# Service Provider Connect



WA Primary Health Alliance acknowledges and pays respect to the Traditional Owners and Elders of this country and recognises the significant importance of their cultural heritage, values and beliefs and how these contribute to the positive health and wellbeing of the whole community.



Service Provider Connect #84 - 16 March 2023

#### In this edition:

### **Executive General Manager's foreword**

### Strategic Update

- Aboriginal Cultural Competency and Capability Framework; LGBTIQA+ Equity and Inclusion Framework launched
- National review to inform alignment of service delivery with Closing the Gap
- Strengthening Medicare Taskforce Report

#### Procurement and contracting

- Tender notification
- Commissioning update
- WAPHA commissioning
- Contract acknowledgement and brand guidelines
- Program Improvement update
- Service Provider Panel meeting update
- Commissioned Services Research
- Phase 2 CSRP progress

### **General resources and information**

- Exemption to Subsection 19(2) of the Health Insurance Act 1973 for GPs practicing at regional and remote headspace services
- Strengthening Medicare General Practice Grants
- Family, Domestic and Sexual Violence Pilot
- Remote Primary Health Care Manuals launched in NT

### **Training and events**

 HealthPathways Trans, Gender Diverse and Non-Binary Health Webinar Series- 2023: Session 2

- HealthPathways Trans, Gender Diverse and Non-Binary Health Webinar Series- 2023: Session 3
- WAPHA Multicultural Community Workshops

### **Previous editions of Provider Connect**

### **Executive General Manager's foreword**

Continuous quality improvement is critical if we are to play our part in strengthening the health care system. Improving efficiency, optimising systems and processes, and reducing costs will ultimately improve patient outcomes.

While technology-driven innovation has a significant role to play, and I will write more on that in a future edition of this newsletter, there are many other ways we are working both within WA Primary Health Alliance and with our commissioned service providers to achieve this.

In this edition, the launch of the first two of three cultural competency frameworks signals our leadership and commitment to continuous quality improvement but also our humility in understanding that many of you are already well progressed in this journey and we can and will learn from your experience. A personal thank you to those of you who have informed this work so far.

Continuing this theme, our Program Improvement team continues to deliver results, working closely with service providers on enhancements to current programs across chronic conditions and mental health.

Underpinning our work and yours, the recently developed <u>Performance Management Framework</u> and Commissioned Services Reporting Portal are tools to support you to deliver safe, high-quality, and reliable care whilst also providing us with better oversight of data, provider performance and patient outcomes.

As we implement these changes, that will ultimately benefit communities across Western Australia, we will continue to consult and work closely with you and provide the necessary support.

Last but very much not least, touching on the national policy agenda, our Board has recently made a commitment to support the Voice to Parliament. WA Primary Health Alliance supports the Uluru Statement and Voice to Parliament

WA Primary Health Alliance CEO, Learne Durrington and Board Chair, Dr Richard Choong, discuss WA Primary Health Alliance's endorsement and support of the Uluru Statement and Voice to Parliament and how we will support our staff and stakeholders to be informed ahead of the Referendum.

View the video

We will share more information, including some practical campaign resources for you to consider using, in a future edition.

Regards,

Mark Cockayne

**Executive General Manager Commissioned Services** 

### Strategic Update

# Aboriginal Cultural Competency and Capability Framework; LGBTIQA+ Equity and Inclusion Framework launched

WA Primary Health Alliance is delighted to present the first two of three foundational documents that will guide our journey towards cultural competency, diversity and inclusion, being the <u>Aboriginal Cultural Competency and Capability Framework 2023-2025</u> and the <u>LGBTIQA+ Equity and Inclusion Framework 2023-2025</u>. A third Framework, focusing on multicultural communities, is in development, that we hope to launch later this year.

We extend our thanks to those of you who have contributed your experience to inform these Frameworks. We look forward to consulting with service providers once again as we develop the detailed Commissioning Guidelines and associated Toolkit.

You can see from our three-year implementation timeline, that in 2023, we will focus internally and lay the groundwork to implement the Frameworks with our commissioned service providers in 2024 and beyond.

YEAR 1		YEAR 2		YEAR 3
WAPHA 2023				
	Co	ommissioned Services 2024		
			Su	pporting Primary Care 2025

We will support service providers on this journey and build in an appropriate level of flexibility, considering each organisation's unique situation, including resourcing, capacity and capability.

