



Western Queensland Primary Health Network

After Hours Primary Health Care 2023/24 — 2026/27 Activity Work Plan

ACTIVITY: AH-HAP - 1 - AHPHC-HAP1 (24-25) HOMELESSNESS ACCESS PROGRAM NEEDS ASSESSMENT

.....

Activity Priorities and Description

PROGRAM KEY PRIORITY AREA

After Hours - Homelessness Access

AIM OF ACTIVITY

The overarching aim of the Activity is the development of a comprehensive health needs assessment report outlining the issues and priorities of people experiencing homelessness or who are at risk of homelessness, in the Western Queensland PHN region, and the impacts on primary health care, including individual and community physical and mental health and wellbeing.

It is anticipated that the report will:

Identify and map support services for people experiencing homelessness and those at risk of homelessness, where it is demonstrated that there are physical, geographic, or other barriers to accessing primary care services.

Investigate the intersectionalities of homelessness and other social determinants of health, including the impact on disadvantaged target populations, including (but not limited to):

- Aboriginal and Torres Strait Islander people
- Culturally and linguistically diverse (CALD)
- Lesbian, gay, bisexual, transgender, queer or questioning, intersex and/or other sexuality and gender diverse people (LGBTQI+)
- people with mental illness
- people of low socioeconomic status
- people with disabilities
- rural, regional and remote; and

Recommend targeted commissioning for WQPHN to support primary health care access in areas where there are limited or no services available in the local community, through addressing service gaps across the Western Queensland PHN region, for people experiencing homeless and those at risk of homelessness.

The Project will identify the health and other needs of people experiencing homelessness, or who are at risk of homelessness across the million square kilometres over the three WQPHN subregions of:

- North-West Queensland,
- South-West Queensland, and
- Central-West Queensland

DESCRIPTION OF ACTIVITY

Through this Activity, WQPHN will:

- a. Undertake a Needs Assessment of the Western Queensland region by assessing the needs of people experiencing homelessness or at risk of homelessness in the Western PHN region
- b. Use the Needs Assessment to inform the development and implementation of an evidence-based Activity Work Plan. The Needs Assessment will identify service gaps and barriers to ensure PHN commissioned activities do not duplicate or compete with existing services

- c. Promote collaboration and partnerships that support primary health care access by people experiencing homelessness or who are at risk of homelessness, to help meet the needs of the Western Queensland region: including regional planning with HHSs, local primary care service providers including Aboriginal Community Controlled Organisations, Specialist Homelessness Services and relevant health consumer groups; and
- d. Consider opportunities for co-design and co-commissioning to enable more sustainable primary health care and service system solutions delivered to people who are homeless or who are at risk of homelessness, in the Western PHN region

Needs Assessment Priorities

NEEDS ASSESSMENT

WQPHN Needs Assessment 2021/22-2023/24

PRIORITIES

Priority	Page Reference
Recommendation 08 – Improved access for people with poor access or at risk of poorer health outcomes	81
Recommendation 13 – Broader primary health care	86
Recommendation 10 – Building workforce capability and sustainability	86
Recommendation 05 – Local approaches to deliver coordinated care	79
Recommendation 16 – Care innovation	76

Activity Demographics

TARGET POPULATION COHORT

People experiencing or at risk of homelessness in WQPHN region

Activity Consultation and Collaboration

CONSULTATION

To ensure that there are well-informed recommendations from the Project, including from a Lived Experience perspective, about how access to primary health care and enhanced health outcomes can be achieved for the target group, the mandatory consultations will include:

- face to face consultations with Specialist Homelessness Services (SHSs) – both Youth and Adult
- face to face consultations with relevant non-specialist services and networks
- people who identify as having a Lived Experience in relation to the target groups for this Project; and
- other stakeholders including Homelessness and service provider peaks e.g. QCOSS, commissioned and non-commissioned services providers, relevant regional, state, and national networks, HHSs (including any targeted Homelessness Support positions and ACCHOs

COLLABORATION

Collaboration will occur with the stakeholders to co-design and implement the Activity throughout the Project.

Activity Milestone Details/Duration

ACTIVITY START DATE

01/07/2022

ACTIVITY END DATE

30/06/2025



ACTIVITY: AH-MAP - 1 - AHPHC-MAP1 (24-25) MULTICULTURAL ACCESS PROGRAM NEEDS ASSESSMENT

.....

Activity Priorities and Description

PROGRAM KEY PRIORITY AREA

After Hours - Multicultural Access

AIM OF ACTIVITY

The overarching aim of the Activity is the development of a comprehensive health needs assessment report outlining the issues and priorities of people from culturally and linguistically diverse (CALD) backgrounds in the Western Queensland PHN region, who experience barriers to accessing primary health care.

It is anticipated that the report will:

Identify and map support services for people from the target group, where it is demonstrated that there are physical, geographic, or other barriers to accessing primary care services.

