

# North Coast - Integrated Team Care

2019/20 - 2020/21

## Activity Summary View



### [ITC - 1 - ITC1 – Care coordination and supplementary services]



#### Activity Metadata

**Applicable Schedule \***

Integrated Team Care

**Activity Prefix \***

ITC

**Activity Number \***

1

**Activity Title \***

ITC1 – Care coordination and supplementary services

**Existing, Modified or New Activity \***

Existing



#### Activity Priorities and Description

**Program Key Priority Area \***

Aboriginal and Torres Strait Islander Health

**Other Program Key Priority Area Description**

**Aim of Activity \***

Contribute to improving health outcomes for Aboriginal and Torres Strait Islander people with chronic health conditions through better access to care coordination, multidisciplinary care, and support for self-management.

**Description of Activity \***

In 2019-21 NCPHN will continue to contract 11 existing ITC service providers to deliver Care Coordination and Supplementary Services.

These services were established in 2017 through two commissioning methods: (1) direct approach to six Aboriginal Medical Services covering nine sites; and (2) Request for Proposals for delivering services to Aboriginal and Torres Strait Islander people receiving care coordination and supplementary services from mainstream general practices.

**NCPHN ITC Workforce Table:**

	Indigenous Health Project Officer	Care Coordinators	Outreach Workers
FTE	3.92	14	7
AMS	0	9	0
MPC	0	7	8
PHN	4	0	0

The contracted ITC service providers are meeting the expected KPIs for service delivery. Care Coordinators support eligible clients through one-on-one care coordination and access to supplementary services. Outreach Workers help clients to access health care services including assistance with travel to their medical appointments and ensuring that services are culturally competent. Clients are able to access ITC services via GP referral to an Aboriginal Medical Service or mainstream provider. In Northern NSW clients can also be referred via the Integrated Aboriginal Chronic Care (IACC) referral line, which aims to connect clients with the most appropriate chronic disease services, including ITC services.

NCPHN Indigenous Health Project Officer’s (IHPO’s) support ITC contracted providers regularly via phone, email and face to face. Activities include providing leadership, working with ITC Contracted Services on projects to improve access to the ITC program and raising the awareness of the ITC program. The IHPO’s meet regularly with Local Health Districts, Aboriginal Medical Services and non-profit organisations to collectively improve access to health services for Aboriginal and Torres Strait Islander people.

NCPHN will continue to host an Aboriginal chronic conditions conference for the North Coast workforce in collaboration with ITC providers to build the capacity of Aboriginal Health Workers, Practice Nurses and Aboriginal Outreach Workers providing care coordination under the ITC program. Each provider also supports their ITC employees in workforce development opportunities as required.

NCPHN supports collaboration and quality improvement with the ITC workforce through regular Chief Executive and Senior Managers meetings and the coordination of an interactive online forum supporting networking and the sharing of resources. From July 2019 a new Resource Allocation Model will be implemented to distribute funding. The Resource Allocation Model will ensure that ITC funding is more effectively directed to areas of need.

**Needs Assessment Priorities \***

NCPHN Needs Assessment 2019/20-2021/22

**Priorities**

Needs Assessment Priority	Page Reference
Improve Aboriginal and Torres Strait Islander people’s access to high quality, culturally appropriate health care, including primary care and care coordination services.	n/a



**Activity Demographics**

**Target Population Cohort \***

Aboriginal and Torres Strait Islander people with a diagnosed chronic condition

**In Scope AOD Treatment Type \***

## Indigenous Specific \*

Yes

### Indigenous Specific Comments \*

In 2019-21 NCPHN will continue to contract 11 existing ITC service providers to deliver Care Coordination and Supplementary Services.

These services were established in 2017 through two commissioning methods:

- 1) Direct approach to eight Aboriginal Medical Services for Aboriginal; and
- 2) Request for Proposals for delivering services to Aboriginal and Torres Strait Islander people receiving care coordination and supplementary services from mainstream general practices

## Coverage \*

### Whole Region

Yes

SA3 Name	SA3 Code
Clarence Valley	10401
Coffs Harbour	10402
Kempsey - Nambucca	10802
Port Macquarie	10804
Inverell - Tenterfield	11002
Richmond Valley - Coastal	11201
Richmond Valley - Hinterland	11202
Tweed Valley	11203



## Activity Consultation and Collaboration

### Consultation \*

NCPHN will continue its ongoing consultative approach with stakeholders working in Aboriginal health including Aboriginal Medical Services, Aboriginal health and social care organisations, Clinical Councils, Local Health Districts and Aboriginal community advisory structures.

From July 2019 NCPHN will implement a weighted needs based funding formula for ITC. The funding formula is being developed in collaboration with all ITC providers and specialist expertise from a health economist.

### Collaboration \*

NCPHN will continue its ongoing approach to co-designing commissioned services in collaboration with the Aboriginal Health sector, the Local Health Districts, clinicians and community members.



