# Central Queensland, Wide Bay, Sunshine Coast - After Hours Primary Health Care

2019/20 - 2020/21

**Activity Summary View** 



# After Hours Counselling, Women's Health Clinic



# **Activity Metadata**

Applicable Schedule \*

After Hours Primary Health Care

**Activity Prefix \*** 

AΗ

**Activity Number \*** 

1

**Activity Title \*** 

AH-P1: After Hours Counselling, Women's Health Clinic

Existing, Modified or New Activity \*

Modified



# **Activity Priorities and Description**

# **Other Program Key Priority Area Description**

Mental Health: AHM-P1.8, Maternal and Child Health: AHM-P1.12

# Aim of Activity \*

- Improved access to after hours care in areas of need.
- Reduction in category 5 emergency department presentations.

#### **Description of Activity\***

- AHM-P1.8 The after hours counselling program aims to enhance access to after hours women's health and low intensity
  mental health counselling services for at-risk women in Gympie via the Gympie Women's Health Service.
- AHM-P1.12 Women's Health Clinic provides improved access to female general practitioners (GPs) (specialising in women's reproductive and sexual health) for vulnerable, marginalised and socially isolated women in Sunshine Coast local government area (LGA).

## **Needs Assessment Priorities\***

CQWBSCPHN Needs Assessment 2019/20-2021/22

#### **Priorities**

Needs Assessment Priority	Page Reference
Improve access to primary care services	92
Create locally based solutions to improve integration	95



# **Activity Demographics**

# **Target Population Cohort \***

- Women from low socio-economic background in Sunshine Coast and Gympie LGAs.
- Aboriginal and Torres Strait Islander women in Sunshine Coast and Gympie LGAs.
- Homeless and vulnerable women in Sunshine Coast and Gympie LGAs.

### Indigenous Specific \*

No

### **Indigenous Specific Comments \***

While not specifically targeting Aboriginal and Torres Strait Islander peoples, the activity maintains a commitment to prioritising the health needs of our diverse Aboriginal and Torres Strait Islander communities across the region.

# Coverage \*

## **Whole Region**

Yes



# **Activity Consultation and Collaboration**

#### Consultation \*

Service funded in consultation with the local HHS and related service providers to ensure there is no duplication.

#### Collaboration \*

- SCHHS.
- Gympie Women's Health Service.
- North Coast Women's Health Centre.



# **Activity Milestone Details/Duration**

#### Activity Start Date \*

30 Jun 2019

# Activity End Date \*

29 Jun 2022

#### **Service Delivery Start Date**

July 2019

#### **Service Delivery End Date**

June 2022

#### **Other Relevant Milestones**

Service delivery start date

• AHM-P1.8: July 2019

AHM-P1.12: 30 March 2020



# **Activity Commissioning**

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

Not yet known: Yes

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

Direct engagement:

- AHM-P1.8: This is the sole provider for this service in Gympie and has been performing very well to-date. Demonstrated ongoing need.
- AHM-P1.12: North Coast Women's Health Centre has been established for over 20 years serving a subset of the community who is generally unable to afford, or uncomfortable accessing, mainstream primary women's health care options. The service provides specialised family planning, antenatal care for women with complex needs, and women's health for women in low socioeconomic groups or who are vulnerable due to social circumstances (such as sex workers). To improve access, the service provides some consultations before normal working hours. The service is in critical need of some administration support to maintain its ability to offer public health services (such as immunisation) within its consultations and to recruit and retain motivated general practitioners who are willing to bulk-bill to provide this service.

Open tender: No

Expression of interest (EOI): No

Other approach (please provide details): Yes

Continuing service provider / contract extension:

AHM-P1.8 Yes;

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 *
Co-designed with the parties mentioned in the consultation section of the AWP.



# Patient management and referral system to reduce avoidable after hours hospital presentations



# **Activity Metadata**

Applicable Schedule \*

After Hours Primary Health Care

**Activity Prefix \*** 

AΗ

**Activity Number \*** 

2

**Activity Title \*** 

AH-P2: Patient management and referral system to reduce avoidable after hours hospital presentations

Existing, Modified or New Activity \*

Modified



# **Activity Priorities and Description**

Program Key Priority Area \*

Other (please provide details)

#### Other Program Key Priority Area Description

Improved coordination and integration of care for patients with complex and chronic disease.

