

PHNs and regional commissioning

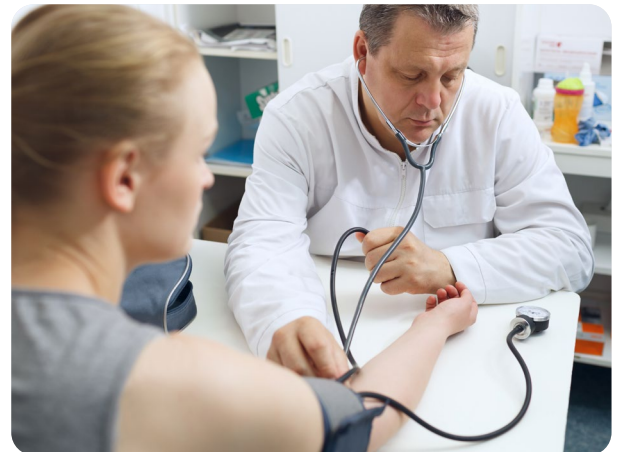
We help meet the primary healthcare needs of Australians through locally commissioned health and wellbeing services.

Up to 85%

of PHN funds are spent directly on commissioned healthcare services that meet local needs.

'Through commissioning we have managed to triple the number of much-needed mental health services available locally.'

—Abbe Anderson, former CEO, Brisbane North PHN



What are PHNs?



PHNs are local independent organisations set up to improve patient care in their PHN regions, ensuring primary healthcare is more accessible, efficient and effective.



PHNs are funded by the Australian Government and collaborate with GPs, other health professionals and consumers.



There are 31 PHNs covering all of Australia.

PHN key functions

We use our knowledge and understanding of local health needs to fulfil three core functions.



*General Practices include Aboriginal Medical Services

Why and how we commission health and wellbeing services

What is commissioning?

Commissioning is the process by which services are planned, purchased and monitored.

Commissioning typically involves:

- assessing needs
- planning services
- co-design
- procuring services
- monitoring quality
- evaluating outcomes.

Why we commission health and wellbeing services

- We focus on optimum health and wellbeing for our communities.
- Our unique advantages are that we are locally based and locally focused.
- We seek to know and understand our local health challenges, our areas of greatest need, and the services and support currently available.
- If there are gaps between needs and available services and support, we try to fill those gaps through commissioning.

How we operate

- We work with local organisations, providers and consumers throughout the commissioning process.
- We use data and other objective evidence wherever possible.
- We operate as an independent broker.
- We are not service providers.
- We always strive to fund locally-based services that have maximum impact and integrate well with other parts of the health system.
- We often bring different providers together to create collective action, typically using a mix of existing and new services.

