



**Australian Government**  
**Department of Health**



## **Activity Work Plan 2019-2021: After Hours Funding**

This After Hours Activity Work Plan template has the following parts:

1. The After Hours Activity Work Plan for the financial years 2019-20 and 2020-2021. Please complete the table of planned activities funded under the following:
  - a) Primary Health Networks Core Funding, Item B.3 – Primary Health Networks – After Hours Primary Health Care Program Funding

***Adelaide PHN***

*This Activity Work Plan has been endorsed by the CEO.*

*Resubmitted on 25 September 2019*

## Overview

This After Hours Activity Work Plan covers the period from 1 July 2019 to 30 June 2021. To assist with PHN planning, each activity nominated in this work plan can be proposed for a period of up to 24 months. Regardless of the proposed duration for each activity, the Department of Health will require PHNs to submit updates to the Activity Work Plan on an annual basis.

## 1. (a) Planned PHN activities for 2019-20 and 2020-21 – After Hours Primary Health Care Program Funding

PHNs must use the table below to outline the activities proposed to be undertaken within the period 2019-2021.

### AH1 After Hours Consumers Awareness Resource

Proposed Activities – AH 1 After Hours Consumers Awareness Resource	
ACTIVITY TITLE	AH1. After Hours Consumers Awareness Resource
Existing, Modified, or New Activity	Indicate if this is an existing activity, modified activity, or a new activity. Existing Activity  <i>Previously referenced as AH1.1</i>
Program Key Priority Area	Choose from the following: Population Health  If Other (please provide details): After Hours
Needs Assessment Priority	GPH9. Lack of community awareness about appropriate after-hours health care services leading to increased potentially preventable hospitalisations. GPH17. Lack of community awareness about existing health care services for different population groups, consumers and providers. GPH23. Awareness of timely access to appropriate services (including after-hours services) for vulnerable population groups particularly, Children and Youth, people with a disability, Older people, Palliative Care patients, and their carers.
Aim of Activity	This project focuses on the development of community awareness raising tools for after-hours medical services to enable people residing in the APHN region have access and information to support self-triage of available and appropriate after-hours services.
Description of Activity	This activity involves the use of information technology, consumer resource development and expanded care options. The intended outcomes are a reduction in preventable hospitalisations and improvements in the delivery and management of care in order to receive the right care at the right time in the right place.  Previous stages of this activity saw development, distribution and promotion of hard copy flip charts to residents in the Playford City council and Port Adelaide Enfield City council areas. The After-Hours Online Directory of General Practices, Hospitals and Allied Health (e.g. Pharmacies) was developed and successfully launched, available to all Adelaide residents. This has been promoted through radio, social media and a translated magnet for our CALD communities.  The Adelaide After Hours website will continue to be promoted through: <ul style="list-style-type: none"> <li>• Radio advertising campaign</li> <li>• Cinematic advertising</li> </ul>

	<ul style="list-style-type: none"> <li>Continued distribution of the tri-fold brochure through General Practice, hospital emergency departments and council services such as libraries and community centres</li> <li>Re-print of the translated magnets</li> </ul> <p>The website will be expanded to include a listing of afterhours mental health services and other appropriate medical services available to APHN residents.</p>
Target population cohort	All residents in the Adelaide PHN region. Translated resources will target Culturally and Linguistically Diverse communities.
Indigenous specific	<p>Is this activity targeted to, or predominantly supporting, Aboriginal and Torres Strait Islander people?</p> <p>No</p> <p>If yes, briefly describe how this activity will engage with the Indigenous sector.</p>
Coverage	Entire APHN region
Consultation	<p>Provide details of stakeholder engagement and consultation activities to support this activity. Confirm whether GPs were consulted.</p> <p>Consultation with relevant LGAs, LHNs, key stakeholders in the multicultural sector and community groups, Mental Health Coalition of SA and APHN membership groups including Mental Health Special Interest Area. GPs continue to be consulted through our Clinical Councils and GP Regional Councils.</p>
Collaboration	<p>List and describe the role of each stakeholder that will be involved in designing and/or implementing the activity, including stakeholders such as Local Health Networks, state/territory governments, or other relevant support services. Confirm whether GPs were consulted in the design or co-design process.</p> <p>This activity has worked with organisations such as medical deputising services [MDS], general practice and other primary health practitioners i.e. Dentist and pharmacy, providing after hours services within the APHN region, to ensure that appropriate information is provided to community whilst raising awareness about the most appropriate and available services.</p> <p>This activity has also worked with Northern Local Health Network (NALHN), Playford LGA and Port Adelaide Enfield City Council.</p> <p>Relevant stakeholders in the multicultural sector for promotion of the translated resource and website.</p>
Activity milestone details/ Duration	<p>Provide the anticipated activity start and completion dates (<b>including</b> the planning and procurement cycle):</p> <p>Activity start date: 1/07/2019</p> <p>Activity end date: 30/06/2021</p> <p><b>If applicable</b>, provide anticipated service delivery start and completion dates (<b>excluding</b> the planning and procurement cycle):</p> <p>Service delivery start date: July 2019</p> <p>Service delivery end date: June 2021</p>

