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CF - 1100 - CF1.1 Mental Health – Early intervention & low intensity strategies



Activity Metadata

Applicable Schedule *
Core Funding
Activity Prefix *
CF
Activity Number *
1100
Activity Title *
CF1.1 Mental Health – Early intervention & low intensity strategies
Existing, Modified or New Activity *
Existing



Activity Priorities and Description

Program Key Priority Area * Mental Health Other Program Key Priority Area Description

Aim of Activity *

This activity aims towards improving coordination of care to John and Jenny receive the right care in the right place at the right time, this activity will complement and integrate with Primary Mental Health funded programs and Stepped Care ideology while also focussing on early intervention strategies, low intensity approaches and holistic complementary services.

There is no service duplication or replication between this activity and the Primary Mental Health Care Activity Work Plan.

Description of Activity *

Activities will holistically assist John and Jenny with a:

- Focus on wellness promotion and prevention by providing access to information, advice and self-help resources;
- Increase early intervention through access to lower cost, evidence-based alternatives to face-to-face psychological therapy services.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Integrated and coordinated holistic services	68
Low intensity services delivery to reduce waiting lists and increased access of mental health to areas of high disadvantage	66



Activity Demographics

Target Population Cohort

Population groups include (but are not limited to):

- people living in rural and remote communities;
- people identified as being at a high risk of disadvantage;
- people with, or at risk of, mild mental illness;
- people with severe and complex mental illness; and
- people with a co morbid mental health and drug and alcohol condition.

Regional coverage:

Rural Counselling Services -Eyre Peninsula LGA, Central Local Govt. Region Low intensity mental health -Eyre Peninsula LGA, Central Local Govt. Region

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

SA3 Name	SA3 Code
Yorke Peninsula	40504
Lower North	40502
Gawler - Two Wells	40201
Mid North	40503
Barossa	40501
Eyre Peninsula and South West	40601



Consultation

Mental Health, Alcohol and Other Drug community consultations were conducted with both service providers and community members providing context to data already gathered through the literature.

CSAPHN is also developing an evidence based Regional Plan for Mental Health and Suicide Prevention in the region with Country SA LHNs and other key stakeholders. Once completed it will provide a vital resource to the region to support the integrated delivery of mental health and suicide prevention services within the community. The Plan will identify needs and gaps, reduce duplication, remove inefficiencies and encourage innovation.

Also, in conjunction with Country SA LHNs, we have undergone extensive service mapping of core and commissioned services across both sectors with the stepped care model and held 6 jointly chaired forums focusing on the findings as well as key issues surrounding:

- local service gaps;
- pressure points;
- points of intersection; and
- areas of opportunity to further collaborate.

Collaboration

All activity has been part of a co-design process flowing from consultation through to collaborative service design with providers. Linkages between relevant funded services and other services and supports, including non-clinical support, are contractually required to ensure a person-centred approach to service delivery. As part of stepped care strategy regional workshops are facilitated by the PHN to help establish partnerships between organisations and services to facilitate 'joined up' services and sector integration.



Activity Milestone Details/Duration

Activity Start Date
30/06/2021
Activity End Date
29/06/2023
Service Delivery Start Date
July 2021
Service Delivery End Date
June 2023
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: Yes Direct Engagement: No 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 comments
Previous co-design occurred with relevant stakeholders.

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CF - 1200 - CF1.2 Mental Health - Acute transitions and holistic supports



Activity Metadata

Applicable Schedule *
Core Funding
Activity Prefix *
CF
Activity Number *
1200
Activity Title *
CF1.2 Mental Health - Acute transitions and holistic supports
Existing, Modified or New Activity *
Existing



Activity Priorities and Description

Program Key Priority Area * Mental Health Other Program Key Priority Area Description

Aim of Activity *

This activity aims towards Improving coordination of care to ensure John and Jenny receive the right care in the right place at the right time, this activity will complement and integrate with Primary Mental Health funded programs and Stepped Care ideology while also supporting regional interfaces between inpatient and community mental health settings.

There is no service duplication or replication between this activity and the Primary Mental Health Care Activity Work Plan.

Description of Activity *

Activities will assist John and Jenny's needs by:

- Providing wrap-around holistic coordinated care for disadvantaged rural people with complex needs; and
- Bridging the gap between acute episode discharge and re-entry to primary mental health services and wrap around supports via coordinated care and appropriate clinical triage.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Mental Health hospital separations	68
Step Up and Down interface with acute services	69



Activity Demographics

Target Population Cohort

Population groups include (but are not limited to):

- people living in rural and remote communities;
- people identified as being at a high risk of disadvantage;
- people with, or at risk of, mild mental illness;
- people with severe and complex mental illness; and
- people with a co morbid mental health and drug and alcohol condition.

Region coverage: Mental Health Coordinated Care - South East Mental health recover and support - Central Local Govt. Region

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

SA3 Name	SA3 Code
Yorke Peninsula	40504
Lower North	40502
Gawler - Two Wells	40201
Mid North	40503
Limestone Coast	40702
Barossa	40501



Consultation

Mental Health, Alcohol and Other Drug community consultations were conducted with both service providers and community members providing context to data already gathered through the literature.

CSAPHN is also developing an evidence based Regional Plan for Mental Health and Suicide Prevention in the region with Country SA LHNs and other key stakeholders. Once completed it will provide a vital resource to the region to support the integrated delivery of mental health and suicide prevention services within the community. The Plan will identify needs and gaps, reduce duplication, remove inefficiencies and encourage innovation.

Also, in conjunction with Country SA LHNs, we have undergone extensive service mapping of core and commissioned services across both sectors with the stepped care model and held 6 jointly chaired forums focusing on the findings as well as key issues surrounding:

- local service gaps;
- pressure points;
- points of intersection; and
- areas of opportunity to further collaborate.

Collaboration

All activity has been part of a co-design process flowing from consultation through to collaborative service design with providers. Linkages between relevant funded services and other services and supports, including non-clinical support, are contractually required to ensure a person-centred approach to service delivery. As part of stepped care strategy regional workshops are facilitated by the PHN to help establish partnerships between organisations and services to facilitate 'joined up' services and sector integration.



Activity Milestone Details/Duration

Activity Start Date
30/06/2021
Activity End Date
29/06/2023
Service Delivery Start Date
July 2021
Service Delivery End Date
June 2023
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: Yes Direct Engagement: No Open Tender: No Expression Of Interest (EOI): No Other Approach (please provide details): 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 comments

Previous co - design occurred with relevant stakeholders.



CF - 2100 - CF2.1 Aboriginal Health - Chronic Condition Management Services



Activity Metadata

Applicable Schedule *
Core Funding
Activity Prefix *
CF
Activity Number *
2100
Activity Title *
CF2.1 Aboriginal Health - Chronic Condition Management Services
Existing, Modified or New Activity *
Modified



Activity Priorities and Description

Program Key Priority Area * Aboriginal and Torres Strait Islander Health Other Program Key Priority Area Description

Aim of Activity *

Activities aim to:

- Increase access to culturally safe, comprehensive and coordinated care
- Contribute to improved Aboriginal and Torres Strait Islander health outcomes
- ACCHOs and AMS achieve increased capacity to provide quality services.
- Enabling best practice approach to delivery of care

John and Jenny have a chronic condition and live in rural and remote areas. This situation can be difficult both for John and Jenny to get access to the health professionals that they need and for Aboriginal Controlled Community Health Organisations who provide medical services and organise access to multi-disciplinary teams to ensure John and Jenny's health care and cultural safety needs are met. By supporting the ACCHOs in increasing their capacity to provide and acquire these health care services and complementary services such as Ngangkari services in a holistic health framework, John and Jenny's health care needs can be met in a culturally safe, comprehensive, and coordinated manner.

Description of Activity *

Support to rural and remote communities in delivering comprehensive and coordinated care to Aboriginal patients with chronic conditions. Including the provision of primary health care services to clients with a chronic and/or complex condition that aims to

improve the health outcomes of the client and enables self-management of their condition.

Primary health care services, on referral from a General Practitioner, include screening, early intervention, treatment and condition (self) management. The targeted health and lifestyle conditions that are to be prioritised include chronic condition care and management, and managing risk factors such as smoking, nutrition, alcohol and physical activity.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Aboriginal Health (GEN-1)	45



Activity Demographics

Target Population Cohort

Aboriginal and Torres Strait Islander people

Region coverage:

- Ceduna SA2 (Ceduna and Surrounds including Koonibba)
- West Coast SA2 (Yalata Community and Surrounds)
- Western SA2 (Maralinga Tjarutja)
- Coober Pedy SA2 and Outback SA2
- Murray Bridge SA2, Murray Bridge Region SA2, Mannum SA2 The Coorong SA2, Fleurieu and KI SA3

In Scope AOD Treatment Type *

Indigenous Specific *

Yes

Indigenous Specific Comments

The activity engages directly with the Aboriginal Community Controlled Health Service sector as it commissions chronic condition management services directly to Aboriginal Community Controlled Health Services.

Coverage

Whole Region

No

SA3 Name	SA3 Code
Murray and Mallee	40703
Outback - North and East	40602
Eyre Peninsula and South West	40601
Fleurieu - Kangaroo Island	40701



Consultation

CSAPHN works in consultation with ACCHOS, the Aboriginal Health Directors of the 6 Regional LHNs, RDWA, Wellbeing SA, SA Health, communities, and Elders as well as across various condition specific committees and networks.

Collaboration

CSAPHN works across providers and networks, each contributing advice on existing programs and services and service gaps to address key priorities, identify collaboration opportunities and avoid service duplication.



Activity Milestone Details/Duration

Activity Start Date	
27/04/2019	
Activity End Date	
29/06/2023	
Service Delivery Start Date	
uly 2019	
Service Delivery End Date	
une 2023	
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: Yes Direct Engagement: No 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?
nil

Co-design or co-commissioning comments

Direct engagement with individual ACCHO's in terms of service needs to address the health needs of their communities. Service design occurred on this individual basis and formed subsequent activity and service agreement.

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CF - 2200 - CF2.2 Aboriginal Health - Workforce Support and Capacity Building



Activity Metadata

Applicable Schedule *
Core Funding
Activity Prefix *
CF
Activity Number *
2200
Activity Title *
CF2.2 Aboriginal Health - Workforce Support and Capacity Building
Existing, Modified or New Activity *
Modified



Activity Priorities and Description

Program Key Priority Area * Aboriginal and Torres Strait Islander Health Other Program Key Priority Area Description

Aim of Activity *

- Increasing the number of Aboriginal and Torres Strait Islander people in the health workforce
- Increasing the participation of Aboriginal primary health care providers in professional development, inclusive of Integrated Team Care service providers
- Increase access to culturally safe, comprehensive and coordinated care
- ACCHOs and AMS achieve increased capacity to provide quality services.
- Enabling best practice approach to delivery of care

John and Jenny rely on the primary health care services that are provided by ACCHOs, specifically the coordination of multidisciplinary services that visit the communities. Sometimes these services are the only services present in the communities. By supporting the capacity of the ACCHOs and ITC Service providers to increase their workforce and provide professional development opportunities; service quality remains high, and the organisations remains viable to continue to ensure that the best practice approach to the delivery of culturally safe, comprehensive, and coordinated care for John and Jenny.

Description of Activity *

Delivery of capacity support to Aboriginal primary health care providers inclusive of Integrated Team Care Providers. This includes however, is not limited to workforce professional development support and recruitment support.

Aboriginal Health Workforce grants: Increasing the Aboriginal Health Practitioner/Worker supply where issues have been identified in terms of availability (local people) and development of the workforce in particular areas where it has been identified in terms of chronic conditions. E.g. Spirometry Training associated with areas of high Asthma and COPD diagnosis. Aboriginal Traineeship Grant: support to Aboriginal primary health care providers inclusive of Integrated Team Care Providers to increase the capacity of the health workforce via recruitment of an Aboriginal trainee.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Aboriginal Health (GEN-1)	45



Activity Demographics

Target Population Cohort

Aboriginal and Torres Strait Islander people

In Scope AOD Treatment Type *

Indigenous Specific *

Yes

Indigenous Specific Comments

The activity engages directly with the Aboriginal Community Controlled Health Service sector as it requests expressions of interest from this sector. For those Service Providers who are Integrated Team Care Service Providers, direct commissioning will be included as the most efficient process to deliver the support.

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Campbelltown (SA)	40104
Yorke Peninsula	40504
Lower North	40502
Gawler - Two Wells	40201
Mid North	40503
Limestone Coast	40702
Murray and Mallee	40703
Outback - North and East	40602
Barossa	40501
Adelaide Hills	40102
Eyre Peninsula and South West	40601
Fleurieu - Kangaroo Island	40701



Consultation

CSAPHN works in consultation with AHCSA, ACCHOS, the Aboriginal Health Directors of the 6 Regional LHNs, RDWA, Wellbeing SA, SA Health, communities, and Elders as well as across various condition specific committees and networks.

Collaboration

CSAPHN works across providers and networks, each contributing advice on existing programs and services and service gaps to address key priorities, identify collaboration opportunities and avoid service duplication.



Activity Milestone Details/Duration

Activity Start Date
28/04/2019
Activity End Date
29/06/2023
Service Delivery Start Date
1/07/2021
Service Delivery End Date
30/06/2023
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: Yes Open Tender: No 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

Direct negotiation with organisations responding to the EOI and current commissioned providers.



