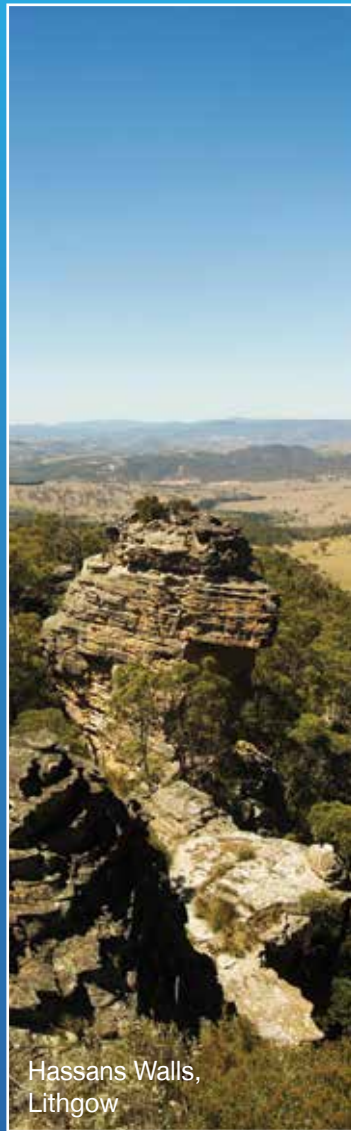




Katoomba,
Blue Mountains



Freemans Reach,
Hawkesbury



Hassans Walls,
Lithgow



Victoria Bridge,
Penrith

Highlights Report 2014

Supporting **better health** for the communities of
Blue Mountains, Hawkesbury, Lithgow & Penrith



NEPEAN-BLUE MOUNTAINS

Connecting health to meet local needs

Who we are

Nepean-Blue Mountains Medicare Local (NBMML) is a not for profit organisation that works to improve health for the communities of the Blue Mountains, Hawkesbury, Lithgow and Penrith.

We have the important task of improving the health of our region by making it easier for patients to access the primary health care services they need, better linking local GPs, nursing and other health professionals, hospitals and aged care, and maintaining up-to-date local service directories.

We support and work in collaboration with general practice and the many other health providers and organisations across the region in a very hands-on role that is making a tangible difference to the health of our community.

Our Values

- » Respect
- » Ethical Practice
- » Quality
- » Collaboration
- » Continuous Improvement

Our Vision

Improved health of the people in our region

Our Mission

Improve the health of the region through patient centred health care and primary care integration.



Population of our region	349,864
Blue Mountains	78,391
Hawkesbury	64,312
Lithgow	20,161
Penrith	187,000

Our Region

The geographic area of the Nepean-Blue Mountains Medicare Local covers 10,000 square kilometres, including a world heritage listed National Park, and spans four Local Government Areas (LGAs): Blue Mountains, Hawkesbury, Lithgow and Penrith.

We have an estimated population of around 350,000 people and an anticipated population level of nearly 400,000 by 2021.

Nepean-Blue Mountains Medicare Local (NBMML) supports the primary healthcare needs of our community, as well as representing and assisting 446 general practitioners, 910 allied health professionals and 749 primary healthcare practices across the region.

Health snapshot

- Around half of our population do not get enough physical activity. *
- 64% of adults are overweight or obese. †
- Women in our region are more likely to die from cardiovascular diseases, coronary heart disease, respiratory diseases and chronic obstructive pulmonary disease than other women in NSW. *
- 92% of males and 83% of females consume less fruit and vegetables than recommended in national dietary guidelines. *
- Around one in ten people report high to very high levels of psychological distress. Suicide in young males is higher than the state average. *
- 20% of males and 14% of females report that they currently smoke. *
- Our region is ranked 2nd highest in self rated high to very high psychological distress in population aged 16 and over. †
- Cancer is responsible for 30.2% of all deaths in the region (compared to the NSW figure of 29.1%). †
- 23% of adults reported delaying or not seeing a dentist or dental hygienist due to cost each year. †
- More than 10,000 people report often having difficulty or being unable to travel to access services due to lack of transport each year. †
- More than 103,000 patients present to Emergency Departments in the region each year. †



20% ♂, 14% ♀
smoke



50%
do not meet physical
activity guidelines



92% ♂, 83% ♀
eat less fruit & veg
than recommended



64%
overweight or obese

* "A report on the Health Needs of the Nepean-Blue Mountains Medicare Local area", undertaken by JustHealth Consulting in partnership with The Menzies Centre for Health Policy (August 2012)

† NBMML Comprehensive Needs Assessment 2014-2015

Regional Health Priorities

As part of an initiative organised by the Interim Joint Health Consumer Committee of NBMML and Nepean Blue Mountains Local Health District (NBMLHD), local residents were asked to have their say about the health services in the region.

Through this consumer forum process, the main health-related issues were identified for the four LGAs in our region:

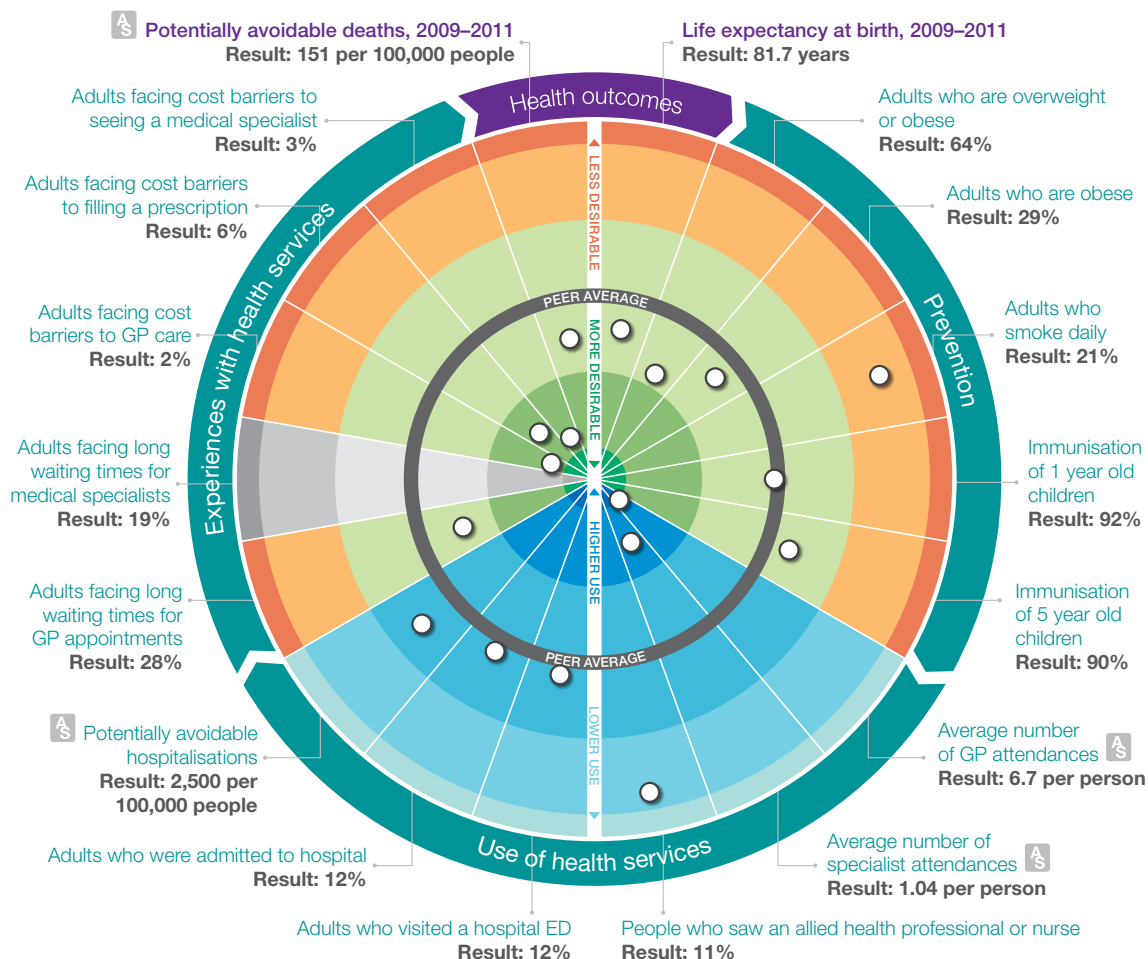
Blue Mountains	Hawkesbury	Lithgow	Penrith
<ul style="list-style-type: none"> • Transport difficulties - travelling to and from health care services • Aged care services - inadequate number residential care beds and costs • Workforce problems - shortage of GPs • Access to information - low knowledge of services and where to go to get information • Carer respite and support - limited resources • Impact of bushfire on access to health care - inadequate disaster planning • Access to health services - long distances to travel and long waiting lists • Renal Dialysis - long, impractical travel to access services • Increase in holistic care - better support and access for mental health, cancer conditions and the elderly 	<ul style="list-style-type: none"> • Transport difficulties - time, costs and parking issues involved in travelling to and from health care services • Aged care services - shortage of resources and aged care beds • Workforce problems - shortage of health care providers • Access to information - low knowledge of services and where to go to get information • Mental health services - shortage of services • Impact of flood and bushfire on access to health care - inadequate disaster planning and access to emergency services west of the Hawkesbury River • Cancer treatment - long, impractical travel to access services • Carer respite and support - limited resources • Boundaries and accessing health services in other areas 	<ul style="list-style-type: none"> • Transport difficulties - travelling to and from health care services • Accommodation - when travelling long distances to access health services • Aged care services - both in-home and residential care • Knowledge, community expectations and where to go to get information • Boundaries and accessing health services in other areas • Workforce problems - shortage of health care providers • Aboriginal health services - shortage of services • Mental health services - shortage of services • Communication - improving communication between health services, health providers and consumers. 	<ul style="list-style-type: none"> • Aged care services - both home care and nursing home care. • Workforce problems - shortage of health care providers • Access to information - knowledge of services and need for a central information source • Boundaries and accessing health services in other areas • Safety and security within health facilities • Rapid growth and increasing diversity - growing demand on health services • Communication - improving communication between health services, health providers and consumer • Health services for the homeless - better access to services • Men's Health - inadequately supported in the area. • Renal Dialysis - shortage of services and access difficulties • Dental services - costs, waiting lists and access difficulties • Multidisciplinary treatment - more holistic care sought

Your Medicare Local



Nepean-Blue Mountains

Medicare Local catchment results relative to **Regional 1** peer group results, 2011–12



Medicare Local catchment profile

Total population: 351,237	Total land area: 9,122km²
Indigenous population: 3.2%	Population split: 49.7% male, 50.3% female
Age proportions: 25% (0–17 years) 63% (18–64 years) 12% (65+ years)	Socioeconomic status: 26% (low) 47% (medium) 27% (high)

Medicare Local catchment legend

- Medicare Local results
- Age standardised data
- NP** Not publishable
- These data are not available for publication for this Medicare Local catchment

Source: Healthy Communities: Avoidable deaths and life expectancies in 2009–2011

medicare local

NEPEAN-BLUE MOUNTAINS

Connecting health to meet local needs

Our Organisation

Nepean-Blue Mountains Medicare Local employs more than 100 talented and skilled professionals.

Eighty per cent of the NBMML workforce is involved in clinical service delivery or support. This includes GPs, registered nurses, mental health nurses, dietitians, psychologists, social workers, Aboriginal & Torres Strait Islander health and outreach workers, care coordinators and diabetes educators.