	<p>Any other relevant milestones?</p>
<p>Commissioning method and approach to market</p>	<p>1. Please identify your intended procurement approach for commissioning services under this activity:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Not yet known</li> <li><input type="checkbox"/> Continuing service provider / contract extension</li> <li><input type="checkbox"/> Direct engagement. If selecting this option, provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date.</li> <li><input type="checkbox"/> Open tender</li> <li><input type="checkbox"/> Expression of Interest (EOI)</li> <li><input checked="" type="checkbox"/> Other approach (please provide details)</li> </ul> <p>This activity has been provided in full by Adelaide PHN</p> <p>2a. Is this activity being co-designed? No</p> <p>2b. Is this activity this result of a previous co-design process? No</p> <p>3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? No</p> <p>3b. Has this activity previously been co-commissioned or joint-commissioned? No</p>
<p>Decommissioning</p>	<p>1a. Does this activity include any decommissioning of services? No</p> <p>1b. If yes, provide a description of the proposed decommissioning process and any potential implications.</p>

## AH2 Extended Primary Care for Residential Aged Care Facilities (Camellia Project)

Proposed Activities – AH2 Extended Primary Care for Residential Aged Care Facilities (Camellia Project)	
ACTIVITY TITLE	<i>AH2 Extended Primary Care for Residential Aged Care Facilities (Camellia Project)</i>
Existing, Modified, or New Activity	Indicate if this is an existing activity, modified activity, or a new activity. Existing Activity  Previously referenced as AH2.2
Program Key Priority Area	Choose from the following: Aged Care  If Other (please provide details): After Hours
Needs Assessment Priority	GPH9. Lack of community awareness about appropriate after-hours health care services leading to increased potentially preventable hospitalisations. GPH10. RACFs have a low capacity to support their residents in the afterhours setting leading to increased transportation to emergency departments and medical deputising services. GPH17. Lack of community awareness about existing health care services for different population groups, consumers and providers. GPH23. Awareness of timely access to appropriate services (including after-hours services) for vulnerable population groups particularly, Children and Youth, people with a disability, Older people, Palliative Care patients, and their carers.
Aim of Activity	The aims of the activity are to: <ul style="list-style-type: none"> <li>• Provide Residential Aged Care Facility residents proactive in hours primary health care to reduce hospital presentations in the after-hours period.</li> <li>• Provide Residential Aged Care Facility residents with proactive in hours primary health care to reduce General Practitioner attendance in the after-hours period.</li> <li>• Build the capacity and capability of Residential Aged Care Facilities to coordinate 24 hour care and clinical services for residents, particularly in relation to the management of complex/chronic conditions, palliative care and end of life care</li> </ul>
Description of Activity	This activity optimises onsite primary health care for people residing in Residential Aged Care Facilities (RACF) through the delivery of a resident-centred, evidence based multi-disciplinary primary health care model  The activity implements an "Assess Treat Stay" model within the RACF, which enables early identification of residents at risk of hospitalisation and the delivery of proactive onsite 24/7 clinical care. Where resident hospitalisation cannot be avoided the activity facilitates early discharge and coordinates transition of care back to the RACF.  The activity is being delivered over three Southern Cross Care (SA & NT) Inc., sites in Adelaide's north western suburbs – namely Largs Bay, West Beach and Rosewater.

	Over the remaining project period the model will be fully integrated into existing services delivered by the RACF and underpinned by standardised protocols to guide clinical care, education and training for staff and a resource toolbox.
Target population cohort	RACF residents with chronic complex conditions and at end of life who are at risk of hospitalisation
Indigenous specific	Is this activity targeted to, or predominantly supporting, Aboriginal and Torres Strait Islander people?  No  If yes, briefly describe how this activity will engage with the Indigenous sector.
Coverage	North western APHN region. The Activity will be conducted over three Southern Cross Care (SA & NT) sites in APHN's north and western suburbs - specifically in the suburbs of Largs Bay, West Beach and Rosewater.
Consultation	Provide details of stakeholder engagement and consultation activities to support this activity. Confirm whether GPs were consulted.  APHN undertook a series of community and health care professional consultations as part of the needs assessment process. Based on this feedback and analysis of population health data, hospital emergency department presentation data and After Hours intelligence and reporting from the three South Australian Medicare Locals, APHN identified gaps in the After Hours service provision and developed a strategic focus for After Hours funding in Residential Aged Care.
Collaboration	List and describe the role of each stakeholder that will be involved in designing and/or implementing the activity, including stakeholders such as Local Health Networks, state/territory governments, or other relevant support services. Confirm whether GPs were consulted in the design or co-design process.  To provide innovative after hours services that meet identified community needs the activity collaborates with: <ul style="list-style-type: none"> <li>• Southern Cross Care Residential Aged Care management, staff and residents</li> <li>• General practitioners with residents in participating Southern Cross Care sites</li> <li>• Clinicians and hospital staff the Northern and Central Adelaide Local Health Networks</li> <li>• South Australian Ambulance Service extended care paramedics</li> </ul>
Activity milestone details/ Duration	Provide the anticipated activity start and completion dates ( <b>including</b> the planning and procurement cycle): Activity start date: 1/07/2019 Activity end date: 30/06/2020  <b>If applicable</b> , provide anticipated service delivery start and completion dates ( <b>excluding</b> the planning and procurement cycle): Service delivery start date: July 2019 Service delivery end date: June 2020  Any other relevant milestones?