CF - 2300 - CF2.3 Aboriginal Health - Ngangkari Traditional Healers



Activity Metadata

Applicable Schedule *
Core Funding
Activity Prefix *
CF
Activity Number *
2300
Activity Title *
CF2.3 Aboriginal Health - Ngangkari Traditional Healers
Existing, Modified or New Activity *
Existing



Activity Priorities and Description

Program Key Priority Area * Aboriginal and Torres Strait Islander Health Other Program Key Priority Area Description

Aim of Activity *

The activity aims to support Aboriginal and Torres Strait Islander understandings of health and the complex interplay between cultural, spiritual, physical, social and emotional health.

John and Jenny's understandings of health are viewed in a holistic context that encompasses a complex interplay with mental, physical, cultural, and spiritual health. Land is central to wellbeing. When the harmony of these interrelations is disrupted, John and Jenny's ill health will persist. By supporting ACCHOs to provide these holistic health services, the balance of John and Jenny's health will be supported.

Description of Activity *

This is targeted at Aboriginal Community Controlled Health Services to provide Ngangkari Services as part of a holistic health framework. It is to support the clinical activities undertaken and can serve to improve participation and engagement in lifestyle programs and education that need to be undertaken.

These grants will be the result of an EOI targeted at Aboriginal Community Controlled Health services.

Ngangkari Services are not included in the ITC Program as a recognised 'Allied Health Professional' or a 'Specialist Service' and therefore there is no service duplication. They can support the services provided under the ITC program through enhancement of

self-management by increased motivation to engage in active management and control of their health.

Supporting these activities through building the local Aboriginal and Torres Strait Islander Health workforce and service capacity.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Aboriginal Health (GEN-1)	45



Activity Demographics

Target Population Cohort

Aboriginal and Torres Strait Islander people

In Scope AOD Treatment Type *

Indigenous Specific *

Yes

Indigenous Specific Comments

The activity engages directly with the Aboriginal Community Controlled Health Service sector as it requests expressions of interest from this sector.

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Campbelltown (SA)	40104
Yorke Peninsula	40504
Lower North	40502
Gawler - Two Wells	40201
Mid North	40503
Limestone Coast	40702
Murray and Mallee	40703
Outback - North and East	40602
Barossa	40501
Adelaide Hills	40102
Eyre Peninsula and South West	40601
Fleurieu - Kangaroo Island	40701



Consultation

CSAPHN works in consultation with AHCSA, ACCHOS, the Aboriginal Health Directors of the 6 Regional LHNs, RDWA, Wellbeing SA, SA Health, communities, and Elders as well as across various condition specific committees and networks.

Collaboration

CSAPHN works across providers and networks, each contributing advice on existing programs and services and service gaps to address key priorities, identify collaboration opportunities and avoid service duplication.



Activity Milestone Details/Duration

Activity Start Date	
28/04/2019	
Activity End Date	
29/06/2023	
Service Delivery Start Date	
July 2019	
Service Delivery End Date	
June 2023	
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? 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 comments Direct negotiation with organisations who respond to the EOI



CF - 2400 - CF2.4 Aboriginal Health - Aboriginal Health Navigator Project (Discharge Care to Community)



Activity Metadata

Applicable Schedule *
Core Funding
Activity Prefix *
CF
Activity Number *
2400
Activity Title *
CF2.4 Aboriginal Health - Aboriginal Health Navigator Project (Discharge Care to Community)
Existing, Modified or New Activity *
Existing



Activity Priorities and Description

Program Key Priority Area * Aboriginal and Torres Strait Islander Health Other Program Key Priority Area Description

Aim of Activity *

The aim of the activity is to improve patient pathways of Aboriginal and Torres Strait Islander people in systematic discharge, referral and follow-up between hospital and primary health care services.

John and Jenny require medical care that has complex pathways in terms of receiving care at the primary, secondary, and tertiary care. Quite often the pathway is disconnected, by distance, service access and health professional team communication across these pathways. The Health Navigator project seeks to identify where these pathways may be disconnected and work with the Aboriginal Community Controlled Health Organisations to find solutions that will work on the ground, including strategies to avoid travel such as Telehealth. By improving the pathways in systematic discharge, referral and follow-up between hospital and primary health care services, John and Jenny will be able to access the right care, in the right place at the right time.

Description of Activity *

This Activity is designed to support patient self-management through supported health system navigation. The Activity seeks to develop a function that will lead the design and implementation of a Health System Navigation mechanism to support Aboriginal patients transitioning from tertiary to community-based healthcare.

The Health Navigator focusses on the health needs of the individual, supporting the patient's identified health needs, and in particular, managing the transition of care through admission and discharge and between non-acute services in conjunction with

Integrated Team Care Activity Care Coordinators, where present.

The objective of the activity is to develop a sustainable platform which improves the ability of Aboriginal people to navigate through primary health services and between primary and acute services, in conjunction with the CSAPHN and western region ACCHO's.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Aboriginal Health (GEN-1)	45



Activity Demographics

Target Population Cohort

Aboriginal and Torres Strait Islander people

Region coverage:

- Western SA2
- Ceduna SA2
- West Coast SA2
- Port Lincoln SA2
- Whyalla SA2
- Whyalla North SA2
- Port Augusta SA2
- Outback SA2
- Quorn-Lake Gilles SA2

In Scope AOD Treatment Type *

Indigenous Specific *

Yes

Indigenous Specific Comments

The activity engages directly with the Aboriginal Community Controlled Health Service sector as it requests expressions of interest from this sector.

Coverage

Whole Region

No

SA3 Name	SA3 Code
Outback - North and East	40602
Eyre Peninsula and South West	40601



Consultation

The development of the Activity will require effective engagement with appropriate stakeholders across country South Australia (SA) regions including SA Local Health Networks (LHN), GPs, Elders, and ACCHOs.

Collaboration

This project is linked to the SA Aboriginal Chronic Disease Consortium Continuity of Care Project. As such all stakeholders of the Consortium have a stake in the development and implementation of the activity.



Activity Milestone Details/Duration

Activity Start Date
28/04/2019
Activity End Date
29/06/2023
Service Delivery Start Date
July 2019
Service Delivery End Date
June 2023
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: Yes Direct Engagement: No 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 comments
Direct negotiation with service provider

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CF - 3100 - CF3.1 Population Health – Creating Healthy Neighbourhoods



Activity Metadata

Applicable Schedule *
Core Funding
Activity Prefix *
CF
Activity Number *
3100
Activity Title *
CF3.1 Population Health – Creating Healthy Neighbourhoods
Existing, Modified or New Activity *
Modified



Activity Priorities and Description

Program Key Priority Area * Population Health Other Program Key Priority Area Description

Aim of Activity *

John and Jenny live, work and play in communities across country South Australia (SA). The consumer focus of John and Jenny as a whole person living in country SA supports a holistic approach that takes consideration of multiple factors that may impact the ability of the individual, family or community to experience health optimisation and wellbeing as they go about their daily lives.

John and Jenny represent all members of our community. John and Jenny are individuals across all age groups, cultural values, family groupings, ability or disability, advantage or disadvantage, sexual orientation.

With the aim of supporting John and Jenny in creating and maintaining optimal health and wellbeing for them, their family and community, this activity encompasses a range of initiatives that support appropriate access to health and related services, targeted support, education and information.

Description of Activity *

The following activities support John and Jenny in establishing healthy life habits by addressing a range of national health priorities, PHN headline indicator and local priority areas with a primary goal of reducing potentially preventable hospitalisations and ill-health across the life span.

- Healthy Neighbourhood Illness Prevention John and Jenny come from a variety of backgrounds and cultures and abilities, keeping up to date with information, basic health checks and screening, including sexual health, can be a challenge in their neighbourhood. Activities under this initiative are designed to empower and provide John and Jenny with information and resources to support decision making and access to appropriate frontline health services. This may be achieved by but not limited to:
 - Activities directed to the specific needs of John and Jenny, who may be considered members of our vulnerable
 populations (including but not limited to, people with a disability, people made vulnerable through homelessness and
 / or domestic violence, new arrivals having experienced trauma) and are at risk of ill health including chronic and
 complex conditions.
 - Screening initiatives for priority populations that include but are not limited to; Culturally and Linguistically Diverse Populations, LGBTI populations and TransMen
 - Country SA skin cancer screening and awareness program that enables John and Jenny to access skin checks and improve health literacy in locations where there is limited to no access to this medical service, and in rural and remote locations without a permanent GP, and where the medical workforce lacks the capability to perform screening and procedures.
 - Cancer screening promotion Get Screened and Get on With Living and other promotional activities, supports John and Jenny, their family, friends and the community to have regular access to cancer screening including but not limited to bowel, breast, cervical and skin, in accordance with Australian national population-based screening activities and PHN performance indicators.
- Immunisation and Vaccinations enabling John and Jenny to contribute to heard immunity in their community along with reducing their risk of contracting a vaccine preventable condition, this activity contributes to the headline indicator of improving immunisation rates and includes but is not limited to:
 - Targeting geographic regions of low vaccination compliance with a focus on vulnerable populations and including uptake of Meningococcal B vaccine in the 0 4 year-old cohort
 - Supporting the skill base of immunisation providers with commissioned targeted vaccine education to support frontline service delivery of immunisations; promotion of vaccine awareness; and address vaccine hesitancy.
 - Promotion, support, and monitoring of vaccinations that impact the health of communities and individuals including Human Papillomavirus (HPV); whooping cough (pertussis) for pregnant women; and influenza; shingles (herpes zoster) for people over 60; etc...

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
CALD Populations (GEN-13)	11
Health Systems Integration and Coordination (GEN-6)	30
Reducing Potentially Preventable Hospitalisations (GEN-8,9)	23
Health Workforce (GEN-2)	27
Chronic Conditions and Risk Factors (GEN-4)	16
Childhood Development and Youth (GEN 12)	9
Other Population Health Factors (GEN-5)	21
Immunisation (GEN-11)	18



Target Population Cohort

This activity is targeted towards people with complex conditions and or chronic disease, vulnerable populations and those disadvantaged by availability of clinical services

In Scope AOD Treatment Type *
Indigenous Specific *
No
Indigenous Specific Comments
Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Campbelltown (SA)	40104
Yorke Peninsula	40504
Lower North	40502
Gawler - Two Wells	40201
Mid North	40503
Limestone Coast	40702
Murray and Mallee	40703
Outback - North and East	40602
Barossa	40501
Adelaide Hills	40102
Eyre Peninsula and South West	40601
Fleurieu - Kangaroo Island	40701



Activity Consultation and Collaboration

Consultation

Collaboration



operations, community consultation and stakeholder engagement.

Activity Start Date
Activity End Date
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?
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?
Yes
Has this activity previously been co-commissioned or joint-commissioned?
Yes
Decommissioning
Νο
Decommissioning details?
n/a
Co-design or co-commissioning comments
Co-design occurs as required on matters of; program design, health outcomes and experience outcomes, priority populations,

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CF - 3200 - CF3.2 Population Health – Living Well with Chronic Conditions



Activity Metadata

Applicable Schedule *
Core Funding
Activity Prefix *
CF
Activity Number *
3200
Activity Title *
CF3.2 Population Health – Living Well with Chronic Conditions
Existing, Modified or New Activity *
Modified



Activity Priorities and Description

Program Key Priority Area * Population Health Other Program Key Priority Area Description

Aim of Activity *

John and Jenny live, work and play in communities across Country South Australia. The consumer focus of John and Jenny as a whole person living in Country SA supports a holistic approach that takes consideration of multiple factors that may impact the ability of the individual, family or community to experience health optimisation and wellbeing as they go about their daily lives. John and Jenny represent all members of our community. They are individuals across all age groups, cultural values, family groupings, ability or disability, advantage or disadvantage, sexual orientation.

Activities and initiative under 'Living Well with Chronic Conditions' aim to:

- support John and Jenny as they experience the onset of chronic conditions whether childhood asthma, arthritis or other long term health conditions, and
- contribute to lessening the deterioration of John and Jenny's health and wellbeing and reduce their likelihood of becoming a potentially preventable hospitalisations statistic.

Description of Activity *

 Living Well with Chronic Condition activities and initiatives will support John and Jenny on their patient journey to better health outcomes by enabling access to appropriate and integrated care close to home. Managing Chronic Conditions Evidence suggests that where John and Jenny are able to quickly build their health literacy and are active participants and partners to their care, they are more likely to have positive disease outcomes, including remission[1]. These initiatives will provide a range of frontline health services supported by digital and other enablers to assist John and Jenny in achieving better health outcomes and include but are not limited to:

- up-to-date, evidence based health information at point of diagnosis in primary care and through ongoing coordinated team care,
- multi-faceted approach to healthy lifestyles and other risk behaviours through both direct personal intervention and accompanying virtual service such as outreach telemedicine and shared medical appointments.
- Supporting personalised care including but not limited to Point of Care Testing and Virtual Home Monitoring devices. This includes access to Medical Specialist advice for GPs and others in the care team.
- 2. Integrating Primary Health Care In country communities of South Australia where you are likely to find John, Jenny and their family, access to primary health care such as allied health and other associated services that support better health outcomes for people with chronic conditions, continue to be limited.

