Eastern Melbourne - After Hours Primary Health Care

2019/20 - 2020/21

Activity Summary View



[AH - 1.0 - 1.0 Enhanced and Innovative After Hours Services that demonstrate integration and collaboration

acro]



Activity Metadata

Applicable Schedule *

After Hours Primary Health Care

Activity Prefix *

AH

Activity Number *

1.0

Activity Title *

1.0 Enhanced and Innovative After Hours Services that demonstrate integration and collaboration acro

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

After Hours

Aim of Activity *

Enhanced and Innovative service delivery models that support integrated after-hours access to health care for the EMPHN community.

The intended outcomes are:

• patients will experience increased ability to access appropriate care options in the after-hours, especially in the Outer East and Outer North of the catchment

- better integrated care between after-hours services
- decreased primary care type emergency department presentations and admissions in the after hours
- increased collaboration between after-hours General Practices and Tertiary Health Services as part of a co-designed
- process resulting in establishment of formal processes to divert people attending EDs to local General Practices

Description of Activity *

AH 1.1 Innovative after hours solutions

Extend current contracts with after-hours service providers to continue to develop integrative and innovative solutions to address after hours needs and gaps in the region:

• EMPHN commissioned a number of organisations to deliver innovative after-hours health care solutions in May 2018. Following an initial evaluation, further funding will be used to commission My Emergency Doctor to provide after-hours telehealth across the catchment and Nexus Primary Health to provide an after-hours medical neighbourhood in the North. As a part of the innovation, funded services will be required to continually demonstrate integration into existing after-hours services including after-hours clinics and Medical Deputising Services.

The After Hours Commissioned Services Group will continue to liaise via a formal platform to enable enhancement of services and to ensure integration across the after-hours service sector. This group has proved invaluable for members to enable formalised dialogue around after-hours issues particularly around workforce, triage processes and ideas development for integration.

AH 1.2 After Hours ED Diversion Project

Continuation of the After Hours ED Diversion Project with commencement of ED Diversions and working towards embedding systemic change.

• EMPHN will extend contracts with the four Local Hospital Networks including Austin, Eastern, Monash and Northern Hospitals as well as the contracts with participating local practices. With Eastern, Northern and Monash this project will continue to establish clear pathways and formalise partnerships with LHNs and local General Practices to divert patients presenting after hours from ED to general practice when people are triaged at an ED.

Formalised agreements will continue to ensure that participating practices will have the capacity in the after-hours period to treat minor emergency conditions including wounds, non -displaced fractures, minor burns etc. Where there are gaps in after-hours primary care services, EMPHN may commission General Practices to provide additional services.

Austin Hospital will continue to implement a slightly modified version of this project focussing on reducing the number of clients who are transferred to EDs via Residential Aged Care Facilities (RACFs). This model will focus on engaging with the families of residents as well as RACFs to promote alternatives to sending their family member/client to ED. Triage guidelines/policies will be developed utilising referral methods to include contacting Medical Deputising Services (MDS), My Emergency Doctor and Residential In Reach before sending a client to ED.

AH 1.3 After Hours Clinic in the Outer East and the Northern Area After Hours Access Project Stage 2 Support continuation of the after-hours GP clinic in the outer east from 2020 -2021 and enhance access to the community of the outer north via the continuation of the Northern Area After Hours Access Project

• EMPHN commissioned Eastern Health to provide After Hours GP services for the residents in the outer east in 2016/17. An evaluation of this service has identified the need to continue to commission Eastern Health to provide this service for the Healesville and surrounding community. Comprehensive mapping of availability of after-hours services as well as community consultation continues to highlight the gap in accessing GPs for the community in the after-hours. Many residents are required to travel long distances to access a GP or are presenting to emergency departments for conditions that may have been treated by a GP. Funding from this activity will be used to extend the current contract with Eastern Health until 2021.

An additional component of this contract is the provision of after-hours psychological services for the Healesville and surrounding community where clients lack access to psychological services, particularly in the after-hours. Contract deliverables for this service incorporate extensive reporting including retrospective and patient consultation data to demonstrate the effectiveness of the service.

• EMPHN will extend the contract with Lakes Boulevard Medical to implement and evaluate the after-hours triage model which is the second phase of this project. The innovative triage model provides guidelines for the triage nurse to utilise for those patients attending a GP Practice in the After Hours. This practice provides a large number of consultations in the after-hours and the aim of the model is to ensure patients needing care semi urgently are treated at the practice rather than going to the Northern Hospital ED.

