

Northern NSW Integration Strategy

2016 - 2019

*Together keeping people healthy
and out of hospital*

Greater integration can improve the patient experience, the outcomes and efficiency of care and the ability of the health system to meet increasing demand.

The case for integration of care is well made. The evidence of the benefits, in particular to the experience of service users and their families make a compelling case for care to be coordinated around the needs of people and populations.

Developing integrated care means overcoming barriers between primary and secondary care, physical and mental health, health and social care and across funding regimens to provide the right care at the right time in the right place.

The aim of this strategy is to support the process of *'making it happen'*.



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EXPECTED BENEFITS FROM IMPROVED INTEGRATION ON HEALTH CARE SERVICES IN NORTHERN NSW:

- Improved patient experience of the health system
- Reduced waiting times for patients as they navigate the health system
- Improved health outcomes
- Reduced avoidable hospital admissions
- Less duplication of investigations
- Better use of health resources
- Improved professional satisfaction through delivering integrated care
- Improved clinician engagement through patient focused reform
- Improved communication between all members of a patient's care team

Who we are



North Coast Primary Health Network (NCPHN) is a not-for-profit organisation with the goal of working together with health professionals and community members to keep people healthy and out of hospital. A key function of NCPHN is to integrate care and make the patient journey easier and better connected. Established as a plank of the Commonwealth health reform agenda, NCPHN is active in not only connecting care but also filling gaps in service delivery.

NCPHN facilitates the provision of patient care across its footprint each year, including general practice, Aboriginal Health, Mental Health, Allied Health and Specialist Medical Services. Services are coordinated from offices in Ballina, Tweed Heads, Lismore, Coffs Harbour and Port Macquarie and are delivered by health professionals in more than 25 locations on the North Coast.

Northern NSW Local Health District (NNSWLHD) is responsible for improving local patient outcomes and responding to local health issues and is the regional operator of NSW State health care. Hospital based services consist of two referral hospitals located at Lismore and Tweed Heads with 10 base/district and community hospitals situated in the townships of Grafton, Ballina, Bonalbo, Byron, Casino, Maclean, Murwillumbah and three multi-purpose centres at Kyogle, Urbenville and Nimbin. There are 20 Community Health Centres spread across the Northern region.

The NNSWLHD also operates Aboriginal Health Services, Drug and Alcohol, Sexual Health, Cancer Services, Breastscreen and Mental Health Services, Public Health Unit, and Oral Health Services for the communities in the North Coast.



Our region

The North Coast region is bounded by NSW/Qld border extending from Tweed Heads in the north to the Clarence Valley in the south, covering 21,470 square kilometres and home to 289,404 people (4% of NSW population).

The North Coast is a region rich in Aboriginal culture and history and is home to the Bundjalung, Arakwal, Githabul, Yaegl and part of Gumbaynggirr nations.

The seven Local Government Areas (LGAs) include Ballina, Byron, Clarence Valley, Kyogle, Lismore, Richmond Valley and Tweed plus the Urbenville section of the Tenterfield LGA.

The region is characterised by continual high population growth, high proportion of Aboriginal and older people, low median household incomes and low labour force participation, high levels of social and transport disadvantage and low levels of Year 12 and University attainment. With the expectation that the region will grow faster than the State average, particularly for the 65 plus age group, there is considerable stress on health services.



Our partnership

We share the broad goal of better health for North Coast communities. Central to our partnership is our shared commitment to patient care and service quality.

A patient journey through the health system often crosses many domains of responsibility. We acknowledge the vital role each service plays in the health of the patient. We respect the capacity and role of each organisation in the overall functioning of the health system. For the health system to operate 'as one' in an integrated manner, partnership is essential as better patient outcomes are achieved when care is seamless.

Elements of our partnership to achieve integration will include:

- Shared integration agenda – focusing on health outcomes
- Shared integration vision, objectives and narrative
- Shared leadership for health system integration
- Shared planning, service delivery and resources - including procurement, commissioning and purchasing
- Shared information structures and platforms
- Shared resourcing for new services and development of a contemporary workforce

We acknowledge the health system includes a wide array of stakeholders and see this joint Local Health District – Primary Health Network strategy as providing a platform for wider integration.

We acknowledge the Aboriginal Medical Services as important partners with whom we work closely through the 'United for Aboriginal Health' Partnership. We are actively engaged with other services such as aged care sector, community service organisations, tertiary education institutions, government services and an array of peak agencies at a Commonwealth and State level to further foster and strengthen the health and social services systems.



Our vision

Each person experiences a health system that behaves 'as one' – healthcare providers form a team that is complimentary, integrated and mutually supportive.

