

**phn**  
WESTERN NSW

An Australian Government Initiative



# **WESTERN NSW PRIMARY HEALTH NETWORK**

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**ANNUAL REPORT**  
2021-22

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Created by Lewis Burns for WNSW PHN in 2016, the WNSW PHN Aboriginal Motif used throughout this publication has been developed to be complimentary to the WNSW PHN Logo.

*The row of dots represents a river, large dots in the centre represents stronger flowing water in the centre of the river and smaller dots alongside represent the slower flow on the river's edge. The "U" shaped symbols with the dot between them above the river represent people sitting at camps or at campfires along the river. The other random dots represent the ground or the earth or "Country" where people would hunt & gather, or "Country" that people respected and would care for. Holistically the story represents a healthy lifestyle with fresh clean water and abundant natural foods while living off the land.*

– Lewis Burns (Artist)

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## ACKNOWLEDGEMENT OF COUNTRY

Western NSW Primary Health Network (WNSW PHN) respectfully acknowledges Aboriginal and Torres Strait Islander people as the traditional custodians of the nations and countries on which we work, and commit to building relationships, respect and opportunities with all Aboriginal Peoples in our region.

We pay respect to Elders past and present and extend recognition to all Aboriginal people reading this message.

We respectfully acknowledge the following Aboriginal nations:  
Wiradjuri, Gamilaraay / Gamilaroi / Kamilaroi, Wailwun, Wongaibon,  
Ngemba / Nyemba / Ngiyampaa, Murrawarri, Barkindji, Barindji,  
Barundji, Nyirrpaa, Karenggapaa, Wadigali, Wilyakali / Wiljali, Wandjiwalgu,  
Danggali, Muthi-Muthi, Kureinji, Gunu, Barranbinya, Bandjigali,  
Malyangaba and Dadi Dadi.

We acknowledge Elders who are the knowledge holders, teachers and pioneers, the youth who are the hope for a brighter future and who will be the future leaders.

We acknowledge and pay our respect to Aboriginal people who have gone before us and recognise their contribution to Aboriginal people and community.





*The Journey* by Nathan Peckham (Tubba-gah Wiradjuri artist)



## MESSAGE FROM THE CHAIR

Welcome to the 2021/22 WNSW PHN Annual Report.

This report encapsulates the various and numerous areas of focus, funding and successes achieved by WNSW PHN in delivering better health outcomes for the residents of Western NSW throughout the 2021/22 financial year.

As we continue to respond to the constantly evolving COVID-19 pandemic, its variants, and government response, I'm extremely proud of how WNSW PHN has been able to act effectively in this effort as well as embracing other opportunities presented and develop solutions to bring about real benefits for our region's healthcare providers and their patients.

Covering more than half of the land mass of NSW, WNSW PHN faces real and unique challenges due to the vastness of the region we serve and its more than 300,000 residents.

This report also shows how we work to overcome these demands to support all the region's communities as effectively as possible while understanding their own uniqueness while linked by common obstacles to quality healthcare.

Please enjoy exploring the 2021/22 WNSW PHN Annual Report.

Robin Williams

Chair, Western Health Alliance Ltd.





## MESSAGE FROM THE CEO

Having joined WNSW PHN at the start of the past financial year, I am proud to be part of one of the nation's top performing PHNs, and I am eager for the continued growth of its success for the benefit of health outcomes for every individual across our region.

We draw upon world class expertise to support frontline health services and increase the efficiency and effectiveness of primary health care locally.

As our region spans both the Far West and Western NSW Local Health Districts, the strengthening and effective collaboration of our partnerships with both Local Health Districts, as well as the NSW Rural Doctors Network, all levels of government, peak bodies and numerous other partner organisation, is integral to the success of our efforts in meeting the health needs of the region and making meaningful and powerful enhancements.

Together, we have an unwavering determination to improve the health and wellbeing of residents right across our vast region.

We also acknowledge that we work on the traditional lands of many Aboriginal clans, tribes, and nations, and we are committed to working with and building collaborations with our region's Aboriginal communities and peoples to improve their health, emotional and social well-being in the true spirit of partnership.

Please enjoy this snapshot of WNSW PHN's work of the 2021/22 financial year, as we focus on patients who are at risk of poor health outcomes and working to improve the coordination of their care, so they receive the right care in the right place at the right time.

Andrew Coe

CEO, Western NSW Primary Health Network





## WHO WE ARE

Western Health Alliance Limited, trading as the Western NSW Primary Health Network (WNSW PHN), is one of 31 Primary Health Networks across Australia, established to support frontline health services and increase the efficiency and effectiveness of primary health care.

Our focus is patients who are at risk of poor health outcomes and working to improve the coordination of their care, so they receive the right care in the right place at the right time. We work closely with key stakeholders including general practice, other health care providers, Local Health Districts, hospitals and the broader community to align services with the health needs of the region.

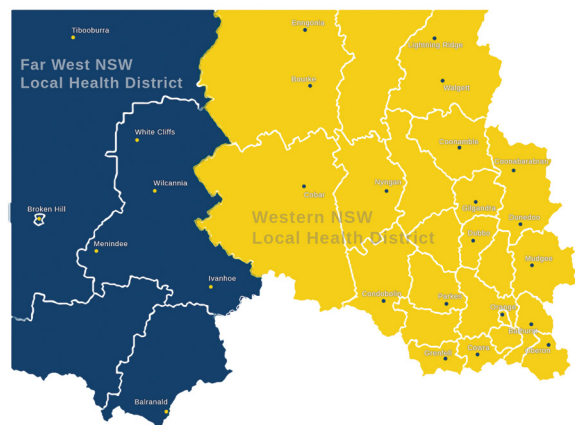
WNSW PHN is a not-for-profit organisation primarily funded by the Australian Government.

Our vision is to support, strengthen, and shape a world class, person-centred primary healthcare system in Western NSW.

## OUR REGION

WNSW PHN covers both Far West and Western NSW Local Health Districts across a total area of 433,379 square kilometres, making it the largest PHN in NSW (at 53.5%).