#### Aim of Activity \*

- Reduce avoidable after hours hospital presentations by improving service coordination and integration for high-need, complex-care clients.
- Improve service coordination and integration between the PHN and Hospital and Health Services (HHSs).
- Develop, implement and evaluate current models of care, such as health pathways and General Practice Liaison Officer (GPLO) positions as a way of improving the coordination and integration of primary and secondary health services in the region.
- Provide targeted and supportive psychiatric advice to enable GPs to work to the top of their scope of practice, keep clients in primary care longer and better integrate their physical health and mental health.

## **Description of Activity \***

- It was widely recognised that after hours services should be integrated and coordinated to achieve continuity of care between after hours service providers and a patient's regular GP. This has been identified as particularly important where patients have chronic and complex conditions and may lack access to services or management of the condition which results in avoidable hospital presentation.
- To achieve continuity of care, systems must be in place to support effective communication across providers of after hours services, in particular, between general practice and the HHS.
- Support primary health care providers and GPs to identify opportunities to increase uptake and use of telehealth capabilities to optimise efficient access to health care services and specialist outreach where needed.

• Specifically, the PHN will identify the most frequent potentially preventable ED presentations in the after hours period for patients with complex care needs, and work on improving clinical pathways to improve coordination for these patients.

## Partner:

• Developing integrated models of chronic disease care between primary, secondary and tertiary health service providers and GPs which may include but not limited to:AHC-P2.1 - Partner with HHSs across our PHN to identify joint priorities and integration opportunities, and to move forward on local activity that stems from this.

#### Provide:

- AHC-P2.2 Supporting nurse-led chronic disease management and promoting the use of patient registers and recall systems within general practice for specific chronic diseases (via Health System Support and Integration Officers);
- AHC-P2.3 The development of specific patient-centred management and referral pathways (through HealthPathways) with the purpose of avoiding hospital admissions and inappropriate referral; and
- AHC-P2.4 Designated general practice liaison officer (GPLO) resource based within the PHN across the region to undertake peer-to-peer education with local GPs, jointly plan with the HHS GPLO office, and provide clinical oversight to the HealthPathways program.

# Procure:

- AHC-P2.7 Local GPs to undertake clinical editing of HealthPathways and Streamliners' expertise to publish according to the style guide.
- AH-P2.8 Telephone psychiatric support for general practitioners in managing care of clients with complex and chronic mental health conditions.

#### **Needs Assessment Priorities \***

CQWBSCPHN Needs Assessment 2019/20-2021/22

#### **Priorities**

Needs Assessment Priority	Page Reference
Improve access to primary care services	92
Create locally based solutions to improve integration	95



# **Activity Demographics**

#### Target Population Cohort \*

Clients with complex or chronic disease who are at risk of presenting multiple times or after hours to emergency services.

### Indigenous Specific \*

No

### Indigenous Specific Comments \*

- While not specifically targeting Aboriginal and Torres Strait Islander peoples, the activity maintains a commitment to prioritising the health needs of our diverse Indigenous communities across the region.
- Working with providers to ensure treatment guidelines and recall/reminder processes are tailored to special groups, such Aboriginal and Torres Strait Islander communities.

# Coverage \*

## **Whole Region**

Yes



# **Activity Consultation and Collaboration**

#### Consultation \*

- · HHSs across the region.
- General practitioners.
- Community-based primary health care providers.

#### Collaboration \*

- HHSs across the region.
- General practitioners.
- · Community-based primary health care providers.



# **Activity Milestone Details/Duration**

**Activity Start Date \*** 

30 Jun 2019

Activity End Date \*

29 Jun 2022



# **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: Yes

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? \*

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 \*

Co-designed with the parties listed in the consultation section of the AWP.



# Improve health literacy - Right Place, Right Time Campaign



# **Activity Metadata**

Applicable Schedule \*

After Hours Primary Health Care

**Activity Prefix \*** 

AΗ

**Activity Number \*** 

3

**Activity Title \*** 

AH-P3: Improve health literacy – Right Place, Right Time Campaign.

Existing, Modified or New Activity \*

Existing



# **Activity Priorities and Description**

Program Key Priority Area \*

Other (please provide details)

#### **Other Program Key Priority Area Description**

Health literacy and avoidable hospital presentations.

#### Aim of Activity \*

Improved knowledge among service providers and consumers about available primary health care services in their area.

# **Description of Activity \***

Health literacy regarding after hours care across the community in the Sunshine Coast, Wide Bay and Central Queensland region is generally considered to be poor, with significant opportunities to educate consumers better on which after hours services are available and when to access them. A key barrier to this activity is the lack of available after hours alternatives in regional areas, hence, the limited application of the initiative to the Sunshine Coast region.

