



**Australian Government**

**Department of Health**

**phn**

An Australian Government Initiative

## **Activity Work Plan 2019-2021: Integrated Team Care Funding**

This Integrated Team Care Activity Work Plan template has the following parts:

1. The Activity Work Plan for the financial years 2019-20 and 2020-2021. Please complete one table for each activity to be undertaken in accordance with the Indigenous Australian's Health Programme Schedule, Item B3 – Integrated Team Care:
  - a) Care coordination and supplementary services; and
  - b) Culturally competent mainstream services.
2. The Indicative Budget for the financial years 2019-20 and 2020-21. Please attach an excel spreadsheet using the template provided to submit indicative budgets for:
  - a) Indigenous Australian's Health Programme Schedule, Item B.3 – Integrated Team Care.

***Gold Coast PHN***

***When submitting this Activity Work Plan to the Department of Health, the PHN must ensure that all internal clearances have been obtained and the Activity Work Plan has been endorsed by the CEO.***

## Overview

This Core Activity Work Plan covers the period from 1 July 2019 to 30 June 2022. To assist with PHN planning, each activity nominated in this work plan can be proposed for a period of up to 36 months. Regardless of the proposed duration for each activity, the Department of Health will require PHNs to submit updates to the Activity Work Plan on an annual basis.

### Important documents to guide planning

The following documents will assist in the preparation of your Activity Work Plan:

- Activity Work Plan guidance material;
- PHN Needs Assessment Guide;
- PHN Program Performance and Quality Framework;
- Primary Health Networks Grant Programme Guidelines;
- Integrated Team Care Program Implementation Guidelines; and
- Clause 3, Financial Provisions of the Standard Funding Agreement.

### Formatting requirements

- Submit plans in Microsoft Word format only.
- Submit budgets in Microsoft Excel format only.
- Do not change the orientation of any page in this document.
- Do not add any columns or rows to tables, or insert tables/charts within tables – use attachments if necessary.
- Delete all instructions prior to submission.

# 1. (a) Planned activities funded by the Indigenous Australians' Health Program Schedule for Integrated Team Care Funding

PHNs must use the table below to outline the activities proposed to be undertaken within the period 2019-2021. These activities will be funded under the IAHP Schedule for Integrated Team Care.

Proposed Activity 1	
ACTIVITY TITLE	ITC1 – Care coordination and supplementary services
Program Key Priority Area	Indigenous Health
Needs Assessment Priority	<p>Improve Aboriginal and Torres Strait Islander people's access to high quality, culturally appropriate health care, including care coordination services.</p> <ul style="list-style-type: none"> <li>• “Cultural competency, transport and cost affect access to services for Aboriginal and Torres Strait Islander people</li> <li>• Focus on chronic disease early identification and self-management</li> <li>• Large growth in Aboriginal and Torres Strait Islander population in Ormeau-Oxenford</li> <li>• Gaps remain in terms of life expectancy and many contributing factors</li> <li>• Higher rates of Aboriginal and Torres Strait Islander people with diabetes and COPD in the region and higher rates of smoking”</li> </ul> <p>Page 1 of Aboriginal and Torres Straight Islander Health Needs Assessment Summary (page 236 of 279 in full Needs Assessment submitted)</p>
Aim of Activity	Contribute to improving health outcomes for Aboriginal and Torres Strait Islander people with chronic health conditions through better access to care coordination, multidisciplinary care, and support for self-management.
Description of Activity	<p>IUIH has been commissioned through Brisbane North PHN to provide Care Co-ordination and Supplementary Services on behalf of Gold Coast PHN</p> <p>IUIH implement this service through the provision of a strategic team leader role within the GCPHN region, including regional guidance and strategic direction for the SEQ team and sub contract with Kalwun (Gold Coast AMS) to employ the local care co-ordinators ( 3.6 FTE) who work directly with the clients on the program.</p> <p>The model of care includes</p> <ul style="list-style-type: none"> <li>• Access to the service via referral from AMS practitioner or Mainstream GP via IUIH</li> </ul>