The total population is estimated to be over 309,900 people, with 18.5% over the age of 65 years (ABS, 2016). Approximately 10.5% of people in our region identify as Aboriginal and Torres Strait Islander. WNSW PHN supports 401 General Practitioners that operate from 113 practices in our region.





## OUR POPULATION

- 312, 573 people live in the WNSW PHN region
- 10.5% of Western NSW residents identify as Aboriginal or Torres Strait Islander
- 3rd highest proportion of population of PHN regions of people who identify as Aboriginal or Torres Strait Islander
- More people under 20 and over 65 years than the NSW state population average
- One third of our LGAs are classified as amongst the most disadvantaged in Australia
- 44% of our LGAs are classified as remote or very remote
- Higher rates of low education levels and young people receiving unemployment benefits than national average
- 2nd highest rate of single parent families with children under 15 years in Australia

More details on our region and its population can be found on our website:

[wnswphn.org.au/our-region](https://wnswphn.org.au/our-region)



# WNSW PHN ADVISORY COUNCILS 2021/22

WNSW PHN has established five Advisory Councils who each report directly to the Board. The Councils assist the organisation in setting the strategic direction, evaluating outcomes of services, and supporting the design of new services to meet the needs of local communities.

Clinical Councils provide support and advice to the Board on opportunities to further develop clinical services to meet community needs.

Community Councils support WNSW PHN to understand and address health needs within local communities, including access to services and service gaps.

The Aboriginal Health Council supports WNSW PHN to understand locally relevant Aboriginal Community perspectives in relation to their unique health needs, access to services and service gaps.

Number of meetings overall: 19

## Initiatives

- Joint meetings with Far West and Western Councils & AHC regarding Strategic Planning Implementation Sessions
- WNSW PHN Stakeholder Forums planning
- First 2000 Days Alliancing model
- Establishment of HealthPathways
- Primary Health Information Platform
- Reconciliation Action Plan

## Consultation with councils

- COVID-19
- HealthPathways
- LGA based plan for ongoing COVID-19 vaccination
- Inca
- Nurse incentive contracts
- Planned Care for Better Health - GP Consultation
- Strategic Plan consultations
- Aboriginal Engagement Strategy: 'Waluwin' – Engaging the 'Proper Way' Guide for Staff
- Health Literacy
- LGA based needs assessment
- WNSW PHN Website Homepage Redesign
- Small Towns Initiative
- PWC ITC
- Sorry Business booklet



# FUNDING OVERVIEW 2022

The below table shows the actual to-date financial year revenue:

Funding activity	Jun 22 (Actual)
DOH - After Hours	2,428,418
DOH - Aged Care	1,340,000
DOH - Core Flex Funding	13,377,902
DOH - Covid Funding	2,027,247
DOH - Drugs & Alcohol	2,328,099
DOH - ITC	3,312,830
DOH - Mental Health	23,622,081
DOH - Palliative care	300,000
DOH - Targeted programs	120,000
Other funders	915,099
<b>Total</b>	<b>47,744,429</b>

WNSW PHN has also secured NSW Government funding for the first time during the 2021/22 Financial Year:

Mental Health Commission of NSW	\$75,000
NSW Ministry of Health	\$2,283,328
<b>Total</b>	<b>\$2,358,328</b>

See Appendix on page 32 for the full Financial Report.



# COVID-19 IN WESTERN NSW: OUR RESPONSE IN 2021/22

## COVID-19 Vaccine management

Currently in our region:

- 94 practices are participating in the COVID-19 Vaccination program, including 8 GPRCs.
- 11 ACCHSs are also participating in the program.

## Western NSW Rates of Vaccination among eligible population (>16 years)

Dose 1:	>95%
Dose 2:	>95%
3 or more doses:	Orana & Far West 66.8%
	Central West 70.5%

## Western NSW Rates of Vaccination among eligible Indigenous population (>16 years)

Dose 1:	87% (above NSW rate)
Dose 2:	85% (on par with NSW rate)
3 or more doses	48% (slightly below the NSW rate)



We are also currently implementing 3 funded programs, in conjunction with both Far West and Western NSW Local Health Districts and ACCHSs to roll out these programs, with weekly meetings focusing on coordination.

**Program 1: Living with COVID-19 Program**

This supports practices to look after COVID-19 positive patients. We have rolled out the shared care platform Inca to 51 practices that are currently undergoing instalment, as well as implementation of the management of COVID-19 in the community care pathway and funding of nursing services to support COVID-19 management in practices.

**Program 2: Vulnerable Peoples Program**

This includes vaccinations for Non-Medicare eligible people, in-home vaccinations for those housebound, people with a disability or those who have moderate or severe mental health illnesses. This is delivered in partnership with both LHDs and ACCHSs to provide a culturally safe vaccination service to the Indigenous population in rural and remote areas with limited access to services.

**Program 3: Winter Strategy**

This program targets our elderly and most vulnerable populations to be vaccinated against Influenza and COVID-19.

**PPE Deliveries** (not including Allied Health or Pulse Oximeters)

PPE Deliveries Jan 2021 to Dec 2021		PPE Deliveries Jan 2022 to June 2022	
Surgical Masks	51,100	Surgical Masks	82,250
P2 Masks	24,660	P2 Masks	34,540
Gowns	19,680	Gowns	10,335
Goggles	5,270	Goggles	891
Gloves	65,240	Face Shields	6,616
		Gloves	33,700
		Hand Sanitiser	330

We also commenced delivering a PPE Fit Testing service for practices in 2021.



