

North Western Melbourne - Integrated Team Care

2019/20 - 2020/21

Activity Summary View



[ITC - 2 - ITC2 – Culturally competent mainstream services]



Activity Metadata

Applicable Schedule *

Integrated Team Care

Activity Prefix *

ITC

Activity Number *

2

Activity Title *

ITC2 – Culturally competent mainstream services

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Aboriginal and Torres Strait Islander Health

Aim of Activity *

Improve access to culturally appropriate mainstream primary care services (including but not limited to general practice, allied health, and specialists) for Aboriginal and Torres Strait Islander people

Description of Activity *

There are a range of activities designed to enhance the provision of culturally safe health service delivery. These include:

- Provision of face to face cultural awareness training services for mainstream primary health care providers
- Delivery of Quality Improvement packages, training and resources for mainstream primary health care providers
- General Practice support visits undertaken to promote the Indigenous Health Incentive payments for registered general practices in the region
- Pharmacy visits to support culturally appropriate interventions and assist to ensure Co-Payment Incentive measures are correctly dispensed
- Analysis of data to identify mainstream general practices who support large numbers of Aboriginal clients and working with these practices to improve best practice care

- Support for general practices with limited numbers of Aboriginal patients to improve capacity to be culturally appropriate
- ITC staff attend Practice Manager Network meetings to promote culturally competent service provision

Needs Assessment Priorities *

NWMPHN Needs Assessment 2019/20-2021/22_updated

Priorities

| Needs Assessment Priority | Page Reference |
|---------------------------|----------------|
| Aboriginal Health | 89 |



Activity Demographics

Target Population Cohort *

Aboriginal and Torres Strait Islander people with a diagnosed chronic condition

Indigenous Specific *

Yes

Indigenous Specific Comments *

Improving and supporting Aboriginal and Torres Strait Islander health is a priority. NWMPHN has developed a Reconciliation Action Plan to support the engagement with and focus on our Aboriginal and Torres Strait Islander communities. NWMPHN also works with commissioned providers to support cultural competency in commissioned services.

Coverage *

Whole Region

Yes

| SA3 Name | SA3 Code |
|----------------------------|----------|
| Brunswick - Coburg | 20601 |
| Darebin - South | 20602 |
| Essendon | 20603 |
| Melbourne City | 20604 |
| Yarra | 20607 |
| Darebin - North | 20902 |
| Keilor | 21001 |
| Macedon Ranges | 21002 |
| Moreland - North | 21003 |
| Sunbury | 21004 |
| Tullamarine - Broadmeadows | 21005 |
| Brimbank | 21301 |
| Hobsons Bay | 21302 |
| Maribyrnong | 21303 |
| Melton - Bacchus Marsh | 21304 |
| Wyndham | 21305 |



Activity Consultation and Collaboration

Consultation *

NWMPHNs Reconciliation Action Plan (RAP) identifies clear strategies for consultation to enhance commissioning and capacity building approaches to improve the health and wellbeing of Aboriginal people across the catchment. There are a range of mechanisms in place across the commissioning cycle to facilitate consultation, including through the Clinical and Community Advisory Councils, expert advisory groups, Aboriginal Health Advisory Group and consumer and community forums.

Consumers and people with Lived Experience are core to the work we do. We seek opportunities for consumers to be involved at all stages of Commissioning including co-design to support positive consumer experience. This is particularly important with our work with the Aboriginal community and is reinforced through our commitments in our endorsed RAP.

NWMPHN also consults with existing service providers and the broader sector to understand the effectiveness and impact of commissioned services, and this will be a key feature for the ITC program over the coming years.

Collaboration *

Stakeholder engagement and co-design approaches will underpin collaborative efforts to ensure the ITC program is structured to best meet the needs of local Aboriginal communities. These activities will promote integrated service responses and be focussed on ensuring a transparent and robust process of engagement is undertaken.

Key stakeholders include, but are not limited to, Aboriginal community members, Aboriginal Community Controlled Organisations, mainstream community health services, general practice, local hospital networks, pharmacy, allied health providers, NGOs, local governments and Victorian Department of Health and Human Services.



Activity Milestone Details/Duration

Activity Start Date *

30 Jun 2019

Activity End Date *

30 Aug 2021

Service Delivery Start Date

01/07/2019

Service Delivery End Date

30/06/2021

Other Relevant Milestones

NA



Activity Commissioning

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

Not yet known: No

Continuing service provider / contract extension: No

Direct engagement. Please provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date: No

Open tender : No

Expression of interest (EOI): No

Other approach (please provide details) : Yes

No budget allocated to this activity

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? *

NA

Co-design or co-commissioning details *

NA



[ITC - 1 - ITC1 – Care coordination and supplementary services]



Activity Metadata

Applicable Schedule *

Integrated Team Care

Activity Prefix *

ITC

Activity Number *

1

Activity Title *

ITC1 – Care coordination and supplementary services

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Aboriginal and Torres Strait Islander Health

Aim of Activity *

This activity aims to contribute to improving health outcomes for Aboriginal and Torres Strait Islander people with chronic health conditions through better access to care coordination, multidisciplinary care, and support for self-management.

Description of Activity *

NWMPHN has commissioned an Aboriginal Community Controlled Health Organisation (ACCHO), as well as five mainstream community health services to deliver the Integrated Team Care program. There is a team approach to client care across the catchment, with Care Coordinators and Aboriginal Outreach Workers being co-located in order to promote collaboration and better client outcomes. The Indigenous Health Project Officer (IHPO) roles work closely with the Care Coordinators and Outreach Workers to support commissioned service providers to better understand the health needs of the Aboriginal community and to provide culturally appropriate care.