#### Provide:

AHC-P3.2 - Promoting the uptake of provider self-authorship on the National Health Service Directory (NHSD), improving
and collating after hours service information in each area of the PHN via Health System Support and Integration officers;

- AHC-P3.4 Conduct public awareness campaigns to promote the Right Place, Right Time message. Including but not limited to:
  - o Bus and billboard advertising
  - Cinema advertising
  - Shopping centre restrooms
  - o Child care centres
  - o Printing of promotional material

- o Social and digital marketing campaigns
- External market evaluation of the campaign to improve the reach / impact and confirm the messaging is appropriate.

### **Needs Assessment Priorities \***

CQWBSCPHN Needs Assessment 2019/20-2021/22

#### **Priorities**

Needs Assessment Priority	Page Reference
Improve knowledge about available workforce	92



# **Activity Demographics**

## **Target Population Cohort \***

People experiencing minor injury and illness who present to SCHHS emergency departments and are not aware of alternative services.

### Indigenous Specific \*

No

### **Indigenous Specific Comments \***

While not specifically targeting Aboriginal and Torres Strait Islander peoples, the activity maintains a commitment to prioritising the health needs of our diverse Indigenous communities across the region.

### Coverage \*

#### **Whole Region**

Yes



# **Activity Consultation and Collaboration**

#### Consultation \*

Extensive stakeholder engagement has been undertaken to construct and monitor this campaign, including:

- Consumer groups for focus testing.
- Baseline surveys and end line evaluation.
- · Online consumer feedback and review.
- Hospital and Health Service consumer representatives and communications staff.
- Health care providers.
- · Health service volunteers.

## Collaboration \*

- Sunshine Coast Hospital and Health Service (SCHHS) alternative pathways working group.
- General practice encouraging updated service information on publicly available directory.
- Community consumer surveys, focus groups and online feedback opportunities.



# **Activity Milestone Details/Duration**

Activity Start Date \*

30 Jun 2019

Activity End Date \*

29 Jun 2020

**Service Delivery Start Date** 

July 2019

**Service Delivery End Date** 

June 2022



# **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

\*Direct approach to most capable provider\*

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? \*

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 \*

Co-designed with the parties listed in the consultation section of the AWP.



# Falls prevention for over-65s in the community – Active at Home



# **Activity Metadata**

Applicable Schedule \*

After Hours Primary Health Care

**Activity Prefix \*** 

AΗ

**Activity Number \*** 

4

**Activity Title \*** 

AH-P4: Falls prevention for over-65s in the community – Active at Home.

Existing, Modified or New Activity \*

Existing



# **Activity Priorities and Description**

Program Key Priority Area \*

Other (please provide details)

#### Other Program Key Priority Area Description

Older persons' health.

## Aim of Activity \*

Build strength and resilience in community-dwelling over-65s to improve functional capacity, reduce the risk of falls,
 reduce frailty, reduce the risk of hospital admission and improve quality of life.

#### Description of Activity \*

- AHO-P4.1 Active at Home is a strength and balance exercise program which supports older people to exercise regularly and safely in their own homes.
- The Active at Home program is an accredited online Certificate II training package that has been specifically developed for personal care workers (PCWs). The package trains PCWs to deliver an 18-week program for their clients covering eight simple strength and balance exercises. PCWs record progress and track outcomes using the Active at Home App.
- It is widely recognised that after hours services need to be integrated and coordinated with 'in hours' care models to ensure continuity and completeness of care particularly for vulnerable and isolated individuals.
- Extensive analysis of the Sunshine Coast's Queensland Ambulance Service (QAS) and DEM data has shown that the over-65s population makes up a large proportion of low-acuity QAS-transported DEM presentations which include, but are not limited to, the after hours period. The number of falls-related 'near misses' from QAS call-outs which may or may not result in a hospital transfer is equally alarming.
- The Active at Home program aims to embed preventative, client-focussed service delivery to a vulnerable group of community and avoid frailty escalating to complex fractures and extended hospital interactions. The service is delivered by home care providers who are not always attending their client's home 'in hours'.

### **Needs Assessment Priorities \***

CQWBSCPHN Needs Assessment 2019/20-2021/22

#### **Priorities**

Needs Assessment Priority	Page Reference
Improve access to primary care services	92
Older persons health	94



# **Activity Demographics**

Target Population Cohort \*

Community-dwelling over-65s at risk of frailty or falls.