The benefits of PHN commissioning

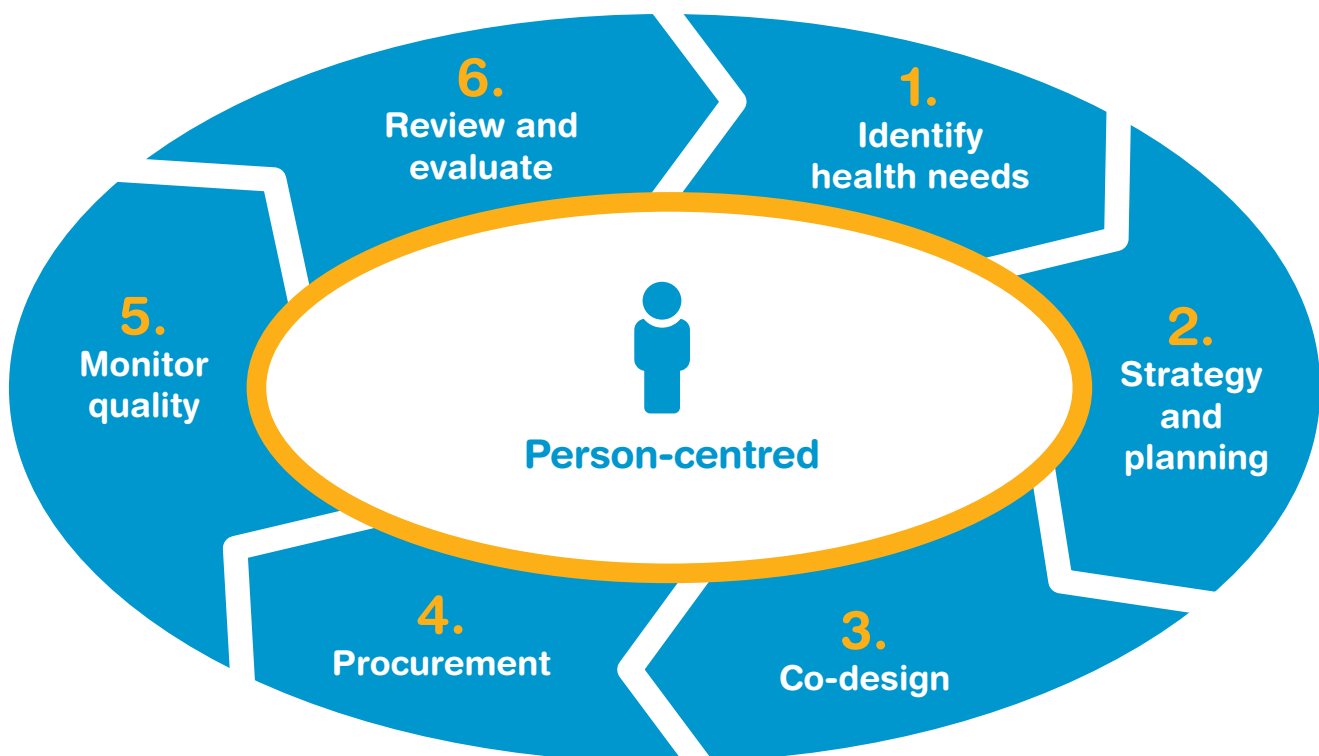
Commissioning by locally-based PHNs brings important benefits compared with traditional national contracting of health services.

Characteristics of national contracting	Characteristics of regional commissioning
One-size-fits-all approach.	<ul style="list-style-type: none">Alignment of services with identified needs.Greater focus on health outcomes that matter most to people within each region.Re-orientes the health system to care within communities.
Health needs and solutions determined nationally.	<ul style="list-style-type: none">Better understanding of the needs of local populations, through local and regional health data analysis.Builds a health and community care system suited to specific local needs.
Limited capacity to work with individual providers to innovate and drive efficiencies in service delivery.	<ul style="list-style-type: none">More scope to build local and regional relationships that will drive change and influence the entire service system to build on its strengths to deliver what communities want.Influences providers to move towards best practice in meeting local health and community care needs.Leads to quicker and easier 'on the ground' changes when needed.
Health funding tied to national efficiency and health outcomes.	<ul style="list-style-type: none">Better value for money achieved through open, transparent, regionally relevant commissioning processes.
Performance monitored by reporting.	<ul style="list-style-type: none">Close monitoring and support.

PHNs have a consistent approach to commissioning

Although local challenges and eventual solutions may differ, PHNs bring a consistent and rigorous approach to commissioning. We all use the same PHN commissioning cycle incorporating nationally-developed commissioning goals and principles.

PHN commissioning cycle



Commissioning outcomes

In commissioning health services we are seeking:

- Optimal health and wellbeing outcomes for the local population
- Better access to value-for-money treatment and care
- Improved person and family experience of healthcare
- Enhanced provider satisfaction.