Through this activity, John and Jenny will continue to be able to access an appropriate level of integrated, tooled up and capable primary care services that supports them to be activated in self-management.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Health Information and Technology (GEN - 3)	34
Aboriginal Health (GEN-1)	45
Health Systems Integration and Coordination (GEN-6)	30
Reducing Potentially Preventable Hospitalisations (GEN-8,9)	23
Chronic Conditions and Risk Factors (GEN-4)	16
Other Population Health Factors (GEN-5)	21



Activity Demographics

Target Population Cohort

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Campbelltown (SA)	40104
Yorke Peninsula	40504
Lower North	40502
Gawler - Two Wells	40201
Mid North	40503
Limestone Coast	40702
Murray and Mallee	40703
Outback - North and East	40602
Barossa	40501
Adelaide Hills	40102
Eyre Peninsula and South West	40601
Fleurieu - Kangaroo Island	40701



Activity Consultation and Collaboration

Consultation

Collaboration



Activity Milestone Details/Duration

Activity Start Date

Activity End Date

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones



Yes

Yes

Yes

Yes

No

n/a

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

Co-design occurs as required on matters of; program design, health outcomes, experience outcomes, priority populations, operations, community consultation and stakeholder engagement.



CF - 3500 - CF3.5 Population Health - Immunisation



Activity Metadata

Applicable Schedule *
Core Funding
Activity Prefix *
CF
Activity Number *
3500
Activity Title *
CF3.5 Population Health - Immunisation
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 this activity is to ensure rural and remote communities and individuals have better access to direct frontline service delivery, targeted education and information on locally accessible services with regards to; the benefits of immunisation; reducing the incidence of vaccine preventable disease and reduce hospitalisations from vaccine preventable disease.

Description of Activity *

This activity is commissioned to the Immunisation Hub and conducted in partnership with Adelaide PHN. This contributes to a state-wide approach to the headline indicator of improving immunisation rates. Activities include but are not limited to:

- Targeting geographic regions of low vaccination compliance with a focus on vulnerable populations
- Commissioning clinical activity via general practice to increase the uptake of Meningococcal B vaccine in the 0 4 year old cohort
- Strategising in partnership with SA Health to respond to provider issues and emergency department presentations related to low or under- immunisation children
- Supporting the skill base of immunisation providers with commissioned targeted vaccine education to support frontline service delivery of immunisations

- Providing information and resources that promote vaccine awareness, address vaccine hesitancy and information on access to services, including after-hours service and home immunisation services
- Initiated Champion Nurse program to actively promote and embed dot point 5. using underspend.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Reducing Potentially Preventable Hospitalisations (GEN-8,9)	23
Health Workforce (GEN-2)	27
Other Population Health Factors (GEN-5)	21
Immunisation (GEN-11)	18



Activity Demographics

Target Population Cohort

Immunisation providers, all children overdue for immunisation and all individuals (specifically those with medical risk factors) who risk significant illness from vaccine preventable disease.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Campbelltown (SA)	40104
Yorke Peninsula	40504
Lower North	40502
Gawler - Two Wells	40201
Mid North	40503
Limestone Coast	40702
Murray and Mallee	40703
Outback - North and East	40602
Barossa	40501
Adelaide Hills	40102
Eyre Peninsula and South West	40601
Fleurieu - Kangaroo Island	40701



Consultation

Engagement with appropriate stakeholders is imbedded in the activity of CSAPHN. CF3.5 Population Health – Immunisation consultation includes, but is not limited to; Immunisation Hub, State Health, six LHNs covering country SA, Adelaide PHN, Aboriginal Health Council SA, local Aboriginal Community Controlled Health Organisations, immunisation providers, general practice and pharmacy. This consultation is augmented by consultation with Clinical Council/s and Community Advisory Committee/s.

Collaboration

Immunisation Hub, State Health, six LHNs covering country SA and Adelaide PHN.



Activity Milestone Details/Duration

Activity Start Date	
30/06/2019	
Activity End Date	
29/06/2021	
Service Delivery Start Date	
July 2019	
Service Delivery End Date	
June 2021	
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: Yes Direct Engagement: No 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?

Yes

Has this activity previously been co-commissioned or joint-commissioned?

Yes

Decommissioning

No

Decommissioning details?

n/a

Co-design or co-commissioning comments

Co-design occurs as required on matters of; program design, priority populations, operations, community consultation and stakeholder engagement.

CF - 3600 - CF3.6 Population Health – Integrating Primary Health Care Services



Activity Metadata

Applicable Schedule *
Core Funding
Activity Prefix *
CF
Activity Number *
3600
Activity Title *
CF3.6 Population Health – Integrating Primary Health Care Services
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 this activity is to enable the building of a robust integrated primary health care system in country South Australia where access to frontline allied health, specialist nurse, chronic condition and other health support services are severely limited.

Description of Activity *

The CSAPHN region covers an area equating to just under 1 million square kilometres or 99.8% of the state geographically. The population of approximately 497,000 or 30% of South Australia's total population is diverse and distributed widely across the region. Dispersal of the population across the region equates to approximately; 35% peri urban, 43% regional, 9% remote and 3% very remote.

Primary health care service availability across the region is reflective of the spread of population with higher levels of private providers in the peri urban and large regional centres and less availability the further travelled from the metropolitan centre of Adelaide.

Through this activity, CSAPHN is endeavouring to improve access to frontline primary health services that are additional to General Practice through the Integrating Primary Health Care Services (IPHCS) program in locations of 5,000 or less. These services, which mostly fall into allied health and specialist nurse roles, have a focus on improving health outcomes of country South Australians, particularly for those with chronic and complex conditions.

Key aspects of the program are that services:

- address an identified need through a collaborative approach with general practice (inclusive of ACCHOs and RFDS), and the community
- are the result of a GP referral
- have a delivery approach that is person centred, evidence based and focuses on client education and activation along with enabling self-management
- are integrated with the health system including general practice, community health and other health care providers, both public and private
- support the continuity of care of the patient across the system
- ensures that general practice and health service providers are well informed
- work to agreed models of care and through local referral pathways
- upload health care 'event summaries' to My Health Record (where appropriate), and
- participate in the use of a shared care platform under the Health Care Home reform (as determined by the Company)

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Health Information and Technology (GEN - 3)	34
Aboriginal Health (GEN-1)	45
Health Systems Integration and Coordination (GEN-6)	30
Chronic Conditions and Risk Factors (GEN-4)	16
Other Population Health Factors (GEN-5)	21



Activity Demographics

Target Population Cohort

Vulnerable and disadvantaged populations with, or at risk of having, chronic and or complex conditions in populations of 5,000 or less. People with private health insurance or who have access to chronic disease services through the aged care gateway, NDIS or DVA are not eligible for these services.

The activity has coverage across the following LGA's:

Ceduna, Streaky Bay, Wudinna, Kimba, Cleve, Franklin Harbour, Tumby Bay, Elliston and part of Lower Eyre Peninsula LGA (Cummins), Northern Areas, Peterborough, Orroroo/Carrieton, Mount Remarkable, Barunga West and part Port Pirie LGA (Crystal Brook), Flinders Ranges, Karoonda East Murray and Southern Mallee, Yorke Peninsula, Kangaroo Island, Kingston and Robe. Activity is also provided in the remote outback including Coober Pedy, Oodnadatta, Maree and stations across the Far West and Far North of SA. In Scope AOD Treatment Type *

Indigenous	Specific *
	0000000

No

Indigenous Specific Comments

Coverage

Whole Region

No

SA3 Name	SA3 Code
Yorke Peninsula	40504
Lower North	40502
Mid North	40503
Limestone Coast	40702
Murray and Mallee	40703
Outback - North and East	40602
Eyre Peninsula and South West	40601
Fleurieu - Kangaroo Island	40701



Activity Consultation and Collaboration

Consultation

Engagement with appropriate stakeholders across country SA regions has been imbedded in the activity of the PHN. It is complemented by consultation with Clinical Council/s and Community Advisory Committee/s. Consultation also occurs at the strategic and peak body level across the State and elsewhere as appropriate.

Under this activity, service providers are required to demonstrate their consultation activities including service model sign-off from local general practices. To ensure services continue to meet local need, commissioned providers must engage in local needs analysis and adjust service delivery to identified need.

Collaboration

Commissioned service providers for this activity are as follows:

Country and Outback Health, FocusOne Health, North and Yorke Local Health Network, Flinders and North Local Health Network, Eyre and Far North Local Health Network, Sonder and Royal Flying Doctors Service.



Activity Milestone Details/Duration

ctivity Start Date	
0/06/2018	
ctivity End Date	
9/06/2021	
ervice Delivery Start Date	
ervice Delivery End Date	
une 2021	
ther 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: Yes Direct Engagement: No 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 comments

Co- design occurs in conjunction with relevant stakeholders



CF - 3700 - CF3.7 Population Health – My Health PoCiTT



Activity Metadata

Applicable Schedule *
Core Funding
Activity Prefix *
CF
Activity Number *
3700
Activity Title *
CF3.7 Population Health – My Health PoCiTT
Existing, Modified or New Activity *
Modified



Activity Priorities and Description

Program Key Priority Area * Population Health Other Program Key Priority Area Description

Aim of Activity *

The aim of this project is to provide contemporary tools to rural and remote General Practice (including ACCHOs) that will assist in early diagnosis and improved management of chronic conditions, better management of antibiotic prescribing through Point of Care Testing (PoCT) and Virtual home monitoring.

Description of Activity *

The CSAPHN region covers an area equating to just under 1 million square kilometres or 99.8% of the state geographically. The population of approximately 497,000 or 30% of South Australia's total population is diverse and distributed widely across the region.

Primary health care service availability, including pathology laboratories, across the region is reflective of the spread of population with less availability of service the further travelled from the metropolitan centre of Adelaide.

Communities that don't have pathology laboratories near-by must rely on either; pathology collection processes that put samples at risk of providing inaccurate results or being untestable due to environmental factors including heat and cold and time from sample taken to delivery at an appropriate laboratory via plane or car.

Speaking at GP18, the RACGP's Annual General Practice Conference, Health Minister Greg Hunt acknowledged this readiness

asserting Federal Government recognised the implementation of Point-of-Care Testing as unavoidable, and that 'Pathology companies have to recognise this is inevitable'.

Technological advances in PoCT devices along with a high level of readiness in general practice to take on contemporary tools that assist in the early diagnosis and management of chronic disease, particularly as it also recognises the travel time impost of attending multiple appointments on care for country people.

Country SA PHN commissioned PoCT and Virtual Home Monitoring services to be provided in alignment with Health Care Home Trial with the project being further expanded for a 6 month period from 2017/18 underspend residual and was renamed 'My Health PoCiTT'.

The project consists of:

- use of Point of Care Testing (PoCT) of pathology in General Practice covering indicators for diabetes, arthritis, heart disease, viral and/or bacterial infections and management of antibiotic prescribing,
- use of patient home monitoring devices to support diabetes, heart disease, COPD and health risk management.

The My Health PoCiTT service provides the following aspects:

- access to PoCT and home monitoring resources
- upskilling of practice staff (including GPs) in the use of the PoCT and home monitoring technologies,
- patient and practice user manuals,
- phone help for both staff and patients
- alerts the practice where data identifies risk to the patient, and
- as needed, the service also connects the GP to a Medical Specialist (SA Health in-kind support) where assistance is needed in managing a condition that has been identified either through the PoCT or Home Monitoring devices.

Under this activity, practices will be supported to implement a business model that will enable them to continue to use PoCT and Home Monitoring as part of their overall model of care beyond this funding including aspects of required accreditation in line with the current RACGP accreditation standards.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Health Information and Technology (GEN - 3)	34
Health Systems Integration and Coordination (GEN-6)	30
Chronic Conditions and Risk Factors (GEN-4)	16



Activity Demographics

Target Population Cohort

People with complex and or chronic disease conditions in rural locations, and people with viral or bacterial cold or flu symptoms that may or may not require antibiotic treatment.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Campbelltown (SA)	40104
Yorke Peninsula	40504
Lower North	40502
Gawler - Two Wells	40201
Mid North	40503
Limestone Coast	40702
Murray and Mallee	40703
Outback - North and East	40602
Barossa	40501
Adelaide Hills	40102
Eyre Peninsula and South West	40601
Fleurieu - Kangaroo Island	40701



Activity Consultation and Collaboration

Consultation

This activity has been commissioned to work within the general practice setting, the commissioned provider works in consultation with practices to identify how they will work with the service and specifically tailor the service to fit with the practice model of care and capacity. Practices are able to select individual aspects of both the PoCT and home monitoring that they feel they are able to cope with and fits their patient cohort.

Collaboration

See above... the Service provider is also providing input to the business model development work and national work on accreditation, upskilling and support of many aspects of PoCT. The Service provider also holds the contract for Australian Point of Care Practitioners Network (APPN), ensuring that the service meets national and international standards in delivery and quality control.



Activity Start Date
30/06/2018
Activity End Date
29/06/2021
Service Delivery Start Date
Service Delivery End Date
June 2021
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: Yes Direct Engagement: No 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 comments

n/a

CF - 3800 - CF3.8 Population Health - Stepping Stones to the Best of You



Activity Metadata

Applicable Schedule *
Core Funding
Activity Prefix *
CF
Activity Number *
3800
Activity Title *
CF3.8 Population Health - Stepping Stones to the Best of You
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 *

Country South Australians are amongst the Australian regions with the highest obesity rates Nationally. This is despite the variety of programs funded over the last 10 plus years, attempting to impede the upwards progression of our obesity rates.

