



Australian Government

Department of Health



An Australian Government Initiative

Primary Health Networks – *Greater Choice for At Home Palliative Care*

Adelaide Primary Health Network Limited

The Greater Choice for At Home Palliative Care Activity Work Plan 2017-2018 to 2019-2020 has all internal clearances obtained and has been endorsed by the CEO.

The Greater Choice for At Home Palliative Care Activity Work Plan was submitted on 19 February 2018, and will be subsequently updated, on an annual basis.

Introduction

Background

Through an EOI process undertaken in August – September 2017, all 31 PHNs were invited to submit their interest in implementing the *Greater Choice for At Home Palliative Care* (GCfAHPC) pilot measure. Through this process, Adelaide PHN is one of the 10 PHNs were selected to receive funding to implement the measure.

Overview

The key objectives of Primary Health Networks (PHN) are:

- increasing the efficiency and effectiveness of medical services for patients, particularly those at risk of poor health outcomes; and
- improving coordination of care to ensure patients receive the right care in the right place at the right time.

The *Greater Choice for At Home Palliative Care* (GCfAHPC) provides funding to improve coordination and integration of end-of-life care across primary, secondary, tertiary and community health services to support at home palliative care through funding [Primary Health Networks \(PHNs\)](#).

In line with these objectives, the PHN GCfAHPC Funding stream will support PHNs to:

- improve access to safe, quality palliative care at home and support end-of-life care systems and services in primary health care and community care;
- enable the right care, at the right time and in the right place to reduce unnecessary hospitalisations;
- generate and use data to ensure continuous improvement of services across sectors; and
- utilise available technologies to provide flexible and responsive care, including care after usual business hours.

In the context of the PHN *GCfAHPC*, funding under this stream will support the recruitment of two Full-Time Equivalent positions within the PHN to deliver the activity in accordance with the GCfAHPC Expression of Interest (EOI) submission/proposal and any aspects agreed to during clarification sessions post EOI outcome.

PHNs are required to outline planned activities, milestones and outcomes to provide the Australian Government with visibility as to the activities expected to be undertaken by PHNs selected to implement the GCfAHPC pilot project.

GCfAHPC Activity Work Plan must:

- reflect the individual PHN GCfAHPC Expression of Interest (EOI) proposal and anything agreed to in the clarification sessions post EOI outcome;
- demonstrate to the Australian Government what the PHN is going to achieve and how the PHN plans to achieve this; and
- be developed in consultation with local communities, Clinical Councils, Community Advisory Committees, state/territory governments, Local Hospital Networks/Local Health Districts and other stakeholders, as appropriate.

This GCfAHPC Activity Work Plan covers the palliative care component of Core Funding provided to PHNs to be expended within the period from 1 January 2018 to 30 June 2020.

1. Planned activities funded under the Activity – Primary Health Networks *Greater Choice for At Home Palliative Care Funding*

The table below outlines the activities proposed to be undertaken within the period 2017-18 to 2019-2020. These activities will be funded under the *Greater Choice for At Home Palliative Care* Funding stream under the Schedule – Primary Health Networks Core Funding.

Proposed Activities	Description
Activity Title	<i>PC1.1 Enabling Choice for South Australians (ECSA)</i>
Description of Activity	<p>The Enabling Choice for South Australians (ECSA) Project provides the opportunity for eligible organisations operating Residential Aged Care Facilities (RACFs) in the Adelaide metropolitan region to apply for the provision of Palliative Care Quality Improvement Packages (PCQIP) to enhance palliative and end of life care systems in the residential aged care setting.</p> <p>The PCQIPs are intended to improve the capacity of the RACFs to support residents to exercise choice and control over their palliative and end of life care and treatment. PCQIPs are delivered by Adelaide PHN Quality Improvement (QI) Facilitators who work directly with RACF management and staff to identify and implement activities that support enhanced person-centred and directed end of life care.</p> <p>The PCQIP activities undertaken by the QI Facilitators will be informed by, and consistent with relevant national and state-based guidelines, professional standards, evidence-based practice, resources and tools.</p> <p>RACFs participating in the ECSA Project are required to enter into a partnership agreement with the Adelaide PHN. The partnership agreements set out the terms and conditions of the Project and associated obligations of each party. This includes obligations for the RACF to provide de-identified quantitative and qualitative data to monitor performance and to contribute to knowledge building and information sharing across the palliative and end of life care sector.</p> <ol style="list-style-type: none"> Adelaide PHN has also established an Intersectoral Collaboration Group representing key stakeholders to provide a strategic overview of the palliative and end of life care sector and to facilitate cross sector collaboration and partnership.