Investigate the intersectionalities of the issues and priorities for people from the target group and other social determinants of health, including the impact on disadvantaged target populations, including (but not limited to):

- Lesbian, gay, bisexual, transgender, queer or questioning, intersex and/or other sexuality and gender diverse people (LGBTQI+)
- people with mental illness
- people of low socioeconomic status
- people with disabilities

rural, regional and remote¹; and

Recommend targeted commissioning for WQPHN to support primary health care access in areas where there are limited or no services available in the local community, through addressing service gaps across the Western Queensland PHN region, for people from CALD backgrounds.

The Project will identify the health and other needs of people from CALD backgrounds, or who are at risk of homelessness across the million square kilometres over the three WQPHN subregions of:

- North-West Queensland,
- South-West Queensland, and
- Central-West Queensland

DESCRIPTION OF ACTIVITY

Through this Activity, WQPHN will:

- a. Undertake a Needs Assessment of the Western Queensland region by assessing the needs of people from the target group, in relation to primary health care access
- b. Use the Needs Assessment to inform the development and implementation of an evidence-based Activity Work Plan. The Needs Assessment will identify service gaps and barriers to ensure PHN commissioned activities do not duplicate or compete with existing services
- c. Promote collaboration and partnerships that support primary health care access by people from CALD backgrounds, to help meet the needs of the Western Queensland region: including regional planning with HHSs, local primary care service providers including Aboriginal Community Controlled Organisations, Multicultural and Migrant services, and relevant health consumer groups; and
- d. Consider opportunities for co-design and co-commissioning to enable more sustainable primary health care and service system solutions delivered to people from CALD backgrounds in the Western PHN region

Needs Assessment Priorities

NEEDS ASSESSMENT

WQPHN Needs Assessment 2021/22-2023/24

PRIORITIES

Priority	Page Reference
Recommendation 08 – Improved access for people with poor access or at risk of poorer health outcomes	81
Recommendation 13 – Broader primary health care	86
Recommendation 05 – Local approaches to deliver coordinated care	79
Recommendation 16 – Care innovation	76
Recommendation 06 – Empowering individuals, families, carers and communities	76

Activity Demographics

TARGET POPULATION COHORT

People from Culturally and Linguistically Diverse (CALD) backgrounds, who may be experiencing barriers to accessing Primary Health Care.

Activity Consultation and Collaboration

CONSULTATION

To ensure that there are well-informed recommendations from the Project, including from a Lived Experience perspective, about how access to primary health care and enhanced health outcomes can be achieved for the target group, the mandatory consultations will include:

- face to face consultations with Multicultural and Migrant services – both Youth and Adult;
- face to face consultations with relevant non-specialist services and networks;
- people who identify as having a Lived Experience in relation to the target groups for this Project; and
- other stakeholders including Multicultural and service provider peaks e.g. Ethnic Communities Council of Queensland, commissioned and non-commissioned services providers, relevant regional, state, and national networks, HHSs (including any targeted Multicultural Health (Qld Health) positions and ACCHOs

COLLABORATION

Collaboration will occur with the stakeholders to co-design and implement the Activity throughout the Project.

Activity Milestone Details/Duration

ACTIVITY START DATE

01/07/2022

ACTIVITY END DATE

30/06/2025

ACTIVITY: AH - 1 - AHPHC-AH1 (24-25) INCREASED SOCIABLE, UNSOCIABLE AND AFTER-HOURS TELEHEALTH SERVICES

Activity Priorities and Description

PROGRAM KEY PRIORITY AREA

After Hours Primary Health Care Support

AIM OF ACTIVITY

To improve and enhance access to primary care services for people living in MMM7 locations who currently experience limited access to general practitioner services and who are at risk of poorer health outcomes.

DESCRIPTION OF ACTIVITY

This activity will support an extension of current operational hours for primary care services to remote vulnerable communities via telehealth. The activity has been designed to address community feedback indicating an increased need for access to GP services - particularly access to sociable, unsociable and out-of-hours services.

Increased access for vulnerable communities to sociable, unsociable out-of-hours primary care will be provided by an RFDS General Practitioner. The after-hours Telehealth services:

- will be delivered in vulnerable communities where there is not a Doctor in the community every day and when there is no RFDS clinic operating
- will be prioritised for vulnerable communities who have a 2-4 week wait for a GP appointment on scheduled fortnightly visits currently provided by the RFDS
- will ensure the delivery of holistic preventative Primary Health Care Services at the correct time, place, and in accordance with community requirements
- will include the delivery of culturally appropriate and outcome-focused health services for Aboriginal and Torres Strait Islander people
- will include of the Qld Government Hospital and Health Service primary health care sites and their public workforce, to enable the delivery of collaborative care and transparency of data - visible to all clinicians to ensure continuity of care is delivered
- are cost-effective primary health care delivered to vulnerable communities that will potentially reduce preventable patient hospitalisations in the regions, thus reducing the need for retrievals