Excess weight, especially obesity, is a major risk factor for cardiovascular disease, Type 2 diabetes, high blood pressure, sleep apnoea, psychological issues, some musculoskeletal conditions and some cancers.[1]

By enabling people to access and move between health risk behaviour modification programs appropriate to their needs and physical, psychological ability to engage and achieve individualised outcomes, this activity aims to provide a stepping stone to enable long-term behavioural change in lifestyle choices across generations in local communities.

Description of Activity *

Taking the foot off the peddle in its messaging, this activity looks to supports those who are at risk to take small steps forward without the hype and pressure that, for many, leads to the cycle of failure \rightarrow guilt \rightarrow more unhealthy behaviour \rightarrow defeat.

Behaviour change unfolds over a series of stages over time [2] and not always in a continuous or linear direction. To make effective change, health behavioural change initiatives necessitate a number of factors including longevity, buy-in and input from the majority of community members, local government, support from local community organisations and State and Federal

Governments.

In partnership with our key stakeholders, through this project, we will endeavour to provide tools and resources to local governments/communities aimed at disrupting cycles of behaviour that contribute to high obesity rates and poor health including chronic disease and mental health issues. We will identify current programs by location and join the dots between programs – through increase knowledge of what is happening in our communities, we will work in conjunction with our key stakeholders to develop partnerships to provide activities and options that enable the individual to engage in lifestyle change at a pace that will see success through small steps.

The project will look to empower community members, to make decisions about driving change for themselves and their community.

The overall expected outcomes of this activity are that country South Australia no longer tops Australian obesity rates and our communities are happier and healthier with a high percentage of the population able and happy to engage in healthy lifestyle activity.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Chronic Conditions and Risk Factors (GEN-4)	16
Other Population Health Factors (GEN-5)	21



Activity Demographics

Target Population Cohort

People in our communities who are at risk of, or who have poor health.

In Scope AOD Treatment Type *

Indigenous Specific *	
No	
Indigenous Specific Comments	
Coverage	
Whole Region	
Yes	

SA3 Name	SA3 Code
Yorke Peninsula	40504
Lower North	40502
Mid North	40503
Limestone Coast	40702
Murray and Mallee	40703
Outback - North and East	40602
Eyre Peninsula and South West	40601
Fleurieu - Kangaroo Island	40701



Activity Consultation and Collaboration

Consultation

Extensive consultation will occur in the early months of this activity ensuring that activity/s:

- do not overlap with other activities in place.
- is evidence based and enables the desired outcomes.
- achievable within the existing infrastructure and resources of any community.
- build resilience in communities

Collaboration

Stakeholders that will be involved in designing and/or implementing the activity, include State Health including Wellbeing SA, all six country based LHNs and metro LHNs, associated peak bodies such as Heart Foundation, Diabetes Australian etc., Adelaide PHN, country based Local Government, stakeholders engaged in providing activities associated with improving health and wellbeing behaviours and our Local Health Clusters and Clinical Councils.

It is expected that each organisation will bring their knowledge and information regarding relevant current activities to the table. Where possible, join in a partnership approach to designing and implementing activities that improve the health and wellbeing of our population cohort that are at risk of poor health. Are able to continue engagement in future planning of activities over the longer term including either the pooling of funding or partnering in more effective activities that impact or influence the lifestyle choices and habitual behaviour.



Activity Milestone Details/Duration

Activity Start Date

30/06/2018

Activity End Date

29/06/2021

Service Delivery Start Date

Service Delivery End Date

June 2021

Other Relevant Milestones

Prior to activities being started, CSAPHN will undertake mapping of services and activities across all aged cohorts to understand the current state of play. In conjunction with the mapping will be a literature review around primary, secondary and tertiary prevention for obesity activities including dropout rates and reasons.

Utilising previously described activities, a key stakeholder round table will inform planning by the partnership in activity design and implementation.



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): Yes
Is this activity being co-designed?
Yes
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?
Yes
Has this activity previously been co-commissioned or joint-commissioned?
No
Decommissioning
No
Decommissioning details?
n/a
Co-design or co-commissioning comments

Country SA PHN will be working closely with Wellbeing SA and Adelaide PHN in a partnership approach that allows for joint design of a Statewide short, medium and long term approach to obesity and overweight prevention and where the organisations are able to take up activity appropriate to their remit from an agreed plan. This will ensure common knowledge of what is being implemented and joins the pipeline of activity thereby smoothing the patient journey.



CF - 4100 - CF4.1 Health Workforce – primary healthcare wellness



Activity Metadata

Applicable Schedule *
Core Funding
Activity Prefix *
CF
Activity Number *
4100
Activity Title *
CF4.1 Health Workforce – primary healthcare wellness
Existing, Modified or New Activity *
Existing



Activity Priorities and Description

Program Key Priority Area * Workforce Other Program Key Priority Area Description

Aim of Activity *

John and Jenny live, work and play in communities across Country South Australia. The consumer focus of John and Jenny as a whole person living in Country SA supports a holistic approach that takes consideration of multiple factors that may impact the ability of the individual, family or community to experience health optimisation and wellbeing as they go about their daily lives. John and Jenny represent all members of our community. They are individuals across all age groups, cultural values, family groupings, ability or disability, advantage or disadvantage, sexual orientation.

As GPs living and working in country South Australia, John and Jenny often face stressful conditions with limited local professional support networks or other independent primary care services where they are not well known.

The aim of this activity is to enable access to primary health care that supports the resilience and wellbeing of GPs, including John and Jenny, in rural and remote locations.

Description of Activity *

Primary Healthcare Wellness is specifically related to workforce resilience development and support to ensure retention of the existing medical workforce. This activity includes but is not limited to:

• Specialised support for the health and wellbeing of rural and remote GPs, registrars, and medical students. This includes provision of clinical services and medical interventions via direct service delivered either face to face or via telehealth consultations.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Health Workforce (GEN-2)	27



Activity Demographics

Target Population Cohort

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Campbelltown (SA)	40104
Yorke Peninsula	40504
Lower North	40502
Gawler - Two Wells	40201
Mid North	40503
Limestone Coast	40702
Murray and Mallee	40703
Outback - North and East	40602
Barossa	40501
Adelaide Hills	40102
Eyre Peninsula and South West	40601
Fleurieu - Kangaroo Island	40701



Activity Consultation and Collaboration

Consultation

Collaboration



Activity Milestone Details/Duration

Activity Start Date

Activity End Date

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 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 comments

CF - 5100 - CF5.1 Digital Health - HealthPathways South Australia



Activity Metadata

Applicable Schedule *
Core Funding
Activity Prefix *
CF
Activity Number *
5100
Activity Title *
CF5.1 Digital Health - HealthPathways South Australia
Existing, Modified or New Activity *
Existing



Activity Priorities and Description

Program Key Priority Area * Digital Health Other Program Key Priority Area Description

Aim of Activity *

John and Jenny live, work and play in communities across Country South Australia. The consumer focus of John and Jenny as a whole person living in Country SA supports a holistic approach that takes consideration of multiple factors that may impact the ability of the individual, family or community to experience health optimisation and wellbeing as they go about their daily lives. John and Jenny represent all members of our community. They are individuals across all age groups, cultural values, family groupings, ability or disability, advantage or disadvantage, sexual orientation.

Enabling and supporting the provision of best practice, evidence based care for John and Jenny to receive, this activity aims to address the key PHN objective of improving coordination of care, through the development and state-wide implementation of the HealthPathways online portal to support the consistent management of health conditions and improve the patient journey through our local health system.

Description of Activity *

In building a more cohesive and integrated health care system for South Australia, HealthPathways South Australia continues to support the development of agreed models of care and clinical referral pathways at a whole of State, CSAPHN region, regionally or locally.

Supporting John and Jenny locally, HealthPathways is an online portal that provides General Practitioners (GPs) and other health

professionals with access to evidence-based assessment, management and localised referral resources for specific health conditions. GPs and other health professionals across the health sectors collaborate on the development and implementation of local pathways to ensure John and Jenny receive the right care in the right place at the right time.

A collaborative partnership between Country SA PHN, SA Health and Adelaide PHN, HealthPathways activity involves:

- Identification of clinical priorities for delivery of care in South Australia
- Development of clinical and referral pathways tailored to the local context
- Promotion of health professional use of HealthPathways in South Australia

Addressing the PHN objectives and priorities identified through the Needs Assessment, this activity looks to enhance consistent care and management of health conditions, increase awareness and utilisation of appropriate services and improve John and Jenny's journey, as patients, through our local health system.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Health Information and Technology (GEN - 3)	34
Health Systems Integration and Coordination (GEN-6)	30
Chronic Conditions and Risk Factors (GEN-4)	16



Activity Demographics

Target Population Cohort

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Campbelltown (SA)	40104
Yorke Peninsula	40504
Lower North	40502
Gawler - Two Wells	40201
Mid North	40503
Limestone Coast	40702
Murray and Mallee	40703
Outback - North and East	40602
Barossa	40501
Adelaide Hills	40102
Eyre Peninsula and South West	40601
Fleurieu - Kangaroo Island	40701



Activity Consultation and Collaboration

Consultation

Collaboration



Activity Milestone Details/Duration

Activity Start Date

Activity End Date

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



CF - 5200 - CF5.2 Digital Health – Health Connections



Activity Metadata

Applicable Schedule *
Core Funding
Activity Prefix *
CF
Activity Number *
5200
Activity Title *
CF5.2 Digital Health – Health Connections
Existing, Modified or New Activity *
Existing



Activity Priorities and Description

Program Key Priority Area * Digital Health Other Program Key Priority Area Description

Aim of Activity *

Supporting the PHN objectives, this activity aims to facilitate supported access to a consistent suite of digital tools and capabilities for healthcare providers and patients in the CSAPHN region to improve coordination, access, continuity and quality of care.

Description of Activity *

Health Connections is an activity name under which digital capabilities are being made available to health providers and patients in the CSAPHN region.

This activity work plan covers three current initiatives that are a continuation of activity from 2018-19. The current initiatives are:

1. Health Connections - Video

Addressing equity in access to health professionals in rural and remote regions, the ongoing development and growth of a network of health providers connected to a shared Cisco unified communication infrastructure that enables innovative service delivery models and improved collaboration and coordination between health providers and patients.

2. Health Connections - Community

A Community engagement platform deployed to support a variety of communities of practice across the country SA region including Health Care Homes and other health interest conversations, Health Connections – Community also

provides a platform for community engagement to facilitate community input to the Community Advisory Committees and regional needs assessment processes.

3. Health Connections – Care Planning

Addressing system integration in a digitally challenged health environment, this online shared care planning platform enables the GP, patient and other health providers, involved in a patient's care, to access and contribute to a living shared care plan.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Health Information and Technology (GEN - 3)	34
After Hours Access (GEN-7)	29
Health Systems Integration and Coordination (GEN-6)	30
Chronic Conditions and Risk Factors (GEN-4)	16



Activity Demographics

Target Population Cohort

The capabilities will be available to all patients and General Practices in the CSAPHN Region. Access will also be available for any other health provider that provides service to a Patient that resides in the CSAPHN region. This includes specialist and allied health services based in metropolitan Adelaide.

In Scope AOD Treatment Type *
Indigenous Specific *
No
Indigenous Specific Comments
Coverage

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Campbelltown (SA)	40104
Yorke Peninsula	40504
Lower North	40502
Gawler - Two Wells	40201
Mid North	40503
Limestone Coast	40702
Murray and Mallee	40703
Outback - North and East	40602
Barossa	40501
Adelaide Hills	40102
Eyre Peninsula and South West	40601
Fleurieu - Kangaroo Island	40701



Activity Consultation and Collaboration

Consultation

There is an ongoing consultation process around these activities with key stakeholders including GPs and General Practice, a wide range of medical specialists, Local Hospital Networks, SA Health, commissioned service providers.

Collaboration

- SA Health SA Digital Telehealth Network for compatibility and enabling usage cases between hospital and primary health care
- LHNs Potential use of Care Planning portal in allied health service delivery and utilisation of HC Video in suitable models of care
- All general practice, ACCHO and other health providers in the CSAPHN region
- Adelaide PHN promotion and supported uptake for Specialists and other service providers that will deliver service to the CSAPHN region
- Primary Health Care Committees and/or regional committees



Activity Milestone Details/Duration

Activity Start Date 30/06/2018 Activity End Date 29/06/2021 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): 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 comments
n/a



CF - 6100 - CF6.1 Aged Care – Ageing Well in Place



Activity Metadata

Applicable Schedule *
Core Funding
Activity Prefix *
CF
Activity Number *
6100
Activity Title *
CF6.1 Aged Care – Ageing Well in Place
Existing, Modified or New Activity *
Modified



Activity Priorities and Description

Program Key Priority Area * Aged Care Other Program Key Priority Area Description

Aim of Activity *

John and Jenny live, work, play and are growing older at home or in residential aged care in communities across country South Australia.

The consumer focus of John and Jenny as a whole person living in country SA supports a holistic approach that takes consideration of multiple factors that may impact the ability of the individual, family or community to experience health optimisation and wellbeing as they go about their daily lives. John and Jenny represent all members of our community. They are individuals across all age groups, cultural values, family groupings, ability or disability, advantage or disadvantage, sexual orientation.