	<ul style="list-style-type: none"> <li>• A care-coordinator is allocated to the patient and makes direct contact to arrange and appointment, which may be a location of their choice or at one of the AMS centres.</li> <li>• The care co-ordinator will complete a holistic assessment including liaising with any other health professional involved in their care to determine their goals and needs.</li> <li>• A care plan is developed with the patients which includes building the patients understanding of their chronic disease and how to manage it The care co-ordinator sets up regular appointments with the client to monitoring the persons progress against their goals</li> <li>• Gold Coast Health run a number of chronic disease outpatient programs that specifically designed for indigenous that patients are referred too which include education and self-management training These include heart failure, diabetes, chronic obstructive pulmonary and kidney disease self-management programs</li> <li>• Local indigenous care co-ordinator has been trained by Flinders University in their self- management program and approach and at the time was the largest indigenous cohort training in the country.</li> </ul> <p>Overarching strategies include;</p> <ul style="list-style-type: none"> <li>• Increasing awareness of and maximising links between services for Aboriginal and Torres Strait Islander people, including those provided by Commonwealth and state/territory governments, AMSs, and other organisations</li> <li>• Developing and implementing strategies to improve access to mainstream primary care for Aboriginal and Torres Strait Islander people, including through outreach programmes such as the Medical Outreach – Indigenous Chronic Disease Programme (MOICDP), the Rural Health Outreach Fund (RHOF), and the Visiting Optometrists Scheme (VOS)</li> <li>• Increasing awareness and understanding of the COAG targets to close the gap in Indigenous disadvantage</li> <li>• Collaborating with local Indigenous health services and mainstream health services in a partnership approach for the delivery of primary care services</li> <li>• Implementation of the CCSS component of the ITC program</li> </ul> <table border="1" data-bbox="448 1458 1410 1608"> <thead> <tr> <th>Workforce Type</th> <th>FTE</th> <th>AMS</th> <th>MPC</th> <th>PHN</th> </tr> </thead> <tbody> <tr> <td>Indigenous Health Project Officers</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Care Coordinators</td> <td></td> <td>3.6</td> <td></td> <td></td> </tr> <tr> <td>Outreach Workers</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <p>*AMS refers to Indigenous Health Services and Aboriginal Community Controlled Health Services</p>	Workforce Type	FTE	AMS	MPC	PHN	Indigenous Health Project Officers					Care Coordinators		3.6			Outreach Workers				
Workforce Type	FTE	AMS	MPC	PHN																	
Indigenous Health Project Officers																					
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Outreach Workers																					
Target population cohort	Aboriginal and Torres Strait Islander people with a diagnosed chronic condition																				
Indigenous specific	Yes																				
Coverage	Gold Coast PHN Region (Gold Coast SA4)																				
Consultation	Strong working partnership will be maintained between Institute of Urban Indigenous Health (IUIH), GCPHN, Kalwun Development Corporation (Kalwun Health, the only local Aboriginal Medical Service), Gold Coast Hospital and																				

	Health Service (GCH) and other providers of A&TSI services including mainstream providers within the Gold Coast region.		
Collaboration	<p>GCPHN works in collaboration with the following stakeholders to complete and inform the needs assessment and determine locally appropriate and integrated service solutions:</p> <ul style="list-style-type: none"> <li>• the Karulbo Partnership (a local regular meeting with representation from organisations working in relation to A&amp;TSI health and wellbeing with around 30 attendees at meetings)</li> <li>• the A&amp;TSI community</li> <li>• Kalwun (AMS),</li> <li>• Institute of Urban Indigenous Health (IUIH)</li> <li>• Gold Coast Health – Aboriginal &amp; Torres Strait Islander Services</li> <li>• other health and social service providers.</li> </ul> <p>South East Queensland PHNs collaborated to jointly commission the CCSS service delivery component to IUIH (through a single contract managed by Brisbane North PHN) with a renewed contract in place from 1 July 2019, this enables pooling of supplementary service funds.</p> <p>Quarterly meeting is held between all South East Queensland PHN and IUIH to review process across ITC.</p>		
Activity milestone details	Activity is valid for full duration of AWP		
Commissioning method and approach to market	<p>1. Please identify your intended procurement approach for commissioning services under this activity:</p> <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? No</p>		
Decommissioning	Outline any decommissioning that this activity may result in and potential implications.		
<b>Funding Source</b>	<b>2019-2020</b>	<b>2020-2021</b>	<b>Total</b>

Planned Commonwealth Expenditure – Integrated Team Care Funding			
Funding from other sources			
Funding from other sources	If applicable, name other organisations contributing funding to the activity (ie. state/territory government, Local Hospital Network, non-profit organisation).		