<p>Commissioning method and approach to market</p>	<p>1. Please identify your intended procurement approach for commissioning services under this activity:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Not yet known</li> <li><input checked="" type="checkbox"/> Continuing service provider / contract extension</li> <li><input type="checkbox"/> Direct engagement. If selecting this option, provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date.</li> <li><input type="checkbox"/> Open tender</li> <li><input type="checkbox"/> Expression of Interest (EOI)</li> <li><input type="checkbox"/> Other approach (please provide details)</li> </ul> <p>2a. Is this activity being co-designed? No</p> <p>2b. Is this activity this result of a previous co-design process? Yes</p> <p>3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? No</p> <p>3b. Has this activity previously been co-commissioned or joint-commissioned? No</p>
<p>Decommissioning</p>	<p>1a. Does this activity include any decommissioning of services? No</p> <p>1b. If yes, provide a description of the proposed decommissioning process and any potential implications.</p>



### AH3 Northern and South After-Hours Walk-in Clinics (NAWiC and SAWiC)

Proposed Activities – AH3 Northern and Southern After-Hours Walk-in Clinics (NAWiC and SAWiC)	
ACTIVITY TITLE	AH3 Northern and Southern After-Hours Walk-in Clinics (NAWiC and SAWiC)
Existing, Modified, or New Activity	Indicate if this is an existing activity, modified activity, or a new activity. Modified Activity  <i>Previously referenced as AH3.1</i>
Program Key Priority Area	Choose from the following: Mental Health  If Other (please provide details): After Hours
Needs Assessment Priority	GPH9. Lack of community awareness about appropriate after-hours health care services leading to increased potentially preventable hospitalisations. GPH17. Lack of community awareness about existing health care services for different population groups, consumers and providers. GPH19. Need to improve provision of education to consumers and professionals across the health sector to encourage the take-up and application of preventive health measures. GPH23. Awareness of timely access to appropriate services (including after-hours services) for vulnerable population groups particularly, Aboriginal and Torres Strait Islander people, Children and Youth, people with a disability, Older people, Palliative Care patients, and their carers. PMH1. Provision of psychological services comparatively low in areas of highest need. PMH5. Increase awareness of appropriate mental health services to health professionals and community and carers through the provision of information and resources.
Aim of Activity	The Northern After-Hours Walk-in Clinic (NAWiC) and Southern After-Hours Walk-in Clinic (SAWiC) (previously identified as the Self-Presentation, Assessment and Referral Service (SPARS)) Program contributes to the provision of high quality, timely and responsive mental health assessment and care for people experiencing mental health concerns and/or associated difficulties predominately residing in Outer Northern and Outer Southern regions of metropolitan Adelaide in the sociable after-hours period. The aims of the activity is: <ul style="list-style-type: none"> <li>• Provide people experiencing low to moderate acuity mental health symptoms and/or associated difficulties and their carers/families with improved access to primary mental health care services in the after-hours period</li> <li>• Improve primary mental health care service integration and follow-up for people experiencing low to moderate acuity mental health symptoms and/or associated difficulties and their carers/families</li> <li>• Reduce the number of potentially presentable emergency department presentations and hospital admissions for people experiencing low to moderate acuity mental health symptoms and/or associated difficulties. (Australian Mental Health Triage Tool, triage levels 4 &amp; 5)</li> </ul>
Description of Activity	The NAWiC and SAWiC services will predominately provide services to people residing in the Outer Northern and Outer Southern regions of metropolitan

	<p>Adelaide (but will be accessible to all within the entire Adelaide metropolitan region).</p> <p>NAWiC and SAWiC will offer free mental health assessment in the after-hours period on a 'no appointment necessary' basis. NAWiC and SAWiC will also act as a referral gateway relevant to the presenting mental health condition and is based on a stepped integrated model approach with clear escalation and de-escalation procedures intrinsic at all levels.</p> <p>NAWiC and SAWiC will provide comprehensive mental health assessment and recovery focused support services for any individual who presents for help and is able to be assessed in a safe way for the consumer and professional alike.</p> <p>NAWiC and SAWiC will be delivered from two key locations, identified as of high demand and low resourced, namely Playford in the Outer Northern region and Onkaparinga in the Outer Southern region of metropolitan Adelaide.</p> <p>NAWiC and SAWiC will provide a face to face mental health assessment and immediacy plan in keeping with the client's needs, with the requirement the client is signposted or referred to follow-up services as required to support the consumer's recovery journey.</p> <p>Furthermore, NAWiC and SAWiC will:</p> <ul style="list-style-type: none"> <li>• Provide points of contact for client and carer centric, proactive, responsive and supportive services to people requiring mental health support and/or advice at time of crisis</li> <li>• Provide a stepped approach to mental health crisis that is in keeping with the need of the presenting mental health crisis</li> <li>• Utilise escalation pathways and de-escalation approaches that are in keeping with the mental health presentation.</li> <li>• Provide potential options for managing the mental health crisis until access to main stream services are available</li> <li>• Enable access to mainstream assessment, treatment and support for mental health that is appropriate to the mental health crisis presentation</li> <li>• Provide short term, up to 3 follow-up appointments, solution focused therapy for mental health presentations able to be resolved in this time frame.</li> <li>• Provide a follow up service to ensure that the consumer or carer has resolved the crisis or accessed services as required</li> </ul>
<p>Target population cohort</p>	<p>NAWiC and SAWiC will generally provide services for:</p> <ul style="list-style-type: none"> <li>• Individuals over the age of 16 whose presentation would meet the minimum criteria of triage Level 4 &amp; 5 under the Australian Mental Health Triage Tool, and their carers/families, but will provide a service to any individual seeking low acuity mental health support.</li> <li>• Individuals over the age of 16 presenting with more serious or complex mental health concerns would be referred to other services as appropriate. Children, parents or carers presenting will be directed to appropriate Primary child mental health or CAMHS services as required.</li> </ul>