With the overarching aim of enabling John and Jenny to preserve their quality of life as they get older, activities and initiative under 'Ageing well in place' will:

- support John and Jenny through their journey including managing deteriorations in their health and wellbeing, and
- support carers and health professionals in the management of John and Jenny's care to reduce avoidable hospitalisations.

Description of Activity *

Over the last few years, John and Jenny have increasingly accessed a range of health and other services, some of which may have been commissioned by CSAPHN such as Integrating Primary Health Care, in an endeavour to re-enable themselves to retain their independence and quality of life.

The following activities are tailored to supporting John and Jenny as they age well in place and will include but are not limited to:

1. Avenues to Ageing – like many aspects of life, John and Jenny are encountering the challenges and adventures experienced by many people as they approach their later years.

Whether in a planned approach or unexpectedly, engaging with the somewhat perplexing supports available to John and Jenny once they have reached 65+ (depending on year of birth), many require building their literacy capacity of health and ageing.

In association with the activity below (Integrated Care at Home), 'Avenues to Ageing' provides a range of supports to John and Jenny that include, but are not limited to, facilitated planning for future health and personal care through an Advance Care Directive along with providing one on one support to understand and navigate the My Aged Care gateway. Through these activities, John and Jenny, their families and carers, are educated to be informed consumers and advocates for their own health.

2. Integrated care at home sets out to ensure that in their place of residence (whether at home in the community or at home in their residential aged care setting), John and Jenny have adequate supports that recognise and can respond to their health needs including halting or reversal of deterioration.

Initiatives under this activity are designed to be integrated across systems to:

- Establish and implement a flexible model of care/s
- Implement and deliver resources and services that enable and respond to identification of changes in health and quality of life
- recognise and activate health care (referral processes) where deterioration and frailty are identified
- includes and integrates John and Jenny's GP as the primary player in care team responders including though telehealth
- supports palliation in the home
- where applicable, utilise and integrate with currently funded CSAPHN services other Local Health Network, State, private and digital enablers that support chronic condition management.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Reducing Potentially Preventable Hospitalisations (GEN-8,9)	23
Health Workforce (GEN-2)	27
Chronic Conditions and Risk Factors (GEN-4)	16
Other Population Health Factors (GEN-5)	21
Ageing Populations (GEN-10,14)	7



Target Population Cohort

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Campbelltown (SA)	40104
Yorke Peninsula	40504
Lower North	40502
Gawler - Two Wells	40201
Mid North	40503
Limestone Coast	40702
Murray and Mallee	40703
Outback - North and East	40602
Barossa	40501
Adelaide Hills	40102
Eyre Peninsula and South West	40601
Fleurieu - Kangaroo Island	40701



Activity Consultation and Collaboration

Consultation

Collaboration



Activity Start Date
Activity End Date
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?
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?
Yes
Has this activity previously been co-commissioned or joint-commissioned?
Yes
Decommissioning

No

Decommissioning details?

Co-design or co-commissioning comments

Co-design occurs as required on matters of; program design, health and experience outcomes, priority populations, operations, community consultation and stakeholder engagement.

	• — I

CF - 6200 - CF6.2 Aged Care – illness prevention through health literacy



Activity Metadata

Applicable Schedule *
Core Funding
Activity Prefix *
CF
Activity Number *
6200
Activity Title *
CF6.2 Aged Care – illness prevention through health literacy
Existing, Modified or New Activity *
Existing



Activity Priorities and Description

Program Key Priority Area * Aged Care Other Program Key Priority Area Description

Aim of Activity *

The aim of this activity is to ensure rural and remote communities and individuals have better access to direct frontline service delivery, targeted education and information on locally accessible services with regards to; my aged care support and active ageing.

Description of Activity *

Activities in CF6.2 Aged Care – illness prevention through health literacy include, but are not limited to:

1. My Aged Care support program. Commissioned to COTA SA, this activity uses community-based peer ambassadors to provide one on one support to understand and navigate the My Aged Care gateway. Ageing people, their families and carers, are educated to be informed consumers and advocates for their health. This program is currently delivered in; Yorke Peninsula, Mid-North, Murray Mallee and Fleurieu regions with plans to extend to other sites.

Note: this program does not duplicate the Aged Care Navigator pilot that COTA SA is trialling in South Australia.

2. Advanced Care Directive Pilot. In association with the program above, this is commissioned to COTA SA. This activity provides support to older South Australians in completing an ACD. It facilitates planning for future health and personal care and documents a person's preference to family and care providers.

3. Supporting community Ageing Well activities through underspend.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference	
Reducing Potentially Preventable Hospitalisations (GEN-8,9)	23	
Health Workforce (GEN-2)	27	
Chronic Conditions and Risk Factors (GEN-4)	16	
Other Population Health Factors (GEN-5)	21	
Ageing Populations (GEN-10,14)	7	



Activity Demographics

Target Population Cohort

Vulnerable and disadvantaged ageing population

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Campbelltown (SA)	40104
Yorke Peninsula	40504
Lower North	40502
Gawler - Two Wells	40201
Mid North	40503
Limestone Coast	40702
Murray and Mallee	40703
Outback - North and East	40602
Barossa	40501
Adelaide Hills	40102
Eyre Peninsula and South West	40601
Fleurieu - Kangaroo Island	40701



Activity Consultation and Collaboration

Consultation

Engagement with appropriate stakeholders is imbedded in the activity of CSAPHN. CF6.2 Aged Care – illness prevention through health literacy consultation includes; COTA SA, Active Ageing, local government and general practice. COTA utilises their platform "The Plug-In" to facilitate consumer engagement and to assist with co-design of services. This consultation is augmented by consultation with Community Advisory Committee/s. Further, commissioned service providers are required to demonstrate their consultation activities and how service delivery is based on need, feedback and evaluation.

Collaboration

- 1. My Aged Care support program: Co-design of the program occurred between COTA SA and CSAPHN
- 2. Advanced Care Directive Pilot: Co-design of the program occurred between COTA SA and CSAPHN



Activity Milestone Details/Duration

Activity Start Date		
30/06/2019		
Activity End Date		
29/06/2021		
Service Delivery Start Date		
July 2019		
Service Delivery End Date		
June 2021		

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: Yes Direct Engagement: No 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 comments

Co-design occurs as required on matters of; program design, priority populations, operations, community consultation and stakeholder engagement.



CF - 7000 - CF7 Alcohol & Other Drugs



Activity Metadata

Applicable Schedule *
Core Funding
Activity Prefix *
CF
Activity Number *
7000
Activity Title *
CF7 Alcohol & Other Drugs
Existing, Modified or New Activity *
Existing



Activity Priorities and Description

Program Key Priority Area * Alcohol and Other Drugs Other Program Key Priority Area Description

Aim of Activity *

This activity aims towards improving coordination of care to ensure John and Jenny receive the right care in the right place at the right time, this activity will improve integration between the Mental Health and Drug and Alcohol Services while also meeting the unique support and coordination needs of rural and remote communities.

There is no service duplication or replication between this activity and the Primary Mental Health Care Activity Work Plan and the Drug and Alcohol Treatment Activity Work Plan.

Description of Activity *

Activities will assist John and Jenny's needs via:

- Support prevention and early intervention activities and treatment services;
- Promote evidence-based information about drug and alcohol through education;
- Support the development of drug and alcohol data to support evidence-based treatment national policy and service delivery; and
- Support service linkages between drug and alcohol treatment services and mental health services, as well as with social, educational and vocational long-term support services.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Increase of specialised drug and alcohol treatment services (DA-1)	53
Mental Health and drug and alcohol co-morbidity (DA-5)	55



Activity Demographics

Target Population Cohort

Population groups include (but are not limited to):

- people living in rural and remote communities;
- people identified as being at a high risk of disadvantage;
- people 15 years and older;
- Aboriginal and Torres Strait Islander people; and
- people with a co morbid mental health and drug and alcohol condition

Region coverage: Eyre Peninsula LGA, City of Port Lincoln

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

SA3 Name	SA3 Code
Eyre Peninsula and South West	40601



Activity Consultation and Collaboration

Consultation

A State-wide Drug and Alcohol Needs Assessment commenced in August 2020 and was completed late December of the same year. The activity was a collaborative effort between DASSA, CSAPHN and APHN. The Needs Assessment process included nine focus groups and 22 interviews with a total of 91 participants. Participants included providers, specialist GPs, client and family representatives, LHNs, peak bodies and academics and commissioners.

A semi-structured approach was utilised to gather information with questions focused on the following themes: sector context; cohort characteristics; client perspective, sector baseline and performance; strengths and, challenges and opportunities; and priorities and options.

Collaboration

All activity has been part of a co-design process flowing from consultation through to collaborative service design with providers. Linkages between relevant funded services and other services and supports, including non-clinical support, are contractually required to ensure a person-centred approach to service delivery. As part of stepped care strategy regional workshops are facilitated by the PHN to help establish partnerships between organisations and services to facilitate 'joined up' services and sector integration.



Activity Milestone Details/Duration

Activity Start Date
30/06/2021
Activity End Date
29/06/2023
Service Delivery Start Date
July 2021
Service Delivery End Date
June 2023
Other Relevant Milestones



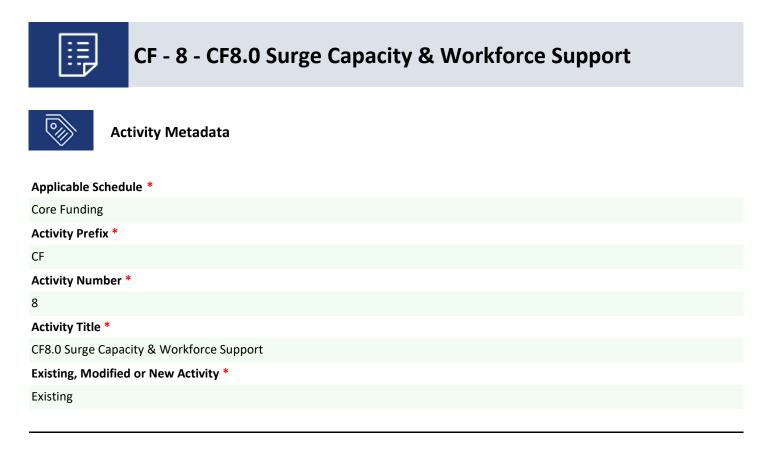
Activity Commissioning

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

Not Yet Known: No Continuing Service Provider / Contract Extension: Yes Direct Engagement: No 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 comments
Co- design occurred with relevant stakeholders

Country SA - Core Funding 2019/20 - 2023/24 Activity Summary View





Activity Priorities and Description

Program Key Priority Area *

Workforce

Other Program Key Priority Area Description

Aim of Activity *

This activity will support infection control training to the primary care, aged Care and broader health care workforce sectors.

Description of Activity *

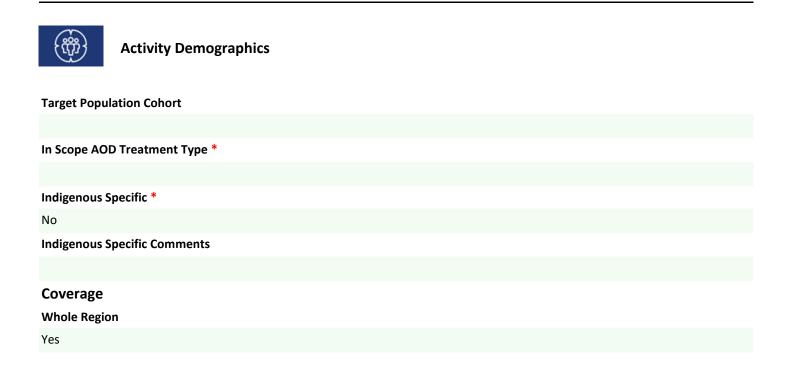
This will include dissemination and direct delivery (online if appropriate) of training materials, development of training plans for the sector in their areas. This activity will also support coordination activities to identify options to address workforce shortages in their regions including distribution of PPE.

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Health Workforce	26





Activity Consultation and Collaboration

Consultation

Collaboration



Activity Milestone Details/Duration

Activity Start Date

Activity End Date
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



HSI - 1000 - HSI 1 Population Health Planning



Activity Metadata

Applicable Schedule *
Core Funding
Activity Prefix *
HSI
Activity Number *
1000
Activity Title *
HSI 1 Population Health Planning
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 this activity is to enable understanding of the country SA population, including social determinants, health and wellbeing, risk factors and service gaps in order to support activities that improve the health outcomes of that population.

Description of Activity *

The main activities under this workplan include:

- data analysis, population health monitoring, analysis of health needs and services gaps, preparing and updating needs assessments;
- support for the multi-organisation Joint Needs Assessment Advisory Group (JNAAG),
- regional profiles and other regionally mapped services and population health data for publication and use by a range of organisations and communities.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Health Systems Integration and Coordination (GEN-6)	30



Activity Demographics

Target Population Cohort
Whole of population
In Scope AOD Treatment Type *
Indigenous Specific *
No
Indigenous Specific Comments

Coverage

Whole Region

SA3 Name	SA3 Code
Campbelltown (SA)	40104
Yorke Peninsula	40504
Lower North	40502
Gawler - Two Wells	40201
Mid North	40503
Limestone Coast	40702
Murray and Mallee	40703
Outback - North and East	40602
Barossa	40501
Adelaide Hills	40102
Eyre Peninsula and South West	40601
Fleurieu - Kangaroo Island	40701



Consultation

Engagement with appropriate stakeholders across country SA regions has been imbedded in the activity of the PHN for three years. It is complemented by consultation with Clinical Council/s and Community Advisory Committee/s. Consultation also occurs at the strategic and peak body level across the State and elsewhere as appropriate. Service providers are required to demonstrate their consultation activities, needs analysis and how their service delivery is based on evaluation and feedback.