Proposed Activity 2	
ACTIVITY TITLE	ITC2 – Culturally competent mainstream services
Program Key Priority Area	Indigenous Health
Needs Assessment Priority	Improve Aboriginal and Torres Strait Islander people’s access to high quality, culturally appropriate health care, including care coordination services.
Aim of Activity	Improve access to culturally appropriate mainstream primary care services (including but not limited to general practice, allied health, and specialists) for Aboriginal and Torres Strait Islander people
Description of Activity	<ul style="list-style-type: none"> <li>• Operational team leader within the GCPHN region, including guidance and direction for the local team</li> <li>• 2FTE positions <ul style="list-style-type: none"> <li>○ IHPO mainstream</li> <li>○ Outreach worker</li> </ul> </li> <li>• Increasing awareness of and maximising links between services for Aboriginal and Torres Strait Islander people, including those provided by Commonwealth and state/territory governments, AMSs, and other organisations, including developing and implementing strategies to improve access to mainstream primary care for Aboriginal and Torres Strait Islander people</li> <li>• Developing and implementing strategies to improve the capacity of mainstream primary care providers to deliver culturally appropriate primary care services to Aboriginal and Torres Strait Islander people, including: <ul style="list-style-type: none"> <li>○ self-identification</li> <li>○ uptake of Aboriginal and Torres Strait Islander specific MBS items including item 715 - Health Assessments for Aboriginal and Torres Strait Islander People, care planning and follow up items</li> </ul> </li> <li>• Improvement plans for the practices developed that target suggested activities and interventions to bring the clinical indicators within optimal range</li> <li>• Collaborating with local Indigenous health services and mainstream health services in a partnership approach for the delivery of primary care services.</li> </ul> <p>Results</p> <p>Deliverables required align with the PHN Performance Framework and include but not limited to;</p> <p>Improving Access</p> <ul style="list-style-type: none"> <li>• Increase of PIP IHI General Practices in the Gold Coast PHN region.</li> <li>• Maintain or Increase number of 715 Health Checks</li> <li>• Deliver (Gold Coast PHN region) at least four large group Cultural Awareness training sessions per year, which will have at least 40 individuals complete the course.</li> <li>• Deliver one Yarning circles each year to collect patient feedback. One in each PHN region</li> </ul>

	Workforce Type	FTE	AMS	MPC	PHN
	Indigenous Health Project Officers		1		
	Outreach Workers		1		
	Consultants				
	Other: specify				
	*AMS refers to Indigenous Health Services and Aboriginal Community Controlled Health Services				
Target population cohort	Aboriginal and Torres Strait Islander people with a diagnosed chronic condition				
Indigenous specific	Yes				
Coverage	Whole PHN region				
Consultation	Strong working partnership will be maintained between Institute of Urban Indigenous Health (IUIH), GCPHN, Kalwun Development Corporation (Kalwun Health, the only local Aboriginal Medical Service), Gold Coast Hospital and Health Service (GCH) and other providers of A&TSI services including mainstream providers within the Gold Coast region.				
Collaboration	<p>GCPHN works in collaboration with the following stakeholders to complete and inform the needs assessment and determine locally appropriate and integrated service solutions:</p> <ul style="list-style-type: none"> <li>• the Karulbo Partnership (a local regular meeting with representation from organisations working in relation to A&amp;TSI health and wellbeing with around 30 attendees at meetings)</li> <li>• the A&amp;TSI community</li> <li>• Kalwun (AMS),</li> <li>• Institute of Urban Indigenous Health (IUIH)</li> <li>• Gold Coast Health – Aboriginal &amp; Torres Strait Islander Services</li> <li>• other health and social service providers.</li> </ul> <p>South East Queensland PHNs collaborated to jointly commission the CCSS service delivery component to IUIH (through a single contract managed by Brisbane North PHN) with a renewed contract in place from 1 July 2019, this enables pooling of supplementary service funds.</p> <p>Quarterly meeting is held between all South East Queensland PHN and IUIH to review process across ITC.</p>				
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