# Australian Capital Territory - PHN Pilots and Targeted Programs 2023/24 - 2027/28 Activity Summary View



# PP&TP-GCPC - 2 - Greater Choice for At Home Palliative Care in the ACT - Operational



## **Activity Metadata**

Applicable Schedule \*

**PHN Pilots and Targeted Programs** 

**Activity Prefix \*** 

PP&TP-GCPC

**Activity Number \*** 

2

**Activity Title \*** 

Greater Choice for At Home Palliative Care in the ACT - Operational

Existing, Modified or New Activity \*

**New Activity** 



## **Activity Priorities and Description**

Program Key Priority Area \*

**Population Health** 

**Other Program Key Priority Area Description** 

Aim of Activity \*

To fund operational expenditure associated with activity

Description of Activity \*

To fund operational expenditure associated with activity

**Needs Assessment Priorities \*** 

**Needs Assessment** 

Capital Health Network (ACT PHN) 2021 to 2024 Needs Assessment

#### **Priorities**

Priority	Page reference
Care Across the Continuum	21



## **Activity Demographics**

**Target Population Cohort** 

In Scope AOD Treatment Type \*

Indigenous Specific \*

No

**Indigenous Specific Comments** 

Coverage

**Whole Region** 

Yes



## **Activity Consultation and Collaboration**

Consultation

Collaboration



## **Activity Milestone Details/Duration**

**Activity Start Date** 

01/01/2022

**Activity End Date** 

28/06/2025

Service Delivery Start Date
Service Delivery End Date
Other Relevant Milestones
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: No Open Tender: No Expression Of Interest (EOI): No Other Approach (please provide details): No
Is this activity being co-designed?
Is this activity the result of a previous co-design process?
Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?
Has this activity previously been co-commissioned or joint-commissioned?
Decommissioning
Decommissioning details?
Co-design or co-commissioning comments



**Activity Status** 



## PP&TP-GP - 1 - Strengthening Medicare Grant Program



## **Activity Metadata**

Applicable Schedule \*

**PHN Pilots and Targeted Programs** 

**Activity Prefix \*** 

PP&TP-GP

**Activity Number \*** 

1

**Activity Title \*** 

Strengthening Medicare Grant Program

Existing, Modified or New Activity \*

Existing



## **Activity Priorities and Description**

Program Key Priority Area \*

Workforce

Other Program Key Priority Area Description

#### Aim of Activity \*

The GP Grants program will provide one-off grants between \$25,000 to \$50,000 (based on practice size) to support general practices to expand patient access and provide better, safe and accessible quality primary care.

## **Description of Activity \***

The grants will be available to make investments in innovation, training, equipment, and minor capital works in one or more of the three investment streams listed below:

a. enhanced digital capacity to fast track the benefits of connected health readiness it to meet future standards; b. upgrade infection prevention and control arrangements- to ensure infectious respiratory disease (e.g. COVID-19, influenza) patients can be safely seen face to face and/or c. to maintain accreditation against the Royal Australian College of General Practitioners standards for general practices under the general practice accreditation scheme to promote quality and safety in general practice

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

#### **Needs Assessment**

Capital Health Network (ACT PHN) 2021 to 2024 Needs Assessment

#### **Priorities**

Priority	Page reference
Workforce sustainability	14



## **Activity Demographics**

**Target Population Cohort** 

In Scope AOD Treatment Type \*

Indigenous Specific \*

No

**Indigenous Specific Comments** 

## Coverage

**Whole Region** 

Yes



## **Activity Consultation and Collaboration**

Consultation

Collaboration



## **Activity Milestone Details/Duration**

**Activity Start Date** 

28/02/2023

**Activity End Date** 

29/12/2024

**Service Delivery Start Date** 

## **Service Delivery End Date**

#### **Other Relevant Milestones**



## **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:** No **Open Tender:** No

Expression Of Interest (EOI): Yes

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?