<p>Indigenous specific</p>	<p>Is this activity targeted to, or predominantly supporting, Aboriginal and Torres Strait Islander people? No</p> <p>If yes, briefly describe how this activity will engage with the Indigenous sector.</p>
<p>Coverage</p>	<p>Predominantly Northern and Southern regions of metropolitan Adelaide with access available for all Metropolitan Adelaide</p>
<p>Consultation</p>	<p>Consultation has and continues to occur with all accessible consumer and carer stakeholder representatives, including</p> <ul style="list-style-type: none"> <li>• Aboriginal and Torres Strait Islander and Cultural and Linguistically Diverse populations.</li> <li>• Northern Region GP Council</li> <li>• Southern Region GP Council</li> <li>• Northern and Southern Adelaide Local Health networks.</li> <li>• Emergency Departments</li> <li>• South Australia Police</li> <li>• NGO’s providing Primary Mental health Services.</li> </ul>
<p>Collaboration</p>	<p>The NAWiC and SAWiC services involved collaboration with:</p> <ul style="list-style-type: none"> <li>• LHNs in the design and implementation of the service to ensure smooth consumer centred pathways to and from acute services</li> <li>• LHNs, NGOs and PHN commissioned services and other primary health care providers to enable timely access to required services post assessment</li> <li>• SAPOL to offer an alternative pathway for clients in distress but not requiring ED presentation</li> <li>• General practitioners to offer an alternative referral pathway in the out of hours time period for clients in distress but not requiring ED presentation</li> </ul>
<p>Activity milestone details/ Duration</p>	<p>Provide the anticipated activity start and completion dates <b>(including the planning and procurement cycle)</b>:                  Activity start date: 1/07/2019                  Activity end date: 30/06/2021</p> <p><b>If applicable</b>, provide anticipated service delivery start and completion dates <b>(excluding the planning and procurement cycle)</b>:                  Service delivery start date: July 2019                  Service delivery end date: June 2021</p> <p>Any other relevant milestones?</p>
<p>Commissioning method and approach to market</p>	<p>1. Please identify your intended procurement approach for commissioning services under this activity:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Not yet known</li> <li><input checked="" type="checkbox"/> Continuing service provider / contract extension</li> <li><input type="checkbox"/> Direct engagement. If selecting this option, provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date.</li> <li><input type="checkbox"/> Open tender</li> <li><input type="checkbox"/> Expression of Interest (EOI)</li> <li><input type="checkbox"/> Other approach (please provide details)</li> </ul>

	<p>2a. Is this activity being co-designed? No</p> <p>2b. Is this activity this result of a previous co-design process? Yes</p> <p>3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? No</p> <p>3b. Has this activity previously been co-commissioned or joint-commissioned? No</p>
Decommissioning	<p>1a. Does this activity include any decommissioning of services? No</p> <p>1b. If yes, provide a description of the proposed decommissioning process and any potential implications.</p>

### AH4 Lived Experience Telephone Support Service (LETSS)

Proposed Activities – AH4 Lived Experience Telephone Support Service (LETSS)	
ACTIVITY TITLE	AH4 Lived Experience Telephone Support Service (LETSS)
Existing, Modified, or New Activity	Indicate if this is an existing activity, modified activity, or a new activity. Existing Activity  <i>Previously referenced as 4.1</i>
Program Key Priority Area	Choose from the following: Mental Health  If Other (please provide details): After Hours
Needs Assessment Priority	GPH9. Lack of community awareness about appropriate after hours health care services leading to increased potentially preventable hospitalisations. GPH17. Lack of community awareness about existing health care services for different population groups, consumers and providers. GPH19. Need to improve provision of education to consumers and professionals across the health sector to encourage the take-up and application of preventive health measures. GPH23. Awareness of timely access to appropriate services (including after-hours services) for vulnerable population groups particularly, Aboriginal and Torres Strait Islander people, Children and Youth, people with a disability, Older people, Palliative Care patients, and their carers. PMH5. Difficulty in identifying and accessing appropriate mental health treatment services. PMH5. Increase awareness of appropriate mental health services to health professionals and community and carers through the provision of information and resources.
Aim of Activity	The Lived Experience Telephone Support Service (LETSS) has been developed to help meet the local mental health service needs, of the metropolitan Adelaide region in the after-hours period. The aim of the activity is to provide consumers who have mental health service needs with real-time information, navigation, and support in the sociable after-hours time period that: <ul style="list-style-type: none"> <li>(a) is timely</li> <li>(b) is appropriate to their need</li> <li>(c) is focused on engagement and an empathetic consumer experience (non-clinical)</li> <li>(d) supports de-escalation of mental health distress</li> <li>(e) potentially diverts attendance at an emergency department</li> <li>(f) assists with access to mainstream in-hours mental health services and other services as required.</li> <li>(g) supports with wellbeing checks and follow-up calls for consumers accessing mental health services.</li> </ul>
Description of Activity	The LETSS will be delivered as a one-to-one, non-clinical telephone service optimising the mental health lived-experience of peer support workers, with additional education and certification in mental health, to enable callers to feel understood and respected by the support, honesty and authentic lived experience of the worker.