Our CEO, Ms Sheila Holcombe, was previously CEO of the Blue Mountains GP Network. In 2013, Sheila was nominated for the Women of the West award.

NBMML has a head office located at Penrith, which is also the regional office for the Hawkesbury. A regional office for the Blue Mountains and Lithgow areas is located in Hazelbrook, and the Aboriginal Healthy for Life Program also operates from Hazelbrook.



Our Board

NBMML is governed by a skills based board.

- Dr Shiva Prakash (Chair)
- Ms Gabrielle Armstrong
- Ms Diana Aspinall
- Mr Paul Brennan
- Ms Jillian Harrington
- Dr Andrew Knight
- Ms Jennifer Mason
- Dr Tony Rombola
- Mr Tony Thirlwell



Our Members

NBMML is proud to have the following organisations as members:

- Blue Mountains GP Network
- Hawkesbury Doctors Network
- Nepean Division of General Practice
- Australian Primary Health Care Nurses Association
- Western Sydney Regional Organisation of Councils
- Lithgow City Council

The year in review

NBMML plays an important role in planning, coordinating and delivering primary health care services across the region.

We do this by working with the local community, clinicians, health and other services to identify gaps and develop solutions that will work in our region.

While our efforts to improve the health of our region are ongoing, it is important to recognise the activity and achievements of our organisation during the last 12 months.

Following are just some of the highlights from July 2013 to June 2014.





“ Since becoming a 24-hour pharmacy the benefits have flowed onto the community – not only locally but for people throughout Western Sydney and the Blue Mountains. We’ve filled scripts for sick children with croup so parents can get them home to bed and for shift workers coming or going from work between 2am and 6am.

**Jan Bardsley-Smith,
Pharmacist
(Penrith High St Chemmart
Pharmacy), a recipient of the
NBMLL After Hours Primary
Care Incentive Grants.**

Our Programs & Services

After Hours

Medical concerns often arise outside of normal business hours, which is when after hours (non emergency) medical assistance may be needed. Understanding the locally-available after hours medical services can save time, effort and lives, which is why NBMML invests considerably in supporting the provision of local after hours services and raising the profile of these services within the community.

Achievements 2013/14

Across our region more than 125,000 after hours GP consultations were conducted last year. NBMML provides financial support to 95% of accredited general practices to provide after hours GP services.

Additionally, NBMML funded eight local organisations including general practices, pharmacies and a deputising service provider to improve after hours services in areas that are currently experiencing after hours service shortages.

From November 2013, local residents in the lower Blue Mountains area gained access to doctor home visits on weeknights, weekends, and public holidays -

an initiative funded and supported by NBMML. In the past year, we've seen 5,232 home visits across the region and more than 99% of the patients using these services waiting less than 1.5 hours to see a clinician.

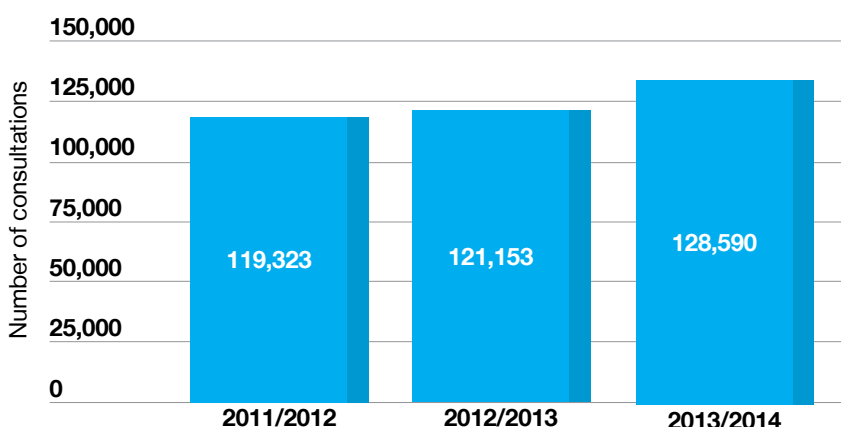
NBMML provides financial and practice management support to the Hawkesbury After Hours GP Clinic as well as full management of the Nepean After Hours GP service. Across both facilities, over 12,300 consultations took place in the last 12 months.

During 2013/14, research was undertaken within the community to better understand general awareness and opinions of after hours services, and as a result, a large-scale campaign was mounted to raise awareness in the local community about the after hours services available in our region and to educate consumers on the appropriate use of these services.

In addition, the operating hours of all GPs and pharmacies is now available on the National Health Services Directory at www.nbmmml.com.au.

Workforce shortage is one of the key challenges of delivering after hours primary care services. In response to this challenge, NBMML supports general practices across the region by assisting them with recruiting and retaining staff.

After Hours GP services across the region



“ Thank you to the After Hours GP Clinic for their quick & courteous attention this evening... [I was] in and out in under 40 minutes. This is a great service...the Nurse on duty was fantastic. Many thanks to all.

Patient from the Penrith area

eHealth

eHealth is the electronic management of health information to deliver safer, more efficient, better quality healthcare.

Achievements 2013/2014

Nearly 23,000 consumers living within the NBMML region are currently registered for the PCEHR (personally controlled eHealth record).

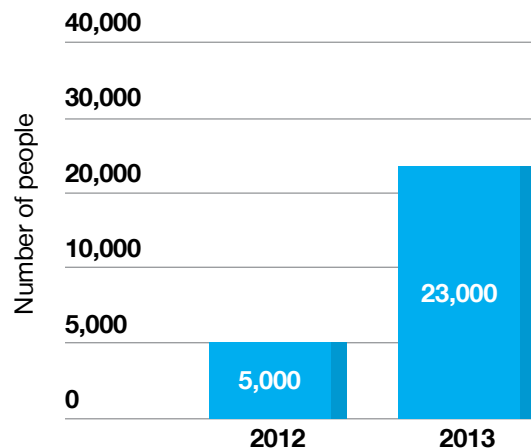
- ✓ Over 1,200 eHealth support activities were conducted across 186 general practices, allied health providers and community pharmacies to assist in ePIP compliance, secure messaging, data quality, registering for the eHealth record and education in the use of PCEHR.
- ✓ Approximately 63 health care organisations have successfully registered for the PCEHR.
- ✓ 12 practices have been supported to install Assisted Registration software, enabling them to register their own patients.