Co-design or co-commissioning comments



**Activity Status** 



# PP&TP-GP-Ad - 1 - Administration of the Strengthening Medicare Grants Program



## **Activity Metadata**

Applicable Schedule \*

**PHN Pilots and Targeted Programs** 

**Activity Prefix \*** 

PP&TP-GP-Ad

**Activity Number \*** 

1

**Activity Title \*** 

Administration of the Strengthening Medicare Grants Program

Existing, Modified or New Activity \*

Existing



## **Activity Priorities and Description**

Program Key Priority Area \*

Workforce

Other Program Key Priority Area Description

#### Aim of Activity \*

Administer the Strengthening Medicare GP Grants Program to support general practices to expand patient access and provide better, safe and accessible quality primary care.

#### Description of Activity \*

**ACT PHN will** 

- -promote and implement a grants process that supports general practices to participate
- -receive and assess applications from general practices i
- using templates provided by the Department, prepare and execute simple grant agreements for participating general practices
- arrange payment of grant funds to successful general practice applicants
- manage enquiries from general practice applicants/grant recipients in your PHN region,
- record key monitoring metrics
- advise and support the Department on any compliance issues and support the Department with information and insights.
- obtain end-of-program financial acquittals, financial declarations, and self-reported outcomes about the use of grant funding .

• contribute to and support the Department's evaluation activities to assess the performance and success of the GP Grants Program in your PHN region.

## **Needs Assessment Priorities \***

## **Needs Assessment**

Capital Health Network (ACT PHN) 2021 to 2024 Needs Assessment

#### **Priorities**

Priority	Page reference
Workforce sustainability	14



## **Activity Demographics**

## **Target Population Cohort**

In Scope AOD Treatment Type \*

Indigenous Specific \*

No

**Indigenous Specific Comments** 

## Coverage

**Whole Region** 

Yes



## **Activity Consultation and Collaboration**

#### Consultation

## Collaboration



**Activity Milestone Details/Duration** 

Activity Start Date
28/02/2023
Activity End Date
30/12/2024
Service Delivery Start Date
Service Delivery End Date
Other Relevant Milestones
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: No Open Tender: No Expression Of Interest (EOI): No
Other Approach (please provide details): No
Is this activity being co-designed?
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Is this activity the result of a previous co-design process?
Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?
Has this activity previously been co-commissioned or joint-commissioned?
, p, p, p
Decommissioning
Decommissioning details?
Co-design or co-commissioning comments



**Activity Status** 



## PP&TP-EPP - 1 - ACT Endometriosis and Pelvic Plain Clinic



## **Activity Metadata**

Applicable Schedule \*

**PHN Pilots and Targeted Programs** 

**Activity Prefix \*** 

PP&TP-EPP

**Activity Number \*** 

1

**Activity Title \*** 

**ACT Endometriosis and Pelvic Plain Clinic** 

Existing, Modified or New Activity \*

Existing



## **Activity Priorities and Description**

#### Program Key Priority Area \*

**Population Health** 

## Other Program Key Priority Area Description

#### Aim of Activity \*

Enable the delivery of and improve access to endometriosis and pelvic pain services in primary care setting.

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

The key program objectives are to support clinics to provide multi-disciplinary care with a focus on improving diagnostic delay and to promote early access to intervention, care and treatment options for endometriosis and pelvic pain.

Endometriosis and Pelvic Pain program will provide:

- a. improved access for patients to diagnostic, treatment and referral services for endometriosis and pelvic pain; including:
- directly benefiting patients from rural and regional areas
- provision of enhanced support to priority populations
- b. provision of access to new information, support resources, care pathways and networks
- c. provision of an appropriately trained workforce with expertise in endometriosis and pelvic pain
- d. increased access to support services, either through a nurse navigator or referral pathway
- B. Enhanced Endometriosis and Pelvic Pain services

The funding may be used for wide range of enhanced services for treatment and management of endometriosis and pelvic pain, based on the needs of the community including but not limited to:

- Recruitment of specialist staff (allied health, nurse practitioners)
- Expenditure on capital costs

