ACI CCAP Program
New Directions Workshop
14 March 2017

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Aboriginal Health Program Coordinator (SWSPHN)
A strong, responsive and sustainable primary health care system is one that improves health care for all Australians, especially those who currently experience inequitable health outcomes, by keeping people healthy, preventing illness, reducing the need for hospital services and improving management of chronic conditions.

Ref. Health Ministers, through the Standing Council on Health (April 2013)
Two Key Objectives:

1. Increase the efficiency and effectiveness of health services for patients, particularly those at risk of poor health outcomes; and
2. Improve coordination of care to ensure patients receive the right care in the right place at the right time

To achieve their objectives, PHNs will

1. be “aligned” to LHDs and will improve frontline service delivery by working to integrate primary, community and secondary sectors for the benefit of patients.
2. actively engage general practitioners, health professionals and the community through local level structures to identify and respond to local health priorities, establish care pathways, and monitor the quality and performance of services.
3. work collaboratively with LHDs to reduce hospital admissions and re-admissions”

Ref. 2014/15 Dept. of Health Portfolio Budget Statement – Outcome Five – Primary Health Care
PHN Characteristics

- Fewer in number than Medicare Locals: economies of scale
- Boundary alignment with LHDs (or clusters of LHDs)
- Clinically focused care integrators: primary, community and acute care
- Clinical Councils: greater role for GPs
- Community Advisory Committees: community voice
- Regional purchasers of services, not providers
- Outcomes focused performance expectations
- Maximising the investment in frontline services


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PHN Priorities

1. Aboriginal and Torres Strait Islander Health
2. Aged Care
3. Digital Health
4. Health Workforce
5. Mental Health
6. Population Health

Each PHN has their own Board, a Strategic Plan, with their own vision, mission, service standard aims and goals.

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PHN Commissioning Role

National Commissioning Principles and Framework

- **Understand** community needs
- **Engage** service providers
- **Focus on outcomes**
- Adopt a **whole of system** approach
- **Empower** providers to deliver outcomes
- **Co–design solutions**
- Invest in provider & consumer **capacity**
- Ensure **transparent and fair** procurement
- **Manage through relationships**
- Develop **collaborative governance**, shared decision making and collective performance management.
- **Ensure efficiency** and value for money
- **Monitor and Evaluate**

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## Primary Health Networks in NSW

<table>
<thead>
<tr>
<th>Primary Health Network</th>
<th>Local Health Districts</th>
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<tbody>
<tr>
<td>North Coast NSW</td>
<td>Northern NSW &amp; Mid North Coast</td>
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<tr>
<td>Hunter, New England &amp; Central Coast</td>
<td>Hunter New England &amp; Central Coast</td>
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<td>Sydney North</td>
<td>Northern Sydney</td>
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<td>Central &amp; Eastern Sydney</td>
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<td>Nepean Blue Mountains</td>
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<td>South Eastern NSW</td>
<td>Illawarra Shoalhaven &amp; Southern NSW</td>
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<tr>
<td>Murrumbidgee</td>
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<tr>
<td>Western NSW</td>
<td>Western NSW &amp; Far West NSW</td>
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NSW (& ACT) PHN Structure

NSW/ACT PHN CEO Forum
*CEOs from the 11 PHNs*

NSW/ACT PHN Council
*CEOs & Chairs from the 11 PHNs*

NSW/ACT PHN Coordination

**PRIMARY HEALTH NETWORKS**

ACT PHN (Capital Health Network) • Central and Eastern Sydney PHN • Hunter New England Central Coast PHN • Murrumbidgee PHN • Nepean Blue Mountains PHN • North Coast NSW PHN • Northern Sydney PHN (Sydney North Primary Health Network) • South Eastern NSW PHN (Coordinare) • South Western Sydney PHN • Western NSW PHN (Western Health Alliance) • Western Sydney PHN (Wentwest)

**INTERNAL PHN NETWORKS**

Aboriginal Health Network • Alcohol & Other Drugs Network • Commissioning Network • Corporate Operations Network • Mental Health Network • Primary Health Care Transformation/Integration Network • Population Health, Data and Information Network •
PHN CCSS to ITC

CCSS (Care Coordination & Supplementary Services)
- 2010 – 2015

IIAMPC (Improving Indigenous Access to Mainstream Primary Care)
- 2010 – 2015

ITC (Integrated Team Care)
- established 1 July 2015
- integration of the CCSS and IIAMPC programs
- contributes to improving health outcomes through better access to coordinated and multidisciplinary care in a timely manner
- contributes to closing the gap in life expectancy by improving access to culturally appropriate mainstream primary care services

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Commonwealth published ITC PHN Guidelines

Most PHN tenders published

Service delivery from 1 July 2017 (*unless extension granted*)

Examples of services: care coordination, community engagement, supplementary services, providing cultural safety in mainstream services (GP, allied health etc.)

Tenderlink details all NSW PHN tenders/register
PHC Services Available

- ITC
- Tackling Indigenous smoking
- New Directions: child and maternal health
- Integrated early childhood services
- Mental health
- Drug and alcohol
- MBS & PBS

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Representatives on each other’s Committees, and Boards

Integration with LHD Programs: Antenatal Shared Care (ANSC), Connecting Care, Chronic Care Programs, Mental Health, Mums and Bubs, etc.

Shared care of mutual patients (ITC): monthly meetings work

Aboriginal Outreach Worker: patient discharge refer to AOW to link with GP
More information

Want to know more?

The Department of Health Primary Health Network Website:


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