In 2024-2025, this activity will pick up the successful aspects of the implementation of the script clinic services initially planned to commence in 2023-2024 including:

- enhanced access to primary healthcare services through extended operational hours via telehealth during sociable, unsociable after-hours periods
- collaboration between RFDS General Practitioners and HHS Primary Health Care staff to ensure continuity of care and reduce preventable hospitalizations and retrieval needs
- improved access for vulnerable populations and those at risk of poorer health outcomes., to access to a GP in the no-market regions
- delivery of cost-effective primary healthcare to potentially reduce preventable hospitalizations in the regions
- addressing community feedback regarding increased need for more GP services and sociable, unsociable and out-of-hours access
- delivery of holistic preventative primary healthcare services tailored to community requirements, including culturally appropriate care for Aboriginal and Torres Strait Islander populations
- inclusion of HHS Primary Health Care Sites workforce to enable collaborative care delivery and transparency of data among clinicians, ensuring continuity of care

The Activity will also include a dedicated WQPHN staff member to work with all practices and key stakeholders to promote work within the after hours period to ensure that people have access to services at the right time at the right place - for eg in particular where Local Government Authority Road Crews are camped out and where graziers are not able to come to the clinics due to weather events and road conditions during normal clinic times. The dedicated staff member will be able to promote after hours and work on projects and plans that provide holistic care to communities but also support General Practitioners to undertake work planning and access to MBS items for work done in the after hours period.

Needs Assessment Priorities

NEEDS ASSESSMENT

WQPHN Needs Assessment 2021/22-2023/24

PRIORITIES

Priority	Page Reference
Recommendation 08 – Improved access for people with poor access or at risk of poorer health outcomes	81
Recommendation 04 – Aboriginal and Torres Strait Islander Health	77
Recommendation 13 – Broader primary health care	86
Recommendation 10 – Building workforce capability and sustainability	86
Recommendation 05 – Local approaches to deliver coordinated care	79
Recommendation 07 – Comprehensive preventive care	76
Recommendation 16 – Care innovation	76
Recommendation 02 – Single primary health care destination	76

Activity Demographics

TARGET POPULATION COHORT

Vulnerable populations residing in MMM7 localities with limited access to GP services.

Activity Consultation and Collaboration

CONSULTATION

WQPHN rolled out an After Hours Pilot with RFDS for 3 months in 2023. The program was hugely successful with the communities, enabling access to GP services and addressing identified community needs.

All MPPP/AMS and GP Clinics were engaged in the WQPHN footprint in relation to participating in this after-hours activity funding. 4 sites were identified with capacity and interest in AH service provision.

COLLABORATION

- GP service providers
- CWHHS, NWHHS, 17 RFDS sites

WQPHN Practice Support Staff – Lead Training organisation – Providing training in the use Medical software to showcase quality data improvement initiatives and access to services that enhance patient health outcomes through data through the Pen CS tool and WQPHN PHC data dashboard.

Activity Milestone Details/Duration

ACTIVITY START DATE

01/07/2022

ACTIVITY END DATE

30/06/2025



ACTIVITY: AH - 2 - AHPHC-AH2 (24-25) AFTER HOURS PALLIATIVE CARE SERVICES

Activity Priorities and Description

PROGRAM KEY PRIORITY AREA

After Hours Palliative Care

AIM OF ACTIVITY

Increase the availability and access to palliative care services to Residential Aged Care Homes (RACHs) or client's residences/home during after-hours periods.

DESCRIPTION OF ACTIVITY

WQPHN will engage primary care services to extend their availability to provide palliative care services to patients after hours. Palliative care services will be extended during after-hours periods via either telehealth or face-to-face, to clients wherever they reside – in RACH's or at home.

- WQPHN will address issues with the thin market for palliative care services in remote areas by engaging existing general practice and non-government organisations, including ACCHO's, that support vulnerable communities with palliative care services
- clinical support to providers will be facilitative in collaboration with SPARTA via telehealth
- will enable telehealth palliative care support services out of hours to assist the clinical workforce to empower individuals, families, and carers in communities, with up-to-date medication management, pain management and multidisciplinary case conferencing, for any palliative care patients
- this funding will facilitate clinician support to enhance a local approach to delivering coordinated care from industry experts, to build on the knowledge of the most current practices, medication support and delivery of culturally appropriate palliative care to Aboriginal and Torres Strait Islander people, culturally diverse, and all populations of our region
- engagement of the local workforce will build trust and relationships that enable holistic palliative care delivery supported by locals, and care innovation in rural, remote and very remote localities
- after-hours delivery will be targeted to improve service availability for people with identified poor access or at risk of poorer health outcomes