	<p>Specifically, the LETSS will provide a lived experience, real-time telephone helpline as a support and potential signposting (or referral) service that provides, advice, guidance, navigation, emotional mental health support and information to individuals experiencing mental health issues, as well as their family, friends and carers.</p> <p>All personnel (staff delivering the service) will be targeted as having a lived experience of mental illness whether personal, or as someone who cares for a family member or friend, with additional training in the field of mental health or lived experience.</p> <p>This service will provide a seven day per week after-hours only service (public operating hours of 5pm to 11.30pm) but have key links with current services offered by Non-Governmental Organisations, State and commonwealth funded services during normal business hours (e.g. for follow-up, referrals).</p>
<p>Target population cohort</p>	<p>The service will support any individual across the metropolitan Adelaide community who may be feeling socially isolated, seeking information about mental health or services, or simply needing someone to talk to. An eligible individual may be a person with a mental health presentation, or their family, friend, carer or significant other. The service priority is to support and guide any individual:</p> <ul style="list-style-type: none"> <li>• seeking general mental health advice or information</li> <li>• seeking general mental health help and support</li> <li>• seeking to navigate and access available mental health services</li> <li>• someone with an exacerbation of mental health symptoms or escalating emotional dysregulation including feelings of suicide.</li> <li>• someone with a severe and complex mental illness that is seeking support in the implementation of care plan strategies</li> <li>• someone with a mental health presentation needing someone to talk to relieve isolation and loneliness</li> <li>• who may need a welfare check following hospital admission or Emergency Department attendance</li> <li>• someone requiring support when experiencing difficulties or frustrations in accessing a specific service.</li> <li>• Someone requiring support reflecting on early warning signs or trigger behaviours.</li> <li>• A person requiring support in the implementation of their mental health plan of care (where provided to the service)</li> </ul> <p>In addition, the following populations have been identified as experiencing greater health challenges whilst receiving disproportionately lower levels of service. As such, these populations may require specific support strategies to maintain engagement and support in accessing the LETSS. They can include, but are not limited to:</p> <ul style="list-style-type: none"> <li>• individuals on a lower income,</li> <li>• individuals experiencing homelessness,</li> <li>• Culturally and Linguistically Diverse,</li> <li>• Aboriginal and Torres Strait Islander individuals,</li> <li>• Lesbian, Gay, Bisexual, Transgendered, Queer and Intersex (LGBTQI),</li> <li>• socially isolated new and emerging populations,</li> <li>• peri-natal women, and</li> </ul>

	<ul style="list-style-type: none"> <li>• individuals with comorbid presentations.</li> </ul>
Indigenous specific	<p>Is this activity targeted to, or predominantly supporting, Aboriginal and Torres Strait Islander people?</p> <p>No</p> <p>If yes, briefly describe how this activity will engage with the Indigenous sector.</p>
Coverage	<p>Outline coverage of the activity. Where area covered is not the whole PHN region, provide the statistical area as defined in the Australian Bureau of Statistics (ABS), or LGA.</p>
Consultation	<p>This is a fully consumer, carer and stakeholder co-designed service initiative.</p> <p>Communication and Marketing Plan developed and implemented supporting service partnerships and community awareness.</p> <ul style="list-style-type: none"> <li>• Consultation has and continues to occur with all accessible consumer and carer stakeholder representatives, and the Mental Health Coalition of SA</li> <li>• Consultation and partnering is planned for ATSI service providers, CALD service providers, LHNs (including emergency departments), and SAAS services</li> <li>• Consultation and partnering is planned with NGO's, local government, community services.</li> <li>• Consultation and partnering is planned with Consumer and Carer groups including ATSI and CALD representatives.</li> </ul>
Collaboration	<p>List and describe the role of each stakeholder that will be involved in designing and/or implementing the activity, including stakeholders such as Local Health Networks, state/territory governments, or other relevant support services. Confirm whether GPs were consulted in the design or co-design process. The LETSS initiative has collaborated closely in the co-design on the service with NGO's, Local Health Networks and consumers and carers, this includes the Mental Health Coalition of SA. Achieving an 80% consumer carer input into the final design.</p> <p>Through the implementation and capacity building phases, the LETSS will continue to collaborate with Local Health Networks (including emergency departments across metropolitan Adelaide, and the Mental Health Triage service), the Mental Health Coalition of SA, NGO's, broader social and community service providers (e.g. across mental health, AOD, disability, youth, domestic violence, CALD, ATSI local government sectors) and PHN commissioned services to link this service with established mental health pathways to enable timely access to required services in either the in or after hours' time frame.</p>
Activity milestone details/ Duration	<p>Provide the anticipated activity start and completion dates (<b>including</b> the planning and procurement cycle):</p> <p>Activity start date: 1/07/2019</p> <p>Activity end date: 30/06/2021</p> <p><b>If applicable</b>, provide anticipated service delivery start and completion dates (<b>excluding</b> the planning and procurement cycle):</p> <p>Service delivery start date: July 2019</p> <p>Service delivery end date: June 2021</p> <p>Any other relevant milestones?</p>