<p>Rationale/Aim of the Activity</p>	<p>The aims of the ECSA Project are to:</p> <ul style="list-style-type: none"> • Establish formal partnerships between Adelaide PHN and Residential Aged Care organisations to support the development, implementation and/or integration of end of life choice into systems and processes. • Improve the capacity of Residential Aged Care organisations to support residents to exercise choice and control over their palliative and end of life care and treatment • Promote and support linkages with, and usage of existing palliative care and end of life networks, resources and services available across the primary, acute and aged care sectors. <p>Facilitate data development and collection to share learnings and opportunities for continuous quality improvement with key stakeholders</p>
<p>Strategic Alignment</p>	<p>ECSA aligns with the following priority areas: -</p> <p>Objectives of the Primary Health Networks Programme:</p> <ul style="list-style-type: none"> • increasing the efficiency and effectiveness of medical services for patients, particularly those at risk of poor health outcomes; and • improving coordination of care to ensure patients receive the right care in the right place at the right time. <p>APHN Primary Objective Focus Areas:</p> <ul style="list-style-type: none"> • Aged Care • Health Workforce • Palliative Care <p>APHN Needs Assessment Priorities (numbers listed below align to priorities in the 2017/18 Adelaide PHN Core Flexible Needs Assessment Update):</p> <p>10. Higher rates of multimorbidity among the aged population lead to increased utilisation of health care services.</p> <p>11. Lack of community awareness about appropriate after-hours health care services leading to increased potentially preventable hospitalisations.</p> <p>12. RACFs have a low capacity to support their residents in the afterhours setting leading to increased transportation to emergency departments and medical deputising services.</p> <p>16. A need to increase the ease of navigation and visibility of the health care system in selected APHN regions, population groups and for specific health issues.</p>

	<p>19. Lack of community awareness about existing health care services for different population groups, consumers and providers</p> <p>APHN Membership Identified Themes:</p> <ul style="list-style-type: none"> • Provide timely, early and equitable access to appropriate services • Improve health literacy and education for consumers and primary health care providers • Improve care coordination, integration and navigation of the primary health care sector
Scalability	ECSA will be implemented in participating Residential Aged Care Facilities, however learnings and quality improvement activities undertaken by the Project will be transferable across the aged care sector and for residents living in residential or community settings.
Target Population	<ul style="list-style-type: none"> • The target population for ESCA are residents of aged care organisations with lifelimiting illnesses or at the end of life.
Coverage	ECSA will be implemented in Residential Aged Care organisations in the Adelaide PHN region
Anticipated Outcomes	<p>The anticipated outcomes of ECSA are:</p> <ul style="list-style-type: none"> • Residents receive safe, high quality palliative and end of life care in their place of choice • Participating aged care organisations have leadership, systems and processes in place to support planning and delivery of palliative and endoflife care • Participating aged care organisations have linkages with palliative care and end of life networks, resources and services available across the primary and acute care sectors.
Measuring outcomes	<p>Adelaide PHN has identified qualitative and quantitative indicators to measure outcomes of the ECSA Project. These include:</p> <ul style="list-style-type: none"> • Number and % of Advanced Care Directives, Advanced Care Plans, Palliative and End of Life Care Documents developed • Number and % of case conferences conducted for palliative and end of life care • Number of education/training sessions provided to General Practitioners, aged care organisation staff, resident carers and families in relation to planning and/or delivery of advanced care decision making. • Improvement in knowledge and confidence of aged care organisation staff and General Practitioners in the delivery of palliative and end of life care • Number and type of linkages and connections between palliative care and end of life networks, resources and services available across the primary and acute care sectors

	<p>Additional outcome measures may be identified by participating aged care organisations through their Quality Improvement Plans and activities undertaken through the ECSA Project.</p> <p>The QI Facilitators will participate in the External Evaluation to ensure consistency of evaluation activities and data development with the national evaluation of the GCfAHPC measure.</p>
Indigenous Specific	Not specific but may include Aboriginal and Torres Strait Islander people
Collaboration/Communication	<ul style="list-style-type: none"> • Adelaide PHN has established links in the palliative care sector in Adelaide and broader South Australia through the Palliative Care Health Priority Group and has worked closely with key stakeholders including Palliative Care SA • , Leading Age Service Australia, Aged and Community Services SA & NT, SA Health Palliative Care service providers and other key stakeholders to contribute to the planning and delivery of the ESCA Project. <p>Adelaide PHN has also established an Intersectoral Collaboration Group representing key stakeholders to provide a strategic overview of the palliative and end of life care sector and to facilitate cross sector collaboration and partnership for the ECSA Project.</p> <p>Adelaide PHN has strong linkages with primary care providers and general practice including non-government health organisations and communicates with these stakeholders through network meetings education events, newsletters and updates and including its website to provide consistent messages around end-of-life care choices and the use of existing resources and tools.</p>
Timeline	<p>2017-18: Planning and preparation phases underway, including establishment of advisory committee and recruitment</p> <p>2018-19: Implementation and monitoring/evaluation phases to commence 1 July 2018</p> <p>2019-20: Implementation and monitoring/evaluation phases to continue, with expected completion 30 June 2020</p>