# ABORIGINAL HEALTH REPORT

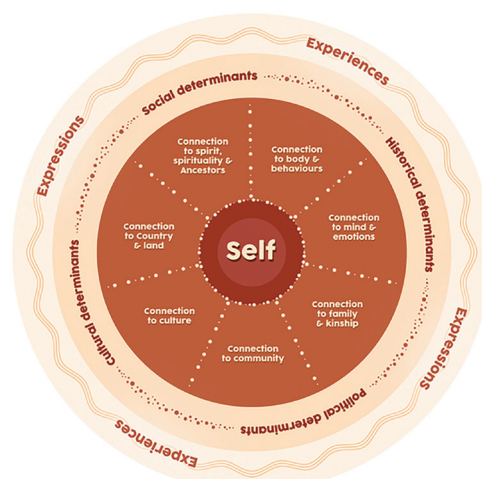
## Social Emotional Wellbeing (SEWB) Network

The SEWB Network funded by WNSW PHN as part of the suicide prevention trial undertakes various non-clinical, community-based initiatives to strengthen the social and emotional wellbeing of local Aboriginal community members. These initiatives include activities such as 'Brothers for Recovery' men's Healing Camps, 'Walkabout Barber' and 'Lateral Violence/Healing' workshops. The best available research evidence indicates that these types of interventions are essential for work within Aboriginal and Torres Strait Islander conceptualisations of health and wellbeing and are consistent with research findings about the type of work likely to be most effective in reducing rates of suicide.

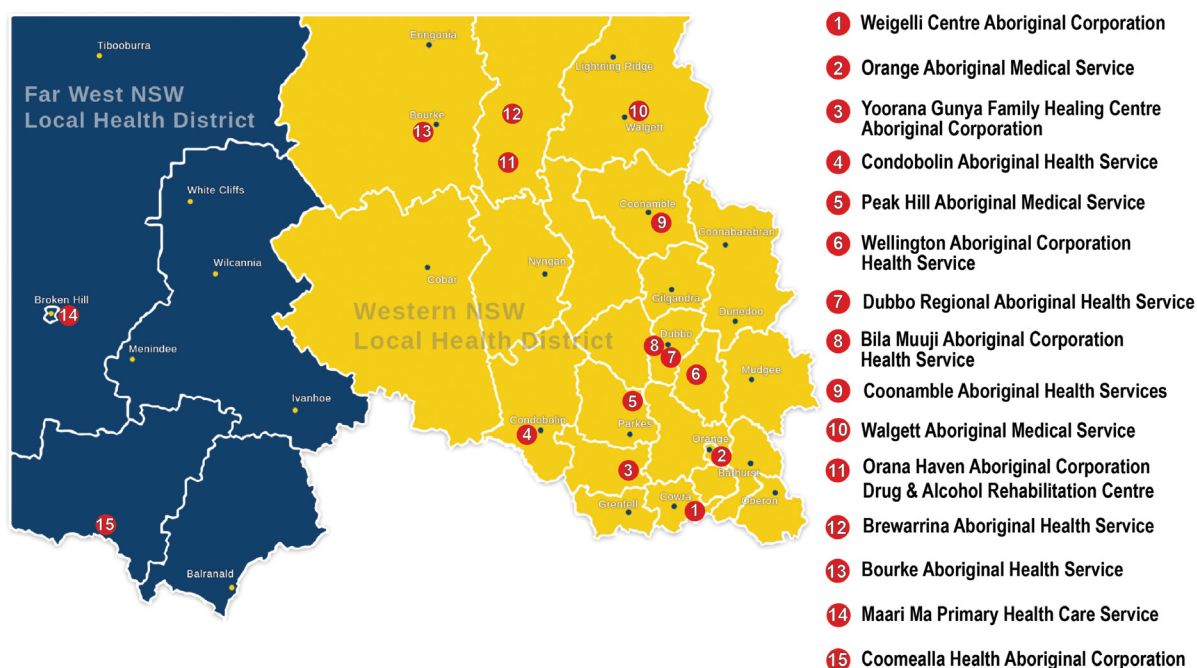
The aim of the project is to identify and make recommendations for the implementation of SEWB measurement tools for participants in non-clinical, community-based initiatives.

The WNSW PHN SEWB network consists of our SEWB contracted services: Coomealla AHC, Coonamble AHS, Yoorana Gunya Family Healing Centre Aboriginal Corporation, Orange AMS, Maari Ma HAC, Peak Hill Aboriginal Medical Service.

We participate in facilitating the network and providing updates from our organisation regarding SEWB, along with guidance. This approach creates conversation and collaboration driven by the SEWB providers themselves, which is what they have intended since inheriting the network.



SEWB Diagram adapted from Gee et al., (2014)



The outcomes of the project would be:

- a) Local service providers are consulted about the methods they currently use and/or the challenges they face in undertaking evaluations of relevant activities (including the application of trauma informed practice principles).
- b) WNSW PHN is provided with a report that includes:
  - A scan of relevant research literature
  - Summary of consultations with providers
  - Recommendations about what evaluation tools would be suitable for providers to use and strategies to support and enhance their routine use by providers
- c) In consultation with the authors, the research findings would be made publicly available to the (Indigenous) health, wellbeing and community work sectors and submitted for publication in relevant professional journals.





### All Staff Day 2021

We facilitated the all-staff day during 2021 with cultural immersion activities provided by proud Tubba-Gah Wiradjuri man Lewis Burns.

This day included talks about local Aboriginal culture, vibration therapy, traditional dancing lessons, the meaning of symbols and the use of ochre with different colours meaning different things (yellow can only be used by women, and red can only be used by men in this area).

Along with this, we had an all-day activity: an ongoing artwork that had a contribution from all staff present on the day.





## Waluwin Strategy

Set to be released during the 2022-23 financial year, the WNSW PHN Waluwin Strategy underscores why engaging with Aboriginal people and communities when done in the 'proper way' will support our goal of strengthening and enhancing the capacity to improve health outcomes for Aboriginal people and their communities.

This Strategy supports the WHAL Commissioning Framework for how WNSW PHN undertakes its role as a commissioner of services to support Aboriginal people and communities in accessing appropriate health services as identified by needs analysis.