Immediate challenges to integration

- I. Separate needs assessment and planning processes
- II. Disparate and incongruent organisational performance measures and KPIs
- III. Funding mechanisms and budget pressures placing constraints on change
- IV. Solid walls restricting information flow (for patients and systems)
- V. Organisational focus and workforce culture

Our approach

We start from the assumption that the unprecedented financial and service pressures facing health and social care cannot be tackled by making incremental adjustments to existing services and ways of working.

Deliberate and purposeful reform action is required with particular attention paid to:

1. Higher level integration to support system alignment
2. Service level integration from the patient's perspective
3. Clinician Engagement

Lasting outcomes are achieved when the above aims are progressed concurrently.

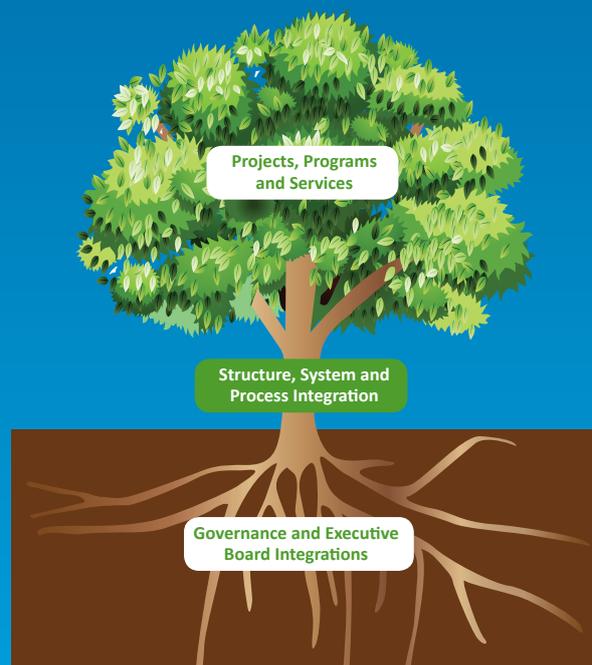
Pivotal to the systematic achievement of change and reform is a common, overarching framework that gives shape to activities and initiatives. This strategy provides this framework and, in addition to fostering cohesion, sets out:

- Priorities and focus for system reform
- Delineation of responsibilities of those involved

We aim to achieve top-down and bottom-up integration.

We will focus on three spheres of integration action

- 1) Governance and Executive
- 2) Structures and Systems
- 3) Services and Programs



Focus area 1: Patient experience and participation

Strategies	Activities	Indicators
1.1 Empower patients to be partners in their care and have greater control over their health and wellbeing	<ul style="list-style-type: none"> • Improve the Health Literacy of patients, particularly those with Chronic Diseases • Increase availability of health literate resources for community members • Collect and use patient reported information to improve care. 	<ul style="list-style-type: none"> - Joint Health Literacy Framework developed and adopted - Training delivered to build workforce capability for building patient motivation and activation - Shared Health Literacy Framework adopted and implemented by both organisations - Healthy North Coast platform and healthlink utilised to distribute resources - Patient reported experience measures (PREMS) and Patient reported outcome measures (PROMS) implemented in a range of settings

Focus area 2: Governance level leadership to support integration

Strategies	Activities	Indicators
2.1 Ensure Board and Executive level leadership to drive integration	<ul style="list-style-type: none"> • Joint Board meetings • Joint Executive meetings • Plan for NSW Integration Innovator Program 'Whole of System Management for People with Chronic and Complex conditions' 2016-2018 finalised and endorsed. <ul style="list-style-type: none"> - Performance targets finalised and endorsed 	<ul style="list-style-type: none"> - At least two joint Board meetings per annum - At least two joint executive meetings per annum - Implementation plan updated and revised and adopted by Integrated Care Governance Committee by December 2016 - Performance targets agreed by Integrated Care Governance Committee by December 2016 and performance monitored quarterly
2.2 Ensure the integration shared vision and narrative is communicated to staff and stakeholders across the health system	<ul style="list-style-type: none"> • Communication strategy developed and implemented collaboratively, so everyone knows what integration means for them. 	<ul style="list-style-type: none"> - Communication Strategies on place at each organisation with cross promotion of integration successes shared via a range of mechanisms including: <ul style="list-style-type: none"> • Practitioner Newsletters(NCPHN) • Northern Exposure (NNSWLHD) • HealthSpeak (NCPHN)