## Activity Milestone Details/Duration

### Activity Start Date \*

30 Jun 2019

### Activity End Date \*

29 Jun 2021

**Service Delivery Start Date**

**Service Delivery End Date**

**Other Relevant Milestones**

Activity is valid for full duration of AWP



## Activity Commissioning

**Please identify your intended procurement approach for commissioning services under this activity: \***

**Not yet known:** No

**Continuing service provider / contract extension:** Yes

**Direct engagement. Please provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date:** No

**Open tender :** No

**Expression of interest (EOI):** No

**Other approach (please provide details) :** No

**Is this activity being co-designed? \***

Yes

**Is this activity the result of a previous co-design process? \***

No

**Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? \***

No

**Has this activity previously been co-commissioned or joint-commissioned? \***

No

**Decommissioning \***

No

**Decommissioning Details? \***

**Co-design or co-commissioning details \***

NCPHN will continue its ongoing approach to co-designing commissioned services in collaboration with the Aboriginal Health sector, the Local Health Districts, clinicians and community members.



## [ITC - 2 - ITC2 – Culturally competent mainstream services]



### Activity Metadata

**Applicable Schedule \***

Integrated Team Care

**Activity Prefix \***

ITC

**Activity Number \***

2

**Activity Title \***

ITC2 – Culturally competent mainstream services

**Existing, Modified or New Activity \***

Existing



### Activity Priorities and Description

**Program Key Priority Area \***

Aboriginal and Torres Strait Islander Health

**Other Program Key Priority Area Description****Aim of Activity \***

Improve access to culturally appropriate mainstream primary care services (including but not limited to general practice, allied health, and specialists) for Aboriginal and Torres Strait Islander people

**Description of Activity \***

NCPHN's Indigenous Health Project Officer (IHPO) positions will continue to work alongside NCPHN Quality Improvement Support staff to ensure culturally appropriate mainstream primary health care services are delivered on the North Coast.

NCPHN will:

- Contract cultural educators to provide face to face cultural awareness training across the region.
- Develop a Cultural Safety Framework in 2019-2020 to support increased activities and greater effectiveness in this Activity.
- Raise awareness of Aboriginal and Torres Strait Islander days of celebration within primary health care settings to improve cultural understanding.

	Indigenous Health Project Officer	Outreach Workers	Consultants	Other
FTE	3.92	0	1	0
AMS	0	0	0	0
MPC	0	0	0	0
PHN	4	0	1	0

NCPHN will continue to host an Aboriginal chronic conditions conference in collaboration with ITC providers to build the capacity of IHPO's and Aboriginal Health Workers, Practice Nurses and Aboriginal Outreach Workers providing care coordination under the ITC program on the North Coast of NSW. NCPHN will also support individual IHPO's to attend cultural awareness programs and professional development opportunities in cultural competency as required.

NCPHN will work with Local Health Districts, Aboriginal Medical Services and other non-profit organisations in the health sector to support cultural competency programs to increase reach of localised programs to primary health professionals.

## Needs Assessment Priorities \*

NCPHN Needs Assessment 2019/20-2021/22

### Priorities

Needs Assessment Priority	Page Reference
Improve Aboriginal and Torres Strait Islander people's access to high quality, culturally appropriate health care, including primary care and care coordination services.	n/a



## Activity Demographics

### Target Population Cohort \*

Aboriginal and Torres Strait Islander people with a diagnosed chronic condition

### In Scope AOD Treatment Type \*

### Indigenous Specific \*

Yes

### Indigenous Specific Comments \*

NCPHN will:

- Contract cultural educators to provide face to face cultural awareness training across the region.
- Develop a Cultural Safety Framework in 2019-2020 to support increased activities and greater effectiveness in this Activity.
- Raise awareness of Aboriginal and Torres Strait Islander days of celebration within primary health care settings to improve cultural understanding.

## Coverage \*

### Whole Region

Yes

SA3 Name	SA3 Code
Clarence Valley	10401
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Inverell - Tenterfield	11002
Richmond Valley - Coastal	11201
Richmond Valley - Hinterland	11202
Tweed Valley	11203



## Activity Consultation and Collaboration

### Consultation \*

NCPHN will continue its ongoing consultative approach with stakeholders working in the Aboriginal health sector including Aboriginal Medical Services, other Aboriginal health organisations, Clinical Councils, Local Health Districts and Aboriginal community advisory structures.

### Collaboration \*

NCPHN will continue its ongoing approach to co-designing commissioned services in collaboration with the Aboriginal health sector, Local Health Districts, clinicians and community members.



## Activity Milestone Details/Duration

### Activity Start Date \*

30 Jun 2019

### Activity End Date \*

29 Jun 2021

### Service Delivery Start Date

### Service Delivery End Date

### Other Relevant Milestones

Activity is valid for full duration of AWP



## Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity: \*

Not yet known: No

Continuing service provider / contract extension: Yes

Direct engagement. Please provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date: No

Open tender : No

Expression of interest (EOI): No

Other approach (please provide details) : No

**Is this activity being co-designed? \***

No

**Is this activity the result of a previous co-design process? \***

No

**Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? \***

No

**Has this activity previously been co-commissioned or joint-commissioned? \***

No

**Decommissioning \***

No

**Decommissioning Details? \***

Not applicable

**Co-design or co-commissioning details \***

Not applicable