

# North Western Melbourne - After Hours Primary Health Care 2022/23 - 2026/27 Activity Summary View



## AH-HAP - 1301 - Improving access to integrated afterhours primary healthcare for people exp homelessness 24/25



### Activity Metadata

#### Applicable Schedule \*

After Hours Primary Health Care

#### Activity Prefix \*

AH-HAP

#### Activity Number \*

1301

#### Activity Title \*

Improving access to integrated afterhours primary healthcare for people exp homelessness 24/25

#### 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 \*

The aim of this activity is to increase access to and improve integration of primary care services in the after-hours period for people experiencing homelessness.

#### Description of Activity \*

Services will be commissioned to:

- Deliver primary health care that may involve assertive outreach.
- Is designed in collaboration with consumers or relevant representatives and clinicians.
- Has formalised linkages between internal programs and external services (cross sectorial).
- Has a strong focus on clinical governance and support for staff.

- Supports service providers to respond to seasonal flu and other pan/epidemics.

## Needs Assessment Priorities \*

### Needs Assessment

NWMPHN Needs Assessment 2022-2025

#### Priorities

Priority	Page reference
Chronic conditions - range, higher rates, lower uptake of management plans	186
Alcohol and Other Drug Services - demand, prevalence and complexity	184



## Activity Demographics

### Target Population Cohort

People experiencing homelessness.

The activity will occur in NWMPHN's region with a likely focus on Melbourne (LGA).

A place-based approach may be considered in a suburban or growth area with a high proportion of population experiencing homelessness.

### In Scope AOD Treatment Type \*

### Indigenous Specific \*

No

### Indigenous Specific Comments

### Coverage

#### Whole Region

No

SA3 Name	SA3 Code
Melbourne City	20604



## Activity Consultation and Collaboration

### Consultation

North Western Melbourne Primary Health Network (NWMPHN) is committed to ensuring stakeholder engagement is embedded in our culture and core functions.

Stakeholder engagement occurs throughout all seven activities that comprise our commissioning approach:

- Assess and prioritise needs
- Review evidence to inform planning and design
- Design services to address need
- Prepare the system for delivery
- Support implementation
- Manage performance and drive continuous improvement
- Evaluate the impact

We use a range of mechanisms to engage with our communities. This includes working with our Community and Clinical Councils, Expert Advisory Groups (EAGs) and People Bank members.

The Clinical and Community Councils provide advice to the Board about the unique needs of the region, and principles and mechanisms for engaging local stakeholders. The EAGs provide subject matter expertise, insights and advice to support operational model and service design, focusing on safety, quality, and integration. NWMPHN has EAGs for:

- General Practice
- Alcohol and Other Drugs
- Mental Health
- Aboriginal and Torres Strait Islander Health
- Older Adults

People Bank is a register of people who would like to participate in activities that help to improve the health of people in the region. Members participate in a range of different activities including workshops, governance groups, surveys, and tender evaluation panels.

We continue to also consult and seek specific advice from relevant strategic and local organisations and other stakeholders, such as peak and professional bodies, governments, the primary health care sector and local health services and hospital networks.

This activity will also include meaningful key stakeholder input in the procurement and program development process.

Commissioned provider(s) will also be expected to consult with community members when designing and implementing their activities.

## **Collaboration**

NWMPHN's approach to collaboration and engagement is underpinned by the IAP2 model. Best practice in public engagement is influenced by the Spectrum of Public Participation developed by the International Association of Public Participation. This spectrum includes five levels of participation, Inform, Consult, Involve, Collaborate and Empower.

Collaboration will be utilised wherever possible throughout the commissioning cycle as NWMPHN recognises that working in this way adds value and strengthens our reach. Mutually meaningful collaboration is pursued and maintained in a systematic way across the organisation, which facilitates timely access to existing and new collaboration approaches. This is critical to driving a team-based and integrated approach to delivering person-centred primary care.