We understand service providers are at different levels of maturity in their understanding and application of cultural competency and may have obligations and reporting requirements in place with other commissioners, professional bodies and accreditation agencies.

#### Read more

# National review to inform alignment of service delivery with Closing the Gap

As part of the Australian Government's commitment to Closing the Gap, a review of sector funding arrangements and service provider capability for Aboriginal and Torres Strait Islander mental health and suicide prevention services and the Integrated Team Care program is underway.

The purpose of the Review is to explore how the Australian Government can best align and give effect to the National Agreement on Closing the Gap in the delivery of these services.

Led by Ninti One and First Nations Co, the review has four areas of focus, namely: funding arrangements, service sector capacity, community and consumer needs, and future options.

Informed by a desktop review of existing information, an interim report was delivered to the government late last year. The next phase is direct engagement and fact-finding via interviews, focus groups, forums and a national online survey.

As the operator of WA's three Primary Health Networks, WA Primary Health Alliance will be participating in the review. We expect many of our commissioned service providers will do likewise. Aboriginal community-controlled organisations as well as mainstream and non-Aboriginal organisations commissioned to deliver the relevant health services will be eligible to participate.

A final report is to be delivered in June 2023 that will make recommendations to strengthen future service and program delivery and outcomes. WA Primary Health Alliance will keep abreast of the review and its outcomes as we consider how this will shape our future approach to commissioning services for Aboriginal people in Western Australia.

### **Strengthening Medicare Taskforce report**

The Strengthening Medicare Taskforce report was released on 3 February with equity of health outcomes at the centre of the Taskforce's discussions.

The Taskforce report contains recommendations centred around key areas:

- Increasing access to primary care
- Encouraging multidisciplinary team care
- Modernising primary care

• Supporting change management and cultural change WA Primary Health Alliance was actively engaged in the Taskforce focus and discussions, having provided numerous related submissions to the 10 Year Primary Health Care Plan, the Senate GP Workforce Inquiry and being represented on the Taskforce by our CEO, Learne Durrington.

An expanded role for PHNs across the Taskforce recommendations is evident and more detail will be forthcoming in the May 2023 Federal budget as to the activities and funding allocations.

WA Primary Health Alliance, together with PHNs nationally, is currently considering the Taskforce report recommendations and their implications for PHNs directly, our commissioned service providers, GPs and allied health professionals.

## Procurement and Contracting

### **Commissioning Update**

### **Current Status of WAPHA's commissioned services tenders**

Tender No	Service Description	Status
RFT2023-1	FT2023-1 Office-based & online video call face-	
	to-face delivered psychological	Evaluation Stage
	treatment in the Perth metropolitan	
	area	
RFT2022-2	Head to Health Adult Mental Health	Closed -
	Centre (Armadale) and Satellite	Evaluation Stage
	(Gosnells)	
Rft2022-3	Head to Health Adult Mental Health	Closed -
	Satellite (Balga/Mirrabooka)	Evaluation Stage

WA Primary Health Alliance's commissioned services can be found on our website here and via the My Community Directory here.

# WAPHA commissioning acknowledgement and brand guidelines

A friendly reminder for contracted service providers that, as part of the service agreement and activity schedule conditions, it is a requirement that WAPHA activity branding is applied. This relates to:

 Any website, document, email or other publication that advertises or displays the activity; and • In a publicly disseminated activity material, produced with the activity fees or a part of the activity.

To support providers, we have developed acknowledgement and brand guidelines <u>here</u>.

### **Program Improvement Update**

### **Portals Program**

The Integrated Primary Mental Health Care program (IPMHC), or Portals as the program is called, provides free psychological treatment options and care coordination services across Country WA, including the Kimberley, Pilbara, Goldfields, Midwest, Wheatbelt, Great Southern and South West.

The Program Improvement Team is working with IPMHC providers to facilitate a standardised approach to service delivery throughout the regions. Quality improvement processes, including a community of practice, are being utilised to achieve greater equity in access pathways, treatments options and clinical outcomes for consumers

### **Chronic Conditions Management**

The Integrated Chronic Disease Care program (ICDC) supports people with, or at risk of developing, a chronic condition through care coordination and access to allied health. It aims to improve client self-management and reduce potentially preventable hospital presentations.

The program is delivered by twelve organisations across the seven Country WA regions. The population health program improvement coordinator has been establishing relationships with the organisations and staff working within the programs to understand their services and find opportunities for program wide improvements.