Indigenous Specific \*

No

# Coverage \*

**Whole Region** 

Yes



# **Activity Consultation and Collaboration**

#### Consultation \*

- SCHHS.
- University of the Sunshine Coast.
- Brisbane North PHN.
- Sunshine Coast Integrated Care Alliance.
- Community-based service providers.

#### Collaboration \*

The program will be implemented in collaboration with local service providers, the SCHHS, QAS and Brisbane North PHN.



# **Activity Milestone Details/Duration**

Activity Start Date \*

30 Jun 2019

Activity End Date \*

29 Jun 2020

### **Service Delivery Start Date**

July 2019

June 2020



# **Activity Commissioning**

Co-designed with parties listed in the collaboration section of AWP.

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: Yes
This is a specific service offered by Brisbane North PHN which is perceived to meet an identified need within the Sunshine Coast and Gympie LGAs.
Open tender: No
Expression of interest (EOI): No
Other approach (please provide details): 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? *
No
Has this activity previously been co-commissioned or joint-commissioned? *
No
Decommissioning *
No
Decommissioning Details? *
N/A
Co-design or co-commissioning details *



# Primary care access to homeless and vulnerable



# **Activity Metadata**

Applicable Schedule \*

After Hours Primary Health Care

**Activity Prefix \*** 

AΗ

**Activity Number \*** 

5

**Activity Title \*** 

AH-P5: Primary care access to homeless and vulnerable.

Existing, Modified or New Activity \*

Modified



# **Activity Priorities and Description**

Program Key Priority Area \*

Other (please provide details)

#### **Other Program Key Priority Area Description**

- Access to primary care.
- Access to after hours care.
- Mental health.
- · Alcohol and other drugs.

# Aim of Activity \*

• Sunny Street is a GP and nursing mobile outreach unit providing primary health care and complex coordination services for homeless and vulnerable individuals and families.

# **Description of Activity \***

- AHC-P5.1 The PHN is funding Sunny Street to deliver nine primary care clinics per week in accessible locations where homeless and vulnerable populations congregate.
- Funding support contributes to staff costs, volunteer onboarding, clinical supplies, immunisation fridge and vaccines for vulnerable children, youth, families and individuals across the lifespan.
- Unlike other outreach and mobile service models, the key goal of Sunny Street is to use mobile outreach to enhance access for vulnerable groups, with the view to link them into ongoing support. Once individuals are linked into the Sunny Street service, they will have access to a holistic suite of support services from health care to social support.
- The funding to the Sunny Street service is to support nursing and volunteer coordination, consumables and travel for an essential mobile/outreach primary care service providing clinics across the PHN (including after hours).
- The increased access to medical and social supports for homeless people and those at risk of homelessness is specifically
  funded to improve continuity of care for this vulnerable, underserviced group and reduce avoidable hospital
  presentations.

#### **Needs Assessment Priorities \***

CQWBSCPHN Needs Assessment 2019/20-2021/22

#### **Priorities**

Needs Assessment Priority	Page Reference
Improve access to primary care services	92
Create locally based solutions to improve integration	95



# **Activity Demographics**

# **Target Population Cohort \***

The target cohorts for this service are individuals and family units who are homeless, those at risk of homelessness and other socially vulnerable and marginalised groups on the Sunshine Coast and Fraser Coast.

### Indigenous Specific \*

No

## **Indigenous Specific Comments \***

While not specifically targeting Aboriginal and Torres Strait Islander peoples, the activity maintains a commitment to prioritising the health needs of our diverse Indigenous communities across the region.

# Coverage \*

# **Whole Region**

No



# **Activity Consultation and Collaboration**

## Consultation \*

- HHSs.
- · Community-based support services.
- · Local government.
- Non-government agencies.

# Collaboration \*

Multiple stakeholders are currently involved in supporting or partnering with the Sunny Street outreach service including local councils, NGOs and universities.



# **Activity Milestone Details/Duration**

Activity Start Date \*

30 Jun 2019

Activity End Date \*

29 Jun 2020

**Service Delivery Start Date** 

July 2019

**Service Delivery End Date** 

June 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: Yes

Justification of direct engagement is that there is currently only one provider of this service in the LGA.

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 \*

Co-designed with the parties mentioned in the consultation section of the AWP.



# Quality Improvement workforce development and coaching



# **Activity Metadata**

Applicable Schedule \*

After Hours Primary Health Care

**Activity Prefix \*** 

AΗ

**Activity Number \*** 

6

**Activity Title \*** 

AH-P6: Quality improvement workforce development and coaching.

