the capacity of the workforce to deliver services after hours in rural and remote areas and provide skills for the future, including:</p> <ul style="list-style-type: none"> <li>• improvements to recruitment and retention of GPs, Indigenous, and other health workers in rural areas including through the provision of incentives</li> <li>• strengthen relationships between GPs, hospitals and RACFs</li> <li>• develop nurse led models and interventions</li> <li>• improve in-service training and upskilling to enable working at the full scope of practice</li> <li>• increase student experience in rural settings.</li> </ul> <p>Activities to improve access to after hours health services may include home visiting and medical deputising services, outreach, transport and mobility solutions, driver support, and mobile clinics.</p>

	<p>A medical deputising service will deliver after hours services to the Mareeba and Tablelands community via telehealth and home visiting. The same provider will deliver these services across the NQPHN region.</p> <p>Priorities will be determined to target areas of greatest need and identify opportunities for holistic, wellbeing which include preventative/anticipatory care, are people centred and life-course focussed.</p> <p>The provision of timely interventions which reduce the likelihood of escalation of conditions in the after hours period, particularly for RACF residents, will be encouraged.</p> <p>Activities are expected to maximise the advantages of innovations in technology, including telehealth and telephone services in the after hours period which expand the range of support available and minimise travel requirements for both consumers and providers.</p> <p>Evidence demonstrates that improvement to information sharing and continuity of care between services and regular GPs following after hours treatment through handover, quality clinical notes, use of My Health Record, and discharge summaries where applicable, will generate improvements to patient care.</p>
Target population cohort	Disadvantaged groups, palliative care patients, aged, Indigenous people, primary health care workforce, remote and very remote residents, mental health consumers and AOD service users
Indigenous specific	No
Coverage	Whole of the NQPHN region with a specific focus on the Mareeba and Tablelands area.
Consultation	Workforce development consultation through peak bodies HNA consultation processes for stakeholders and communities
Collaboration	NQPHN will work with all relevant stakeholders, including rural and remote health services, non-government organisations, home visiting services, Queensland Ambulance Services, GPs, pharmacy, hospitals, and allied health.
Activity milestone details/ Duration	<p>Activity start date: 1/07/2019</p> <p>Activity end date: 30/06/2020</p>
Commissioning method and approach to market	<p><input type="checkbox"/> Not yet known</p> <p><input checked="" type="checkbox"/> Continuing service provider / contract extension</p> <p><input type="checkbox"/> Direct engagement. If selecting this option, provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date.</p> <p><input type="checkbox"/> Open tender</p> <p><input type="checkbox"/> Expression of Interest (EOI)</p> <p><input type="checkbox"/> Other approach (please provide details)</p> <p>2a. Is this activity being co-designed? No</p> <p>2b. Is this activity this result of a previous co-design process? No</p> <p>3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? No</p> <p>3b. Has this activity previously been co-commissioned or joint-commissioned?</p>

	No
Decommissioning	No

Activity	
ACTIVITY TITLE	I1. Innovation
Existing, Modified, or New Activity	Modified Activity General Practice Health Care Home Readiness program, Online resources portal
Program Key Priority Area	Other (please provide details) Innovation Innovation – Reform (patient centred medical homes)
Needs Assessment Priority	Service needs: Shortage of skilled workforce page 57 -59 Opportunities, priorities and options: Apply after hours quality incentive program page 104 Improve co-ordination and collaboration across region – Innovative models page 105 Improve health system efficiencies pages 106-107
Aim of Activity	The aim of this activity is to support and develop short term innovative approaches and solutions that may lead to improvements in the efficiency, effectiveness and coordination of primary health care services in the NQPHN region. Such innovation will focus upon advancing the health reform agenda, consider system change and integrators, and support the piloting or trialling of evidence-based care options which have been designed to meet the local challenges experienced within the NQPHN region. Innovation is not confined to new ideas but also encourages approaches to primary care which employ technology and best practice in ways which assist to meet local conditions and particularly provide solutions for hard to reach groups or people at risk of poor health outcomes. Many issues require new thinking or synchronicity. This activity will improve the integration and coordination of care.
Description of Activity	Innovation activities which gain their impetus from reform readiness will be developed and commissioned, particularly where they involve transformational workforce development, through workforce training and education programs, encouraging new ways to deliver clinical education to support GP teams, improve co-ordination and team-based approaches, and the use of technology including on line methods such as portals to deliver learning modules and materials. An evidence-based strategic approach to primary care provider engagement and capacity building will be developed and implemented which will enable internal and external stakeholders to navigate the changing health environment. This activity will enable health providers and their teams to drive innovative solutions to needs and adopt continuous quality improvements. Innovative, labour efficient, and lean approaches will be devised using appropriate incentives to produce sustainable improvements to patient centred care and service delivery. Collaborations with academic institutions to facilitate integration of teaching, research, clinical practice, examination of health economics, and provision of value for money will be pursued. Pilots or trial projects which include evaluation components designed to improve the health journeys of patients, particularly of children and youth,



	Aboriginal and Torres Strait Islander people, and other disadvantaged groups will be developed and undertaken.
Target population cohort	The primary health workforce, disadvantaged groups including those living in remote and very remote areas, and specific cohorts such as children, young people, and Aboriginal and Torres Strait Islander people.
Indigenous specific	No
Coverage	Whole of the NQPHN region
Consultation	GP consultation and involvement occurred in the health reform area of Health Care Homes Readiness, Local universities Stakeholder and community consultation undertaken to support the development and revision of the HNA
Collaboration	Australian Primary Healthcare Nurses Association Australian Healthcare and Hospitals Association Local universities Training providers Royal Australian College of General Practitioners Australian College of Rural and Remote Medicine
Activity milestone details/ Duration	Activity start date: 1/07/2019 Activity end date: 30/06/2020
Commissioning method and approach to market	<input checked="" type="checkbox"/> Not yet known <input type="checkbox"/> Continuing service provider / contract extension <input type="checkbox"/> Direct engagement. If selecting this option, provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date. <input type="checkbox"/> Open tender <input type="checkbox"/> Expression of Interest (EOI) <input type="checkbox"/> Other approach (please provide details) <p>2a. Is this activity being co-designed? No</p> <p>2b. Is this activity this result of a previous co-design process? No</p> <p>3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? No</p> <p>3b. Has this activity previously been co-commissioned or joint-commissioned? No</p>
Decommissioning	1a. Does this activity include any decommissioning of services? No