The intent of the Strategy and the associated Aboriginal Engagement Guide: Engaging the 'proper way' for Staff (the Guide) is reflected in the WNSW PHN Strategic Plan. The Strategy and Staff Guide support staff to:

- develop and improve cultural competence within WNSW PHN and commissioned health services through a sustained focus on knowledge, awareness, behaviour, skills, and attitudes at all levels of service in tailoring service delivery to the needs and priorities of Aboriginal and Torres Strait Islander people and communities.
- improve cultural competence in commissioned services by working with local Aboriginal and Torres Strait Islander organisations to enhance their capacity to provide a wide range of services to their communities.
- develop commissioning processes that build capacity and support Aboriginal and Torres Strait Islander organisations, and which minimise the fragmentation and lack of coordination caused by competitive tendering processes.
- understand the role of Reconciliation in closing the gap in the outcomes for Aboriginal people and the objectives for the actions in WNSW PHN's Reconciliation Action Plan.



## Aboriginal Community Engagement Strategy

This guide is for all WNSW PHN staff, contractors and partners to support them in improving relationships with Aboriginal people in the workplace and in the community to improve service delivery and close the gap.

It also ensures that Aboriginal people are included in local decision making within their own communities, empowering them to take control of the future health outcomes of their own people.

It is supported by the Western NSW Primary Health Network Aboriginal Engagement Strategy 2020 (AES) and A Transition to Cultural Safety in Service Delivery: A Western NSW Primary Health Network Framework (CSF).

The WNSW PHN Community and Consumer Engagement Framework provides the overarching framework for the principles of engagement.

Understanding the 'proper' way of engaging at individual, local and regional level is essential to building rapport and trusting relationships and partnerships.

This Guide is underpinned by the guiding principles outlined in the WNSW PHN Aboriginal Engagement Strategy – Waluwin the 'Proper Way' 2020.

As a snapshot, projects already completed as part of the Aboriginal Engagement Strategy include:

- Culturally significant dates calendar
- Aboriginal Engagement Strategy, Waluwin digital document
- Aboriginal Engagement Strategy, Waluwin staff document
- Engagement and communication promoting access to health care and grants in progress
- Promoting culturally safe practices in progress
- Engaging with LALC, AMS, ACCHOs etc. in discussions around "Closing the Gap" targets the Waluwin way
- Engaging with LALCs and AMSs to promote access to healthcare
- Primary Health Program Officer and Practice Support teams engaging with the ACCHOs and GPs to develop and implement culturally safe practices

## Scholarships Program

Western NSW Primary Health Network Scholarships have been made available for eligible students at Charles Sturt University.

These scholarships are designed to help progress and maintain a locally developed and sustainable workforce in our region, targeting 1st Year Aboriginal or Torres Strait Islander students studying a Diploma of Health Science (Mental Health) through the CSU Wagga Wagga campus.

Each of the scholarships granted will total \$8000.





## Redesigned Integrated Team Care Program

The revised Integrated Team Care (ITC) Program from WNSW PHN is funded by the Australian Government to support Aboriginal and Torres Strait Islander people living with chronic conditions and will be fully operational from January 1, 2023.

The program's revision follows region-wide stakeholder and community consultations undertaken between July 2021 and February 2022 that identified several improvement areas required to deliver better outcomes for patients.

Areas of the program identified for improvement included the inclusion of care coordination to aid patients to navigate often complex pathways to the level of care each person requires, including specialist services.

Local delivery of the program was also identified as being vital for local residents to ensure the service has the ability to be tailored to specific community requirements, while also aligning with National Guidelines.

The region's Aboriginal Community Controlled Health Services (ACCHS), Aboriginal Medical Services (AMS) and other key stakeholders have been involved in the co-design of the program. All AMSs within the WNSW PHN region are now being offered a direct contract to manage the delivery of service directly to their patients, while also having the option to contract other organisations to deliver the service on their behalf.

In addition to this, WNSW PHN is seeking providers to offer additional access points to care through the program. Current services are continuing with full funding to the end of December 2022 when the new ITC Program will become fully operational to ensure no disruption to services.

## RAP Report

The first WNSW PHN Reconciliation Action Plan (RAP) was officially launched in November 2021 in conjunction with Reconciliation Australia.

As well as identifying existing work being undertaken by WNSW PHN aligned to its strategic vision of improving health outcomes for Aboriginal and Torres Strait Islander people living in and connected to our region, the WNSW PHN Reflect RAP identifies several actions and deliverables that are to be embedded in its operational plans.

These include:

- Establishing and strengthening mutually beneficial relationships with stakeholders and organisations
- Promoting reconciliation through WNSW PHN's sphere of influence
- Promoting positive race relations through anti-discrimination strategies
- Increasing understanding, value and recognition of Indigenous cultures, histories, knowledge, and rights through cultural learning
- Demonstrating respect and creating culturally safe and respectful environments
- Improving employment outcomes and increasing supplier diversity
- Increasing grant opportunities

To date:

- More than 60% of tasks are complete
- 30% of tasks are nearing completion
- 10% of tasks are starting shortly

WNSW PHN now plans to commence work on its Innovate Reconciliation Action Plan before the end of 2022.

# PRACTICE SUPPORT

The reorientation of the Practice Support Team is currently underway to enable us to be more proactive and deliver a program focused on value for our region's practices.

Changing to the Practice Development Team, Prestantia Health is collaborating with us to build capability within the team, as well as our region's practices, enabling practices to make and sustain change with an increased adaptive reserve, and improved organisational capacity to engage in ongoing Quality Improvement.

This change will give us a more highly skilled team and allows us to have a value-based proposition for practices to want to work with WNSW PHN, as well as increased engagement to enhance the sustainability of their business.

## HealthPathways

We have successfully implemented the COVID-19 HealthPathways on the Western NSW HealthPathways site, including management and treatment.



**HealthPathways**

Between April 2020 and July 2022, HealthPathways has achieved 26,617 overall page views across 1,319 individual users.

## RACFS

We've successfully facilitated COVID-19 vaccinations across all sites within our region, as well as a current concentration on Influenza and COVID-19.

We are also actively participating in outbreak management measures with our LHD partners.



# DIGITAL HEALTH

## Telehealth

The Healthdirect videoconferencing platform has continued to grow to 100 clinics and 550 registered users in Western NSW in 2022.