- Associated equipment purchase
- Training and development qualifications

## **Needs Assessment Priorities \***

## **Needs Assessment**

Capital Health Network (ACT PHN) 2021 to 2024 Needs Assessment

#### **Priorities**

Priority	Page reference
Care Across the Continuum	21
Chronic Conditions	41



## **Activity Demographics**

**Target Population Cohort** 

In Scope AOD Treatment Type \*

Indigenous Specific \*

No

**Indigenous Specific Comments** 

Coverage

**Whole Region** 

Yes



## **Activity Consultation and Collaboration**

## Consultation

## Collaboration



# **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
Please identify your intended procurement approach for commissioning services under this activity:
Not Yet Known: No Continuing Service Provider / Contract Extension: No Direct Engagement: No Open Tender: No Expression Of Interest (EOI): No
Other Approach (please provide details): No
Is this activity being co-designed?
Is this activity the result of a previous co-design process?
Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?
Has this activity previously been co-commissioned or joint-commissioned?
Decommissioning
Decommissioning details?
Co-design or co-commissioning comments



## **Activity Status**



# PP&TP-EPP-Ad - 1 - Administration of the ACT Endometriosis and Pelvic Pain Clinic



## **Activity Metadata**

Applicable Schedule \*

**PHN Pilots and Targeted Programs** 

**Activity Prefix \*** 

PP&TP-EPP-Ad

**Activity Number \*** 

1

**Activity Title \*** 

Administration of the ACT Endometriosis and Pelvic Pain Clinic

Existing, Modified or New Activity \*

Existing



## **Activity Priorities and Description**

#### Program Key Priority Area \*

**Population Health** 

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

#### Aim of Activity \*

The aim of the program is to support the establishment of the ACT Endometriosis and Pelvic Pain Clinic.

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

ACT PHN will establish, support and monitor the Endometriosis and Pelvic Pain Clinic through:

- -Identification of a suitable provider
- -Establish a service agreement with a suitable provider
- -Support the use funding to provide enhanced services

for the treatment and management of endometriosis and pelvic pain, based on the needs

of the community, including but not limited to recruitment of specialised staff, including nurse practitioner and allied health professionals, fit-out costs for pelvic physiotherapy areas, associated equipment; and resources, training and development. -Collect and monitor service data.

## **Needs Assessment Priorities\***

#### **Needs Assessment**

Capital Health Network (ACT PHN) 2021 to 2024 Needs Assessment

#### **Priorities**

Priority	Page reference
Care Across the Continuum	21
Chronic Conditions	41



## **Activity Demographics**

**Target Population Cohort** 

In Scope AOD Treatment Type \*

Indigenous Specific \*

No

**Indigenous Specific Comments** 

Coverage

**Whole Region** 

Yes



## **Activity Consultation and Collaboration**

Consultation

Collaboration



## **Activity Milestone Details/Duration**

**Activity Start Date** 

28/02/2023

**Activity End Date** 

29/06/2026

Service Delivery Start Date
Service Delivery End Date
Other Relevant Milestones
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: No Open Tender: No Expression Of Interest (EOI): No Other Approach (please provide details): No
Is this activity being co-designed?
Is this activity the result of a previous co-design process?
Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?
Has this activity previously been co-commissioned or joint-commissioned?
Decommissioning
Decommissioning details?
Co-design or co-commissioning comments



**Activity Status** 



## PP&TP-DVP - 1 - DVP Operational



## **Activity Metadata**

Applicable Schedule \*

**PHN Pilots and Targeted Programs** 

**Activity Prefix \*** 

PP&TP-DVP

**Activity Number \*** 

1

**Activity Title \*** 

**DVP** Operational

Existing, Modified or New Activity \*

Existing



## **Activity Priorities and Description**

Program Key Priority Area \*

Other (please provide details)

**Other Program Key Priority Area Description** 

At-risk populations

Aim of Activity \*

Delivery of the Family, Domestic and Sexual Violence Pilot

Description of Activity \*

Operational aspects of the 3 streams:

-family domestic violence

-sexual violence

-child sexual violence

Including but not limited to recruitment of program staff, stakeholder engagement, program localisation and co-design, administration costs, IT.