NBMML worked in close partnership with the CSIRO and NBMLHD on a research project to demonstrate the clinical and health economic evidence on how NBN-enabled telehealth services can be scaled up nationally to provide alternate, cost-effective health services for the management of chronic disease in the community.

NBMML entered into the Medicare Local Quality Improvement Partnership project through the Improvement Foundation's Australian Primary Care Collaboratives (APCC). This project aims to complement broader eHealth activities, offering financial incentives and additional support to participating practices in the fields of Assisted Registration, Shared Health Summaries and the PCEHR.

NBMML provided representation on the Board and implementation management group of the NSW Health, HealthNet eDischarge project. eDischarge summaries are now being sent from hospitals to GPs within the NBMML region.

Number of people in our region who have set up a personal eHealth record (PCEHR)



Mental Health

Three mental health programs are available through the region:

ATAPS (Access to Allied Psychological Services)

This program enables GPs to refer patients with mental health issues for psychological intervention from a range of qualified allied health providers. There are ATAPS programs for adults, children, Aboriginal & Torres Strait Islanders, bushfire-affected people, new mothers and for suicide prevention.

PIR (Partners in Recovery)

This new partnership program is helping people living with severe and persistent mental illness and complex needs by producing a better connection between all the services (such as health, accommodation and employment) they need to better support their journey to recovery.

MHNIP (Mental Health Nurse Incentive Program)

Mental Health Nurses work closely with GPs to support people with severe mental health disorders that are affecting multiple areas of their lives.

Achievements 2013/14

ATAPS

Nearly 9,450 mental health consultations were facilitated through the ATAPS program this year. The Child Mental Health Service opened this year across the region for individual referral of children 0-11 years.

NBMML was awarded a "Highly Commended" Award at the NBMLHD Quality Awards for the Cool Kids program (for anxious primary-school aged children). Over the past 12 months, eight Cool Kids programs were run in partnership with NBMLHD throughout the region, with 25 children (accompanied by one or two parents) in attendance.

In response to bushfires occurring in October 2013, NBMML successfully applied for funding of a Bushfire Recovery program, and to date has assisted 189 people.

Suicide prevention training (conducted by Wesley Lifeforce) was offered to GPs and general practice

staff across the region to build capacity and confidence in identification and referral.

A number of mental health networking forums were held across the region to increase connections and the sharing of information amongst local mental health providers and raise awareness of mental health issues and treatment options.

PIR

Interest in the newly launched PIR program has been overwhelming. Enrolments in the program are triple the numbers initially hoped for with 2,762 consultations taking place since it began. The program is now being expanded to meet this need.

MHNIP

NBMML employs two mental health nurses to provide clinical services under the Mental Health Incentive program (MHNIP). Support is provided through both home visits and telephone contact. The mental health nurses provided 182 sessions during the past 12 months.

Dietitian Services

NBMML's accredited dietitians run programs and conduct individual consultations to provide straight forward advice on simple changes people can make to achieve a healthier lifestyle. They offer:

- Healthy Lifestyle Service
- HELP for Diabetes group program
- Healthy Shopping Supermarket Tours

Achievements 2013/14

Our dietitians deliver services across the region. In the past year, their work included:

- ✓ 362 individual consultations through the Healthy Lifestyle Service.
- ✓ HELP for Diabetes program assisting 302 people with type 2 diabetes to understand better ways to manage their condition.

“ Since starting the diabetes program I am looking more closely at what I am buying including the fat and sugar content in different foods and I now know what proper meals to eat. I also really benefit from hearing from other people in my group – what their problems are.

John Dawkins, a Hawkesbury resident participating in HELP for Diabetes, a Medicare funded group health program for people with type 2 diabetes.



Aboriginal Health

NBMML offers a number of programs for Aboriginal & Torres Strait Islander communities:

- **Closing the Gap & Chronic Care Coordinators**

Closing the Gap is a health program that helps Aboriginal & Torres Strait Islander people to access cheap or free medicines and receive assistance from Aboriginal Support Workers. The Chronic Care Coordinators assist local Aboriginal & Torres Strait Islander people to better manage chronic diseases and may assist with the purchase of eligible supplementary services, such as specialist appointments, transport and medical supplies/equipment.

- **Healthy for Life**

The Blue Mountains Aboriginal Healthy for Life Program works to help Aboriginal & Torres Strait Islander people get better health.

The Blue Mountains Aboriginal Healthy for Life Program is an initiative of the Blue Mountains Aboriginal Health Coalition, with NBMML acting as the Lead agency.

This community-based health program operates as a Consortium of eight Blue Mountains organisations:

- › Darug Tribal Aboriginal Corporation – Darug Mountains Group

- › Gundungurra Tribal Council Aboriginal Corporation
- › Gundungurra Aboriginal Heritage Association
- › Blue Mountains Aboriginal Culture and Resource Centre
- › Link-Up New South Wales
- › Blue Mountains City Council
- › Nepean Blue Mountains Local Health District – Primary Care and Community Health
- › Nepean-Blue Mountains Medicare Local

Achievements 2013/14

Across all Aboriginal Health programs, nearly 7,500 occasions of service were provided to our Aboriginal & Torres Strait Islander communities.