The clinics include a range of primary care providers including ACCHS's, General Practices, Specialists and Allied Health Practitioners.

- 9,014 consults conducted from 1 July 2021 to 30 Jun 2022. Of these consultations, mental health providers are identified as the highest user with 43% of all consultations in the 12 month period.

Rollout of the Healthdirect videoconferencing platform continues for all eligible health professionals including GP practices, AMSs, Pharmacists and Allied Health Practitioners to 30th June 2023.

## My Health Record

The My Health Record system shows an increase of 14% in the number of successful transactions that have been uploaded and viewed.

Cross views of My Health Record document (documents that were uploaded by one healthcare organisation and viewed by another) demonstrated a 105% increase for the reporting period. This increase shows that more and more healthcare professionals are accessing patient records in My Health Record.



### **Inca Integrated Care Platform**

With the advent of COVID-19 Care in the Community across New South Wales and the roll out of the Care Partnership for Diabetes program in 2022, a need arose to perform a granular assessment of shared care planning tools.

There was also a need to empower GPs to find a convenient and operational means to maintain clinical contact and patient engagement at a time where both parties were under extreme duress and State Government advice on COVID-19 was constantly changing.

The platform needed to be fit for purpose for our region taking into consideration the levels of digital health literacy for both care providers and recipients. Cross team collaboration within the PHN resulted in the adoption and installation of the Inca Integrated Care platform in November 2021. As of August 2022, 40 practices across the region have installed or are rolling out Inca.

The Inca platform features a patient facing application which shares their self-reported clinical observations with their general practitioner and other care team members to a clinical dashboard.



### **SafeScript NSW**

Following on from the successful rollout in 2021 of electronic prescribing, the digital health team partnered with other PHNs to support the launch of SafeScript NSW in May 2022.

SafeScript NSW provides prescribers and pharmacists with real-time information about a patient's prescribing and dispensing history for certain high-risk medicines, known as monitored medicines. This information helps to improve clinical decision making and keep patients safe.

Over 30% of AHPRA registered practitioners have signed up to SafeScript NSW across the state. This includes medical practitioners (GPs and specialists), pharmacists and nurse practitioners. GP registrations are at 48%, Pharmacists at 44%. Work continues to increase adoption and usage of SafeScript NSW across the region.





## AGED CARE PLAN

As part of the PHN's Activity Work Plans, funding has been secured from the Commonwealth to support our new Aged Care Plan.

The Aged Care Plan covers six main areas:

- Supporting older people to live at home for longer (including those not currently receiving aged care services) through the commissioning of early intervention initiatives that promote healthy ageing and the ongoing management of chronic conditions.
- Increasing awareness in the local primary health care workforce of the needs of the local senior Australian population, and the availability of these initiatives.
- The commissioning of early intervention initiatives that contribute to healthy ageing e.g. the "Living Longer Living Stronger" program provided by the Council for Ageing NSW (COTA).
- Commissioning a Social Prescribing model as trial in one LGA of the WNSW PHN region, and the establishment of a Social Prescribing Link Worker (1 FTE), as well as GP engagement and capacity building to enable referrals.
- Establishing Health Pathways – Aged Care Support Pathways (including Dementia) for WNSW PHN region.
- Upskilling General Practice in My Aged Care referrals.



# MENTAL HEALTH

## **Rate of regional population receiving PHN-commissioned low intensity psychological interventions**

In 2019-20, WNSW PHN recorded 186.43 active clients per 100,000 population receiving low intensity psychological interventions, which is a 72% increase on previous year.

## **Rate of Regional PHN-commissioned psychological therapies delivered by mental health**

In 2019-20, WNSW PHN recorded 394.94 active clients per 100,000 population receiving psychological therapies delivered by mental health professionals.

## **Launch of new service**

A new service was launched which provides mental health support to people in rural and remote areas. The NewAccess program provides low intensity mental health counselling delivered by locally trained coaches with lived experience. This service helps communities affected by drought and other adverse weather events.

WNSW PHN awarded funding to more than 20 community groups and organisations across the region to help those hit by drought. This funding was through round 1 of the Australian Government's Empowering our Communities initiative which facilitates community-led projects to support mental health, social and emotional wellbeing and suicide prevention initiatives for people living in drought-affected areas.

## **Partnerships established with local key stakeholders for drug and alcohol treatment services**

WNSW PHN has established partnerships with a range of drug and alcohol treatment services and stakeholders to deliver mainstream and Aboriginal and Torres Strait Islander-specific drug and alcohol services. They have done so through MOUs with a number of organisations including local health districts, local land councils, Centrelink, Aboriginal health services, shire councils and local hubs.





## Regional Mental Health Plan

Our Regional Mental Health Plan has been developed with the aim of maintaining strong partnerships with health and NGO services and inform strategies to address challenges and drive quality improvement, deliver outcomes-focused value-based health care across the region.

The mechanisms and goals that will guide the implementation of this plan to successful outcomes include:

- Fostering joint initiatives and cross representation on regional mental health projects to create improvements in performance through a whole of system, whole of service approach (e.g., Older People's Suicide Prevention Pathway, LGBTQI+).
- Maintaining two regional Cross Agency Advisory Groups (Western and Far West) which provide the WNSWRMHSP Steering Committee with cross region advice, recommendations, and priorities for service change, to be delivered within a co-design and co-commissioning framework.
- Establishing cross agency regional working groups focusing on four key priority areas (suicide prevention, service navigation, barriers to better health care: co-existing health conditions, placed-base care).
- Developing an online mental health consumer facing Service Navigation Portal that will improve the consumer experience of navigating mental health services in the Western and Far West region (Mental Health Out West).
- Providing strong advocacy and a platform to hear and enact the views of people with a lived experience of mental health and/or suicide risk, and to ensure person-centred care is at the forefront of everything we do.
- Engaging with Black Dog Institute to deliver a Regional Suicide Prevention Capacity Building Program (6 month) through the suicide prevention working group. Output to establish a joint regional Western and Far West Suicide Prevention Collaborative.
- Continuing to work collaboratively and be strong proponents for First Nations people and organisations to improve their health and emotional and social wellbeing in the true spirit of partnership.