Care Coordinators:**Care Coordination includes:**

- Supporting eligible clients to understand their health needs and navigate the health system
- Liaising with general practice to assist clients to get the care they need
- Facilitating access to the most appropriate services in a timely manner
- Developing and maintaining relationships with local community organisations to promote the ITC program and ensure that clients are aware of available resources
- Providing appropriate clinical care and arranging treatment options in accordance with the client's care plan
- Working with the client's family and support networks to ensure that the client's emotional and social wellbeing needs are considered

Outreach Workers:**Outreach Work includes:**

- Supporting Care Coordinators to engage clients and their families

- Supporting Aboriginal clients to access health services, attend appointments and manage access to prescribed medications
- Encouraging clients to engage in services that can improve health outcomes
- Linking clients with local Aboriginal community through support to attend social and emotional wellbeing groups
- Identifying barriers to health care access for their clients and supporting Care Coordinators and IHPO's to develop strategies to improve client access

Indigenous Health Project Officers:

Indigenous Health Project Officer activities include:

- Providing general practice and primary care engagement and support
- Increasing awareness of the Practice Incentive Payment Program's Indigenous Health Incentive (PIP IHI)
- Facilitating access to Cultural Awareness Training opportunities for general practice, allied health and community services
- Developing and maintaining culturally appropriate resources for Aboriginal and Torres Strait Islander populations
- Building capacity of the Aboriginal and non-Aboriginal workforce to deliver culturally appropriate services
- Utilising NWMPHN communication channels to provide information on Closing the Gap measures, National Awareness Days and other important Aboriginal and Torres Strait Islander information.

Specify which positions will be engaged by the PHN or commissioned organisation(s). If engaged at a commissioned organisation, specify whether it is an AMS*, mainstream primary care service or PHN:

| Workforce Type | FTE | AMS | MPC | PHN |
|------------------------------------|-----|-----|---------|---------|
| Indigenous Health Project Officers | 2.0 | | | 2.0 FTE |
| Care Coordinators | | 4.5 | 0.8 FTE | 3.7 FTE |
| Outreach Workers | | 2.4 | 0.8 FTE | 1.6 FTE |

Please provide a description of workforce development provided for staff under this activity.

NWMPHN and commissioned organisations will provide appropriate support and development activities for the ITC workforce that will include:

- Provision of peer support and networking opportunities through regular meetings with all Care Coordinators and Aboriginal Outreach Workers. These meetings will enable sharing of case studies, approaches to client work (problem solving), resources and hearing from presenters to best meet identified needs.
- Provision of training, workforce development and capacity building activities to support skills development and enhancement of high-quality service provision.
- Provision of on the job learning and mentoring approaches in collaboration with other PHNs as appropriate.

*AMS refers to Indigenous Health Services and Aboriginal Community Controlled Health Services

Needs Assessment Priorities *

NWMPHN Needs Assessment 2019/20-2021/22_updated

Priorities

| Needs Assessment Priority | Page Reference |
|---------------------------|----------------|
| Aboriginal Health | 89 |



Activity Demographics

Target Population Cohort *

Aboriginal and Torres Strait Islander people with a diagnosed chronic condition

Indigenous Specific *

Yes

Indigenous Specific Comments *

Improving and supporting Aboriginal and Torres Strait Islander health is a priority. NWMPHN has developed a Reconciliation Action Plan to support the engagement with and focus on our Aboriginal and Torres Strait Islander communities. NWMPHN also works with commissioned providers to support cultural competency in commissioned services.

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Activity Consultation and Collaboration

Consultation *

Commissioning arrangements for the provision of Care Coordination and Aboriginal outreach services will be via direct engagement with the currently contracted Aboriginal Community Controlled Health Organisation and five mainstream Community Health Organisations. This approach ensures ongoing continuity of care across the region to meet the needs of our Aboriginal communities. This work is a co-design process with providers and will include input from Aboriginal community members.

NWMPHNs Reconciliation Action Plan (RAP) identifies clear strategies for consultation to enhance commissioning and capacity building approaches to improve the health and wellbeing of Aboriginal people across the catchment. There are a range of mechanisms in place across the commissioning cycle to facilitate consultation, including through the Clinical and Community Advisory Councils, expert advisory groups, Aboriginal Health Advisory Group and consumer and community forums.

Consumers and people with Lived Experience are core to the work we do. We seek opportunities for consumers to be involved at all stages of Commissioning including co-design to support positive consumer experience. This is particularly important with our work with the Aboriginal community and is reinforced through our commitments in our endorsed RAP.

NWMPHN also consults with existing service providers and the broader sector to understand the effectiveness and impact of commissioned services. NWMPHN has been responsive to feedback from stakeholders to inform service improvements to

better meet the Social and Emotional Wellbeing needs of Aboriginal and Torres Strait Islander people within our region. As a result, each provider is developing a 'Wellbeing Program' to complement the ITC program that provides support so that clients can maintain self-management and address low-intensity mental health issues through a holistic model of care.

Collaboration *

Stakeholder engagement and co-design approaches will underpin collaborative efforts to ensure the ITC program is structured to best meet the needs of local Aboriginal communities. These activities will promote integrated service responses and be focussed on ensuring a transparent and robust process of engagement is undertaken.

Key stakeholders include, but are not limited to, Aboriginal community members, Aboriginal Community Controlled Organisations, mainstream community health services, general practice, local hospital networks, pharmacy, allied health providers, NGOs, local governments and Victorian Department of Health and Human Services.



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Other approach (please provide details) : No

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

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Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? *

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

No

Decommissioning *

No

Decommissioning Details? *

It is not intended that decommissioning will occur in this period. It is important to note however that regular review of current service providers continues to be undertaken to ensure the most appropriate service providers are commissioned to deliver services.

Co-design or co-commissioning details *

NA