Needs Assessment Priorities

NEEDS ASSESSMENT

WQPHN Needs Assessment 2021/22-2023/24

PRIORITIES

Priority	Page Reference
Recommendation 08 – Improved access for people with poor access or at risk of poorer health outcomes	81
Recommendation 04 – Aboriginal and Torres Strait Islander Health	77
Recommendation 13 – Broader primary health care	86
Recommendation 12 – Nursing and midwifery workforce	86
Recommendation 05 – Local approaches to deliver coordinated care	79
Recommendation 16 – Care innovation	76
Recommendation 06 – Empowering individuals, families, carers and communities	76
Recommendation 02 – Single primary health care destination	76

Activity Demographics

TARGET POPULATION COHORT

Palliative care patients.

Activity Consultation and Collaboration

CONSULTATION

GP, NGO, ACCHO's and RACF service providers. EOI to all providers to supply AH Palliative Care services in the 24/25 FY.

COLLABORATION

GP, NGO and RACF service providers.

Activity Milestone Details/Duration

ACTIVITY START DATE

01/07/2022

ACTIVITY END DATE

30/06/2025



ACTIVITY: AH - 3 - AHPHC-AH3 (24-25) AFTER HOURS SCRIPT WALKIN CLINIC

Activity Priorities and Description

PROGRAM KEY PRIORITY AREA

After Hours Primary Health Care Support

AIM OF ACTIVITY

In most remote areas in WQPHN, there is a lack of regular and at times no access to primary health care services. This clinic seeks to enhance access to appropriate primary healthcare services for both the tourist season visitors and the vulnerable communities by extending operational hours via telehealth during predetermined periods during the week. The service will also facilitate collaborative care between RFDS General Practitioners and Hospital & Health Service (HHS) Primary Health Care (PHC) staff, reduce preventable hospitalisations, retrieval needs, and improve health outcomes.

DESCRIPTION OF ACTIVITY

Currently there are 9 PHC clinics with FTE RAN (Remote Area Nurse) serviced by RFDS each fortnight. The funding will allow extension of operating hours of above program to increase access to the face to face/telehealth services with the HHS PHC staff improve care coordination, access and continuity of care. Addressing the need of health care for the transient visitors into the Western Queensland regions.

- enhanced access to primary healthcare services through operational hours via telehealth during after-hours periods
- collaboration between RFDS General Practitioners and HHS Primary Health Care staff to ensure continuity of care and reduce preventable hospitalizations and retrieval needs
- improved access for vulnerable populations and those at risk of poorer health outcomes
- delivery of cost-effective primary healthcare to potentially reduce preventable hospitalisations in the regions
- addressing community feedback regarding increased need for more GP services and increased access
- delivery of holistic preventative primary healthcare services tailored to community requirements, including culturally appropriate care for Aboriginal and Torres Strait Islander populations
- inclusion of HHS Primary Health Care Sites workforce to enable collaborative care delivery and transparency of data among clinicians, ensuring continuity of care

Needs Assessment Priorities

NEEDS ASSESSMENT

WQPHN Needs Assessment 2021/22-2023/24

PRIORITIES

Priority	Page Reference
Recommendation 08 – Improved access for people with poor access or at risk of poorer health outcomes	81
Recommendation 04 – Aboriginal and Torres Strait Islander Health	77
Recommendation 13 – Broader primary health care	86
Recommendation 12 – Nursing and midwifery workforce	86
Recommendation 14 – Medical primary care workforce	86
Recommendation 10 – Building workforce capability and sustainability	86
Recommendation 05 – Local approaches to deliver coordinated care	79
Recommendation 07 – Comprehensive preventive care	76
Recommendation 16 – Care innovation	76
Recommendation 06 – Empowering individuals, families, carers and communities	76
Recommendation 02 – Single primary health care destination	76
Recommendation 01: One system focus	75
Recommendation 03 – Funding reform	75

Activity Demographics

TARGET POPULATION COHORT

MMM7 communities.

Activity Consultation and Collaboration

CONSULTATION

Community and external stakeholder engagement provided feedback that identified a need for increased service access, to counteract the population increase of in excess of 10 thousand extra tourists into the region during the April-October tourist season.

COLLABORATION

- WQPHN – Lead agency for commissioning and training requirements in the PHC
- Access to extended GP services via Telehealth
- HHS- Collaborative approach to support an increase in service provision
- RFDS GP access to Telehealth services to enable access, wholistic preventative PHC Services, reducing the pressure on RFDS allocated services into each community each fortnight being overrun with visitors into the regions. Access for both the local vulnerable populations and visiting tourists into the remote WQ regions by increasing service provision

Activity Milestone Details/Duration

ACTIVITY START DATE

01/07/2022

ACTIVITY END DATE

30/06/2025