A series of Aboriginal Sharing & Learning Circles was launched inviting Aboriginal & Torres Strait Islander communities to 'have their say' and identify local health priorities and needs. Circles were held in the Blue Mountains and Lithgow, with additional Circles to take place in the Hawkesbury and Penrith later in 2014.

The NBMML Aboriginal Health team work closely with the community and other agencies. In the last year 98 collaborations with the Aboriginal organisations, NBMLHD and non government organisations have been conducted. Highlights include working collaboratively during NAIDOC celebrations across the



“ The Healthy for Life program has been a huge success and a hit with the Aboriginal people. It is one of the best run programs I have seen and it works brilliantly. The Aboriginal MovingOn program has also been a great success and helped me personally to get my whole diabetic regime under control.

Uncle Graeme Cooper



region as well as coordinating the popular NAIDOC Cup – a day for Aboriginal families and local schools to participate in traditional indigenous games and sports, generally promoting a healthy, active lifestyle. In 2014, the 4th Annual NAIDOC Cup was attended by 11 local primary schools with over 500 people in attendance. In May 2014, NBMML also participated in National Sorry Day at Muru Mittigar promoting Aboriginal & Torres Strait Islander health programs and services. In the past year seven eye clinics were held with 76 community members receiving eye examinations and access to subsidised glasses.

Closing the Gap & Chronic Care Coordinators

The Care Coordinators Supplementary Service program (CCSS) strengthened relationships with practice staff, local doctors and allied health staff. Care Coordinators provided 1,721 care coordination services to 145 community members, with a significant 172% increase in Allied health care services provisions.

The Closing the Gap team gave 117 presentations during the past 12 months to local general practices (including practice staff, individual GPs and GP Forums) and local organisations about the Closing the Gap program. 1,467 MBS 715 (Aboriginal health assessments) were rendered by 124 GPs. This is a 6% increase in MBS 715 and a 25% increase in practitioner participation from last year.

Overall, 248 Closing the Gap Aboriginal & Torres Strait Islander community members have received 3,128 occasions of service.

Blue Mountains Healthy for Life

Healthy for Life saw a 26% increase in the number of people registered with the program, with nearly 230 clients. This equates to over 17% of the Blue Mountains Aboriginal population. The Healthy for Life program provided over 2,600 occasions of service to the Blue Mountains Aboriginal community.

This year, the Healthy for Life program focussed on engaging clients in health promotion and education

through small group activities with community partners such as the Blue Mountains Aboriginal Culture and Resource Centre, Blue Mountains City Council, Gundungurra Aboriginal Tribal Corporation, and Blue Mountains Hospital. Some activities were Aboriginal Men's Bowls, Men and Youth Camps, Aboriginal Women's Hydrotherapy Group, and MovingOn (Chronic Disease Self-Management).

The Blue Mountains Aboriginal Health Coalition and the Healthy for Life Steering Committee continue to provide invaluable guidance for the program

Specialist Clinics

NBMML operates a specialist paediatric outreach clinic in Lithgow and psychiatric outreach clinic in Katoomba. These clinics provide affordable, accessible specialist services to Aboriginal families and families from low socio-economic backgrounds.

Achievements 2013/14

Over the past 12 months, 22 psychiatry clinic days and 21 paediatric clinic days were held, providing consultations to 317 people.

NBMML is currently establishing an outreach dermatologist clinic in Lithgow. After canvassing GPs in the Lithgow area, NBMML successfully applied to the Rural Doctors Network for funding for this service, which will save patients two hours travelling time to attend a public clinic at Westmead hospital which has a six month waiting list.

Following a NBMML needs assessment and service gap analysis of paediatric audiology services across the region, a proposal has also been submitted to the Rural Doctors Network to fund the Department of Health's Healthy Ears - Better Hearing, Better Listening program.



Veteran Community Health

The Veteran Community Health Project links eligible veteran community members to locally available Department of Veterans' Affairs (DVA) programs as well as supporting and educating primary healthcare providers of the veteran community. It offers HomeFront Assessments as part of the DVA Falls Prevention Program, as well as making presentations to ex-servicemen.

Achievements 2013/14

NBMML's provision of the HomeFront Service (DVA Falls Prevention program) enabled HomeFront Assessments to commence from July 2013. Over 20 HomeFront Assessments were completed and in most cases carers and/or family members were simultaneously connected to local community services.

The Veteran Community Health Project Advisory Group now includes a local Occupational Therapist who provides a significant number of DVA services to veterans in the Penrith, Hawkesbury and lower Blue Mountains areas.

The Veteran Community Health project is promoted regularly to our community, including presentations about the initiative being made to many local RSL clubs and sub-branches.

MovingOn

MovingOn is a program designed to help people with chronic health conditions take more control of their health and wellbeing.

MovingOn taps into the power of people to manage their own health. It presents useful information from research, but participants share their 'real world' experiences to help to make the learning fit their lives.

Trained leaders help participants along on this journey – one is a person living with a chronic disease who is able to share from personal experience, and one is a health professional.

The program was developed by Arthritis & Osteoporosis NSW.

Achievements 2013/2014

NBMML facilitated four MovingOn programs locally in conjunction with NBMLHD. This included programs for Greek, Maltese and Filipino communities.

More than 60 participants attended the four programs. Thirteen lay leaders were trained to facilitate these programs, including NBMML and NBMLHD staff and representatives from the various community groups.

HealthOne

HealthOne aims to integrate primary and community health services bringing together GPs, community health and other health professionals in multidisciplinary teams to better meet the health needs of people in our community by providing comprehensive and coordinated care.

HealthOne Nepean Blue Mountains is a state-funded collaboration between NBMML and NBMLHD.

Achievements 2013/14

The HealthOne program has commenced with a focus on three areas of need:

- diabetes,
- mental health, and
- child and family health.

Working groups have been established for each stream and the mapping of services for each of the focus areas is in progress.