Collaboration

Collaborations for the activities described above are many and varied and are inclusive of both the public and private space. Collaborations include, but are not limited to; Adelaide PHN, State Health, Country Health SA LHN, General Practice, ACCHOs, Clinical Councils, Community Advisory Committees, allied health professionals, and relevant peak organisations.



Activity Milestone Details/Duration

tivity Start Date	
/06/2015	
tivity End Date	
/06/2021	
rvice Delivery Start Date	
vice Delivery End Date	
her 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): Yes

Is this activity being co-designed?

Is this activity the result of a	a previous co-design	process?
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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 comments

n/a



HSI - 2000 - HSI 2 Stakeholder Engagement



Activity Metadata

Applicable Schedule *
Core Funding
Activity Prefix *
HSI
Activity Number *
2000
Activity Title *
HSI 2 Stakeholder Engagement
Existing, Modified or New Activity *
Existing



Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

Understand the health needs of the population and provide support with integration of care

Aim of Activity *

This activity aims to engage key stakeholders across the CSAPHN region to both understand the health needs of the population and provide support with integration of care.

Description of Activity *

This activity is at the core of CSAPHN's work, underpinning CSAPHN delivery of the contractual obligations of the Australian Government Department of Health.

This activity includes but is not limited to:

- Stakeholder engagement with upwards of 5000 health and associated services across the CSAPHN region
- Strategic engagement with SA Health, Country Health SA Local Health Network regarding local and regional population health planning, workforce and system improvement
- Key partnerships with peak health organisations with a focus on collaborative approaches for system integration
- Enabling local engagement and advocacy between stakeholders in order to explore solutions at the point of care
- Support clinical councils and community advisory committees
- Engage stakeholders in targeted consultation and collaboration that contribute to CSAPHN Comprehensive Needs Assessment

- Support to integrate commissioned services into the core business of appropriate stakeholders
- Providing contract management, monitoring and evaluation

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
CALD Populations (GEN-13)	11
Health Information and Technology (GEN - 3)	34
Health Systems Integration and Coordination (GEN-6)	30
Reducing Potentially Preventable Hospitalisations (GEN-8,9)	23
Health Workforce (GEN-2)	27
Chronic Conditions and Risk Factors (GEN-4)	16
Childhood Development and Youth (GEN 12)	9
Other Population Health Factors (GEN-5)	21
Ageing Populations (GEN-10,14)	7



Activity Demographics

Target Population Cohort

Whole of CSAPHN including peak health organisations and state-wide stakeholders.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

SA3 Name	SA3 Code
Campbelltown (SA)	40104
Yorke Peninsula	40504
Lower North	40502
Gawler - Two Wells	40201
Mid North	40503
Limestone Coast	40702
Murray and Mallee	40703
Outback - North and East	40602
Barossa	40501
Adelaide Hills	40102
Eyre Peninsula and South West	40601
Fleurieu - Kangaroo Island	40701



Consultation

Engagement with appropriate stakeholders across country SA regions has been imbedded in the activity of the PHN for three years. It is complemented by consultation with Clinical Council/s and Community Advisory Committee/s. Consultation also occurs at the strategic and peak body level across the State and elsewhere as appropriate.

Collaboration

Collaborations for the activities in HSI 2 are many and varied and are inclusive of both the public and private space. Collaborations include, but are not limited to; State Health, Country Health SA LHN, general practice, Aboriginal Community Controlled Organisations, allied health professionals, residential aged care facilities, peak organisations, universities and registered training organisations.



Activity Milestone Details/Duration

Activity Start Date		
30/06/2019		
Activity End Date		
29/06/2021		
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): 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 comments

n/a



HSI - 3000 - HSI 3 System Integration



Activity Metadata

Applicable Schedule *
Core Funding
Activity Prefix *
HSI
Activity Number *
3000
Activity Title *
HSI 3 System Integration
Existing, Modified or New Activity *
Existing



Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

System integration

Aim of Activity *

This activity aims to enable productive and targeted engagement to progress the system integration agenda across the country SA, State and National space, enabling improvements in care and the health outcomes of our population.

Description of Activity *

This activity supports the health system to work in a more coordinated way, developing and maintaining informal and formal partnerships including:

- Key engagement with SA Health, Country Health SA Local Health Network (CHSALHN) re strategic and local population planning and leverage for system improvement
- Key partnerships relating to peak bodies and national agencies re collaborative approach to chronic co-morbidities and screening initiatives
- Stakeholder engagement with upwards of 5,000 health and associated services sites across the region
- Progressing partnerships relating to digital health solutions to enable uploading of coordinated care and other activity across disconnected systems for country patients and services.
- Support for primary care providers to access LGBTIQA+ upskilling through underspends.

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Health Systems Integration and Coordination (GEN-6)	30



Activity Demographics

Target Population Cohort

People who access the health system at any or multiple points

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

SA3 Name	SA3 Code
Campbelltown (SA)	40104
Yorke Peninsula	40504
Lower North	40502
Gawler - Two Wells	40201
Mid North	40503
Limestone Coast	40702
Murray and Mallee	40703
Outback - North and East	40602
Barossa	40501
Adelaide Hills	40102
Eyre Peninsula and South West	40601
Fleurieu - Kangaroo Island	40701



Consultation

Engagement with appropriate stakeholders across country SA regions has been imbedded in the activity of the PHN for three years. It is complemented by consultation with Clinical Council/s and Community Advisory Committee/s. Consultation also occurs at the strategic and peak body level across the State and elsewhere as appropriate.

Collaboration

Collaborations for the activities in HSI 3 are many and varied and are inclusive of both the public and private space. Collaborations include, but are not limited to; State Health, Country Health SA LHN, general practice, Aboriginal Community Controlled Organisations, allied health professionals, residential aged care facilities, peak organisations, universities and registered training organisations.



Activity Milestone Details/Duration

Activity Start Date
30/06/2019
Activity End Date
29/06/2021
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): 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 comments
n/a



HSI - 4000 - HSI 4 Health Referral Pathways and Care Coordination



Activity Metadata

Applicable Schedule *
Core Funding
Activity Prefix *
HSI
Activity Number *
4000
Activity Title *
HSI 4 Health Referral Pathways and Care Coordination
Existing, Modified or New Activity *
Existing
Laisting



Activity Priorities and Description

Program Key Priority Area *

Digital Health

Other Program Key Priority Area Description

Aim of Activity *

The aim of this activity is to provide the underpinning support, including targeted stakeholder engagement that will enable improvements in patient care and navigation across primary, secondary and acute care.

Description of Activity *

This activity supports:

- developing mechanisms to improve coordination of care for patients
- development, delivery and maintenance of health pathways, including localisation of integrated care service pathways.

The activity now links to Core AWP CF5.1 Digital Health – HealthPathways South Australia

- development and publication of orthopaedic pathways in response to primary care requests through use of underspends.
- In response to NOUS report to Royal Commission on Aged Care Safety and Quality, approval to repurpose funds in alignment with recommendations work on aged care specific HealthPathways (\$50,000).

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Health Information and Technology (GEN - 3)	34
Health Systems Integration and Coordination (GEN-6)	30



Activity Demographics

Target Population Cohort
N/A
In Scope AOD Treatment Type *
Indigenous Specific *
No
Indigenous Specific Comments
-

Coverage

Whole Region

SA3 Name	SA3 Code
Campbelltown (SA)	40104
Yorke Peninsula	40504
Lower North	40502
Gawler - Two Wells	40201
Mid North	40503
Limestone Coast	40702
Murray and Mallee	40703
Outback - North and East	40602
Barossa	40501
Adelaide Hills	40102
Eyre Peninsula and South West	40601
Fleurieu - Kangaroo Island	40701



Consultation

Engagement with appropriate stakeholders across country SA regions has been embedded in the activity of the PHN for three years. It is complemented by consultation with Clinical Council/s and Community Advisory Committee/s. Consultation also occurs at the strategic and peak body level across the State and elsewhere as appropriate.

As a tripartite partnership, consultation is conducted through all organisational networks where required in the activity and program stage. This has involved consultation with the following including, but not limited to: State Health, all LHNs including Country SA LHN, peak health and consumer representative bodies, GPs, hospital and private specialists, nurses, practice staff, private providers, research groups, pharmacists, allied health, tertiary and professional education providers.

Collaboration

Collaborations for the activity are many and varied and are inclusive of both the public and private space. Collaborations include, but are not limited to; State Health, Adelaide PHN, Country Health SA LHN, General Practice, allied health professionals, consumer groups and relevant peak organisations.

Activity Milestone Details/Duration
Activity Start Date
30/06/2018
Activity End Date
29/06/2021
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): Yes	
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?	
Yes	
Decommissioning	
No	
Decommissioning details?	
n/a	
Co-design or co-commissioning comments	
n/a	



HSI - 5000 - HSI 5 Commissioning Support



Activity Metadata

Applicable Schedule *
Core Funding
Activity Prefix *
HSI
Activity Number *
5000
Activity Title *
HSI 5 Commissioning Support
Existing, Modified or New Activity *
Existing



Activity Priorities and Description

Program Key Priority Area * Other (please provide details)

Other Program Key Priority Area Description

Commissioning support

Aim of Activity *

The aim of this activity is to develop, administer and manage policies, processes and systems that advance best practice commissioning of health services for Country SA PHN (CSAPHN) in line with departmental guidance.

Description of Activity *

Commissioning support ensures that CSAPHN staff have the knowledge, skills and tools to assist them to secure efficiency, value for money and probity in a planned approach across the Commissioning Cycle. Key factors of the activity support CSAPHN in:

- maintaining of commissioning cycle including developing strategic partnerships, procurement, monitoring and evaluation;
- to advance service integration and co-design opportunities through strategic stakeholder engagement and partnerships.
- driving evolution of market approaches over time
- a systematic approach to procurement, tendering and preparation of contracts and other activities aligned to the commissioning cycle including developing and managing necessary systems and processes such as compliance, risk management and management of contract registers.
- Coordination of the CSAPHN Board's Independent Commissioning Committee to ensure best-fit/best-value service provision.

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Health Systems Integration and Coordination (GEN-6)	30



Activity Demographics

Target Population Cohort
N/A
In Scope AOD Treatment Type *
Indigenous Specific *
No
Indigenous Specific Comments

Coverage

Whole Region

SA3 Name	SA3 Code
Campbelltown (SA)	40104
Yorke Peninsula	40504
Lower North	40502
Gawler - Two Wells	40201
Mid North	40503
Limestone Coast	40702
Murray and Mallee	40703
Outback - North and East	40602
Barossa	40501
Adelaide Hills	40102
Eyre Peninsula and South West	40601
Fleurieu - Kangaroo Island	40701



Consultation

Consultation occurs with the CSAPHN Board, Independent Commissioning Committee and CSAPHN Portfolios, commissioned providers, any targeted market through tender processes, and the Commonwealth Department of Health.

Collaboration

See consultation above.



Activity Milestone Details/Duration

Activity Start Date

Activity End Date

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?

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 comments
n/a



HSI - 6000 - HSI 6 Practice Support



Activity Metadata

Applicable Schedule *	
Core Funding	
Activity Prefix *	
HSI	
Activity Number *	
6000	
Activity Title *	
HSI 6 Practice Support	
Existing, Modified or New Activity *	
Existing	



Activity Priorities and Description

Program Key Priority Area * Workforce Other Program Key Priority Area Description

Aim of Activity *

This activity provides support to general practice both in business capacity and population health support. It encourages continuous improvement and quality care, enhanced capacity, sustainability, improved access, better coordination and health outcomes for patients. This support is delivered via a targeted program that includes practice visits, remote support, webinars, assistance with resources and education.

This activity aligns with and supports the key priority areas and headline indicators of CSAPHN.

Description of Activity *

This activity supports the general practice function in its encounter with and management of patients, data, systems and process to enable best practice options of patient care. This activity includes but is not limited to:

- Implement digital health changes for the meaningful use of the My Health Record and enabling technologies.
- Increase general practice capacity and sustainability through increased appropriate use of MBS and Incentive payments.
- Promote engagement and participation in Practice Incentives Program (PIP) and the PIP Quality Improvement (QI) incentive.
- Support Practice Managers, Practice Nurses and General Practice staff with CQI and 5th Standards Accreditation.
- Support care planning and the Medical Home model changes.

