

**Primary Health Tasmania  
INTEGRATED TEAM CARE  
Activity Work Plan 2016 - 2018**

# Primary Health Networks - Integrated Team Care (ITC) Funding

## ITC Activity Work Plan 2016-2018

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# Introduction

The aims of Integrated Team Care are to:

- contribute to improving health outcomes for Aboriginal and Torres Strait Islander people with chronic health conditions through better access to coordinated and multidisciplinary care; and
- contribute to closing the gap in life expectancy by improved 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.

The objectives of Integrated Team Care are to:

- achieve better treatment and management of chronic conditions for Aboriginal and Torres Strait Islander people, through better access to the required services and better care coordination and provision of supplementary services;
- foster collaboration and support between the mainstream primary care and the Aboriginal and Torres Strait Islander health sectors;
- improve the capacity of mainstream primary care services to deliver culturally appropriate services to Aboriginal and Torres Strait Islander people;
- increase the uptake of Aboriginal and Torres Strait Islander specific Medicare Benefits Schedule (MBS) items, including Health Assessments for Aboriginal and Torres Strait Islander people and follow up items;
- support mainstream primary care services to encourage Aboriginal and Torres Strait Islander people to self-identify; and
- increase awareness and understanding of measures relevant to mainstream primary care.

The following Integrated Team Care Funding Activity Work Plan (AWP) provides:

- a) A strategic vision which outlines the approach in achieving the Integrated Team Care (ITC) objectives and to meet the current and future needs of Aboriginal and Torres Strait Islander people.
- b) A description of planned activities funded by Integrated Team Care funding under the Indigenous Australians' Health Programme (IAHP) Schedule.

This Activity Work Plan is a refresh of the AWP published in 2016 and covers the period from 1 July 2016 to 30 June 2018.

A comprehensive needs assessment was undertaken by Primary Health Tasmania to inform this Activity Work Plan. The Activity Work Plan has been developed in consultation with local communities, Clinical Councils, Community Advisory Committees, state/territory governments and Local Hospital Networks as appropriate; and articulates a set of activities that Primary Health Tasmania will undertake, using the Needs Assessment as evidence.

# Strategic Vision

It is Primary Health Tasmania's view that working in collaboration and in partnership will ensure the development and implementation of evidenced based strategies to meet the current and future needs of Aboriginal and Torres Strait Islander people. This view underpins our philosophy and strategic thinking with a commitment from Primary Health Tasmania to work closely with our stakeholders and partners to ensure that consultation and inclusiveness is the basis of the working approach.

In collaboration and in partnership with stakeholders it will be important to acquire knowledge and intelligence and build networks and relationships to ensure a thorough understanding of the specific needs of Aboriginal and Torres Strait Islander people and to develop evidenced based solutions to ensure improved health outcomes.

Primary Health Tasmania will work with stakeholders to increase service delivery capacity via a comprehensive commissioning process resulting in the design and commissioning of services that are responsive to the needs of local communities. Service specifications will be focused on clinical quality, evidence based practice, integration and coordination, measurable outcomes and positive impact on the service user experience. Services will be encouraged and supported to collect data to inform innovation and continuous improvement in service design optimising health and well-being for service users.

This above vision is supported by a Reconciliation Action Plan (RAP). The RAP guides our organisation in its continuing development towards being a culturally safe organisation both in our internal growth and in our ongoing engagement with Aboriginal and Torres Strait Islander people, communities and organisations in ensuring they have access to appropriate health services with the ultimate aim of improved health outcomes.