Aged Care

NBMML's Aged Care Program aims to increase access to primary health care services for older people living in a residential aged care facility (RACF) or living in the community.

Achievements 2013/14

Collaborating with 17 aged care facilities across the region, NBMML coordinated the introduction of programs to assist with the two greatest areas of care required: falls prevention and dental care.

In the past year, 229 low care residents took part in the Falls Prevention program conducted by local exercise physiologists and physiotherapists, and 128 low care residents received dental treatment through the dental program supported by NBMML and delivered by local dentists.

NBMML also supported house-bound elderly people who have severe chronic conditions in need of nutrition advice. NBMML dietitians provided 48 consultations to elderly people in their home across the year.

A six week pain management program was piloted in a RACF in Penrith in 2014. Fifty six services were provided. This program was developed in response to the Comprehensive Needs Assessment conducted by NBMML and feedback from RACFs and General Practice who identified chronic pain as a major issue in the community.

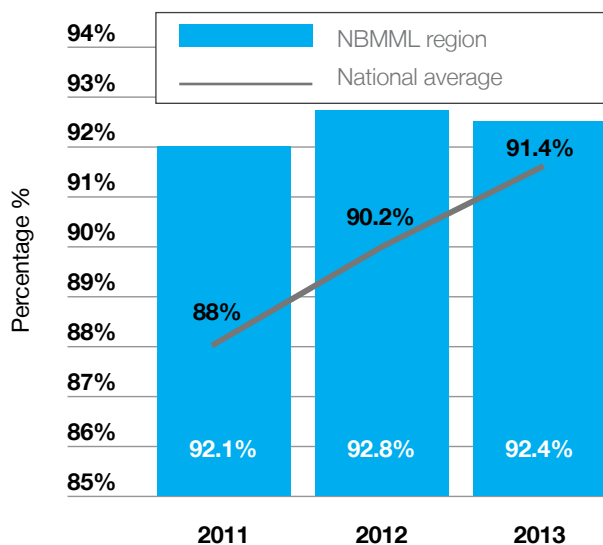


Immunisation

The Immunisation Program is designed to play a role in reducing the local incidence of vaccine-preventable diseases and complications within the Blue Mountains, Hawkesbury, Lithgow and Penrith areas by:

- providing relevant and timely support to primary health care immunisation providers,
- promoting immunisation benefits to the local community, and
- liaison with immunisation stakeholders.

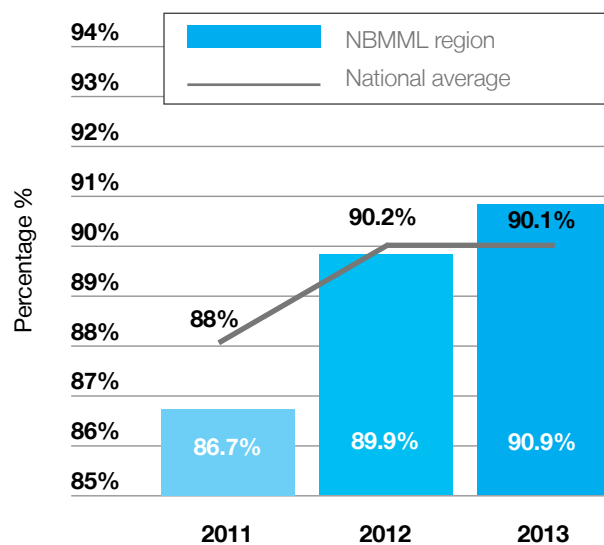
All children 5 and under in NBMML region who are immunised vs national average



Achievements 2013/14

We are seeing progress in childhood immunisation rates in the region, with current immunisation rates of 92.4% of all children and 90.9% of Aboriginal & Torres Strait Islander children up to the age of five. This is above the national average of 91.4%.

All Aboriginal & Torres Strait Islander children 5 and under in NBMML region who are immunised vs national average



Antenatal Care

NBMML has established a cross-sector working group with NBMLHD to progress plans to redevelop the Antenatal Shared Care program. We have consulted with GPs and hospital personnel to review antenatal care pathways, clinical protocols and program guidelines. Two educational events for GPs and primary care nurses were also held across the region.

Achievements 2013/2014

Our region's commitment to excellence in antenatal care has been recognised by the recent National Health Performance Authority (NHPA) report, *Healthy Communities: Child and Maternal Health 2009 - 2012*. In this report, our region was **ranked number one in Australia** for GP antenatal shared care to Aboriginal & Torres Strait Islander women and number two in Australia for GP antenatal shared care to all women.

Connecting Care

The Connecting Care Program provides patient-centred, coordinated care for patients living with selected chronic diseases who are at high risk of unplanned hospitalisation or presentation at Emergency Departments.

The client is supported to self manage their chronic condition and referred to health coaching. Services can include telephone support, home visits and comprehensive individual, lifestyle and environmental assessments. It is a service conducted jointly by NBMML and NBMLHD.

Achievements 2013/14

In the past 12 months, over 174 clients have been assisted through the NBMML Connecting Care Program, with 100% of clients' GPs being contacted to promote joint care planning.

Connecting Care Coordinators have referred clients to the Closing the Gap program, the Healthy Lifestyle services and home assessment services.





“ As a small clinic with no practice manager, we have found the assistance given to us by staff at NBMML to be invaluable. They have assisted us with accreditation and to become an electronic practice, and their support has always been reliable and extremely helpful.

Dr Daryl Chamberlain, GP, Colyton

Primary Healthcare Support

Workforce Support

In November 2013, NBMML saw most areas in the Blue Mountains, Hawkesbury and Penrith re-classified as Districts of Workforce Shortage (DWS). This is significant, as the DWS classification attracts more doctors to work in our area and assists us in filling some of the workforce shortage gaps we have in the provision of primary health care services.