Collaboration with key stakeholders will occur throughout the commissioning process. Consequently, the following stakeholders may be involved in prioritisation, planning and design, implementation, monitoring and evaluation of activities:

- Community participants – consumers, patients, carers, and people with lived experience, priority populations, community leaders
- Health care professionals
- NWMPHN regional and strategic partnerships and collaboratives
- Local health services and hospital networks
- Community health services
- General practice
- Residential aged care facilities
- Pharmacy
- Allied health
- Community-based organisations
- Research institutes
- Academic and training institutions
- Peak and professional bodies
- Victorian Department of Health
- Local government
- Other PHNs
- Media

- Other identified providers



## Activity Milestone Details/Duration

### Activity Start Date

16/09/2022

### Activity End Date

29/09/2025

### Service Delivery Start Date

January 2023

### Service Delivery End Date

30/6/2025

### 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?

**Co-design or co-commissioning comments**

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## AH-HAP-Ops - 3 - Homelessness Ops



### Activity Metadata

**Applicable Schedule \***

After Hours Primary Health Care

**Activity Prefix \***

AH-HAP-Ops

**Activity Number \***

3

**Activity Title \***

Homelessness Ops

**Existing, Modified or New Activity \***

New Activity



### Activity Priorities and Description

**Program Key Priority Area \***

**Other Program Key Priority Area Description**

**Aim of Activity \***

**Description of Activity \***

**Needs Assessment Priorities \***

**Needs Assessment**

**Priorities**



## Activity Demographics

Target Population Cohort

In Scope AOD Treatment Type \*

Indigenous Specific \*

Indigenous Specific Comments

Coverage

Whole Region



## 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





## AH-MAP - 1800 - Multicultural Access Program 23/24



### Activity Metadata

**Applicable Schedule \***

After Hours Primary Health Care

**Activity Prefix \***

AH-MAP

**Activity Number \***

1800

**Activity Title \***

Multicultural Access Program 23/24

**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 \***

Undertake a needs assessment to support the application for the Improving primary care access for multicultural communities

**Description of Activity \***

This activity will seek to understand the barriers to accessing primary care services in NWMPHN for culturally and linguistically diverse communities.

The activity will build on data analysis and consultations undertaken for the following projects; development of the 2022-2025 NWMPHN Health Needs Assessment (HNA), Older Persons HNA (2022) focused Mental Health HNA and focused West Metro Health Needs Assessment.

The findings identified through these projects will inform the key lines of inquiry for further targeted consultations with CALD community members, peak bodies and service providers that will inform the commissioning intentions for NWMPHN for the PHN Multicultural Access After Hours stream for 2024-2025 activity.

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

## Priorities

Priority	Page reference
Chronic conditions - range, higher rates, lower uptake of management plans	186
Preventative health checks - lower rates of screening	185
Comorbid conditions - complexity and demand	184
Mental Health - demand, prevalence, complexity	183



## Activity Demographics

### Target Population Cohort

Multicultural communities

### In Scope AOD Treatment Type \*

### Indigenous Specific \*

No

### Indigenous Specific Comments

### Coverage

#### Whole Region

Yes



## Activity Consultation and Collaboration

### Consultation

North Western Melbourne Primary Health Network (NWMPHN) is committed to ensuring stakeholder engagement is embedded in our culture and core functions.

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- Manage performance and drive continuous improvement
- Evaluate the impact

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The Clinical and Community Councils provide advice to the Board about the unique needs of the region, and principles and mechanisms for engaging local stakeholders. The EAGs provide subject matter expertise, insights and advice to support operational model and service design, focusing on safety, quality, and integration. NWMPHN has EAGs for:

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- Aboriginal and Torres Strait Islander Health
- Older Adults

People Bank is a register of people who would like to participate in activities that help to improve the health of people in the region. Members participate in a range of different activities including workshops, governance groups, surveys, and tender evaluation panels.