Needs Assessment Priorities \*

#### **Needs Assessment**

Capital Health Network (ACT PHN) 2021 to 2024 Needs Assessment

**Priorities** 

Priority	Page reference
People at Risk of Poor Health Outcomes	75



## **Activity Demographics**

**Target Population Cohort** 

In Scope AOD Treatment Type \*

Indigenous Specific \*

No

**Indigenous Specific Comments** 

Coverage

**Whole Region** 

Yes



## **Activity Consultation and Collaboration**

Consultation

Collaboration



## **Activity Milestone Details/Duration**

**Activity Start Date** 

30/06/2023

**Activity End Date** 

29/06/2026

**Service Delivery Start Date** 

Service Delivery End Date
Other Relevant Milestones
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: No Open Tender: No Expression Of Interest (EOI): No Other Approach (please provide details): No
Is this activity being co-designed?
Is this activity the result of a previous co-design process?
Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?
Has this activity previously been co-commissioned or joint-commissioned?
Decommissioning
Decommissioning details?
Co-design or co-commissioning comments



**Activity Status** 



# PP&TP-DVP - 2 - Strengthening Primary Care Sector Response to Domestic and Family Violence



## **Activity Metadata**

Applicable Schedule \*

**PHN Pilots and Targeted Programs** 

**Activity Prefix \*** 

PP&TP-DVP

**Activity Number \*** 

2

**Activity Title \*** 

Strengthening Primary Care Sector Response to Domestic and Family Violence

Existing, Modified or New Activity \*

Existing



## **Activity Priorities and Description**

Program Key Priority Area \*

Other (please provide details)

Other Program Key Priority Area Description

At-risk populations

#### Aim of Activity \*

This activity aims to: 1. Strengthen the primary care sector's capacity and capability to respond, refer and better support victim-survivors of domestic and family violence (DFV) in the ACT region, by: a) improving primary care sectors understanding and awarness of their role in addressing DFV; b) improving primary care staff's readiness and ability to recognise DFV, through whole-of-practice training, education and capacity-building activities. 2. Improve system integration between primary care services and specialist DFV, support services in the ACT region, by: a) improving DFV service provider's understanding of primary care sector's role in supporting victim-survivors of DFV. b) improving partnerships and trust between primary care and DFV sector c) improving integration of primary care system response with ACT Government's DFV initiatives and reforms d) increasing the number and quality of referrals from primary care to specialist DFV support services; and e) improving service navigation for victim-survivors of DFV, through commissioning of link workers within support services.

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

The three core activities within CHN's model of support for strengthening the primary care sector response to domestic and family violence (DFV) are: 1. Workforce capacity building activities to support primary care providers in the early identification and intervention of DFV and coordinated referrals to support services: CHN will develop localised training resources in consultation with key stakeholders from the DFV and primary care sector to ensure a place-based approach.

CHN will commission a training provider to deliver formal accredited DFV training for whole-of-practice staff (general practitioners, practice nurses, allied health professionals, and other primary care staff, including non-clinical staff) in the ACT region.

CHN will develop organisational supports and resources for general practice and other primary care providers. 2. System integration measures to improve health service navigation for victim-survivors of DFV and increase collaboration between primary care and DFV sector: CHN will commission link workers within the community sector to enable collaboration and integration between primary care and specialist DFV support services. Their primary function will include: Supporting capacity building activities

Serving as a one-point-of-referral from primary care to DFV services for victim-survivors

Providing ongoing engagement, secondary consultations, general/patient-specific advice and informal training to the primary care staff.

Supporting DFV services to close the referral loop with primary care.

Providing case coordination, risk assessment, safety planning and connection to appropriate DFV support services

CHN will establish Communities of Practice and networking events for primary care and DFV sector to increase opportunities for collaboration across the sector. Supporting capacity building activities serving as a one-point-of-referral from primary care to DFV services for victim-survivors

Providing ongoing engagement, secondary consultations, general/patient-specific advice and informal training to the primary care staff.

Supporting DFV services to close the referral loop with primary care.

Providing case coordination, risk assessment, safety planning and connection to appropriate DFV support services CHN will establish Communities of Practice and networking events for primary care and DFV sector to increase opportunities for collaboration across the sector. 3. Locality integration measures to improve linkages between DFV responses at primary and secondary care level: CHN will ensure that local context is considered during the planning, establishment and implementation of the model, and advocate for primary care to be integrated into ACT Government's DFV initiatives. CHN will ensure that local context is considered during the planning, establishment and implementation of the model, and advocate for primary care to be integrated into ACT Government's DFV initiatives.