NBMML provides extensive services to local healthcare providers and practices to assist them in recruiting the necessary complement of medical staff, including advertising positions on the NBMML website and offering recruitment advice. During the past 12 months, 625 workforce support consultations were administered by NBMML, helping local practices to recruit more than 16 GPs and practice staff to serve the region's population growth.

In the last two years, this effort has resulted in our local GP workforce increasing by nearly 30%.

NBMML administers government incentive payments, such as the Outer Metropolitan Relocation Incentive Grant (OMRIG). OMRIG is an initiative to encourage doctors to work in outer metro areas by providing a

“ I am very much grateful and thankful for the continuous support I received from NBMML's Workforce Support team during the entire process of recruitment.

Dr Nadira Jahan, GP, Werrington County Medical Centre

relocation grant of up to \$40,000. In 2013, OMRIG grants were awarded to three local GPs in the Blue Mountains, Hawkesbury and Penrith areas.

NBMML has been actively working with the NSW Ministry of Health to streamline the application process for Areas of Need (AoN), and has assisted local general practices with their AoN applications.

NBMML also works with the regional training provider and local universities to develop the quality and capacity in medical education and training. About 25 general practices across the region provide vocational training to GP registrars.





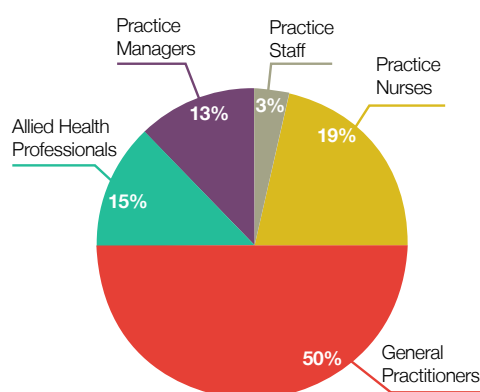
CPD & Events

NBMML develops and coordinates accredited Continuing Professional Development (CPD) events for healthcare professionals across the region. CPD events developed by NBMML are accredited against professional standards. In addition, it promotes health-related educational activities presented by external organisations. Our goal is to make educational events for both healthcare professionals and the general public as accessible as possible.

Achievements 2013/14

NBMML coordinated 121 education and networking events this year, involving more than 1,800 attendees, including GPs, allied health professionals, practice managers and practice nurses across the four LGAs.

NBMML CPD Event Attendance by Profession



A comprehensive research project was also undertaken to understand the professional development needs of allied health professionals and general practitioners across the region.

General Practice Support

NBMML's Primary Health Care Support (PHSC) team provides assistance to local practices in a wide range of areas including accreditation, immunisation, eHealth, data quality improvement, practice nursing, after hours and workforce needs and the interpretation of the Medicare Benefits Schedule (MBS).

The team also takes a central role in distributing key health information to the primary healthcare community. A weekly publication for general practices is a pivotal communication tool that continues to grow in popularity amongst health professionals. This provides a vehicle for pertinent information to be succinctly communicated to practices.

Achievements 2013/14

This year, the PHSC team provided 3,003 occasions of service to primary care professionals and organisations.

The NBMML Quality Improvement program supports 33% of practices with data quality improvement initiatives such as register, recall and reminder system management, data cleansing and links to Chronic Disease Management pathways of care within the primary care setting.

Practice Nurse and Practice Manager Network meetings were conducted across the region to deliver education and foster the development of peer support networks.

Allied Health Support

Understanding the needs of local allied health professionals has led to NBMML establishing a model for delivering relevant services and support to allied health providers in our region.

Achievements 2013/2014

Findings and feedback from the Prevention in Primary Health Care (PiPHC) project in the Hawkesbury and Blue Mountains have informed the model of service delivery for Allied Health for 2014-2015.

Major outcomes include the generation of a network engagement report and a better understanding of the enablers and barriers of the referral network for chronic disease prevention and management between practitioners across disciplines.

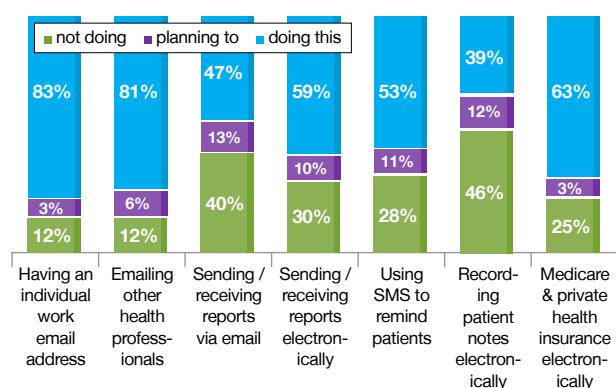
A comprehensive survey of allied health providers across the four LGAs was undertaken in September 2013, resulting in NBMML better understanding the 910 individual practitioners and 598 organisations that provide allied health services across the region.

A number of themes were identified from the survey including:

- CPD and Networking with GPs via collaborative case study is popular.
- Allied health professionals feel there is an opportunity to increase GP recognition of their clinical contributions
- Allied health professionals would like to increase interaction with GPs and hospitals
- NBMML has an opportunity to support allied health professionals through information technology uptake, particularly the PCEHR, dissemination of program information, website awareness and clinical education.


As a result of the outcomes from this survey, NBMML is now implementing a new level of support to allied health professionals, through information technology uptake, dissemination of program information and clinical education.

Survey Feedback: How advanced is this Allied Health practice in using technology in the following areas:



“ The 5 Steps to Success exercise program I run as part of the HELP for Diabetes program has been very well received by the community. It engages participants in a way that reduces the fear of what they need to do whilst helping them realise the gravity of their illness and the long term poor outcomes should they not make positive change.