## Primary Health Tasmania planned activities funded by the IAHP Schedule for Integrated Team Care Funding

Planned Activities	
ITC transition phase	<p>During the first six months of 2016/17 Primary Health Tasmania commenced the commissioning cycle for the ITC program. This involved assessing need, including reviewing available administrative data, reviewing literature regarding best practice and engaging with key stakeholders through individual interviews with Aboriginal Community Controlled Health Organisations (ACCHOs) and a state-wide forum was extended to some mainstream providers.</p> <p>This work, along with the ITC program guidelines informed the design phase and the development of the commissioning intention.</p> <p>Interested providers tendered for the ITC program in late 2016, with 5 ACCHOs and one mainstream provider (who delivers an aboriginal health service) successful. This was an increase in 2 ACCHOs who are participating in this program for the first time.</p> <p>Commissioning focused on the care coordination, supplementary services and outreach components of the ITC program. Primary Health Tasmania has retained the Indigenous Health Project Officer (IHPO) resourcing during this period of funding and will work with ACCHOs on collaborative initiatives to improve access to mainstream primary health services.</p>
Start date of ITC activity as fully commissioned	<p>6 organisations have been commissioned to deliver a mix of care coordination, supplementary services and outreach worker elements of the ITC program.</p> <p>Commencement date was 1 January 2017.</p>
Collaboration	<p>Primary Health Tasmania will actively engage with other fund holders and providers of Aboriginal health funding during this time to ensure collaboration and coordination of use of funds and to ascertain future possibilities for pooled resourcing.</p> <p>During this activity period, Primary Health Tasmania will work to gain a greater understanding of funding availability for Aboriginal health in the State in order to identify opportunities for potential collaboration into the future. Such programs will include but not be limited to those funded through the Medical Outreach for Indigenous Chronic Disease Program (MOICDP), Rural Health Outreach Fund (RHOF) and Visiting Optometrists Scheme (VOS), along with identified State funded initiatives.</p> <p>At this point no pooling of resources has occurred or is planned to occur during 2017/18.</p>

<p>Service delivery and commissioning arrangements</p>	<p>Primary Health Tasmania has applied its commissioning framework to the commissioning of the ITC program. This complies with the PHN recommended approach and focuses on:</p> <ol style="list-style-type: none"> <li>1. Needs based planning, grounded in identified and prioritised need and underpinned with epidemiological analysis and consultative shaping of commissioning/purchasing intent.</li> <li>2. Co-design approaches – actively engaging clinical and community input and advice in determining service responses matched to regional need and built within a stepped model of care approach and within a patient centred medical home framework.</li> <li>3. Active market based assessment and development ahead of comprehensive sourcing of market capability and capacity to deliver services.</li> <li>4. Transparent approaches to market for high probity contracting of capable providers</li> <li>5. Relationship based stakeholder and contract management, with active ongoing engagement throughout the life of any agreement and cyclical recommissioning of services.</li> </ol>
<p>Decision framework</p>	<p>To date this process has been informed by the comprehensive needs assessment. This process identified the following priorities:</p> <ol style="list-style-type: none"> <li>1. Improving commissioning readiness for ACCHOs, with a specific focus on: <ul style="list-style-type: none"> <li>• understanding commissioning</li> <li>• quality improvement including clinical governance</li> <li>• preparing for outcomes reporting</li> </ul> </li> <li>2. Readiness for strategic planning and collaboration across organisations</li> <li>3. Improving access to data to inform planning and service delivery.</li> </ol> <p>These priorities have informed Primary Health Tasmania’s decision to retain a reduced staffing of Indigenous Health Program Officers and the establishment of priority activities as described under ‘Description of ITC Activity’.</p> <p>Primary Health Tasmania’s clinical and community advisory councils have also been provided with the outcomes of the Comprehensive Needs Assessment and have had input into the findings of the assessing needs and design elements of the Integrated Team Care program.</p> <p>These elements, combined with the established Program Guidelines, providing direction on the use of funds and the consultation process described under ‘transition’, have formed the basis of the decision framework.</p> <p>This information is consolidated into the ITC Commissioning Intention document available on the Primary Health Tasmania website.</p>
<p>Indigenous sector engagement</p>	<p>Engagement will continue with the participation of Primary Health Tasmania in the Tasmanian Aboriginal Health Forum and the Tasmanian Aboriginal Health Reference Group (Primary Health Tasmania has been accepted as an ex-officio participant in this group during 2016).</p>