Focus area 3: Systems, culture and structures to enable integration

Strategies	Measures	Indicators
3.1 Establish shared systems and structures	<ul style="list-style-type: none"> Shared plans and governance structures <ul style="list-style-type: none"> NNSW Integration Innovator Program ‘Whole of System Management for People with Chronic and Complex Conditions’ Mid and North Coast HealthPathways Health Literacy Program <ul style="list-style-type: none"> NNSW Integrated Mental Health and Wellbeing plan implementation NNSW Aboriginal Health and Wellbeing Plan implementation North Coast Immunisation Action Plan implementation Cross Sector Alliances <ul style="list-style-type: none"> Vulnerable Communities United in Aboriginal Health Mental Health and Wellbeing Cross organisational membership of planning and commissioning Structures Joint community consultation structures and approaches maintained Shared Health Informatics Strategy 	<ul style="list-style-type: none"> At least four shared governance committees established and maintained Data shared to monitor progress At least three Cross Sector Alliances NCPHN represented on Health Services Development Committee. NNSWLHD represented on PHN Commissioning groups Agreement in place for shared operation of Community Engagement and Advisory Committee (CEAC) Strategy developed by June 2017
3.2 Reorient organisational culture and improve patient experience of healthcare system	<ul style="list-style-type: none"> Vision, approach and strategy for integrated care supported and widely promoted by both organisations Collaborative development of Mid and North Coast HealthPathways to document and facilitate integration arrangements Opportunities for clinicians across the health system to work and learn collaboratively including <ul style="list-style-type: none"> Multidisciplinary education and networking outreach visits to General Practice Clinicians engaged as the enablers of change Patient centered care underpins service integration Joint research and evaluation initiatives supported 	<ul style="list-style-type: none"> Communication Strategies in place at each organisation with cross promotion of integration successes shared. Increase number of localised pathways published 40% GP participation on workgroups At least 10 events, forums and networks including LHD and Primary Care Clinicians annually- Enrolment of patients in Integrated Care increased (Baseline 200) Clinical advice mechanisms in place for each integration project Joint Clinical Council meetings facilitated Resources to assist adoption of patient centered medical home developed and distributed Joint development of plain english resources for patients Shared development of workforce to support engagement of patients in self care NNSW Integrated Care evaluation completed Joint contribution to at least one research initiative
3.3 Take action for system wide change	<ul style="list-style-type: none"> Collaborate to deliver the NNSW Integrated Care strategy and deliver integration projects collaboratively 	<ul style="list-style-type: none"> At least four integration projects implemented