Suzie Kennedy
(Managing Director of PilatesWorks Exercise Physiology & Rehabilitation Clinic at Penrith)



“ NBMML worked tirelessly with local GPs and our member organisations to provide vital GP services at evacuation centres during the 2013 bushfires.

Sheila Holcombe, CEO

Engagement & Integration

Working with consumers

Following the extensive consumer consultations, needs assessment forums and health needs reporting in 2012-13, this year has been a time to build upon the substantial foundations of our consumer engagement work conducted in partnership with NBMLHD.

Comprehensive Community Health Reports were published and Consumer Working Groups and Committees recruited for each of the four LGAs in our region. These groups were given the important task of assigning priorities to the health needs identified for each area. The Community Health Reports are available on the NBMML website, at www.nbmml.com.au/communityhealthreports.

Local health priorities are also being incorporated into existing health projects (such as the Health Transport project) and NBMML programs (eg. Aboriginal Health).

Operationalisation of the joint consumer engagement strategy was led by consumers from the Joint Health Consumer Committee (an advisory group to the NBMML and NBMLHD Boards).

We would like to express our sincere thanks to all the community members who willingly gave their time to be a part of this important process.

Consumer-led research

In concert with our commitment to real consumer engagement, NBMML undertook a consumer-led research project with Blue Mountains Cancer Help, the University of Western Sydney and the University of NSW: *Evaluation of Blue Mountains Cancer Help (BMCH) from the Perspective of Clients, Carers and Healthcare Providers* in support of people living with Cancer.

A unique aspect of the research project was the fact it was led by health consumers who provided input at every stage including helping to develop the research plan; devising the survey, interview and focus group questions; interpreting the findings; framing the recommendations; contributing to the report and conference presentations and continually articulating a consumer perspective.

The report reveals BMCH clients benefited from connections and social support, information, access to a range of affordable therapies and programs, symptom relief and stress reduction, self-management skills and increased sense of control and confidence. In the BMCH and healthcare provider interviews, and at a stakeholder workshop, improved communication was identified as a key strategy for achieving an integrated model of care for people living with cancer. Five recommendations resulted from the evaluation findings and from discussions held by stakeholders at a research workshop staged in June.

The research was presented at the national PHCRIS conference and the findings received significant local and national media interest (print and radio).

The report can be found on the NBMML website at www.nbmml.com.au/cancer.

“ Nepean-Blue Mountains Medicare Local enables health consumers to represent their community, to prioritise what they see as the needs of their area, as all areas are different. It is really important that the decision makers in health organisations are provided with these priorities so they can begin to address issues that will make a difference to the local community.

Barry Funnell, Chair of the Lithgow Health Consumer Working Group



Partnering with local agencies

Nepean Blue Mountains Local Health District

NBMML views our relationship with NBMLHD as a vital health partnership which will ultimately benefit every person within our community and improve health outcomes in our region.

We jointly collaborate on a number of initiatives, including:

- Aboriginal health
- Community engagement
- Connecting Care in the Community program
- A clinical redesign project to improve pathways for GPs to outpatients clinics at Nepean Hospital.
- HealthOne
- Multicultural health and mental health initiatives
- Joint health planning
- Disaster planning and management
- The Cool Kids program (for anxious primary school-aged children)
- Diabetes

Health Transport

NBMML is working with local health agencies and community transport providers to identify demand and evaluate existing transport services and the gaps that exist.

Three working groups have been formed to progress the issues arising from the inaugural health transport meeting.

General Practice organisations & consultation

NBMML works closely with General Practitioners directly and through their member organisations (GP Divisions or Networks). GPs participate on program advisory committees such as ATAPs and Antenatal Shared Care steering committees.

During the October 2013 bushfire crisis, NBMML worked with GPs through the GP Network Chairs Committee. As part of this process, the Chairs of the local GP Divisions and Networks clearly indicated the need for a broader GP Advisory Committee to be formed to provide a new model of working with local GP representatives to consult on the best ways to support and engage with our GP community across the region.

This GP Advisory Committee is now in operation, comprising representatives from the four LGAs in our region.

Disaster Management

The role of primary care in regional disaster planning was highlighted during the October bushfires that affected much of the NBMML region.

NBMML represented primary care to the local Emergency Operations Centre (EOC) and participated in briefings one to three times per day.

NBMML coordinated a GP roster to support the evacuation centres as they were established, working with the Chairs of the local Divisions of General Practice. NBMML also worked with the RACGP and AMA as part of the response.

The State Emergency Operations Centre (SEOC) has expressed interest in documenting how NBMML coordinated GPs across the region during the emergency, with a view to our approach being replicated across Australia.

Partners in Recovery

NBMML is proud to be working as the lead agency for the Partners in Recovery consortium project. Our partners are Aftercare, Department of Family and Community Services, Nepean-Blue Mountains Local Health District - Drug and Alcohol Services and Mental Health Services, RichmondPRA and UnitingCare Mental Health

Accreditation

NBMML maintains excellence through strong governance and management structures and a commitment to organisational improvement.

This dedication to quality systems and processes as well as recruiting and retaining excellent staff was reinforced when NBMML was successful in attaining full accreditation against the Medicare Local Accreditation Standards in May 2014 with SAI Global. NBMML is continually involved in quality improvement processes to ensure high standards of care, governance, community and consumer engagement. Quality and safety remain a priority of the organisation.

All the work NBMML does for the community wouldn't be possible without the efforts of the tremendous team of people that work for us, all of whom are committed to taking action to improve the health of our region. We thank them for making 2013-2014 a time of so many great achievements.

Medicare Locals gratefully acknowledge the financial and other support from the Australian Government Department of Health.

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Healthy for Life Office

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Healthy Lifestyle Dietetics Service

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For more information about Nepean-Blue Mountains Medicare Local visit
www.nbmmml.com.au

Connecting health to meet local needs