Priorities

Needs Assessment Priority	Page Reference
Integration of care	47



Activity Demographics

Target Population Cohort *

- Patients presenting at ED with primary care type conditions
- Communities of EMPHN's outer east and outer north catchments where access to after-hours general practice services are limited
- Residents residing in RACFs

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments *

Coverage *

Whole Region

SA3 Name	SA3 Code	
Boroondara	20701	
Manningham - West	20702	
Whitehorse - West	20703	
Banyule	20901	
Nillumbik - Kinglake	20903	
Whittlesea - Wallan	20904	
Knox	21101	
Manningham - East	21102	
Maroondah	21103	
Whitehorse - East	21104	
Yarra Ranges	21105	
Monash	21205	



Activity Consultation and Collaboration

Consultation*

Consultation with general practices, LHNs, RACFs, Pharmacists, medical deputising services (MDS), Residential In Reach Services (RIR), consumers, medical specialties, Ambulance Victoria

• After Hours ED Diversion Forum:

A number of LHNS and General Practices attended the ED Diversion forum in August 2018, participated in the co-design process and are currently participating in the after-hours ED Diversional Project including:

o LHNS: Austin, Northern, Monash and Eastern

o General Practices: Box Hill Superclinic, Burwood Health Care, Monash Clinic, Box Hill After Hours Clinic, Lakes Boulevard Medical, Epping Medical

- After Hours Commissioned Organisations Collaboration including:
- o Lakes Boulevard Medical , South Morang
- o My Emergency Doctor
- o Yarra Valley Community Medical Service (Healesville After Hours Clinic)
- o Nexus Primary Health, Wallan

Collaboration *

Collaboration with Commissioned service providers to identify areas of need including identifying gaps in workforce and service provision.

Collaboration with GPS, Pharmacy and Residential Aged Care Facilities to promote alternatives to the ED including My Emergency Doctor

Collaboration with Hospital Networks, particularly around ED Diversion (ED Diversion Forum)

Activity Milestone Details/Duration

Activity Start Date *

Activity End Date *

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones



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?*

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

 No

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

 Yes

 Decommissioning *

 No

 Decommissioning *

 No

 Decommissioning *

 No

 Decommissioning *

 No



Activity Metadata

Applicable Schedule *After Hours Primary Health CareActivity Prefix *AHActivity Number *2.0

Activity Title *

2.0 After Hours Vulnerable groups

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

After Hours

Aim of Activity *

A person centred approach to after-hours healthcare for vulnerable populations with the following expected outcomes:

• Increased access to after-hours care for vulnerable populations to enable the community to receive the most appropriate care when required.

• System changes to enable conditions for improvement in consumers well-being, integrated and collaborative care, improved client journeys and referral pathways

• Work with RACFs, GPs and MDS to address specific priorities, particularly around skills enhancement to enable residents in RACFs to receive appropriate, timely and quality care.

Description of Activity *

2.1 – AH Palliative Care in the North and East

Enhanced palliative care services in the home for carers and family members treating and caring for loved ones during the end of life stage. It is expected that the care will be provided both in hours to avoid after-hours emergencies and during the after-hours where access to care maybe limited. The purpose of the program is to provide community-based support for people (and their carers) in their last 12 months of life to enable them to remain living at home or in a home-like environment, such as a residential aged care facility, and prevent unnecessary hospitalisation.

Services provided will include a range of service delivery options that will:

- be supportive (enhance psychosocial wellbeing, physical comfort, decision making)
- be informative (raise awareness, educate, improve service navigation)

- provide connections (to family, friends, peers, community, and other services)
- be practical (assist with daily living)

Family members and carers play a crucial role in caring for a loved one and are sometimes unsupported particularly in the after-hours. EMPHN will be looking to the market for solutions which may incorporate a range of services offered by nurses, doctors and allied health professionals, as well as volunteers with the aim of providing a team approach that addresses the person's physical, practical, emotional, spiritual and social needs.

2.2 - RACF Redesign Capacity Building

Building on the work of the RIR Education Project, EMPHN will work with the LHNS, GPS, MDS, RIRs and RACFs to increase the capacity of the workforce to treat residents residing in RACFs to prevent unnecessary hospital transfers and admissions

Needs Assessment Priorities *

EMPHN Needs Assessment 2019/20-2021/22

Priorities

Needs Assessment Priority	Page Reference
Integration of care	47
Supporting RACFs to identify and respond to the mental	104
health care needs of their clients	