<p>Commissioning method and approach to market</p>	<p>1. Please identify your intended procurement approach for commissioning services under this activity:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Not yet known</li> <li><input checked="" type="checkbox"/> Continuing service provider / contract extension</li> <li><input type="checkbox"/> Direct engagement. If selecting this option, provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date.</li> <li><input type="checkbox"/> Open tender</li> <li><input type="checkbox"/> Expression of Interest (EOI)</li> <li><input type="checkbox"/> Other approach (please provide details)</li> </ul> <p>2a. Is this activity being co-designed? No</p> <p>2b. Is this activity this result of a previous co-design process? Yes</p> <p>3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? No</p> <p>3b. Has this activity previously been co-commissioned or joint-commissioned? No</p>
<p>Decommissioning</p>	<p>1a. Does this activity include any decommissioning of services? No</p> <p>1b. If yes, provide a description of the proposed decommissioning process and any potential implications.</p>



## AH5 Northern and Southern Paediatric Partnership Program

Proposed Activities – AH5 Northern and Southern Paediatric Partnership Program	
ACTIVITY TITLE	<i>AH5 Northern and Southern Paediatric Partnership Program</i>
Existing, Modified, or New Activity	Indicate if this is an existing activity, modified activity, or a new activity. Existing Activity  <i>Previously referenced as AH5.1</i>
Program Key Priority Area	Choose from the following: Population Health  If Other (please provide details): Child & Youth
Needs Assessment Priority	GPH16. A need to increase communication and collaboration between service providers including hospitals to improve clinical handover. GPH19. Need to improve provision of education to consumers and professionals across the health sector to encourage the take-up and application of preventive health measures. GPH23. Awareness of timely access to appropriate services (including after-hours services) for vulnerable population groups particularly, Aboriginal and Torres Strait Islander people, Children and Youth, people with a disability, Older people, Palliative Care patients, and their carers. GPH24. A coordinated approach to improve navigation and pathways for patients to manage their conditions.
Aim of Activity	The Program contributes to the provision of quality, timely and responsive paediatric services, and care coordination supports for children and young people aged 0-18 years in the Outer Northern and Outer Southern regions of metropolitan Adelaide.  The aims of the Project are: <ol style="list-style-type: none"> <li>1. Reduce the number of avoidable presentations in public hospital emergency departments, particularly in the after-hours period;</li> <li>2. Reduce the number of unnecessary referrals to public hospital outpatient clinics;</li> <li>3. Improve access to quality, timely and responsive care for children and young people aged 0 -18 years; and</li> <li>4. Improve patient and family/carer health care experiences.</li> </ol>
Description of Activity	This activity is a collaborative partnership model in both the Northern Metropolitan region and Southern Metropolitan region of Adelaide. The activity aims to reduce the avoidable presentations in public hospital Emergency Departments (ED) particularly in the afterhours period and unnecessary referrals to the Hospital Paediatric Outpatients clinics, and Paediatric Outpatient Waiting Lists. This is achieved by working closely with Local Health Networks, Autism SA and a group of private Paediatricians. APHN commissions a Care Coordination role in each region to assist with the management of Paediatrics wait lists in both Lyell McEwin, Flinders Medical Centre and Womens and Childrens Hospital.
Target population cohort	Children and young people (aged 1-18 years of age) with chronic conditions who are frequent attendees at the hospital and their general practitioners.
Indigenous specific	Is this activity targeted to, or predominantly supporting, Aboriginal and Torres Strait Islander people?

	<p>No</p> <p>If yes, briefly describe how this activity will engage with the Indigenous sector.</p>
Coverage	Northern Adelaide and Southern Adelaide Local Health Network regions in APHN region
Consultation	<ul style="list-style-type: none"> <li>• This activity was established in consultation with general practitioners and clinicians and administrative staff from NALHN and SALHN</li> <li>• This activity is governed by Steering Groups, involving participants from partnered organisations to oversee the performance monitoring and evaluation functions of the unit.</li> <li>• The Northern Community Advisory Council identified the need for this service.</li> </ul>
Collaboration	<ul style="list-style-type: none"> <li>• This activity is jointly implemented in collaboration with Local Health Networks, Autism SA, private paediatrics provider and general practice.</li> <li>• This activity engages and collaborates with general practice and clinicians and administrative staff from the hospitals to improve communication and build sustainable working relationships to ensure systems and processes support the quality and timeliness of clinical handover and the coordination of care for patients across the hospital/community interface.</li> </ul>
Activity milestone details/ Duration	<p>Provide the anticipated activity start and completion dates <b>(including</b> the planning and procurement cycle):</p> <p>Activity start date: 1/07/2019</p> <p>Activity end date: 30/06/2021</p> <p><b>If applicable</b>, provide anticipated service delivery start and completion dates <b>(excluding</b> the planning and procurement cycle):</p> <p>Service delivery start date: July 2019</p> <p>Service delivery end date: June 2021</p> <p>Any other relevant milestones?</p>
Commissioning method and approach to market	<p>1. Please identify your intended procurement approach for commissioning services under this activity:</p> <p><input type="checkbox"/> Not yet known</p> <p><input checked="" type="checkbox"/> Continuing service provider / contract extension</p> <p><input type="checkbox"/> Direct engagement. If selecting this option, provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date.</p> <p><input type="checkbox"/> Open tender</p> <p><input type="checkbox"/> Expression of Interest (EOI)</p> <p><input type="checkbox"/> Other approach (please provide details)</p> <p>2a. Is this activity being co-designed?</p> <p>No</p> <p>2b. Is this activity this result of a previous co-design process?</p> <p>Yes</p> <p>3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements?</p> <p>No</p>

	3b. Has this activity previously been co-commissioned or joint-commissioned? No
Decommissioning	1a. Does this activity include any decommissioning of services? No  1b. If yes, provide a description of the proposed decommissioning process and any potential implications.