#### Needs Assessment Priorities \*

#### **Needs Assessment**

Capital Health Network (ACT PHN) 2021 to 2024 Needs Assessment

#### **Priorities**

Priority	Page reference
People at Risk of Poor Health Outcomes	75



## **Activity Demographics**

#### **Target Population Cohort**

In Scope AOD Treatment Type \*

Indigenous Specific \*

No

**Indigenous Specific Comments** 

#### Coverage

**Whole Region** 

Yes



## **Activity Consultation and Collaboration**

Consultation

Collaboration



## **Activity Milestone Details/Duration**

**Activity Start Date** 

30/06/2023

**Activity End Date** 

29/06/2026

**Service Delivery Start Date** 

**Service Delivery End Date** 

**Other Relevant Milestones** 



## **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:** 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?
Co-design or co-commissioning comments



## **Activity Status**



# PP&TP-DVP - 3 - Strengthening Primary Care Sector Response to Sexual Violence



## **Activity Metadata**

Applicable Schedule \*

**PHN Pilots and Targeted Programs** 

**Activity Prefix \*** 

PP&TP-DVP

**Activity Number \*** 

3

**Activity Title \*** 

Strengthening Primary Care Sector Response to Sexual Violence

Existing, Modified or New Activity \*

Existing



## **Activity Priorities and Description**

#### Program Key Priority Area \*

Other (please provide details)

## Other Program Key Priority Area Description

At-risk populations

#### Aim of Activity \*

This activity aims to: 1. Strengthen the primary care sector's capacity and capability to respond, refer and better support victim-survivors of sexual violence (SV) in the ACT region, by: improving primary care sector's understanding and awareness of their role in addressing SV; and improving primary care staff's readiness and ability to recognise SV, through whole-of-practice training, education and capacity-building activities.

Improve system integration between primary care services and specialist SV support services in the ACT region, by:

improving specialist SV service provider's understanding of primary care sector's role in supporting victim-survivors of SV.

improving partnerships and trust between primary care and SV sector

improving integration of primary care system response with ACT Government's SV initiatives and reforms

increasing the number and quality of referrals from primary care to specialist SV support services; and

improving service navigation for victim-survivors of SV, through commissioning of link workers within support services.

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

The three core activities within CHN's model of support for strengthening the primary care sector response to sexual violence (SV) are: 1. Workforce capacity building activities to support primary care providers in the early identification and intervention of SV and coordinated referrals to support services: CHN will develop localised training resources in consultation with key stakeholders from the SV and primary care sector to ensure a place-based approach. CHN will commission a training provider to deliver formal accredited SV training for whole-of-practice staff (general practitioners, practice nurses, allied health professionals, and other primary care staff, including non-clinical staff) in the ACT region. CHN will develop organisational supports and resources for general practice and other primary care providers. 2. System integration measures to improve health service navigation for victimsurvivors of SV and increase collaboration between primary care and SV sector: CHN will commission link workers within the community sector to enable collaboration and integration between primary care and specialist SV support services. Their primary function will include: Supporting capacity building activities Serving as a one-point-of-referral from primary care to SV services for victim-survivors providing ongoing engagement, secondary consultations, general/patient-specific advice and informal training to the primary care staff. Supporting SV services to close the referral loop with primary care. Providing case coordination, risk assessment, safety planning and connection to appropriate SV support services. CHN will establish Communities of Practice and networking events for primary care and SV sector to increase opportunities for collaboration across the sector. 3. Locality integration measures to improve linkages between SV responses at primary and secondary care level: CHN will ensure that local context is considered during the planning, establishment and implementation of the model, and advocate for primary care to be integrated into ACT Government's SV initiatives.