Commissioning principles

- Prioritise health outcomes.
- Adopt a whole-of-system approach.
- Understand community needs through engaging, consulting and data analysis.
- Co-design solutions with stakeholders.
- Consider investing in the capacity of providers and consumers—particularly in relation to hard-to-reach groups.
- Consider the broadest practical range of potential providers.
- Engage with potential service providers well in advance.
- Where appropriate, consider provider potential to overcome market failure and lack of diversity.
- Ensure procurement and contracting are fair and transparent.
- Consider alternative arrangements such as consortia.
- Manage through relationships—partnerships, connections and links.
- Develop trust through collaborative governance, decision-making and performance management.
- Ensure efficiency, value for money, and overall service enhancement.
- Monitor and evaluate through regular performance reporting, feedback and independent assessments.

Commissioning showcase

Key areas of commissioning work across Australia

Mental health and suicide prevention

Care coordination and clinical support for young people and adults; broader range of psychological services and suicide prevention.



Alcohol and other drugs

New services to support treatment for at-risk groups; reduce harms from drug and alcohol use; reduce methamphetamine use in the community.



Aboriginal and Torres Strait Islander health

Improving access to culturally safe primary healthcare services; supporting Aboriginal controlled organisations.



Access to services

Services delivered where and how people want them, e.g. after hours, tailored to chronic diseases, after a hospital stay to enable early discharge home.



At-risk groups

Reducing hospital admissions, supporting people in the community, prevention and support services, early disease management.



Optimal health and wellbeing

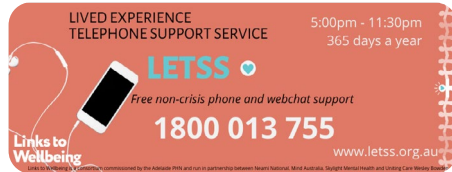
Prevention, and early identification and treatment of chronic diseases; improved services for at-risk groups, including screening and self management; promotion of healthy behaviours.



Mental health and suicide prevention

Lived Experience Telephone Support Service

Adelaide PHN



The challenge

Supporting people with mental health challenges, and their carers, families and friends.

The solution

The *Lived Experience Telephone Support Service (LETSS)* supports people with mental health challenges, as well as their carers, families and friends, while also providing information on mental health topics and navigating the mental health system.

The service is unique in being led and staffed by trained peer workers who have personal lived experience of recovery and managing challenges to their mental health, or caring for someone with mental health challenges.

Peer workers draw upon this in providing non-clinical support to the caller and understanding the caller's unique experience.

The service is available 5.00 – 11.30pm, 365 days a year. People can access LETSS via a toll-free number, or initiate live webchat via a 'Links to Wellbeing' website.

A promotional video highlighting the unique nature of the service and its benefits is available at <https://youtu.be/bHhJ07qGwkl>

Results

The number of contacts to the service rose from 2,400 in 2018–19 to over 5,500 in 2019–20. Webchat accounted for 13% of contacts.

Feedback indicates that 90% of clients had their support needs met and/or would recommend the service to others.

Aboriginal and Torres Strait Islander health

Strengthening Our Spirits

Northern Territory PHN



The challenge

Help prevent suicide in Aboriginal and Torres Strait Islander people in the Northern Territory.

The solution

The *Strengthening Our Spirits* model of care is a systems-based approach to suicide prevention. It takes into account the many people, systems and processes that need to work together to help prevent suicide.

Strengthening Our Spirits was designed by members of the Greater Darwin region's Aboriginal and Torres Strait Islander community. It represents an Aboriginal way of knowing, and is based on the elements of fire, land, air and water.

Its guiding principles are that suicide prevention activities will be responsive and flexible while building and developing local Aboriginal and Torres Strait Islander workforce capacity, engaging culture, elders and lived experience, and involving local design or adaptation.

Northern Territory PHN has funded several innovative activities under this program, and has commissioned a local Aboriginal Community Controlled Health Organisation to guide contracted service providers in using the *Strengthening Our Spirits* model in meeting the needs and priorities of local Aboriginal and Torres Strait Islander people.

Results

Strengthening Our Spirits has been recognised as a best practice model of co-design and suicide prevention for Aboriginal people by the Centre for Best Practice in Aboriginal and Torres Strait Islander Suicide Prevention.