## AH6 After Hours Extended Mental Health Clinical Services

Proposed Activities – AH6 After Hours Extended Mental Health Clinical Services	
ACTIVITY TITLE	<i>AH6 After Hours Extended Mental Health Clinical Services</i>
Existing, Modified, or New Activity	Indicate if this is an existing activity, modified activity, or a new activity. Existing Activity  <i>Previously referenced as AH3.1 and AH4.1 in 2016/17 and 2017/18 Core-After Hours AWP's respectively (note: committed funding to 2018/19)</i>
Program Key Priority Area	Choose from the following: Mental Health If Other (please provide details): After Hours
Needs Assessment Priority	GPH9. Lack of community awareness about appropriate after hours health care services leading to increased potentially preventable hospitalisations. GPH17. Lack of community awareness about existing health care services for different population groups, consumers and providers. GPH23. Awareness of timely access to appropriate services (including after-hours services) for vulnerable population groups particularly, Aboriginal and Torres Strait Islander people, Children and Youth, people with a disability, Older people, Palliative Care patients, and their carers. PMH1. High prevalence of mental health/behavioural issues and psychological distress in selected areas across the region. PMH2. Provision of psychological services comparatively low in areas of highest need. PMH5. Difficulty in identifying and accessing appropriate mental health treatment services. PMH5. Increase awareness of appropriate mental health services to health professionals and community and carers through the provision of information and resources.
Aim of Activity	Describe what this activity will aim to achieve, and how it will address the identified need (300 word limit).  The After Hours Extended Mental Health Clinical Services aims to provide evidence based psychological therapy services during the sociable after-hours period based on the local population health needs.  The services address the needs identified above by: <ul style="list-style-type: none"> <li>• Commissioning existing providers of primary mental health care services in areas of high need to deliver additional afterhours services in locations and times of high need and convenience.</li> <li>• Increasing awareness of services by commissioning existing providers that have well established and promoted referral paths and locations known to the local community.</li> </ul>
Description of Activity	Two existing and large providers of primary mental health care services (both of whom deliver all services across the stepped care continuum) have been commissioned to deliver additional psychological therapy services in the social afterhours period. Services are planned and structured and based on the needs of the client identified via an intake and assessment process (i.e. not a crisis or walk in service).

	<p>These providers were already commissioned to deliver PMHCS in areas of high need and have well established referral paths, partnerships and service footprints.</p> <p>Providing additional resources to deliver evidence based psychological therapies in the social afterhours period enables greater access to quality services in locations that are appropriate and convenient and therefore more likely to be used.</p> <p>Using existing providers enablers allows for integration with a primary mental health system that is able to easily match a client need with the right service, including using existing arrangements to escalate to acute and state based services if required.</p>
<p>Target population cohort</p>	<ul style="list-style-type: none"> <li>• Adults 18-65</li> <li>• Adults 18-65 as having potentially preventable hospital admissions</li> </ul>
<p>Indigenous specific</p>	<p>Is this activity targeted to, or predominantly supporting, Aboriginal and Torres Strait Islander people?</p> <p>No</p> <p>If yes, briefly describe how this activity will engage with the Indigenous sector.</p>
<p>Coverage</p>	<p>Northern Adelaide and Southern Adelaide Local Health Network regions</p>
<p>Consultation</p>	<p>Provide details of stakeholder engagement and consultation activities to support this activity. Confirm whether GPs were consulted.</p> <p>The Adelaide PHN continues to consult widely with stakeholders, representative bodies, professional and community organisations, providers (commissioned service providers, prospective service providers and general), membership groups, consumers and carers regarding after hours primary mental health services and needs. This consultation occurs through a range of formal and informal methods including Adelaide PHN membership activities with, Community Advisory Councils, Clinical Councils and the Health Priority Network and, as appropriate Adelaide PHN representation on established provider forums and working groups. All outcomes from our consultations inform Adelaide PHN’s strategic mental health planning, service design, commissioning and continuous improvement. Our commissioning framework enables elements of formal and informal co-design with stakeholders, ensuring community voice and insight is incorporated into commissioned and non commissioned activities. GPs are consulted via our two Regional GP Councils, Clinical Councils and annual GP roundtables.</p>
<p>Collaboration</p>	<p>List and describe the role of each stakeholder that will be involved in designing and/or implementing the activity, including stakeholders such as Local Health Networks, state/territory governments, or other relevant support services. Confirm whether GPs were consulted in the design or co-design process.</p> <p>Adelaide PHN collaborates with existing Primary Mental health Care Service providers, including General Practitioners to ensure clients of this activity have their needs matched to the most appropriate service as part of the central referral triage and initial assessment service. Options for services in the after hours period are offered to clients whom this is suitable for.</p> <ul style="list-style-type: none"> <li>• Existing commissioned services across the APHN region will promote and warm refer clients to this activity when appropriate.</li> </ul>