#### Needs Assessment Priorities \*

#### **Needs Assessment**

Capital Health Network (ACT PHN) 2021 to 2024 Needs Assessment

#### **Priorities**

Priority	Page reference
People at Risk of Poor Health Outcomes	75



## **Activity Demographics**

#### **Target Population Cohort**

In Scope AOD Treatment Type \*

Indigenous Specific \*

No

**Indigenous Specific Comments** 

## Coverage

**Whole Region** 

Yes



## **Activity Consultation and Collaboration**

Consultation

Collaboration



## **Activity Milestone Details/Duration**

**Activity Start Date** 

30/06/2023

**Activity End Date** 

29/06/2026

**Service Delivery Start Date** 

**Service Delivery End Date** 

**Other Relevant Milestones** 



## **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:** 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?

Has this activity previously been co-commissioned or joint-commissioned?
No
Decommissioning
No
Decommissioning details?
Co-design or co-commissioning comments



## **Activity Status**



# PP&TP-DVP - 4 - Strengthening Primary Care Sector Response to Child Sexual Abuse



## **Activity Metadata**

Applicable Schedule \*

**PHN Pilots and Targeted Programs** 

**Activity Prefix \*** 

PP&TP-DVP

**Activity Number \*** 

4

**Activity Title \*** 

Strengthening Primary Care Sector Response to Child Sexual Abuse

Existing, Modified or New Activity \*

Existing



## **Activity Priorities and Description**

Program Key Priority Area \*

Other (please provide details)

Other Program Key Priority Area Description

At-risk populations

Aim of Activity \*

This activity aims to:

Strengthen the primary care sector's capacity and capability to respond, refer and better support victim-survivors of child sexual abuse (CSA) in the ACT region, by:

- -improving primary care sector's understanding and awareness of their role in addressing CSA; and
- -improving primary care staff's readiness and ability to recognise CSA, through whole-of-practice training, education and capacity-building activities.

Improve system integration between primary care services and specialist CSA support services in the ACT region, by:

- -improving CSA service provider's understanding of primary care sector's role in supporting victim-survivors of CSA.
- -improving partnerships and trust between primary care sector and CSA support services
- -improving integration of primary care system response with ACT Government's CSA initiatives and reforms
- -increasing the number and quality of referrals from primary care to specialist CSA support services; and
- -improving service navigation for victim-survivors of CSA, through commissioning of link workers within support services.

**Description of Activity \*** 

The three core activities within CHN's model of support for strengthening the primary care sector response to child sexual abuse (CSA) are: 1. Workforce capacity building activities to support primary care providers in the early identification and intervention of CSA and coordinated referrals to support services: CHN will develop localised training resources in consultation with key stakeholders from the CSA and primary care sector to ensure a place-based approach.

CHN will commission a training provider to deliver formal accredited CSA training for whole-of-practice staff (general practitioners, practice nurses, allied health professionals, and other primary care staff, including non-clinical staff) in the ACT region.

CHN will develop organisational supports and resources for general practice and other primary care providers. 2. System integration measures to improve health service navigation for victim-survivors of CSA and increase collaboration between primary care and CSA sector: CHN will commission link workers within the community sector to enable collaboration and integration between primary care and specialist CSA support services. Their primary function will include: Supporting capacity building

Serving as a one-point-of-referral from primary care to CSA services for victim-survivors

Providing ongoing engagement, secondary consultations, general/patient-specific advice and informal training to the primary care staff.

Supporting CSA services to close the referral loop with primary care.

Providing case coordination, risk assessment, safety planning and connection to appropriate CSA support services CHN will establish Communities of Practice and networking events for primary care and CSA sector to increase opportunities for collaboration across the sector. Supporting capacity building activities serving as a one-point-of-referral from primary care to CSA services for victim-survivors

Providing ongoing engagement, secondary consultations, general/patient-specific advice and informal training to the primary care staff.

Supporting CSA services to close the referral loop with primary care.

Providing case coordination, risk assessment, safety planning and connection to appropriate DFV support services CHN will establish Communities of Practice and networking events for primary care and DFV sector to increase opportunities for collaboration across the sector. 3. Locality integration measures to improve linkages between DFV responses at primary and secondary care level: CHN will ensure that local context is considered during the planning, establishment and implementation of the model, and advocate for primary care to be integrated into ACT Government's DFV initiatives. CHN will ensure that local context is considered during the planning, establishment and implementation of the model, and advocate for primary care to be integrated into ACT Government's DFV initiatives.