- Support change management and implementation of the MBS review and other future changes.
- Improve data quality and use of clinical information systems.
- Support the uptake of systems such as HealthPathways and online care planning to access to improve coordination of care and integration with specialist and allied health
- Provide clinical care updates, current preventative health information and other resources
- Facilitate the delivery of primary health network communities of practice for managers, nurses and staff
- Facilitate the delivery of continuing professional development to general practice inclusive of; culturally appropriate training and culturally and linguistically diverse wellness
- Support to integrate commissioned services, both clinical and self-management, into the general practice multidisciplinary team
- Promote mental wellness awareness for GPs and the general practice community
- Engage general practice in targeted consultation and collaboration that contribute to CSAPHN Comprehensive Needs Assessment

2019-20 Carryover and Movement of Funds Activities:

- 5th Map Accreditation resources for General Practice
- Emergency Response Planning Tool and Training for General Practice

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Health Information and Technology (GEN - 3)	34
Health Systems Integration and Coordination (GEN-6)	30
Reducing Potentially Preventable Hospitalisations (GEN-8,9)	23
Health Workforce (GEN-2)	27
Chronic Conditions and Risk Factors (GEN-4)	16
Other Population Health Factors (GEN-5)	21



Activity Demographics

Target Population Cohort

General practice along with allied health, specialist services and commissioned service providers.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Campbelltown (SA)	40104
Yorke Peninsula	40504
Lower North	40502
Gawler - Two Wells	40201
Mid North	40503
Limestone Coast	40702
Murray and Mallee	40703
Outback - North and East	40602
Barossa	40501
Adelaide Hills	40102
Eyre Peninsula and South West	40601
Fleurieu - Kangaroo Island	40701



Activity Consultation and Collaboration

Consultation

Engagement with appropriate stakeholders across country SA regions has been imbedded in the activity of the PHN for three years. It is complemented by consultation with Clinical Council/s and Community Advisory Committee/s. Consultation also occurs at the strategic and peak body level across the State and elsewhere as appropriate.

Collaboration

General Practice support is a core function of the PHNs, as such there are efficiencies to be gained by joint development of this area of activity. CSAPHN will seek collaboration and partnership within others in the PHN network to develop the modules of activity that underpin this initiative and to share learnings.

Additionally, the delivery or targeted support from external parties may be a requirement of specific modules of quality improvement (i.e. Education). CSAPHN will facilitate the delivery of relevant third-party support from appropriate providers.



Activity Start Date
20/05/2010
30/06/2018
Activity End Date
29/06/2021
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): Yes
Is this activity being co-designed?
No
No Is this activity the result of a previous co-design process?
No Is this activity the result of a previous co-design process? No
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 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
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 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 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 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
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 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
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 Decommissioning details?



HSI - 7000 - HSI 7 Workforce Development and Capacity Building



Activity Metadata

Applicable Schedule *
Core Funding
Activity Prefix *
HSI
Activity Number *
7000
Activity Title *
HSI 7 Workforce Development and Capacity Building
Existing, Modified or New Activity *
Existing



Activity Priorities and Description

Program Key Priority Area * Workforce Other Program Key Priority Area Description

Aim of Activity *

This activity is aimed at supporting the existing primary health workforce, building local service capacity, stimulating market development, strengthening the viability of primary health care practices and supporting recruitment strategies.

Description of Activity *

Health workforce issues continue to be a recurring theme in stakeholder and community consultation.

This activity is at the core of CSAPHN's work, underpinning CSAPHN delivery of the contractual obligations of the Australian Government Department of Health. This activity includes but is not limited to:

- Promote mental wellness awareness for GPs and the general practice community
- Support targeted education, information and resources addressing clinical care and preventative health
- Foster collaboration across multi-disciplinary teams
- Encourage investigation of new service delivery options and use of digital technologies
- Support recruitment and retention strategies co-designed with primary health care and local communities
- Facilitate the delivery of primary health network communities of practice for mangers, nurses and staff
- Support uptake of commissioned services by the primary health care workforce

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
CALD Populations (GEN-13)	11
Health Information and Technology (GEN - 3)	34
Health Systems Integration and Coordination (GEN-6)	30
Reducing Potentially Preventable Hospitalisations (GEN-8,9)	23
Health Workforce (GEN-2)	27
Chronic Conditions and Risk Factors (GEN-4)	16
Childhood Development and Youth (GEN 12)	9
Other Population Health Factors (GEN-5)	21
Ageing Populations (GEN-10,14)	7



Activity Demographics

Target Population Cohort

Whole of CSAPHN primary health care providers.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

SA3 Name	SA3 Code
Campbelltown (SA)	40104
Yorke Peninsula	40504
Lower North	40502
Gawler - Two Wells	40201
Mid North	40503
Limestone Coast	40702
Murray and Mallee	40703
Outback - North and East	40602
Barossa	40501
Adelaide Hills	40102
Eyre Peninsula and South West	40601
Fleurieu - Kangaroo Island	40701



Consultation

Engagement with appropriate stakeholders across country SA regions has been imbedded in the activity of the PHN since its inception. It is complemented by consultation with Clinical Council/s and Community Advisory Committee/s. Consultation also occurs at the strategic and peak body level across the State and elsewhere as appropriate.

Collaboration

Collaborations for the activities in HSI 7 are many and varied and are inclusive of both the public and private space. Collaborations include, but are not limited to; State Health, Country Health SA LHN, workforce agency, general practice, Aboriginal Community Controlled Organisations, allied health professionals, residential aged care facilities, peak organisations, universities and registered training organisations.



Activity Milestone Details/Duration

Activity Start Date
30/06/2019
Activity End Date
29/06/2021
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): 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 comments

n/a



HSI - 8000 - HSI 8 Community Advisory Committee - LHC Small Grants



Activity Metadata

Applicable Schedule *
Core Funding
Activity Prefix *
HSI
Activity Number *
8000
Activity Title *
HSI 8 Community Advisory Committee - LHC Small Grants
Existing, Modified or New Activity *
Modified



Activity Priorities and Description

Program Key Priority Area * Population Health Other Program Key Priority Area Description

Aim of Activity *

Aim of Activity

The aim of the LHC Small Grants activity is to enable localised health promotion in rural and regional South Australia that improve the health and well-being of local communities.

Description of Activity *

Description of Activity

The LHC Small Grants activity is designed to deliver health promotion to local communities throughout rural and regional South Australia.

LHC Small Grants will be co-designed between the LHCs and the PHN and will:

- Implement localised activity that addresses or go towards addressing the more granular local health needs as identified within communities, through community input.
- Engage in health promotion activities that align with, and may supplement, other PHN health promotion strategies.
- Contributes to local small-scale solutions that work towards addressing community identified issues.

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Reducing Potentially Preventable Hospitalisations (GEN-8,9)	23
Other Population Health Factors (GEN-5)	21



Activity Demographics

Target Population Cohort
Local communities.
In Scope AOD Treatment Type *
Indigenous Specific *
No
Indigenous Specific Comments

Coverage

Whole Region

SA3 Name	SA3 Code
Campbelltown (SA)	40104
Yorke Peninsula	40504
Lower North	40502
Gawler - Two Wells	40201
Mid North	40503
Limestone Coast	40702
Murray and Mallee	40703
Outback - North and East	40602
Barossa	40501
Adelaide Hills	40102
Eyre Peninsula and South West	40601
Fleurieu - Kangaroo Island	40701



Consultation

The LHCs are established as local regionally based organisations that engage with their membership base and the general local population. Stakeholder engagement with the LHCs is maintained through regular face to face meetings at all locations across the state. These face to face meetings are supported with an on-line engagement platform (Health Connections) that links the PHN with the LHCs, and the LHCs with their community. These community engagement activities will be used to add qualitative data to the PHN in its health needs planning.

Collaboration

LHCs link with their community members and various stakeholders such as Suicide Prevention Networks, Local Drug Action Teams, Rotary Clubs, Farming Community groups, Mental Health alliances, and other relevant community bodies. Whilst the LHCs main mandate is advisory, its activities lend themselves to work in partnership with local communities to deliver health promotion work.



Activity Milestone Details/Duration

Activity Start Date
30/06/2019
Activity End Date
29/06/2021
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: Yes 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?
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 comments

The LHCs are established as local regionally based organisations that engage with their membership base and the general local population. LHCs link with their community members and various stakeholders and its activities lend themselves to work in partnership with local communities to deliver health promotion work.



HSI - 9000 - HSI 9 Workforce recruitment and retention



Activity Metadata

Applicable Schedule *
Core Funding
Activity Prefix *
HSI
Activity Number *
9000
Activity Title *
HSI 9 Workforce recruitment and retention
Existing, Modified or New Activity *
Modified



Activity Priorities and Description

Program Key Priority Area * Workforce Other Program Key Priority Area Description

Aim of Activity *

This activity supports the existing primary health workforce, builds local service capacity, stimulates market development, strengthens the viability of primary health care services and supports recruitment and retention in rural and remote locations that are underserviced.

Description of Activity *

Health workforce issues continue to be a recurring theme in stakeholder and community consultation. Activities in HSI 9 Workforce recruitment and retention are specifically related to workforce development and support to ensure retention of the existing workforce.

These activities include, but are not limited to:

Education services program. This activity is commissioned to GPEx. This targeted education addresses the PHN six key
priority areas, headline indicators, national health priorities and disease conditions specifically highlighted in the
Comprehensive Needs Assessment. This education is designed to foster collaboration across multi-disciplinary teams,
allow providers to investigate new service delivery options and imbed the use of HealthPathways and digital health in
clinical practice. This service is provided to the whole of CSAPHN region.

- 2. Clinical services program. This activity is commissioned to sapmea and is conducted in partnership with State Health units including but not limited to; diabetes, burns and wound care. This activity supports the primary health care workforce to deliver front line services to diabetic patients at any point on the care continuum as well as patients requiring advanced burns and wound management. Services are provided across the whole of CSAPHN region according to priority areas identified in the CSAPHN Comprehensive Needs Assessment.
- 3. Primary Health Care Nurse transition to practice program. This activity is commissioned to Australian Primary Health Care Nurses Association (APNA). It is focussed on the recruitment and retention of primary health care nurses by supporting their clinical skills and providing mentoring to aid transition into a general practice setting. This program is available catchment-wide by an expression of interest from individual nurses.
- 4. Practice review program. This new activity will be commissioned via direct engagement with the most capable provider. It is focussed on new technologies and systems, addressing practice issues, reviewing working culture and establishing action plans for practice improvement for recruitment and retention purposes. This program is available catchment wide by an expression of interest from general practice

Note: 2020/2021 In response to NOUS report to Royal Commission on Aged Care Safety and Quality, approval to repurpose funds in alignment with recommendations - work on aged care specific HealthPathways (\$50,000) in HSI4.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Reducing Potentially Preventable Hospitalisations (GEN-8,9)	23
Health Workforce (GEN-2)	27
Chronic Conditions and Risk Factors (GEN-4)	16
Other Population Health Factors (GEN-5)	21



Activity Demographics

Target Population Cohort

This activity is targeted to primary health care providers across the CSAPHN catchment. It includes but is not limited to; GPs and practice staff, allied health and aged care professionals, Country Health SA LHN, Universities and training organisations.

In Scope AOD Treatment Type *

Indigenous Specific *
No
Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Campbelltown (SA)	40104
Yorke Peninsula	40504
Lower North	40502
Gawler - Two Wells	40201
Mid North	40503
Limestone Coast	40702
Murray and Mallee	40703
Outback - North and East	40602
Barossa	40501
Adelaide Hills	40102
Eyre Peninsula and South West	40601
Fleurieu - Kangaroo Island	40701



Activity Consultation and Collaboration

Consultation

Engagement with appropriate stakeholders is imbedded in the activity of CSAPHN. HSI 9 Workforce recruitment and retention consultation includes; general practice, Rural Doctors Workforce Agency, Rural Doctors Association of SA, GPEx and APNA. This consultation is augmented by consultation with Clinical Council/s.

Collaboration

- Education services program: Co-design of this program occurs between GPEx and CSAPHN. GPEx takes an evidenced based approach to planning and delivering this program by engaging general practices and primary health care managers and teams. An annual needs analysis provides data regarding education needs in each of the four CSAPHN regions. Education delivered is relevant to clinical service delivery, addresses the PHN six key priority areas, headline indicators, national health priorities and disease conditions specifically highlighted in the Comprehensive Needs Assessment and health profiles of the regions. This education is designed to foster collaboration across multi-disciplinary teams, allow providers to investigate new service delivery options and imbed the use of HealthPathways and digital health in clinical practice. All activities are accredited by RACGP and ACRRM.
- 2. Clinical services program: Co-design of this program occurs between sapmea and CSAPHN and is conducted in partnership with Country Health SA LHN Diabetes Unit and their Diabetes Nurse Educators, along with UniSA Department of Rural Health with regards to diabetes. The diabetes program has been endorsed and accredited by Australian Primary Health Care Nurse Association (APNA). The diabetes program supports the primary health care workforce to deliver front line services to diabetic patients across the care continuum and to date is supporting use of the state-wide cycle of care, foot assessments, diabetes medication management and gestational diabetes. The burns program is conducted in partnership with the Central Adelaide Local Health Network Burns Unit and is complemented by activities around wound care. Both are accredited by RACGP and ACRRM.

- 3. Primary Health Care Nurse transition to Practice program: This activity uses existing intellectual property of the Australian Primary Health Care Nurse Association (APNA).
- 4. Practice Review program: This activity uses existing intellectual property of GPEx



Activity Milestone Details/Duration

Activity Start Date
30/06/2019
Activity End Date
29/06/2021
Service Delivery Start Date
July 2019
Service Delivery End Date
June 2021
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: Yes Direct Engagement: Yes 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 comments

Co-design has and will occur with the relevant stakeholders.