	<ul style="list-style-type: none"> <li>Services and arrangements made in collaboration with the four Local Health Networks in the APHN region under the Regional Plan for Mental Health and Suicide Prevention services will incorporate access to this activity.</li> </ul>
<p>Activity milestone details/ Duration</p>	<p>Provide the anticipated activity start and completion dates <b>(including the planning and procurement cycle)</b>:</p> <p>Activity start date: 1/07/2019 Activity end date: 30/06/2021</p> <p><b>If applicable</b>, provide anticipated service delivery start and completion dates <b>(excluding the planning and procurement cycle)</b>:</p> <p>Service delivery start date: July 2019 Service delivery end date: June 2021</p> <p>Any other relevant milestones?</p>
<p>Commissioning method and approach to market</p>	<p>1. Please identify your intended procurement approach for commissioning services under this activity:</p> <p><input type="checkbox"/> Not yet known  <input checked="" type="checkbox"/> Continuing service provider / contract extension  <input type="checkbox"/> Direct engagement. If selecting this option, provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date.  <input type="checkbox"/> Open tender  <input type="checkbox"/> Expression of Interest (EOI)  <input type="checkbox"/> Other approach (please provide details)</p> <p>2a. Is this activity being co-designed? No</p> <p>2b. Is this activity this result of a previous co-design process? Yes</p> <p>3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? No</p> <p>3b. Has this activity previously been co-commissioned or joint-commissioned? No</p>
<p>Decommissioning</p>	<p>1a. Does this activity include any decommissioning of services? No</p> <p>1b. If yes, provide a description of the proposed decommissioning process and any potential implications.</p>

## AH7 After Hours Needs Assessment Process – Options and Opportunities

Proposed Activities – AH7 After Hours Needs Assessment Process – Options and Opportunities	
ACTIVITY TITLE	<i>AH7 After Hours Needs Assessment Process – Options and Opportunities</i>
Existing, Modified, or New Activity	Indicate if this is an existing activity, modified activity, or a new activity. New Activity  If activity is existing or modified, provide the relevant reference/s from previous Activity Work Plan/s where possible.
Program Key Priority Area	Choose from the following: Population Health  If Other (please provide details): After Hours
Needs Assessment Priority	To be determined and or following (previously identified) priorities to be refined accordingly.  GPH9. Lack of community awareness about appropriate after-hours health care services leading to increased potentially preventable hospitalisations. GPH10. RACFs have a low capacity to support their residents in the afterhours setting leading to increased transportation to emergency departments and medical deputising services. GPH23. Awareness of timely access to appropriate services (including after-hours services) for vulnerable population groups particularly, Children and Youth, people with a disability, Older people, Palliative Care patients, and their carers. IH-GPH5. Awareness of timely access to appropriate services (including after-hours services) for Aboriginal and Torres Strait Islander people.
Aim of Activity	The activity will aim to: <ul style="list-style-type: none"> <li>• Triangulate quantitative and qualitative information to identify options and opportunities to address identified afterhours needs and gaps of targeted population in APHN region</li> </ul>
Description of Activity	Describe the activity, including what work will be undertaken, and how the activity and/or services will be delivered.  The Needs Assessment activity will: <ul style="list-style-type: none"> <li>• Map current after hours services and analyse health needs of targeted population in APHN region</li> <li>• Consult and engage with relevant stakeholders, APHN membership groups and community members to investigate health and service gaps in APHN region</li> <li>• Triangulate quantitative and qualitative information to identify options and opportunities to address identified afterhours needs and gaps of targeted population in APHN region</li> </ul> <p>The APHN will then determine the best commissioning method as part of the Needs Assessment to address an agreed after hours health and service gap(s).</p>
Target population cohort	Relevant stakeholders, APHN membership groups and community members
Indigenous specific	Is this activity targeted to, or predominantly supporting, Aboriginal and Torres Strait Islander people?

	<p>No</p> <p>If yes, briefly describe how this activity will engage with the Indigenous sector.</p>
Coverage	Entire APHN region
Consultation	<p>Provide details of stakeholder engagement and consultation activities to support this activity. Confirm whether GPs were consulted.</p> <ul style="list-style-type: none"> <li>• General Practices were consulted – Round table workshops</li> <li>• Clinical and Community Advisory Councils were consulted on after hours service gaps</li> <li>• Relevant stakeholders</li> </ul>
Collaboration	<p>List and describe the role of each stakeholder that will be involved in designing and/or implementing the activity, including stakeholders such as Local Health Networks, state/territory governments, or other relevant support services. Confirm whether GPs were consulted in the design or co-design process.</p> <p><i>To be determined after Needs Assessment process</i></p>
Activity milestone details/ Duration	<p>Provide the anticipated activity start and completion dates <b>(including the planning and procurement cycle)</b>:</p> <p>Activity start date: 1/07/2019 Activity end date: 15/11/2019</p> <p><b>If applicable</b>, provide anticipated service delivery start and completion dates <b>(excluding the planning and procurement cycle)</b>:</p> <p>Service delivery start date: Month. 2020 Service delivery end date: Month. 2021</p> <p>Any other relevant milestones?</p>
Commissioning method and approach to market	<p>1. Please identify your intended procurement approach for commissioning services under this activity:</p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Not yet known</li> <li><input type="checkbox"/> Continuing service provider / contract extension</li> <li><input type="checkbox"/> Direct engagement. If selecting this option, provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date.</li> <li><input type="checkbox"/> Open tender</li> <li><input type="checkbox"/> Expression of Interest (EOI)</li> <li><input type="checkbox"/> Other approach (please provide details)</li> </ul> <p>2a. Is this activity being co-designed? Yes</p> <p>2b. Is this activity this result of a previous co-design process? No</p> <p>3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? No</p>



	3b. Has this activity previously been co-commissioned or joint-commissioned? No
Decommissioning	1a. Does this activity include any decommissioning of services? No  1b. If yes, provide a description of the proposed decommissioning process and any potential implications.