#### Needs Assessment Priorities \*

#### **Needs Assessment**

Capital Health Network (ACT PHN) 2021 to 2024 Needs Assessment

#### **Priorities**

Priority	Page reference
People at Risk of Poor Health Outcomes	75



## **Activity Demographics**

#### **Target Population Cohort**

In Scope AOD Treatment Type \*

Indigenous Specific \*

No

#### **Indigenous Specific Comments**

Coverage **Whole Region** Yes **Activity Consultation and Collaboration** Consultation Collaboration **Activity Milestone Details/Duration Activity Start Date** 30/06/2023 **Activity End Date** 29/06/2026 **Service Delivery Start Date Service Delivery End Date Other Relevant Milestones** 



## **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:** 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?
Co-design or co-commissioning comments



## **Activity Status**



# PP&TP-GCPC - 1 - Greater Choice for At Home Palliative Care in the ACT



## **Activity Metadata**

Applicable Schedule \*

**PHN Pilots and Targeted Programs** 

Activity Prefix \*

PP&TP-GCPC

**Activity Number \*** 

1

**Activity Title \*** 

Greater Choice for At Home Palliative Care in the ACT

Existing, Modified or New Activity \*

Existing



## **Activity Priorities and Description**

#### Program Key Priority Area \*

Other (please provide details)

#### Other Program Key Priority Area Description

Palliative care

#### Aim of Activity \*

Increase awareness, facilitate and coordinate access to palliative and end of life care in the home as well as improve integration across services.

## **Description of Activity \***

Engaging the sector to co-design strategies to improve linkages, coordinate services and improve access to palliative care in primary care and the community. • Continuing to engage in key palliative care working groups in the ACT including:

- o the Territory Wide Palliative Care Operational Group and
- o Palliative Care Governance Group
- o Palliative Care Research Group
- o And other related committees and working groups

Specific focus areas will include:

• Develop and operate the PCOC project to drive quality improvement by embedding routine outcome measurement into clinical processes at selected general practices • Primary care workforce eduction/training on palliative care and end of life care.

Engaging the sector to co-design strategies to improve linkages, coordinate services and improve access to palliative care in primary care and the community.

• Engage in key palliative care working groups in the ACT including:

o Palliative Care Operations Group including commencing chairing the committee

- o ACT wide Palliative Care Governance Group
- o Palliative Care Research Group
- o Other related committees and working groups

Specific focus areas will include:

- Co-design, finalise and commence the Palliative Care in General Practice Quality Improvement Activity (After Death Audit)
- Primary care workforce education/training on palliative care and end of life care providing face to face and online learning opportunities
- Increase awareness and general interest of palliative care within primary care through stakeholder engagement, consultatons and collaboration. Further promote these activities via CHN newsletters, social media, website updates and ACT healthcare forums
- Collaboration and mentoring of Community Nursing Palliative Care activities
- ACT Breathlessness Intervention Service pilot to improve quality of life of patients with chronic illness suffering chronic breathlessness and decrease hospital presentations
- Review of after-hours palliative needs within the ACT in collaboration with key stakeholders

All of these activities will be underpinned by consideration for priority population groups, cultural safety, and inclusion of patients, family and support networks.

ACT PHN will contribute to the national evaluation of the GCfaHPC including quantitative and qualitative data collection and outcome measurements, including baseline data.

## **Needs Assessment Priorities \***

#### **Needs Assessment**

Capital Health Network (ACT PHN) 2021 to 2024 Needs Assessment

#### **Priorities**

Priority	Page reference
Aged Care	66
Care Across the Continuum	21
Chronic Conditions	41



## **Activity Demographics**

#### **Target Population Cohort**

In Scope AOD Treatment Type \*

Indigenous Specific \*

No

**Indigenous Specific Comments** 

## Coverage

**Whole Region** 

Yes



## **Activity Consultation and Collaboration**

Consultation

Collaboration



## **Activity Milestone Details/Duration**

**Activity Start Date** 

02/01/2022

**Activity End Date** 

29/06/2025

**Service Delivery Start Date** 

**Service Delivery End Date** 

**Other Relevant Milestones** 



## **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:** No **Open Tender:** Yes

**Expression Of Interest (EOI):** Yes

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?
Co-design or co-commissioning comments



**Activity Status**