



SUPPORTING HEALTHY AGEING
THE ROLE OF PHNs

WHITE PAPER [SUMMARY]

PHN

Acknowledgement

This document is a summary of the White Paper titled 'Supporting Healthy Ageing: The role of PHNs'.

All 31 PHNs support the directions and views expressed in this White Paper and have contributed through comments, case studies and revisions. Brisbane North PHN was the lead PHN with key input from Central Queensland, Wide Bay, Sunshine Coast PHN, North West Melbourne PHN, Nepean Blue Mountains PHN, Brisbane South PHN, Central and Eastern Sydney PHN and other members of the CEO Cooperative Healthy Ageing Working Group.

We acknowledge the traditional custodians of country throughout Australia and recognise their continuing connection to land, waters and community. We pay our respects to them and their cultures; and to Elders both past and present.

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Recommendations

The Supporting Healthy Ageing: the role of PHNs paper identifies the current and potential roles of PHNs in supporting healthy ageing and creates the blueprint for the PHN Cooperative to lead and engage with the Healthy Ageing agenda. It calls for government to use the existing national infrastructure and expertise of the 31 PHNs by investing appropriately in their capacity to realise the vision of enhancing the health and wellbeing of older people through the adoption of well-connected, place-based and person-centred strategies and approaches.

PHNs have implemented a broad range of programs and activities that seek to improve the health of older people within their regions.

- PHNs are embedded within their local communities to act as planners, commissioners, innovators and integrators for services in their region
- PHNs have built a body of evidence that demonstrates their capacity for understanding, analysing and prioritising local needs, and collaboratively developing localised responses to meeting those needs
- PHNs have a particular focus on vulnerable populations – the people most likely to miss out on the opportunity to access and engage with health and aged care services

This places PHNs in a strong position to contribute to improving consumer journeys into, within, and between the health and aged care systems.

In responding to the Royal Commission into Aged Care Quality and Safety, the Government has committed \$17.7 billion to an aged care reform package in the 2021-22 Federal Budget. The package includes specific funding for Primary Health Networks (PHNs). The report of the Royal Commission, and other recent national reports, clearly articulate the need for reform that supports older people having the same rights to quality health care as other Australians. They also highlight the essential role of person-centred approaches that support older people to manage their health and wellbeing and to engage effectively with the health and aged care sectors when required.

This context provides a significant opportunity for PHNs to deliver coordinated responses to enhance integration of health and aged care services within their regions and to contribute to improvements in the health and wellbeing of older people.

It is recommended that PHNs:

- use the roadmap outlined in this paper to guide plans for building on their existing capabilities
- consider and integrate approaches within all relevant PHN funding streams to address the specific needs of older people (horizontal integration)

It is recommended that the federal Government:

- leverage the existing national infrastructure and expertise of the 31 PHNs to drive relevant aged care and primary health reform and improvement initiatives
- support PHNs through funding to take on additional activities and resource increased capability development

It is recommended that Government and other key stakeholders in the health of older people:

- recognise the national PHN network as a willing and capable partner

Background

Purpose of this document

The Supporting Health Ageing: The role of PHNs paper highlights the capabilities of the national PHN network. It also discusses future roles and opportunities for PHNs and outlines a roadmap for progressive implementation. This Summary provides a brief overview of the full document.