Existing, Modified or New Activity \*

**New Activity** 



# **Activity Priorities and Description**

Program Key Priority Area \*

Workforce

#### Aim of Activity \*

- Provide general practice teams with expertise in the development and delivery of quality improvement techniques.
- Support quality improvement work in general practice through expert change management advice, methodology and robust measurement of improvement activities supported by clinical audit data.

#### Description of Activity \*

- AHC-P6.1 The PHN will continue to support primary health care practitioners to develop capability and expertise in
  quality improvement. This may be delivered using remote technology (such as webinar sessions) and/or face-to-face
  workshops for practice staff across multiple locations within our PHN catchment area and include virtual coaching of
  individual practices in rural and remote locations.
- After hours services are limited to Medical Deputising Services in Wide Bay and Central Queensland. This is due to extensive and significant GP workforce shortages across these areas. In addition, GPs had a better hourly remuneration on a Monday than a Sunday, and patients' preference for bulk billing Medical Deputising Services have also been identified as contributing factors. The few clinics that do offer an after hours on-call service for their practices existing patients charge fees that are unaffordable to low and fixed income populations. Funding a financially viable bulk-billing after hours GP clinic is impermissible as it is an activity that is funded by the After Hours Practice Incentive Payment.
- Instead of a supply-side solution, the PHN seeks to create a demand-side solution. Best practice strategies to improve the systems and processes within general practice to improve outcomes for patients with chronic disease will reduce the potentially preventable presentations for those conditions both in and after hours.
- The GP workforce shortage means many practices struggle to meet existing patients' needs in hours. Strategies that support working smarter in hours and invest in improvement in systems and process are essential when GP workforce hours are finite and commissioning after hours GP time is proscribed.

 Improving access to CPD for practice nurses will be provided via an online platform available for 250+ nurses across our PHN region to enable local access to best practice education and upskilling.

# **Needs Assessment Priorities\***

CQWBSCPHN Needs Assessment 2019/20-2021/22

#### **Priorities**

Needs Assessment Priority	Page Reference
Promote chronic disease prevention and management	92
Quality improvement	99



# **Activity Demographics**

#### Target Population Cohort \*

Primary health care practice teams across the PHN catchment.

### Indigenous Specific \*

No

### **Indigenous Specific Comments \***

While not specifically targeting Aboriginal and Torres Strait Islander peoples, the activity maintains a commitment to prioritising the health needs of our diverse Indigenous communities across the region.

# Coverage \*

## **Whole Region**

Yes



# **Activity Consultation and Collaboration**

#### Consultation \*

Consultation will be undertaken with:

- General practice.
- Clinical and Community Advisory Councils.

#### Collaboration \*

Ongoing collaboration occurs with the following:

- · General practice.
  - o assessment, planning and advisory.
- Clinical and Community Councils .
  - o planning, advisory.



# **Activity Milestone Details/Duration**

**Activity Start Date \*** 

30 Jun 2019

Activity End Date \*

29 Jun 2020

**Service Delivery Start Date** 

June 2019

**Service Delivery End Date** 

July 2020



# **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: Yes

This activity will be directly commissioned to the provider who was best qualified to provide the training required.

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 \*

Co-designed with parties listed in the collaboration section of the AWP.



# **Palliative Care Medical Home Visits**



# **Activity Metadata**

Applicable Schedule \*

After Hours Primary Health Care

**Activity Prefix \*** 

AH

**Activity Number \*** 

7

**Activity Title \*** 

AH-P7: Palliative Care Medical Home Visits.

Existing, Modified or New Activity \*

**New Activity** 



# **Activity Priorities and Description**

Program Key Priority Area \*

Other (please provide details)

#### **Other Program Key Priority Area Description**

Chronic conditions identification and management, access, health system literacy (local priorities).

#### Aim of Activity \*

Explore a locally appropriate model for palliative care home visit medical services in Wide Bay.

## **Description of Activity \***

- AHO-P7.1 Support general practices in Wide Bay to address palliative care workforce gaps and explore a locally
  appropriate palliative care home visit model.
- There is no palliative specialist medical care in Wide Bay either in or after hours, in the community, outpatients, inpatients or outreach, publicly or privately. In hours palliative nursing is funded by the WBHHS. Admitted patients are seen by a general medical physician or, in private hospitals and RACFs, by a GP. Palliative medical care in the community is provided by GPs.
- PHN recognised that the lack of access to palliative medical care and resulting presentation of palliative patients to ED is a particularly unfortunate example of our health system not supporting 'right time, right place, right care'.
- To address these circumstances, the PHN will address GP workforce development and practice management barriers to the provision of at-home palliative care.