We continue to also consult and seek specific advice from relevant strategic and local organisations and other stakeholders, such as peak and professional bodies, governments, the primary health care sector and local health services and hospital networks.

This activity will also include meaningful key stakeholder input in the procurement and program development process.

Commissioned provider(s) will also be expected to consult with community members when designing and implementing their activities.

### **Collaboration**

NWMPHN's approach to collaboration and engagement is underpinned by the IAP2 model. Best practice in public engagement is influenced by the Spectrum of Public Participation developed by the International Association of Public Participation. This spectrum includes five levels of participation, Inform, Consult, Involve, Collaborate and Empower.

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Collaboration with key stakeholders will occur throughout the commissioning process. Consequently, the following stakeholders may be involved in prioritisation, planning and design, implementation, monitoring and evaluation of activities:

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- Health care professionals
- NWMPHN regional and strategic partnerships and collaboratives
- Local health services and hospital networks
- Community health services
- General practice
- Residential aged care facilities
- Pharmacy
- Allied health
- Community-based organisations
- Research institutes
- Academic and training institutions
- Peak and professional bodies
- Victorian Department of Health
- Local government
- Other PHNs
- Media



### **Activity Milestone Details/Duration**

**Activity Start Date**

30/06/2023

**Activity End Date**

29/06/2024

**Service Delivery Start Date**

01/07/2023

**Service Delivery End Date**

30/06/2024

**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?****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**

The activity sought to generate solutions from community to then form the application for further funding.



## AH-MAP-Ops - 8 - Multicultural Ops



### Activity Metadata

**Applicable Schedule \***

After Hours Primary Health Care

**Activity Prefix \***

AH-MAP-Ops

**Activity Number \***

8

**Activity Title \***

Multicultural Ops

**Existing, Modified or New Activity \***

New Activity



### Activity Priorities and Description

**Program Key Priority Area \***

**Other Program Key Priority Area Description**

**Aim of Activity \***

**Description of Activity \***

**Needs Assessment Priorities \***

**Needs Assessment**

**Priorities**



## Activity Demographics

Target Population Cohort

In Scope AOD Treatment Type \*

Indigenous Specific \*

Indigenous Specific Comments

Coverage

Whole Region



## 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



## AH - 1200 - Improving the wellbeing of older adults living in residential aged care\_AWP 23/24



### Activity Metadata

**Applicable Schedule \***

After Hours Primary Health Care

**Activity Prefix \***

AH

**Activity Number \***

1200

**Activity Title \***

Improving the wellbeing of older adults living in residential aged care\_AWP 23/24

**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 support improved wellbeing of older adults living in residential aged care facilities.

**Description of Activity \***

The aim of this activity is to support improved wellbeing of older adults living in residential aged care facilities.

Providers will be commissioned to implement proactive interventions to improve the wellbeing of older adults, with a particular focus on addressing impacts on physical and emotional wellbeing resulting from the COVID-19 pandemic. This activity will seek to improve integration of services and support access to after-hours services for older adults.

Approaches may include:

- Targeted activities aimed at reducing the progression of frailty.
- Delivery of allied health services into residential aged care facilities (RACFs) to address physical deconditioning.
- Robust approach to evaluation of the process and impact of all associated commissioned activity.
- Older adults may be referred to services via an aged care provider (e.g. nurse, allied health, aged care assessment service, volunteers), general practitioner, or by family and carers. Service provision may occur, at RACF, both in-hours and in the after-hours period.



Needs Assessment Priorities \*

Needs Assessment

NWMPHN Needs Assessment 2022-2025

Priorities

Priority	Page reference
Mental Health - demand, prevalence, complexity	183



Activity Demographics

Target Population Cohort

Older Adults

In Scope AOD Treatment Type \*

Indigenous Specific \*

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

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



## Activity Consultation and Collaboration

### Consultation

NWMPHN uses a range of mechanisms to facilitate consultation, including through the Community and Clinical Councils and existing Expert Advisory Groups for older adults, Aboriginal and Torres Strait Islanders, general practice, mental health and alcohol and other drugs. Specific consultation and advice will continue to be sought from a range of relevant strategic and local organisations and stakeholders, such as peak and professional bodies, state government and local hospital networks. Consumers and people with lived experience are integral to the work we do and their participation in all aspects of the commissioning cycle will continue to be enabled and evolved.