	<p>Additionally, the Primary Health Tasmania board has approved the establishment of a specific Aboriginal health advisory group for Primary Health Tasmania to be established during 2017 to advise the organisation on Aboriginal health issues.</p>
<p>Description of ITC Activity</p>	<p>During 2017/18 the following activities will continue to be undertaken by Primary Health Tasmania to support the successful establishment of the ITC program for Tasmania:</p> <p><u>Indigenous Health Program Officers (IHPO)</u></p> <ul style="list-style-type: none"> <li>• <b>Improved collaboration</b> - Work with senior management in Primary Health Tasmania, ACCHOs and existing Aboriginal health forums (Tasmanian Aboriginal Health Reference Group and the Tasmanian Aboriginal Health Forum) to identify opportunities to improve relationships with and between Aboriginal organisations. This will include active participation in these forums, as invited by the organisations, along with investigating the potential for an Aboriginal and Torres Strait Islander health advisory function for Primary Health Tasmania, to inform the planning and recommendations of the clinical and community advisory councils.</li> <li>• <b>Improved access to health information</b> – work with ACCHOs to identify opportunities to improve access to data. Work with other organisations such as the Australian Bureau of Statistics, programs currently funded through the Australian and State governments, such as MOICDP, RHOF and VOS and with general practice utilising tools such as PenCAT to improve access to clinical health information. Identify opportunities to improve access to the consumer perspectives on health and wellbeing.</li> <li>• <b>Capacity building</b> – work with commissioned providers and other ACCHOs to build a shared understanding of the commissioning process to ensure active participation in all stages of the commissioning cycle. This will include a specific focus on:             <ul style="list-style-type: none"> <li>○ quality and safety (see below) and</li> <li>○ building readiness for outcomes focused service delivery, measurement and reporting.</li> </ul> </li> <li>• <b>Quality and safety</b> – support ACCHOs in their quality improvement focus, particularly in relation to clinical governance to strengthen readiness for operating within a commissioning environment.</li> <li>• <b>Culturally appropriate services</b> – continue to provide cultural awareness training for mainstream health providers and work with ACCHOs to identify strategies for improving cultural awareness, including a specific focus on supporting general practice to increase the use of MBS items such as health assessments for Aboriginal and Torres Strait Islander people.</li> <li>• <b>Health literacy</b> – work with ACCHOs in understanding current health literacy issues for individuals and communities and identify, as appropriate, strategies for working with providers and consumers to improve health literacy.</li> <li>• <b>Reconciliation Action Plan</b> – work with senior management within Primary Health Tasmania and with the Aboriginal and Torres Strait Islander community to implement our organisation’s Reconciliation Action Plan.</li> </ul> <p><u>Care Coordination and Supplementary Services</u></p>

	<ul style="list-style-type: none"><li>• Continuation of commissioned ITC services established from 1 January 2017.</li><li>• Activity will be undertaken within the program guidelines and will include a focus on working with the client's care plan as developed by the general practitioner to ensure the client has access to appropriate services and means for ensuring access to services. Strategies to improve access may include assistance with arranging transport through use of supplementary services funds to enable appropriate and timely access to specialist services as identified in the care plan. Care coordination services will include close liaison with the general practitioner and a focus on improving client self-management knowledge and skills.</li><li>• Work with commissioned providers to monitor and review progress towards agreed outcomes to inform future commissioning cycles once future arrangements for funds are known for PHNs beyond 30 June 2018.</li></ul> <p><u>Outreach Worker Services</u></p> <ul style="list-style-type: none"><li>• Continuation of commissioned ITC services established from 1 January 2017.</li><li>• Outreach workers will include ensuring strong community networks in order to understand the barriers to health services experienced by individuals and communities. Work in this service will include a specific focus on ensuring access to care through coordination and/or provision of transport, along with maintaining strong service networks to facilitate client access to appropriate services, programs and supports.</li><li>• Work with commissioned providers to monitor and review progress towards agreed outcomes to inform future commissioning cycles once future arrangements for funds are known for PHNs beyond 30 June 2018.</li></ul>
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