Activity Demographics

Target Population Cohort *

2.1 Those consumers/carers in the community who receive Palliative Care in the home setting.

2.2 Residents residing in RACFs within the community. Aged Care Workforce who provide the care to residents

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments *

Coverage *

Whole Region

SA3 Name	SA3 Code
Boroondara	20701
Manningham - West	20702
Whitehorse - West	20703
Banyule	20901
Nillumbik - Kinglake	20903
Whittlesea - Wallan	20904
Кпох	21101

Manningham - East	21102
Maroondah	21103
Whitehorse - East	21104
Yarra Ranges	21105
Monash	21205



Activity Consultation and Collaboration

Consultation*

- Consultation with RACFs, LHNs, RIR and General Practice
- Consultation with Banksia Palliative Care and Eastern Palliative Care

Collaboration*

- Collaboration with Palliative Care Services to identify areas of need for Consumers and Carers at end of life
- Collaboration with commissioned service providers to identify areas of need for the ageing community
- Collaborate with commissioned services to design evaluation and identify parameters for reporting



Activity Milestone Details/Duration

Activity Start Date *

31 May 2020

Activity End Date *

30 Apr 2021

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones

2.1 After Hours Palliative Care Contract extension: June 2020 Delivery of Services: June 2020–May 2021 Evaluation of Service: May 2021

2.2 RACF Capacity Building Procure Service: November 2019 Deliver Service: January 2020 –June 2020 Evaluation of Service: July 2020



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: Yes

Open tender : No

Expression of interest (EOI): No

Other approach (please provide details) : No

Is this activity being co-designed? *

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

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

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

Decommissioning *

No

Decommissioning Details?*





Activity Metadata

Applicable Schedule *

After Hours Primary Health Care

Activity Prefix *

AH

Activity Number *

3.0

Activity Title *

3.0 After Hours Mental Health

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

After Hours

Aim of Activity *

To continue to provide funding for existing mental health programs that have demonstrated enhanced service delivery for targeted communities and to trial new models with a focus on the Indigenous population.

The intended outcomes are:

• Enhancement or implementation of integrated service delivery models to increase access to mental health service models, particularly in situations where the service is used to prevent escalating crises for the family or client System changes to enable conditions for improvement in consumers well-being, integrated and collaborative care, improved client journeys and referral pathways

Description of Activity *

3.1 AH Aboriginal Mental Health Liaison Officer and After Hours AOD Worker

The contract with Northern Area Mental Health Service will be extended until June 2020 following an evaluation demonstrating effective integration with AOD services and a reduction in the number of re-presentations to ED. The service will include:

After Hours Aboriginal Mental Health Liaison Officer

• EMPHN will work with Northern Health to provide an After Hours Indigenous Worker in the ED to provide support, facilitate culturally safe care and service navigation for those Indigenous populations experiencing Mental Health Crisis in the After Hours

After Hours AOD Worker

• The project objectives are to:

o increase after-hours coverage of the AOD clinician to high traffic AOD periods during weekdays as well as weekends and public holidays

o improve screening, assessment, and timely brief interventions. The service aims to offer secondary consultations, referrals to community AOD providers and timely post contact follow-up and the provision of support and information to families and carers.

• The project also aims to provide a continuous and comprehensive AOD service to patients' in the after-hours which may reduce demand in the ED by shortening length of stay and reduction in the number of re-presentations

3.2 After Hours Mental Health Nurse and Liaison Service

The contract with Carrington Community Health will be extended to continue to provide After Hours Mental Health Nursing for the Box Hill and surrounding community. Patients presenting at the Box Hill ED with non- urgent Mental Health conditions are given the option to attend the after-hours clinic located across the road to be treated by a Mental Health Nurse. The Mental Health Nurse completes a follow up phone call within two days of seeing the patient to assess requirements for additional services

3.3 The Northern Mental Health: Family Intervention Support Trial

The contract with Northern Area Mental Health will be extended until June 2021. Data provided as part of the contract deliverables have shown increased access to support for situation crises and a significant reduction in ED attendances by this cohort.

Objectives of the project include:

- Identifying families that are likely to benefit from family intervention and connection to services
- Providing services to at least 56 identified families (1-2 sessions) in 12 months

• Increasing access to mental health family interventions, particularly in the after-hours for people who frequently experience situational crisis.

• Building the capacity of families to support family members who frequently experience situational crisis in the afterhours.

- Reducing carer burden by providing timely intervention and linkages to external services.
- Reducing after hours demand on Northern Hospital Emergency Department and North Western Area Mental Health Service Psychiatric Triage.