The commissioned gap analysis and recommendations included a significant amount of community engagement and consultation, particularly with community members from NWMPHN's priority populations. Interviews and focus groups with community members (older adults) and key sector informants e.g. Council of The Aging (COTA) have been undertaken. Additional consultation has been undertaken as part of the Needs Assessment for the care finder program.

This activity will also include genuine key stakeholder input in the procurement process. Additionally, commissioned providers will be expected to consult with community members when designing and implementing their model of care.

### Collaboration

Collaboration with appropriate stakeholders will occur throughout the commissioning process. Stakeholders will be determined based on the planned commissioned activity, however, may include relevant peak body organisations, community health services, general practice, local hospital networks, Bolton Clarke, residential in-reach providers, allied health, community-based organisations, community members/carers, telephone-based support services, Department of Health and Human Services and other identified providers.



## Activity Milestone Details/Duration

### Activity Start Date

28/06/2019

### Activity End Date

29/12/2023

### Service Delivery Start Date

February 2022

### Service Delivery End Date

December 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?

na

### Co-design or co-commissioning comments

n/a

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## AH - 1300 - Improving access to integrated afterhours primary healthcare for people exp homelessness 23/24



### Activity Metadata

#### Applicable Schedule \*

After Hours Primary Health Care

#### Activity Prefix \*

AH

#### Activity Number \*

1300

#### Activity Title \*

Improving access to integrated afterhours primary healthcare for people exp homelessness 23/24

#### 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 increase access to and improve integration of primary care services in the after-hours period for people experiencing homelessness.

#### Description of Activity \*

Services will be commissioned to:

- Deliver primary health care that may involve assertive outreach.
- Is designed in collaboration with consumers or relevant representatives and clinicians.
- Has formalised linkages between internal programs and external services (cross sectorial).
- Has a strong focus on clinical governance and support for staff.
- Supports service providers to respond to seasonal flu and other pan/epidemics.

#### Needs Assessment Priorities \*

#### Needs Assessment

NWMPHN Needs Assessment 2022-2025

#### Priorities

Priority	Page reference
Chronic conditions - range, higher rates, lower uptake of management plans	186
Alcohol and Other Drug Services - demand, prevalence and complexity	184



## Activity Demographics

### Target Population Cohort

People experiencing homelessness.

The activity will occur in NWMPHN's region with a likely focus on Melbourne (LGA).

A place-based approach may be considered in a suburban or growth area with a high proportion of population experiencing homelessness.

### In Scope AOD Treatment Type \*

### Indigenous Specific \*

No

### Indigenous Specific Comments

### Coverage

#### Whole Region

No

SA3 Name	SA3 Code
Melbourne City	20604



## Activity Consultation and Collaboration

### Consultation

NWMPHN utilises a range of mechanisms to facilitate consultation, including through the Community and Clinical Councils and existing Expert Advisory Groups for older adults, Aboriginal and Torres Strait Islander health, general practice, mental health and alcohol and other drugs. Specific consultation and advice will continue to be sought from a range of relevant strategic and local organisations and stakeholders, such as peak and professional bodies, state government and local hospital networks. Consumers and people with lived experience are integral to the work we do and their participation in all aspects of the commissioning cycle will continue to be enabled and evolved.

### Collaboration

Collaboration with appropriate stakeholders will occur throughout the commissioning process. Stakeholders may include community health services, general practice, local hospital networks, pharmacy, allied health, community-based service providers, Ambulance Victoria, medical deputising services, community members/carers, Department of Health and Human Services and

other identified providers.