An ICDC community of practice (CoP) is planned to commence late March 2023 and staff have been invited to a MS Teams channel where they can access supporting resources and chat between CoP meetings.

This same group have been invited to attend a chronic conditions care planning face to face workshop presented by Benchmarque Group. This will be an opportunity to learn current best practice in chronic conditions care and network with each other to allow for relationship building before the first CoP.

### **Service Providers Panel Meeting**

The latest Service Provider Special Interest Panel session was held in late February 2023 on the topic of Indexation: impact and ideas.

Primary health care providers play a crucial role in ensuring the delivery of quality health care service to communities. However, providing adequate compensation to service providers to keep pace with the rise in costs, such as salaries, rent, utilities, and other expenses, can be a challenge. This is particularly true when the funding provided by the commissioning agency is less than inflation, as this can effectively result in reduced funding for primary health care services.

WA Primary Health Alliance (WAPHA) has in place Funding Agreements with the Australian Government for the delivery of key priority activities under specific program areas (eg. Mental Health and Suicide Prevention (MHSP)). Decisions regarding the provision of indexation and amounts provided are processes of the Australian Government. The indexation of funding provided to WAPHA varies across program areas and is most often less than inflation.

The Panel discussed strategies for managing costs and recommended actions for WAPHA to take to minimise the impact of the effective shortfall in funding. The summary of the discussion highlights the challenges and actions of service providers in the current economic climate.

These insights are already being used in WAPHA to increase awareness for our teams of the reality for services. We will continue to draw on this discussion to inform future planning as we come to the final quarter of the financial year and the examples shared will also add to our advocacy to the Australian Government Department of Health and Aged Care.

Find the summary <u>here</u>.

### **Commissioned Services research**

Research is currently being undertaken with organisations who hold a current WA Primary Health Alliance contract about our performance and how we can improve. We have engaged an independent research agency, Painted Dog Research, to conduct interviews with organisations on our behalf and to provide organisations an opportunity to give feedback confidentially and anonymously.

A sample of organisations will be contacted, representing the diversity of the services and Primary Health Network regions in which we hold contracts. Painted Dog Research are identifying who to call from a list we have provided of our current contracted organisations. If you have a received a request to be involved, then please respond. Discussion should only take around 30 minutes and will explore our performance across a number of aspects, levels of satisfaction with current working relationships, as well as providing you with the opportunity to suggest any areas for improvement.

Themes and opportunities raised in the research will inform our ongoing continuous improvement as a commissioner.

We undertook similar research last year. Feedback directly led to establishment of the Service Provider Special Interest Panel, informed development and implementation of the Performance Management Framework and design of the Service Provider Portal. It also directed our attention to increasing communication and transparency of decisions and of the context we are working in.

If you have any queries please contact Stakeholder Engagement Manager, Jane Harwood at jane.harwood@wapha.org.au or your contract manager.

# Commissioned Services Reporting Portal & Performance Management Framework update

The development of WA Primary Health Alliance's Performance Management Framework (PMF) in 2021 supported our commitment to building a strong and sustainable primary health care system through bringing a more structured and data driven approach to quality improvement.

The PMF sets out a new approach to measuring, monitoring and evaluating commissioned service provider (CSP) performance, in a way that establishes clear, consistent and transparent expectations of service delivery and outcomes.

We are aware that introducing the PMF means new performance indicators and changes to the type and way we collect data for some of our CSP and are committed to supporting them on this journey. We have been working with different sectors to understand the impact these changes may have and work collaboratively to ensure everyone is prepared.

In addition to the PMF, we have started work on a Commissioned Services Reporting Portal (CSRP), an online tool to collect data in a more timely, automated and secure way. The CSRP supports the implementation of the PMF by streamlining data sharing and providing reports that CSPs and WA Primary Health Alliance can use to work together to enhance patient experience and continually improve primary care.

In April 2022, we piloted the first stage of the CSRP with a small group of chronic conditions CSP. We have reviewed the pilot outcomes and is currently undertaking work to improve the CSRP user interface and update the system to align with our PMF.

What is the latest on the Performance Management Framework and Commissioned Services Reporting Portal?

- On the 8 March, we met AOD CSP to discuss Performance Indicators and the data these providers will need to submit under the new PMF.
- We will be meeting with chronic conditions CSP in the coming weeks.
- Mental Health CSP will continue to report their data to the PMHC-MDS and will soon be onboarded to the CSRP to receive their reporting dashboards.
- The PMF will be implemented for the majority of AOD and most chronic conditions CSP from 1 July 2023.
- CSRP is expected to go live in July 2023 with CSP onboarding and training in June 2023.