## Head to Health Services to be Commissioned

At the start of May 2022, Commonwealth funding for two Head to Health services were announced by local Federal Members.

On May 7, Member for Calare, Andrew Gee, announced \$3.4 million over 4 years from the National Mental Health and Suicide Plan for a Head to Health satellite service in Orange.

On May 12, Member for Parkes, Mark Coultan, announced \$14 million over 4 years from 2023/24 to establish a Broken Hill Head to Health centre.



## EDUCATION

During 2021/2022, the CPD team has delivered:

- 44 webinars with 1340 participants
- 21 training/webinars on COVID-19 with 927 participants

The ECHO Network was launched in 2021, with the series successfully delivered on alcohol and other drugs, and pain management. Diabetes will be the focus of the upcoming series in the second half of 2022. Another pain management or AOD series is also being considered.

The Nurse Immunisation Conference took place in May 2022 with 330 nurses attending in both Dubbo, Orange and via livestream for our remote nurses. This was the first time this event was hosted face-to-face in two years due to COVID-19 restrictions.

The Orange, Dubbo and Mudgee GP Masterclasses have resumed following a hiatus during the COVID-19 response period.

We have partnered with Benchmarque and NSW Rural Doctors Network to offer Immunisation Practice in Primary Care to 45 registered nurses from general practice and aged care.

We are also working with the University of New England Partnerships to offer scholarships for medical practicing assistants to reception staff across our region. We have 49 students currently enrolled from practices including Bathurst, Cowra, Wellington, Dubbo, Orange, Cobar, Lightning Ridge, Coonamble, Bourke, Broken Hill, Walgett and Millthorpe. To date, four students have graduated.

The CPD team has collaborative partnerships with many organisations to deliver our programs, including WNSWLHD, FWLHD, CSU, USYD, Benchmarque, Hartmann, Kidney Council of Australia, NCIRS (Immunisation Updates / Conferences), National Asthma Council, Black Dog Institute, APNA, Blue Knot, UNE Partnerships, Royal Life Saving and RACGP).





We have 2 new GP advisors on board with the team with Dr Catherine Stewart in Bathurst and Dr Justin Gladman in Broken Hill, while Dr Jenny Geraghty and Dr Annie Balcomb are continuing their support in Orange and Dubbo.

The CPD team conducts regular surveys, evaluations and needs assessments to ensure our events are responsive and relevant to our stakeholders identified learning needs. The average approval rating for our sessions is 90%.

The CPD Team works with other PHN teams to support and coordinate the delivery of education associated with specific portfolios, with partnerships with Blue Knot delivering four Trauma Informed Care workshops in 2021/2022, and Black Dog Institute delivering ABC of CBT to GPs (Dubbo and Broken Hill in 2021/2022).

To support the needs of Aboriginal health practitioners, we have facilitated specific CPD sessions in 2021/2022, including:

- Understanding Chronic Kidney Disease for Aboriginal and Torres Strait Islander Health Workers and Practitioners
- COVID-19, Vaccination and Aboriginal Health and Wellbeing with Patrick Cashman, Dr Amy-Lea Perrin and Marsha Files
- Partnered with OAMs and Syd Uni to deliver COPD management and COVID-19 Implications
- Asthma and Spirometry Workshops for Aboriginal Health Workers in Orange and Dubbo





# EXTERNAL ENGAGEMENT ASSESSMENT

WNSW PHN commissioned an independent third party, the Australian Healthcare and Hospital Association (AHHA), to undertake a review of its stakeholder engagement in 2021. The review consisted of two roundtable discussions, one focus group and a series of interviews. In total, 63 individuals representing a broad range of stakeholder groups were consulted. In addition, the annual “WNSW PHN Improving GP Experience: 2021 Survey” was conducted by Outcome Services and completed by 126 general practitioners.

Findings demonstrate positive perceptions amongst participants on the governance structure when establishing the PHN, working relationships with the PHN staff and on the direction of PHN engagement, particularly in the recent year. PHN staff were mostly reported to be supportive, helpful, professional, and respectful. The Collaborative Commissioning project was repeatedly referenced as an example of high-quality engagement by the PHN.

Despite these positives, findings reveal several areas for improvement within the four drivers of trust, summarised below:

Work on the following 3 actions is already underway:

1. Embed a Culture of Social Responsibility
2. Ensure Feedback Loops
3. External Stakeholder Engagement Report

Reviews of this report are informing how we implement relevant identified recommendations at Board, management, and leadership levels.



# COLLABORATIONS

## Western NSW Collaboration

The Western NSW Health Collaboration is a commitment to high-level cooperation between key health agencies of Western NSW; Western NSW Primary Health Network, Western NSW Local Health District, Far West NSW Local Health District, and NSW Rural Doctors Network.

It is a symbol that these organisations are committed to working collaboratively to develop a health care system that delivers well-coordinated, high quality and efficient care to the populations we serve.

It is also recognition that our organisations cannot achieve the gains we seek by working in isolation.

The purpose of this Collaboration Protocol is to provide a framework within which the parties will:

- Strengthen collaboration to support joint strategic and operational planning, design of contemporary models of care, and coordinated implementation across the region
- Determine collaborative ways of working to assist the parties to deliver on:
  - » NSW State and Commonwealth priorities
  - » Agreed local health and service need priorities
- Work in partnership with key regional stakeholders
- Work together in a spirit of good will and mutual respect

Recent collaborative efforts have included progressing work on Collaborative Care, the Collaborative Commissioning Program, and workforce strategies.



### Collaborative Commissioning

Commencing at the start of 2021, we joined with Western NSW Local Health District, Far West Local Health District and NSW Rural Doctors Network to work towards the delivery of collaborative commissioning projects targeting chronic disease treatments and pathways across our region.

First targeting diabetes and patients with an HbA1C score higher than 7, this project is approaching the delivery stage.