At-risk groups

'Choices' social and mental health support

WA Primary Health Alliance



Choices client Angela, and case worker Carol, with Angela's artwork

The challenge

Reducing avoidable hospital presentations and admissions in at-risk groups through support and care in the community.

The solution

The *Choices* program connects people at risk of poor health outcomes with social and mental health support on discharge from emergency departments and when exiting justice services. It is the first service of its kind in Australia.

The program currently employs peer and case workers based in emergency departments at Royal Perth Hospital and Rockingham General Hospital, as well as previously at the Perth Watch House and Perth Magistrates Court.

The development of trusting relationships with non-clinical staff can be key to ongoing and sustained contact with services—and *Choices* offers that.

Many *Choices* clients present to hospital emergency departments with physical and mental health conditions that could be potentially managed through primary care.

The *Choices* program connects clients to GPs who can offer ongoing health care, as well as to relevant community-based treatment and support services.

Results

Choices peer and case workers have connected with over 3,000 people. An independent evaluation found that emergency department presentations fell by 35% among the evaluated client group in the 12 months following support.

Primary Health Networks

Alcohol and other drugs

'You're Not Alone' Family and Carer Support Service

Gippsland PHN



'You're Not Alone' Substance Abuse Support Group

The challenge

Reduce the impacts of alcohol and other drug misuse, particularly 'Ice' and similar substances, among individuals, families and communities.

The solution

The *You're Not Alone* Family and Carer Support Service offers a variety of different interventions for alcohol and other drug misuse, including individual and family counselling, brief intervention, group education and information sessions, peer support groups, and access to further support and treatment services as needed.

Based on the recommendations of its National Ice Taskforce, the Australian Government funded Primary Health Networks (PHNs) to assist in planning and commissioning Alcohol and Other Drug (AOD) treatment services.

To inform its commissioning approach, Gippsland PHN completed a comprehensive Alcohol and Other Drugs needs assessment and service mapping exercise—in collaboration with existing AOD service providers and the Victorian State Government.

The main priorities identified were realistic and tangible support for the families and carers of substance users, and early intervention youth support.

Results

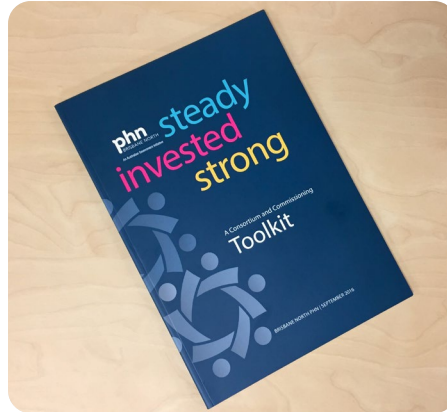
In 2018–19, the 'You're Not Alone' Family and Carer Support Service delivered or established:

- 411 family therapy episodes of care
- 291 brief interventions
- 7 'You're Not Alone' information and education groups
- 45 substance abuse support peer support groups.

Access to services

healthy@home aged care consortium

Brisbane North PHN



The challenge

Improving access to at-home support and care services by older Australians.

The solution

The *healthy@home* consortium commissions and delivers high quality aged care services to people at home, as well as actively supporting and shaping these services. It follows practices set out in the Brisbane North PHN's *steady invested strong* consortium and commissioning toolkit.

The consortium comprises 19 members, with Brisbane North PHN as the lead/backbone organisation among a diverse group of service providers, as well as consumer and carer advocacy representatives, peak bodies, and the local hospital and health service.

Services available include help with household jobs, home modifications, personal care, nursing care, social support, transport, preparing meals, shopping for food, delivering meals, allied health and therapy services, and arranging respite care.

The consortium has also introduced the 'Active at Home' home exercise program, and a centre-based respite project encouraging social connection.

Results

In 2019–20, the *healthy@home* program delivered over 195,000 sessions of care to older Australians living in the Brisbane North and Caboolture communities, and provided clinical and social-care services to 8,300 people.