HSI - 10000 - HSI 10 Research, Evaluation and Advisory



Activity Metadata

Applicable Schedule *
Core Funding
Activity Prefix *
HSI
Activity Number *
10000
Activity Title *
HSI 10 Research, Evaluation and Advisory
Existing, Modified or New Activity *
Modified



Activity Priorities and Description

Program Key Priority Area * Other (please provide details) Other Program Key Priority Area Description

Aim of Activity *

The aim of this activity is to enable connection to evidence, support evaluation and investigate or initiate innovation and to provide a range of supporting mechanisms to commissioned providers.

Description of Activity *

Activities under this AWP will support development of cutting edged commissioning of services that integrate across the system and funding streams.

These activities will also support capacity building and sharing of ideas and best practice between commissioned service providers, along with connection to research institutions.

Development of a reporting portal specifically related to this program IPHCS through underspends

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Health Systems Integration and Coordination (GEN-6)	30



Activity Demographics

Target Population Cohort

See CF3.6

The activity has coverage across the following LGA's:

Ceduna, Streaky Bay, Wudinna, Kimba, Cleve, Franklin Harbour, Tumby Bay, Elliston and part of Lower Eyre Peninsula LGA (Cummins), Northern Areas, Peterborough, Orroroo/Carrieton, Mount Remarkable, Barunga West and part Port Pirie LGA (Crystal Brook), Flinders Ranges, Karoonda East Murray and Southern Mallee, Yorke Peninsula, Kangaroo Island, Kingston and Robe. Activity is also provided in the remote outback including Coober Pedy, Oodnadatta, Maree and stations across the Far West and Far North of SA.

In Scope AOD Treatment Type *

Indigenous Specific *
No
Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Yorke Peninsula	40504
Lower North	40502
Mid North	40503
Limestone Coast	40702
Murray and Mallee	40703
Outback - North and East	40602
Eyre Peninsula and South West	40601
Fleurieu - Kangaroo Island	40701



Consultation

Collaboration



Activity Milestone Details/Duration

ctivity Start Date
0/06/2018
ctivity End Date
9/06/2021
ervice Delivery Start Date
ervice Delivery End Date

Other Relevant Milestones

The evaluation report is expected to be delivered in September 2021.



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: No 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 comments

n/a



GPS - 1000 - GPS – General Practice Support



Activity Metadata

Applicable Schedule *
Core Funding
Activity Prefix *
GPS
Activity Number *
1000
Activity Title *
GPS – General Practice Support
Existing, Modified or New Activity *
Existing



Activity Priorities and Description

Program Key Priority Area * Workforce Other Program Key Priority Area Description

Aim of Activity *

This activity provides support to general practice both in business capacity and population health support. It encourages continuous improvement and quality care, enhanced capacity, sustainability, improved access, better coordination and health outcomes for patients. This support is delivered via a targeted program that includes practice visits, remote support, webinars, assistance with resources and education.

Description of Activity *

This activity supports the general practice function in its encounter with and management of patients, data, systems and process to enable best practice options of patient care. This activity includes but is not limited to:

- Implement digital health changes for the meaningful use of the My Health Record and enabling technologies.
- Increase general practice capacity and sustainability through increased appropriate use of MBS and Incentive payments.
- Promote engagement and participation in Practice Incentives Program (PIP) and the PIP Quality Improvement (QI) incentive.
- Support Practice Managers, Practice Nurses and General Practice staff with CQI and 5th Standards Accreditation.
- Support care planning and the Medical Home model changes.
- Support change management and implementation of the MBS review and other future changes.

- Improve data quality and use of clinical information systems.
- Support the uptake of systems such as HealthPathways and online care planning to access to improve coordination of care and integration with specialist and allied health
- Provide clinical care updates, current preventative health information and other resources

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Health Information and Technology (GEN - 3)	34
Health Systems Integration and Coordination (GEN-6)	30
Reducing Potentially Preventable Hospitalisations (GEN-8,9)	23
Health Workforce (GEN-2)	27
Chronic Conditions and Risk Factors (GEN-4)	16
Other Population Health Factors (GEN-5)	21



Activity Demographics

Target Population Cohort

General Practices in the CSAPHN Region

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Campbelltown (SA)	40104
Yorke Peninsula	40504
Lower North	40502
Gawler - Two Wells	40201
Mid North	40503
Limestone Coast	40702
Murray and Mallee	40703
Outback - North and East	40602
Barossa	40501
Adelaide Hills	40102
Eyre Peninsula and South West	40601
Fleurieu - Kangaroo Island	40701



Activity Consultation and Collaboration

Consultation

Engagement with appropriate stakeholders across country SA regions has been imbedded in the activity of the PHN for three years. It is complemented by consultation with Clinical Council/s and Community Advisory Committee/s. Consultation also occurs at the strategic and peak body level across the State and elsewhere as appropriate.

Collaboration

General Practice support is a core function of the PHNs, as such there are efficiencies to be gained by joint development of this area of activity. CSAPHN will seek collaboration and partnership within others in the PHN network to develop the modules of activity that underpin this initiative and to share learnings.

Additionally, the delivery or targeted support from external parties may be a requirement of specific modules of quality improvement (i.e. Education). CSAPHN will facilitate the delivery of relevant third-party support from appropriate providers.



Activity Milestone Details/Duration

Activity Start Date 30/06/2018 Activity End Date 29/06/2021 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): 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 comments n/a



CF-COVID-PCS - 2 - COVID Primary Care Support



Activity Metadata

Applicable Schedule *
Core Funding
Activity Prefix *
CF-COVID-PCS
Activity Number *
2
Activity Title *
COVID Primary Care Support
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 *

This Activity will assist PHNs to provide support for Australia's COVID-19 Vaccine and Treatment Strategy (Strategy) to the primary, aged care and disability sectors.

Description of Activity *

Activities are as follows but not limited to:

- •
- provide guidance and expert advice to GPRCs, General Practices, Aboriginal Community Controlled Health Services (ACCHs), residential aged care facilities (RACF), disability accommodation facilities and governments on local needs and issues;
- coordinate vaccine rollout within RACFs and disability accommodation facilities for phase 1a of the Strategy as guided by key stakeholders and industry experts, including local service integration and communication, liaison with key delivery partners and consistent reporting;
- coordinate the delivery of vaccination services to RACFs in their areas;

- conduct a needs assessment in their region followed by a rapid expression of interest process to identify suitable General Practices and GPRCs to participate from Phase 1b of the Strategy and provide advice to the Department on the selection of those sites;
- support vaccine delivery sites in their establishment and operation, including where appropriate, performing functions of assurance and assessment of suitability and ongoing quality control support; and
- support vaccine delivery to be integrated within local health pathways to assist with the coordination of local COVID-19
 primary care responses, including identification and assistance for GPRCs and General Practices interested in
 participating, and ensuring consistent communications to local communities.
- support vaccine delivery with supply of PPE and consumables where vaccinating general practices and ACCHS are unable to source
- support Allied Health Services in RACFs through the rollout of the COVID Allied Health Package GP Education

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Health systems integration and coordination	29
Immunisation	17
Health Workforce	26



Activity Demographics

Target Population Cohort

N/A

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
Activity End Date
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?
is this activity the result of a previous to-design process:
Do you plan to implement this Activity using so commissioning or joint commissioning arrangements?
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



COVID-GPLRC - 1000 - Respiratory Clinics and Workforce



Activity Metadata

Applicable Schedule *
Core Funding
Activity Prefix *
COVID-GPLRC
Activity Number *
1000
Activity Title *
Respiratory Clinics and Workforce
xisting, Modified or New Activity *
xisting



Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

Pandemic response to COVID testing primary care workforce support

Aim of Activity *

This Activity will assist PHNs to provide ongoing support in relation to the Australian Government's COVID-19 response including:

- identifying potential GP-led Respiratory Clinic (GPRC) sites; and
- supporting the ongoing distribution of personal protective equipment (PPE) to primary care services as directed by Department-issued guidance.

This is to be completed by 31 December 2021.

Description of Activity *

Per advice from Primary Care Services Branch, this activity is noted in the Core AWP as an operational activity. It requires only a title and allocation of funding.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Other population health factors	20
Reducing potentially preventable hospitalisations	22



Activity Demographics

Target Population Cohort

Whole of population approach to pandemic response

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

Authorised GP Respiratory Clinics and Primary Care Practitioners in the region

Collaboration

Local Health Networks, SA Health, Primary Care Health Providers as directed under a pandemic response



Activity Milestone Details/Duration

Activity Start Date

Activity End Date

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



CHHP - 1100 - Community Paramedicine and Nurse Practitioner Care Model



Activity Metadata

Applicable Schedule *
Core Funding
Activity Prefix *
СННР
Activity Number *
1100
Activity Title *
Community Paramedicine and Nurse Practitioner Care Model
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 *

John and Jenny live, work and play in communities across country South Australia. The consumer focus of John and Jenny as a whole person living in country SA supports a holistic approach that takes consideration of multiple factors that may impact the ability of the individual, family or community to experience health optimisation and wellbeing as they go about their daily lives. John and Jenny represent all members of our community. They are individuals across all age groups, cultural values, family groupings, ability or disability, advantage or disadvantage, sexual orientation.

John and Jenny reside in one of approximately 50 small rural and remote South Australian communities that have very limited or no access, to GP primary care services.

Through supporting the trial of supplementary primary health professional resources in rural and remote communities, CSAPHN seeks to support integrate care options that link vulnerable people with health care suited to their circumstances.

The primary aims of CHHP1.1 activities are to reduce the significant gap in timely access to general practice level services for John and Jenny, particularly in relation to management of their chronic conditions.

Description of Activity *

There are some 110 communities with a population of less than 1,000 persons dotted across the CSAPHN region. Half of these communities rely on outreach services from a visiting General Practitioner (GP), or residents must travel to an alternative location to access care.

As John and Jenny in our smaller rural and remote communities get older or have less ability to move between locations, access to regular illness prevention and other basic primary care becomes less accessible as does the ability to age or live well in place.

This activity is commissioned in part to, and conducted in partnership with, SA Ambulance Service and is known as the "Community Paramedic and Nurse Practitioner Program".

Activities include but are not limited to:

- 1.
- Trial and evaluate a Community Paramedic/ Nurse Practitioner model in the remote south east and the remote west coast of the state, and other locations as identified.
- Recruit, train and support appropriately trained Community Paramedics and qualified advanced scope of practice or Nurse Practitioners (NP) to work in targeted regions.
- Engage with local General Practice/Aboriginal Community Controlled Health Services (ACCHS), other service providers and the local community to identify service gaps and plan appropriate service provision.
- Identify and support at risk patients to receive time appropriate care through the community paramedicine and nurse practitioner models.
- Work with Aboriginal and Torres Strait Islander people and their communities to improve timely access to health care when and where needed
- Consider and plan for ongoing sustainability of this activity after the conclusion of the funding period Scoping of this care model in other areas of need, and in particular using an advanced scope or nurse practitioner workforce is continuing.
- SAAS in-reach into aged care hospital avoidance activities through underspends.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Aboriginal Health (GEN-1)	45
Reducing Potentially Preventable Hospitalisations (GEN-8,9)	23
Health Workforce (GEN-2)	27
Other Population Health Factors (GEN-5)	21
Ageing Populations (GEN-10,14)	7



Activity Demographics

Target Population Cohort

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Limestone Coast	40702
Eyre Peninsula and South West	40601



Activity Consultation and Collaboration

Consultation

Collaboration

ţ...,

Activity Milestone Details/Duration

Activity Start Date

Activity End Date

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? 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? Yes Has this activity previously been co-commissioned or joint-commissioned? Yes Decommissioning No **Decommissioning details?** n/a Co-design or co-commissioning comments

Country SA - PHN Pilots and Targeted Programs 2019/20 - 2023/24 Activity Summary View



PP&TP-AHPGPE - 1 - COVID Allied Health Package and GP Education support



Activity Metadata

Applicable Schedule *
PHN Pilots and Targeted Programs
Activity Prefix *
PP&TP-AHPGPE
Activity Number *
1
Activity Title *
COVID Allied Health Package and GP Education support
Existing, Modified or New Activity *
New Activity



Activity Priorities and Description

Program Key Priority Area *

Workforce

Other Program Key Priority Area Description

Aim of Activity *

Support the delivery of information to key providers regarding new MBS items that assist in managing the health of people living in residential aged care facilities.

Description of Activity *

Deliver a GP education package to GPs and other primary care providers, including practice nurses, in your region regarding:

• the importance of providing allied health services to people with dementia and other residents with complex medical needs in Residential Aged Care Facilities (RACF);

the new temporary MBS allied health and mental health items for residents of aged care facilities, and how they can be used to support the residents. It is expected that a minimum of three education sessions are conducted. The fact sheets available at the following link will be the key guidance materials for the education package:
 http://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/factsheet-rack-ah

The Department will provide any additional guidance materials developed by the AskMBS team as they are released to support the delivery of the grant opportunity. The Department will be conducting an evaluation of the package and will require PHNs to work with the evaluation team as the package is rolled out.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Health systems integration and coordination	29
Ageing population	7
Health Workforce	26



Activity Demographics

Target Population Cohort

Older Australians in residential aged care

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

ctivity Start Date	
ctivity End Date	
ervice Delivery Start Date	
ervice Delivery End Date	
ther 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