Full collaborative and consultative approaches have been undertaken in the design of this project, which will also enable the localising of the model to ensure that service providers and patients:

- Are encouraged and supported to undertake testing
- Are acutely aware of the importance of early intervention
- Have an improved experience in the treatment of the disease throughout the entire care journey, and
- See improved health outcomes as part of this new model of care

The success of this program, to be rolled out across the region over three years, will influence the new collaborative approaches to other chronic disease service delivery over the coming decade.

The initial targeted LGAs for this program will be Brewarrina and Walgett, Bourke, Orange, Broken Hill, Dubbo and Coomealla, and will roll out over the entire region during a 3-year period.

Expressions of Interest for the Collaborative Commissioning – Diabetes program were launched on June 14, 2022, with the announcement by the NSW Government of \$13.7 million in support for the program.





# WNSW PHN'S NATIONAL PROFILE

The profile of WNSW PHN continues to grow across the nation, as our recognition as being one of the top performing PHNs is leading to our involvement and collaboration in numerous State and Nation-wide programs and projects, and inclusion in consultations during the 2021-22 financial year.

Our achievements and inclusions to date include:

- Part of the National COVID-19 Response Group
- Review of the Quality Use of Medicines Program's Delivery by NPS MedicineWise
- Working Group to develop Workplace solutions White Paper
- PHN Collaborative Key Election Messages
- Rural Health Working Group
- Ongoing quarterly meetings with NRHC
- NSW ACCHS and NSW PHNs Partnership Group
- Joint Statement WG 1: Focusing on Care in the Community - Co-Chair.
- NSW/ACT PHN Aboriginal Health Network - CEO Sponsor
- CHF/PHN Consumer Summit (PHN CEO Cooperative group)

Held on May 11, 2022, This event:

- » Presented new data about the value and consumer experiences of general practice and primary health care services and discussed its implications
- » Highlighted regionally-led exemplars of transformation and innovation in primary health care, their common characteristics and critical success factors
- » Generated a call to action of the immediate primary health care priorities to be taken forward in the first term of a returned or new government





### **PHN Cooperative Outcome Measure Frameworks**

WNSW PHN is joining with the nation's 30 other PHNs to develop an Outcome Framework which is functional, relevant, and consistent across PHNs, with the outcomes aims including:

- Shared knowledge of existing Outcome Measurement Frameworks across PHNs.
- A set of principles and high-level outcomes to guide the development of a shared Outcomes Measurement Framework.
- Consider what is in scope and what is out of scope in an Outcome Measures Framework.
- An agreed plan to progress the development of a shared Outcome Measurement Framework,
  - » Who will participate in the operational level development of the Outcome Measurement Framework (e.g., Senior Executives/State and Territory Representation or other).
  - » Need for a workshop to enable this to occur.
  - » How we engage with the Department of Health and Aged Care.
- Timeline – when would PHNs like to see this completed.
- Governance and approval Process e.g., CEO Steering Group.

### **Collaboration with HNECC PHN in the Living Longer, Living Stronger Program**

In conjunction with Hunter New England and Central Coast Primary Health Network, this program aims to:

- Facilitate quality supervised strength training and balance programs for older people.
- Support accredited health and fitness providers to assess and service older participants to enable them to confidently engage in a safe, effective strength training program.
- Promote the benefits of strength and balance training and appropriate type of exercise for older people.
- Provide training and useful resources to better equip the health and fitness industries to service older people.





## Commissioning Showcase

WNSW PHN was one of five PHNs nationally that coordinated the delivery of the Commissioning Showcase in 2022. The showcase is designed on the premise of “by PHNs for PHNs” to ensure that themes and topics remain contemporary in the Australian context of health care commissioning and provides opportunities to learn and share in a collegial environment with PHNs from around the country.

Themes that were the basis in 2022 were:

- Value – measuring, driving, and evaluating outcomes from health investments
- Engagement – engaging communities and clinicians to improve services
- Digital – accelerating behaviour change through digital innovation
- Integration – wrapping healthcare around people’s needs

We had the opportunity to submit a poster and highlighted the Inca platform as innovation in digital health in the management of COVID-19 patients.

Feedback included that the PHN presentations were a good mixture of co-commissioning, pooled funding, consortium approaches and provided a good cross section of different types of commissioning examples.

122 people were able to attend the conference at Merewether Surfhouse in Newcastle. Feedback has suggested to book a bigger venue next year to enable a growth in attendance.





## Leading State-Based Bilateral Project for Community Care

Pricewaterhouse Coopers (PwC) has been engaged to help drive the development of the Care in the Community Project.

The Joint Statement between the NSW Primary Health Networks (PHNs), NSW Health and the Primary Care Division of the Australian Government Department of Health sets out a shared commitment between the parties to a one health system mindset, to work together, to plan and evaluate, and to adopt a regional focus. Care in the Community is a critical initiative to progress this commitment and demonstrate the effectiveness of a one system approach, while enhancing health outcomes and the experience of consumers across NSW.

In this context, WNSW PHN is leading the development of a White Paper on care in the community on behalf of the Joint Statement members. This includes undertaking an environmental scan into existing care in the community initiatives, proposing new models of community-based care for consideration, and developing a set of recommendations on the role of PHNs in delivering care in the community.

As a strategically important document, it will be critical that the development of the White Paper:

- Builds consensus between NSW PHNs and all parties to the Joint Statement. Effective facilitation of the process to develop the White Paper will be crucial to build alignment. This will mean that the White Paper is able to guide collaborative action between parties moving forward.
- Identifies and promotes innovative and leading practice models for care in the community. This White Paper is a key opportunity to draw on examples of effective community care initiatives and drive the implementation of leading practice approaches across NSW.
- Identifies practical opportunities for collaborative approaches to the delivery of care in the community. By providing practical recommendations, the White Paper will be able to drive action and collaboration between the parties moving forward.
- Clearly articulates the role and responsibilities of the various parties to the Joint Statement, including outlining the role for PHNs in the delivery of community care. This includes highlighting the unique strengths offered by PHNs in understanding local community needs, working with provider markets and commissioning services effectively. This also means taking into consideration the appropriate resourcing required to enable PHNs to perform this role.