# **Needs Assessment Priorities\***

CQWBSCPHN Needs Assessment 2019/20-2021/22

#### **Priorities**

Needs Assessment Priority	Page Reference
Promote chronic disease prevention and management	92
Improve access to primary care services	92



# **Activity Demographics**

#### Target Population Cohort \*

Wide Bay residents in need of community-based palliative care due to life-limiting illness.

Indigenous Specific \*

No

## Indigenous Specific Comments \*

While not specifically targeting Aboriginal and Torres Strait Islander peoples, the activity maintains a commitment to prioritising the health needs of our diverse Indigenous communities across the region.

### Coverage \*

### **Whole Region**

Yes



# **Activity Consultation and Collaboration**

#### Consultation \*

- GPs.
- Private hospitals, and medical and radiation oncology services.
- Palliative Care Statewide Network.
- PEPA.
- WBHHS.
- RACFs.
- ACCHOs.
- Clinical Advisory Council.

#### Collaboration \*

- General practices and GPs
  - o Provide medical home visit service.
- Private medical and radiation oncology services
  - o Identification, referral, advisory.
- Palliative Care Statewide Network
  - o Education, advisory, mentoring.
- WBHHS
  - o Liaison with WBHHS nursing service.
- RACFs
  - o Advisory, coordination, referral.
- ACCHOs
  - o Advisory.

- Clinical Advisory Council
  - o Advisory.



# **Activity Milestone Details/Duration**

Activity Start Date \*

30 Jun 2019

Activity End Date \*

29 Jun 2022

#### **Other Relevant Milestones**

- Engage with general practice managers and GPs.
- Deliver palliative care education and placement.
- Scope a palliative care service home visit service model.



# **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: Yes

No current capacity in any other service providers in area.

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? \*

Nο

Decommissioning \*

No

# Decommissioning Details? \*

N/A

# Co-design or co-commissioning details \*

Co-designed with the parties mentioned in the consultation section of the AWP.



# **After Hours Telehealth Service**



# **Activity Metadata**

Applicable Schedule \*

After Hours Primary Health Care

**Activity Prefix \*** 

AH

**Activity Number \*** 

9

Activity Title \*

AH-P9: After Hours Telehealth Service

Existing, Modified or New Activity \*

**New Activity** 



# **Activity Priorities and Description**

Program Key Priority Area \*

**Population Health** 

#### Aim of Activity \*

The aim of the after hours telehealth service is to increase access to efficient and effective after hours primary health care via an established Australian-based telehealth provider and thus decrease the burden on the hospital emergency system.

#### **Description of Activity\***

## **Procure**

- AH-P9.1 The PHN will commission one established organisation to provide after hours telehealth consultations between the hours of 6:00-11:00pm on weeknights (Monday-Friday), Saturdays from 12:00noon until 11:00pm and Sunday 8:00am to 11:00pm in the areas of Central Queensland, Wide Bay and Sunshine Coast. The successful organisation must have existing, functional and technical capabilities to service the whole PHN region and be using an existing secure messaging platform (i.e. Medical Objects) to enable secure messaging to local GPs and pharmacies.
- The successful bidder will also be responsible for advertising the service to the general public within the PHN catchment in order to maximise uptake.

# **Needs Assessment Priorities\***

CQWBSCPHN Needs Assessment 2019/20-2021/22

#### **Priorities**

Needs Assessment Priority	Page Reference
Promote chronic disease prevention and management	92
Improve access to primary care services	92

# **Target Population Cohort \***

General population within the Central Queensland, Wide Bay and Sunshine Coast catchment.

Indigenous Specific \*

Nο

## **Indigenous Specific Comments \***

While not specifically targeting Aboriginal and Torres Strait Islander peoples, the activity maintains a commitment to prioritising the health needs of our diverse Indigenous communities across the region.

# Coverage \*

#### **Whole Region**

Yes



# **Activity Consultation and Collaboration**

#### Consultation \*

Consultation will be undertaken with:

- PHN GPLOs
- Health Systems Improvement Area Managers
- PHN Procurement and Contracts team

## Collaboration \*

Ongoing collaboration occurs with the following:

• Clinical and Community Councils (planning, advisory)



# **Activity Milestone Details/Duration**

**Activity Start Date \*** 

30 Apr 2020

Activity End Date \*

29 Jun 2021

**Service Delivery Start Date** 

June 2020

#### **Service Delivery End Date**

June 2021

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: Yes
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