Needs Assessment Priorities *

EMPHN Needs Assessment 2019/20-2021/22

Priorities

Needs Assessment Priority	Page Reference
Integration of care	47



Activity Demographics

Target Population Cohort *

- 3.1 Aboriginal and Torres Strait Islander populations who require crisis mental health interventions within the ED and
- patients presenting to ED with AOD issues requiring specific AOD treatment in the after-hours.
- 3.2 Those in the community requiring mental health support and services in the after-hours.
- 3.3 Families residing in the Northern area of the EMPHN with possibility of expansion to other catchments.

In Scope AOD Treatment Type *

Indigenous Specific *

Indigenous Specific Comments *

EMPHN will work with Northern Area Mental Health to provide an After Hours Aboriginal Mental Health Liaison Officer at the Northern Emergency Department to provide services and support for the Aboriginal population experiencing mental health issues in the after hours

Coverage *

Whole Region

SA3 Name	SA3 Code
Boroondara	20701
Manningham - West	20702
Whitehorse - West	20703
Banyule	20901
Nillumbik - Kinglake	20903
Whittlesea - Wallan	20904
Knox	21101
Manningham - East	21102
Maroondah	21103
Whitehorse - East	21104
Yarra Ranges	21105
Monash	21205



Activity Consultation and Collaboration

Consultation *

Consultation with Internal Mental Health Team Consultation with Northern Area Mental Health Consultation with Carrington Community Health Health

Collaboration *

Collaboration with GPs, key mental health agencies, psychologists, Aboriginal and Torres Strait Islander organisation and community health services to identify priority areas around mental health and AOD. Collaboration with commissioned service providers to identify key issues around after hours services Collaborate with commissioned services to design evaluation and identify parameters for reporting



Activity Milestone Details/Duration

Activity Start Date *

30 Jun 2019

Activity End Date *

30 Jun 2020

Service Delivery Start Date

Other Relevant Milestones

3.1 AH Aboriginal Mental Health Liaison Officer
Procure Services: July 2019
Deliver Service: July 2019 – June 2020
Evaluation of Services: July 2020

3.2 AH Mental Health Services Procure services (service extension): June 2020 Deliver Services: June 2020 – May 2021 Evaluation of services: June 2021

3.3 NAMHS Procure services: July –June 2021 Deliver services: July 2021 Evaluation of services: June 2020

2.6 AH AOD Worker Procure services: August 2019 Deliver Services: August 2019 -2020 Evaluation of services: September 2020



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: Yes

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? *

Yes

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? *

Yes

Decommissioning *

No

Decommissioning Details? *





Activity Metadata

Applicable Schedule *

After Hours Primary Health Care

Activity Prefix *

AH

Activity Number *

4.0

Activity Title *

4.0 After Hours Community Awareness

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

After Hours

Aim of Activity *

The aim of this activity is to increase community awareness of appropriate services available and to improve the health literacy of consumers resulting in consumers accessing the most appropriate health services in the after -hours. The intended outcomes are:

- Communities are empowered to attend the most appropriate service when and where they need it.
- Provide information regarding real time wait times for utilising hospital emergency departments so that the consumer can be informed about making alternative decisions, where available

Description of Activity *

AH 3.1 Community Awareness campaigns with a focus on exploration of real time ED Monitoring:

- Community Awareness campaign that is informed by demographic and service utilisation data.
- Exploration of real time ED monitoring with the intention of working with hospitals to make this information available to the community i.e. via website, communication platforms etc.

Needs Assessment Priorities *

EMPHN Needs Assessment 2019/20-2021/22

Page Reference



Activity Demographics

Target Population Cohort *

- General Community
- Patients attending ED for Primary care type presentations

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments *

Coverage *

Whole Region

SA3 Name	SA3 Code
Boroondara	20701
Manningham - West	20702
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Whittlesea - Wallan	20904
Knox	21101
Manningham - East	21102
Maroondah	21103
Whitehorse - East	21104
Yarra Ranges	21105
Monash	21205



Activity Consultation and Collaboration

Consultation*

Consultation conducted with general practices, LHNs and community as part of the Diagnostics and Prioritisation project.

Collaboration*

- Collaborate with Local Hospital Networks to identify strategies to inform the community of alternatives to the ED
- NHSD Health Direct and General Practice ensuring all practices opening hours are up to date
- Collaborate with Victorian Department of Health and Human Services to ensure consistent messaging with any campaigns

H-H	
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Activity Milestone Details/Duration

Activity Start Date *

Activity End Date *

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones



Activity Commissioning

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

Not yet known: No

Continuing service provider / contract extension: No

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? *

Yes

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

Yes

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

Yes

Decommissioning *

No

Decommissioning Details? *