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## Activity Milestone Details/Duration

### Activity Start Date

17/09/2022

### Activity End Date

29/12/2023

### Service Delivery Start Date

January 2023

### Service Delivery End Date

December 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?

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 comments**

n/a

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## AH - 1700 - Improving outcomes after hours for vulnerable people most at risk of seasonal illness 23/24



### Activity Metadata

**Applicable Schedule \***

After Hours Primary Health Care

**Activity Prefix \***

AH

**Activity Number \***

1700

**Activity Title \***

Improving outcomes after hours for vulnerable people most at risk of seasonal illness 23/24

**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 activity is to improve outcomes in the after hours period for vulnerable people most at risk of seasonal illness.

**Description of Activity \***

- The activity supports service providers to prepare for and proactively respond to seasonal flu, respiratory conditions and epidemics.
- Provider(s) will be commissioned to develop and implement services which boost:
  - o Vaccination numbers in communities where vaccination rates are low and there are significant risks associated with respiratory conditions including COVID-19 and influenza.
  - o Winter plans for at risk populations to ensure timely access to care and appropriate medications, such as COVID-19 antivirals, to reduce avoidable hospital utilisation.
- Providers with formalised links between internal programs and external services (cross-sectorial) will be prioritised.
- The activity will have a strong focus on clinical governance and support for staff.
- The activity will facilitate information sharing and improving health literacy targeting people from vulnerable population groups.

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

#### Priorities

Priority	Page reference
Immunisation - lower rates of immunisation	184



### Activity Demographics

#### Target Population Cohort

This activity will target vulnerable population groups including Aboriginal and Torres Strait Islander Peoples, Children, Young People and Families, Culturally and Linguistically Diverse People, Older People, People with a disability and People Experiencing unstable housing/homelessness.

#### In Scope AOD Treatment Type \*

#### Indigenous Specific \*

No

#### Indigenous Specific Comments

#### Coverage

#### Whole Region

Yes



### Activity Consultation and Collaboration

#### Consultation

NWMPHN utilises a range of mechanisms to facilitate consultation, including through the Community and Clinical Councils and existing Expert Advisory Groups for older adults, Aboriginal and Torres Strait Islander health, general practice, mental health and alcohol and other drugs. Specific consultation and advice will continue to be sought from a range of relevant strategic and local organisations and stakeholders, such as peak and professional bodies, state government and local hospital networks. Consumers and people with lived experience are integral to the work we do and their participation in all aspects of the commissioning cycle will continue to be enabled and evolved.

#### Collaboration

Collaboration with appropriate stakeholders will occur throughout the commissioning process. Stakeholders may include community health services, general practice, local hospital networks, pharmacy, allied health, community-based service providers, Ambulance Victoria, medical deputising services, community members/carers, Department of Health and Human Services and other identified providers.



## Activity Milestone Details/Duration

### Activity Start Date

17/09/2022

### Activity End Date

29/12/2023

### Service Delivery Start Date

March 2023

### Service Delivery End Date

December 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

Yes

### Decommissioning details?

This program has been successful and allocated funding has been exhausted. Additionally, changes to policy guidelines have resulted in this activity not being eligible for out of hours funding.

### Co-design or co-commissioning comments

na





## AH-Op - 1000 - After Hours Operational\_AWP 23/24



### Activity Metadata

**Applicable Schedule \***

After Hours Primary Health Care

**Activity Prefix \***

AH-Op

**Activity Number \***

1000

**Activity Title \***

After Hours Operational\_AWP 23/24

**Existing, Modified or New Activity \***

Existing



### Activity Priorities and Description

**Program Key Priority Area \*****Other Program Key Priority Area Description****Aim of Activity \*****Description of Activity \*****Needs Assessment Priorities \*****Needs Assessment****Priorities**



## Activity Demographics

Target Population Cohort

In Scope AOD Treatment Type \*

Indigenous Specific \*

Indigenous Specific Comments

Coverage

Whole Region



## 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