Focus area 4: Service and program level integration

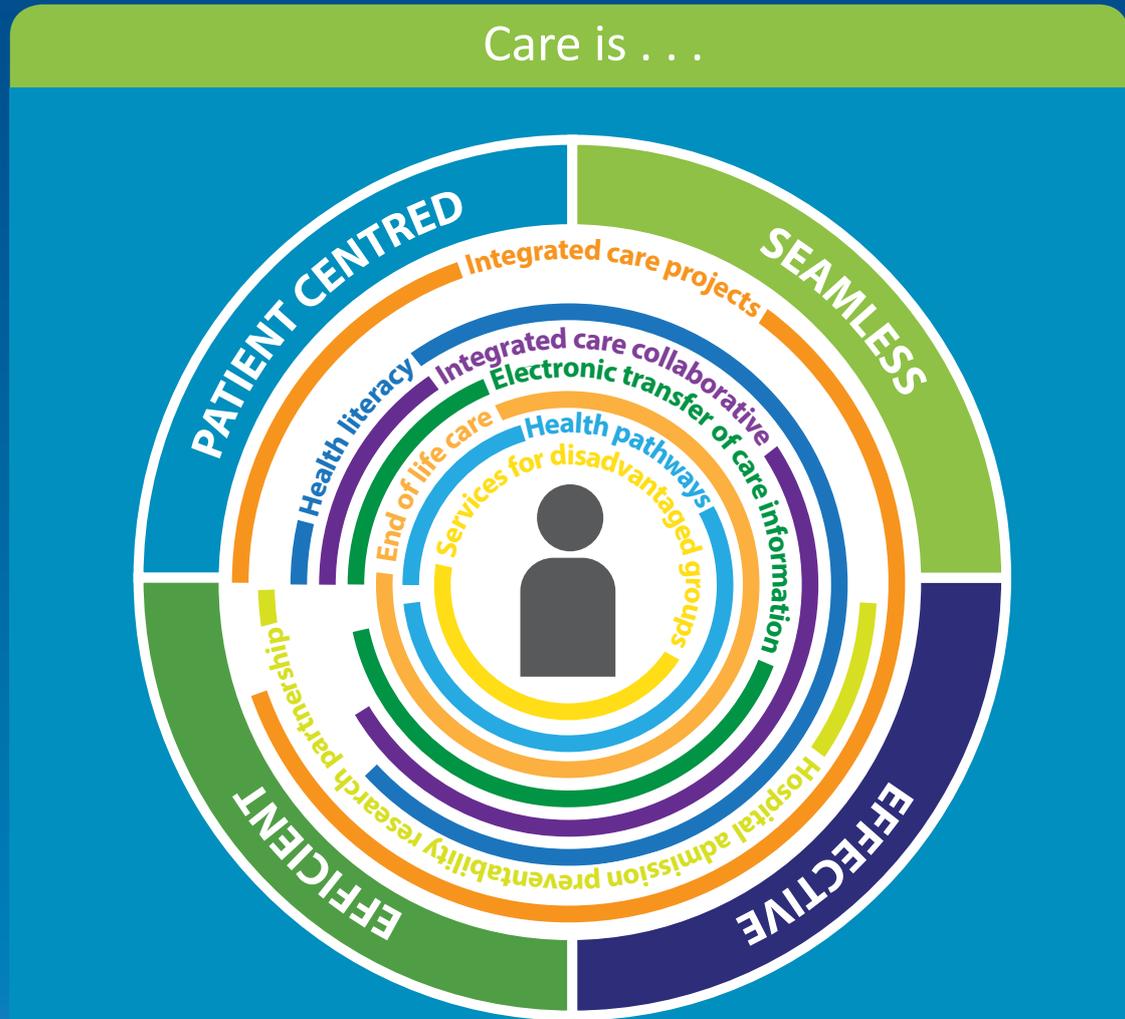
Strategies	Activities	Indicators
<p>4.1 Improve clinical integration and effective transfer of care across the system</p>	<ul style="list-style-type: none"> • Joint trialling of solutions for improving the sharing of patient information • KPIs of integration priorities monitored and reported to joint executive meetings • Effective transfer of care within and across the system • Cross Sector Collaborations to address health equity and social determinants of health • Integrated initiatives to address disease prevention • Collaborative actions to commission and decommission services 	<ul style="list-style-type: none"> - <i>At least two initiatives trialed</i> <ul style="list-style-type: none"> • <i>Orion Shared Care planning tool</i> • <i>Admission and Discharge Notifications</i> - <i>Reports to joint executive meeting include</i> <ul style="list-style-type: none"> • <i>Completion and timeliness of electronic discharge summaries</i> • <i>Health Literacy project</i> • <i>GP Engagement activities</i> • <i>Integrated care program</i> • <i>Mid and North Coast HealthPathways</i> - <i>Number of practices and LHD clinicians participating in Integrated Care Collaborative (wave 2)</i> - <i>Aboriginal Chronic Disease redesign completed and endorsed</i> - <i>The Alliance for services for vulnerable members of the community maintained with at least three working groups collaborating:</i> <ul style="list-style-type: none"> • <i>People experiencing homelessness</i> • <i>Children at risk of harm</i> • <i>Disability Integration and Action Group</i> - <i>Collaborative working groups established to improve childhood immunisation rates and breast cancer screening</i> - <i>Lismore and Tweed headspace</i> - <i>Lismore Aboriginal Medical Service</i> - <i>Aboriginal Chronic Disease</i> - <i>Mental Health</i>



We recognise that integrated care has four main characteristics. These are:

- 1) Patient Centred Care
- 2) Seamless Care
- 3) Effective Care
- 4) Efficient Care

The diagram below demonstrates some of our current projects and programs and how they link to the integrated care characteristics.



Statement of Intent



This document outlines the shared intent of Northern NSW Local Health District and North Coast Primary Health Network to work together to deliver health services that are patient-centred, seamless, effective and efficient.

This will be achieved through the joint implementation of the Northern NSW Integration Strategy 2016-2018.

We are committed to working collaboratively to ensure the implementation of the integration strategy and agree to focus on three spheres of integration action:

- Governance & Executive
- Structures and systems
- Services and programs

The parties recognise that effective communication and a co-operative 'working' relationship are integral to successfully achieving shared objectives.

Made on the _____ day of _____, 2016 between the following parties:

Northern NSW Local Health District

ABN 67 284 856 520

Crawford House

Hunter Street, Lismore NSW 2480

Healthy North Coast Ltd t/a

North Coast Primary Health Network

ABN 18 154 252 132

106-108 Tamar, Ballina NSW 2478

Signature of Board Chair

Signature of Board Chair

Name of Board Chair (print)

Name of Board Chair (print)

Date

Date

Signature of Chief Executive

Signature of Chief Executive

Name of Chief Executive (print)

Name of Chief Executive (print)

Date

Date



Health
Northern NSW
Local Health District