Optimal health and wellbeing

SNAPO+ workshops (Smoking, nutrition, alcohol, physical activity and obesity)

Sydney North PHN



Aboriginal–On Track' workshop in progress

The challenge

Reduce the prevalence of lifestyle risk factors and associated chronic diseases in vulnerable population groups.

The solution

Cancer, heart disease, self-harm and respiratory disease are the top four causes of premature mortality in the Northern Sydney region. Vulnerable population groups in the region have a high prevalence of lifestyle risk factors leading to these diseases and conditions, including smoking, poor nutrition, excessive alcohol consumption, lack of physical activity, and obesity (SNAPO).

The Sydney North PHN *SNAPO+* workshops aim to improve health literacy and knowledge of local services in vulnerable populations within the community, and enable self-determination. They are tailored to culturally and linguistically diverse (CALD) groups and Aboriginal and Torres Strait Islander people, seniors, youth, and refugee and humanitarian entrant populations.

Each topic has been delivered by a local expert (e.g. general practitioners, dietitians, exercise physiologists), either in language, or via a translator if required.

The workshops are facilitated in partnership with local councils, NGOs, community groups, GPs and other health professionals delivering services within the region.

Results

A total of 112 workshops have been run, with over 7,000 attendees.

What clients say

'I honestly don't know where I would be without LETSS, I might not even be here if it wasn't for you. Every time I speak to you, it moves me forward a tiny bit more. It doesn't matter who I get to speak to there, it's always the right person on the right night.'

—LETSS client (Adelaide PHN)

'It really feels like you guys have experience and just get it. I'm glad your service exists, I don't like going to hospital...and being away from my family, it's good I can call you before things get bad.'

—LETSS client (Adelaide PHN)

'The program has been very good. It's good to talk about making strong connections with others and our culture, whether it's talking about country, or our personal life such as our emotions or stress, and learning to understand yourself. I reckon all schools should be talking about it, just to feel the connections!!'

—Year 11 student, Strengthening Our Spirits care recipient (Northern Territory PHN)

'I have enjoyed the meetings with in-depth education about drugs and effects. And it has already helped me in making decisions about my partner's addiction in a more understanding way.'

—'You're Not Alone' Family and Carer Support Service client (Gippsland PHN)

'My balance has improved a lot. I hold my head up and am aware of my posture even when sitting—and I can stand on one leg now. The exercises have helped me no end. To the people who chose 10 minutes more services over exercise I would say to them that they missed out on a wonderful opportunity.'

—Client, 83, on the 'Active at Home' component of healthy@home (Brisbane North PHN)

'Good to hear health information in my language, from a trusted doctor.'

—Community member from a CALD background, SNAPO+ workshops (Sydney North PHN)

'The Choices service saved my life...the only support I had was through Carol and Choices...It was the first time I had been heard in a long time.'

—Angela, 'Choices' social and mental health support client (Western Australia Primary Health Alliance) Follow Angela's story here: www.youtube.com/watch?v=Srb5p3liYVA&feature=youtu.be

What we've learnt

Keep it local, involve the community

The foundation of successful commissioning is the trust of the local community, built through strong relationships and partnerships.

Focusing on local impact is more effective than responding to national drivers and targets.

Collectively agreeing and developing services in cooperation with local providers and the community leads to the best outcomes.

Where to next?

Place-based resource-sharing—

Pooling funds and other resources with organisations at specific locations will bring benefits of scale to collectively administering and delivering improved healthcare services at that location.

Co-Commissioning—Joining with one or more funders to co-commission needed services requires a high level of trust, but will bring important benefits such as:

- highly engaged providers and consumers;
- agreed measures of success; and
- the opportunity to collect and share data that can be used to further improve the service.

Regional planning—Extra 'buy-in' and support will be achieved by working with providers and the community to develop collectively 'owned' regional plans—for example regional mental health plans covering all levels of mental health need, from low intensity to severe and complex.

To locate/contact your local PHN:
www.health.gov.au/internet/main/publishing.nsf/Content/PHN-Locator

More information:
execoffice@phncooperative.org.au