The project has been set out over four stages:

- Mobilisation: Establishing project foundations, confirmation of project objectives, agreement on approach and ways of working.
- Environmental Scan: Understanding the current state of community-based health services across NSW and best-practice examples of alternative models of care.
- Working Group Facilitation and Support: Supporting the working group to define and determine what community care should look like under a “one health system” approach.
- Development: Development of the White Paper that outlines realistic and achievable, yet innovative models of care in the community.



# **APPENDIX 1**

## FINANCIALS

**WESTERN HEALTH ALLIANCE LIMITED**  
**(a company limited by guarantee)**  
**ABN 59 605 922 156**

**STATEMENT OF COMPREHENSIVE INCOME**  
**FOR THE YEAR ENDED 30 JUNE 2022**

	Notes	2022 \$	2021 \$
Revenue	2	50,173,873	39,638,438
Service supplier expenses		(39,316,611)	(29,387,886)
Employee expenses		(7,308,681)	(7,436,727)
Interest expense	3	(39,891)	(45,652)
Information technology and communication		(637,845)	(529,542)
Travel expenses		(121,971)	(188,562)
Property expenses		(112,938)	(77,425)
Council payments		(40,351)	(70,180)
Program delivery expenses		(1,380,150)	(879,516)
Motor vehicle expenses		(60,734)	(51,185)
Depreciation expense	3	(350,223)	(340,567)
Other expenses	3	(745,939)	(313,378)
<b>Surplus for the year</b>		<u>\$58,539</u>	<u>\$317,818</u>



**WESTERN HEALTH ALLIANCE LIMITED**  
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ABN 59 605 922 156

**STATEMENT OF FINANCIAL POSITION**  
**AS AT 30 JUNE 2022**

	Notes	2022 \$	2021 \$
<b>ASSETS</b>			
<b>CURRENT ASSETS</b>			
Cash and cash equivalents	4	28,036,660	20,972,486
Trade and other receivables	5	2,135,386	1,131,661
Other assets	6	226,534	334,507
<b>TOTAL CURRENT ASSETS</b>		<b>30,398,580</b>	<b>22,438,654</b>
<b>NON-CURRENT ASSETS</b>			
Property, plant and equipment	7	-	-
Right of use assets	8	839,359	871,698
<b>TOTAL NON-CURRENT ASSETS</b>		<b>839,359</b>	<b>871,698</b>
<b>TOTAL ASSETS</b>		<b>31,237,939</b>	<b>23,310,352</b>
<b>LIABILITIES</b>			
<b>CURRENT LIABILITIES</b>			
Trade and other payables	9	13,348,748	5,420,386
Lease liabilities	10	336,012	858,034
Provisions	11	607,250	714,797
Contract liabilities	12	14,112,333	14,052,566
<b>TOTAL CURRENT LIABILITIES</b>		<b>28,404,343</b>	<b>21,045,783</b>
<b>NON-CURRENT LIABILITIES</b>			
Lease liabilities	10	519,609	13,664
Provisions	11	138,438	133,895
<b>TOTAL NON-CURRENT LIABILITIES</b>		<b>658,047</b>	<b>147,559</b>
<b>TOTAL LIABILITIES</b>		<b>29,062,390</b>	<b>21,193,342</b>
<b>NET ASSETS</b>		<b>2,175,549</b>	<b>\$2,117,010</b>
<b>EQUITY</b>			
Retained earnings		2,175,549	2,117,010
<b>TOTAL EQUITY</b>		<b>\$2,175,549</b>	<b>\$2,117,010</b>

**WESTERN HEALTH ALLIANCE LIMITED**  
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ABN 59 605 922 156

**STATEMENT OF CHANGES IN EQUITY  
FOR THE YEAR ENDED 30 JUNE 2022**

	Retained Earnings \$	Total \$
Balance at 1 July 2020	1,799,192	1,799,192
Surplus for the year	317,818	317,818
	<hr/>	<hr/>
Balance at 30 June 2021	2,117,010	2,117,010
Surplus for the year	58,539	58,539
	<hr/>	<hr/>
Balance at 30 June 2022	\$2,175,549	\$2,175,549
	<hr/>	<hr/>

**WESTERN HEALTH ALLIANCE LIMITED**  
(a company limited by guarantee)  
ABN 59 605 922 156

**STATEMENT OF CASH FLOWS  
FOR THE YEAR ENDED 30 JUNE 2022**

	2022 \$	2021 \$
<b>CASH FLOWS FROM OPERATING ACTIVITIES</b>		
Grant moneys received	54,626,116	45,090,159
Receipts from customers	83,888	110,204
Interest received	86,299	175,798
Payments to suppliers and employees	(47,342,016)	(44,683,767)
	<hr/>	<hr/>
<b>Net cash flows provided by operating activities (Note 14.2)</b>	7,454,287	692,394
	<hr/>	<hr/>
<b>CASH FLOWS FROM INVESTING ACTIVITIES</b>	-	-
	<hr/>	<hr/>
<b>CASH FLOWS FROM FINANCING ACTIVITIES</b>		
Proceeds from right of use asset leases	16,615	17,203
Repayment of right of use asset leases	(406,728)	(400,323)
	<hr/>	<hr/>
<b>Net cash flows used in investing activities</b>	(390,113)	(383,120)
	<hr/>	<hr/>
Net increase in cash and cash equivalents	7,064,174	309,274
Cash and cash equivalents at the beginning of the year	20,972,486	20,663,212
	<hr/>	<hr/>
<b>CASH AND CASH EQUIVALENTS AT THE  END OF THE YEAR (Note 14.1)</b>	\$28,036,660	\$20,972,486
	<hr/>	<hr/>







**phn**  
WESTERN NSW

An Australian Government Initiative

**WESTERN NSW  
PRIMARY HEALTH NETWORK**

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