### **General Information**

# Exemption to Subsection 19(2) of the Health Insurance Act 1973 for GPs practicing at regional and remote headspace services

#### **Background**

As part of the March 2022-23 Budget, the Australian Government agreed to provide an exemption to Subsection 19(2) of the Health Insurance Act 1973 for GPs practicing at regional and remote headspace services.

Currently, subsection 19(2) prohibits the payment of Medicare benefits where other government funding is provided for that service. This means that GPs cannot bill Medicare for a service at the same time they are also receiving a payment from headspace, which could be in the form of a salary, wage, contract or other payment arrangement.

#### **Purpose**

A core component of the headspace model requires services to provide access to physical and sexual health services to young people at low or no cost. This initiative aims to:

- Help address the challenges of attracting and retaining GP's in regional and remote headspace services
- Enhance Access to primary care services for young people and their families

This initiative has been designed to provide headspace services the opportunity to enhance GP remuneration in an effort to ease some of the challenges in attracting and retaining GPs.

#### The exemption

The exemption will permit eligible GPs at eligible headspace centres, who currently receive salaries or other payments from Lead Agencies, to also bill against 28 eligible MBS services.

Eligible headspace services are those located within Modified Monash (MM) regions MM2-MM7. headspace services located in MM1 regions will be ineligible for this exemption. All headspace Centres and Satellites in the Country WA PHN region are eligible for this exemption.

The exemption will take effect from 1 February 2023 and is currently in place to 30 June 2026.

For further information in relation to this initiative, please contact your Contract Manager or headspace National direct at <a href="mailto:GPprogram@headspace.org.au">GPprogram@headspace.org.au</a>

### **Strengthening Medicare General Practice Grants**

Applications from general practices and Aboriginal Community Controlled Health Services (ACCHS) for the \$220 million Strengthening Medicare general practice grants program are expected to open in April 2023. The Australian Government will invest funds through the program over two years (from 2022-2023 to 2023-2024).

The one-off grants of \$25,000 to \$50,000 can be used by each general practice and ACCHS to invest in innovation, training, ICT and other equipment, and minor capital works in one or more of three investment streams. The streams are enhancing digital health capability, upgrading infection prevention and control, and accreditation to promote quality and safety in general practice.

The grants for general practices are being distributed in WA through WA Primary Health Alliance, and for WA ACCHS via the National Aboriginal Community Controlled Health Organisation (NACCHO).

Further information will be provided to practices as soon as possible to assist in planning for the grant application process.

Please sign up to our fortnightly <u>Practice Connect</u> newsletter to keep up to date on the grants program.

### **Family, Domestic and Sexual Violence Pilot**

The Australian Government announced in the 2022-23 budget that it will be investing \$48.7 million over four years (from 2022-23 to 2025-26) to support victims and survivors of family, domestic and sexual violence and child sex abuse to navigate the health system.

This funding will expand the existing Family and Domestic Violence (FDV) Primary Health Network pilots in NSW, Victoria and Queensland, establish a FDV pilot in each state and territory, and integrate models of support for victims-survivors of sexual violence and child sexual abuse.

The pilots aim to provide increased support to primary care providers to assist in the early identification and intervention of family, domestic and sexual violence, and sexual abuse, and ensure coordinated referrals to support services.

WA Primary Health Alliance has recently been invited to apply to a restricted grant round which we expect to open for four weeks in February 2023. As this is a new area of activity for WA Primary Health Alliance, team members will be

reaching out to key stakeholders in the coming weeks to inform our approach to the grant application and ensure that the additional investment contributes to addressing local needs and adds value to the existing service system.

# Remote Primary Health Care Manuals launched in Alice Springs

A suite of best-practice manuals for primary health care workers in central, northern and remote Australia, reviewed by Flinders University experts in collaboration with a volunteer editorial committee and more than 300 volunteer reviewers, has been launched.

The newest edition of the Remote Primary Health Care Manuals (RPHCM) comprises five books which are designed to support high quality clinical practice. They are widely used across the health care system, including in clinical care, education and orientation in the Northern Territory, remote South Australia, Ngaanyatjarra and Kimberley regions in Western Australia and beyond.

More information on the resources can be found <a href="here">here</a>

Training and events