National context

- **our ageing population:** Australians aged 65 years and over continue to grow in number and as an increasing proportion of our total population
- **ageing and health:** improvements in life expectancy have increased the risk of years of life lived with chronic disease, frailty, memory and mobility disorders with the resulting need for more complex social and health care¹²
- **changing demand and preferences:** changing demographics, alongside increasing health and care needs and changing expectations of older people and society, affect demand for, and types of care required. Changes include greater demand for a variety of care choices, and the desire of older people to remain in their homes and communities for as long as possible³
- **Royal Commission into Aged Care Quality and Safety:** The Royal Commission (established in October 2018) found:
 - people receiving aged care, particularly those in residential aged care, do not consistently receive the health care they need (e.g. doctor visits, mental and oral health services)
 - responsibilities of aged care and health care providers to deliver health care for people in aged care are unclear. Inadequate communication between them compounds problems
 - gaps in care occur when older people transition between multiple health and social care systems. These are intensified by individual circumstances such as where people live, their physical or mental health needs, financial capacity, culturally and linguistically diverse needs, and technology access and literacy.⁴
- **the interface between the aged care, health and disability systems:** A national analysis of needs and stocktake of programs to support transitions between the aged care, health and disability systems identified the need for more programs that provide:
 - support for people accessing information and navigating the aged and health care systems
 - services that are culturally safe for Aboriginal and Torres Strait Islander people, people from culturally and linguistically diverse backgrounds, refugees, and LGBTIQ+ communities
 - increased access to preventative care and early intervention rehabilitative care and support services
 - support for people to travel to appointments
 - support for information sharing to facilitate clinical handover between aged care and health care providers⁵
- **Productivity Commission findings:** Both their *Innovations in Care for Chronic Health Conditions*⁶ and *Inquiry into Mental Health*⁷ clearly articulate the need for reform that supports older people having the same rights to quality health care as other Australians. They also highlight the essential role of person-centred approaches that support older people to manage their health and wellbeing and to engage effectively with the health and aged care sectors when required.
- **PHNs:** Across Australia, PHNs have implemented a broad range of programs and activities to improve the health of older people within their regions. Embedded within their local communities, PHNs act as planners,

1 Australian Institute of Health and Welfare, 2020

2 Australian Medical Association, 2021

3 Royal Commission into Aged Care Quality and Safety, 2021

4 Royal Commission into Aged Care Quality and Safety, 2021

5 Nous Group, 2020

6 Productivity Commission, 2021

7 Productivity Commission, 2020

commissioners, and integrators for services in their region.

They have built a body of evidence that demonstrates their capacity for understanding, analysing and prioritising local needs, and collaboratively developing localised responses to meeting those needs. PHNs have a particular focus on vulnerable populations, which places them in a strong position to contribute to improving consumer journeys into, within, and between the health and aged care systems.⁸

The Government committed \$17.7 billion to an aged care reform package in the 2021-22 Federal Budget, which includes specific funding for PHNs. It provides a significant opportunity for PHNs to deliver coordinated responses to address many of the issues identified above, and to enhance integration of health and aged care services within their regions thereby contributing to improvements in the health and wellbeing of older people.

Current PHN aged care priority

The Commonwealth Department of Health has nominated seven priority areas for the PHN Program. They are:

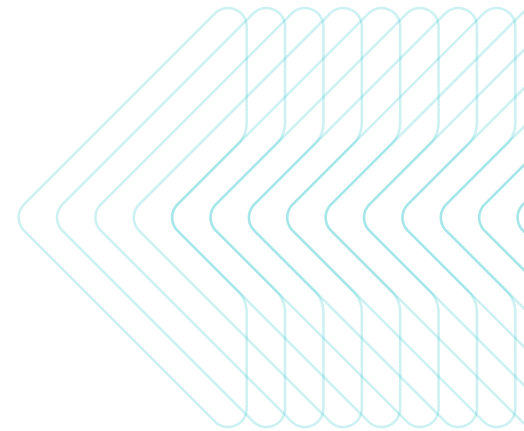
- Mental Health
- Aboriginal and Torres Strait Islander Health
- Population Health
- Workforce
- Digital Health
- Aged Care
- Alcohol and Other Drugs⁹

Limited funding has been allocated to PHNs to directly respond to Aged Care as a priority. Generally, PHNs have identified and addressed local needs relating to older populations through Flexible or Health/System Improvement funding sources, which constitute a relatively small proportion of the total funding PHNs receive to address the range of local needs across the seven priority areas.

Some of the specific funding allocations to PHNs, together with additional funding streams successfully secured by PHNs, and outcomes of local needs assessments has resulted in variability

in access to resources and therefore the amount of focus on addressing the needs of older people that has been possible for PHNs across the country.

Greater equity and a national approach, implemented locally through the PHNs to meet the needs and expectations of older people in their communities, is required.



8 Australian Health and Hospitals Association, 2015
9 Australian Government Department of Health, 2018

Healthy ageing – future role for PHNs

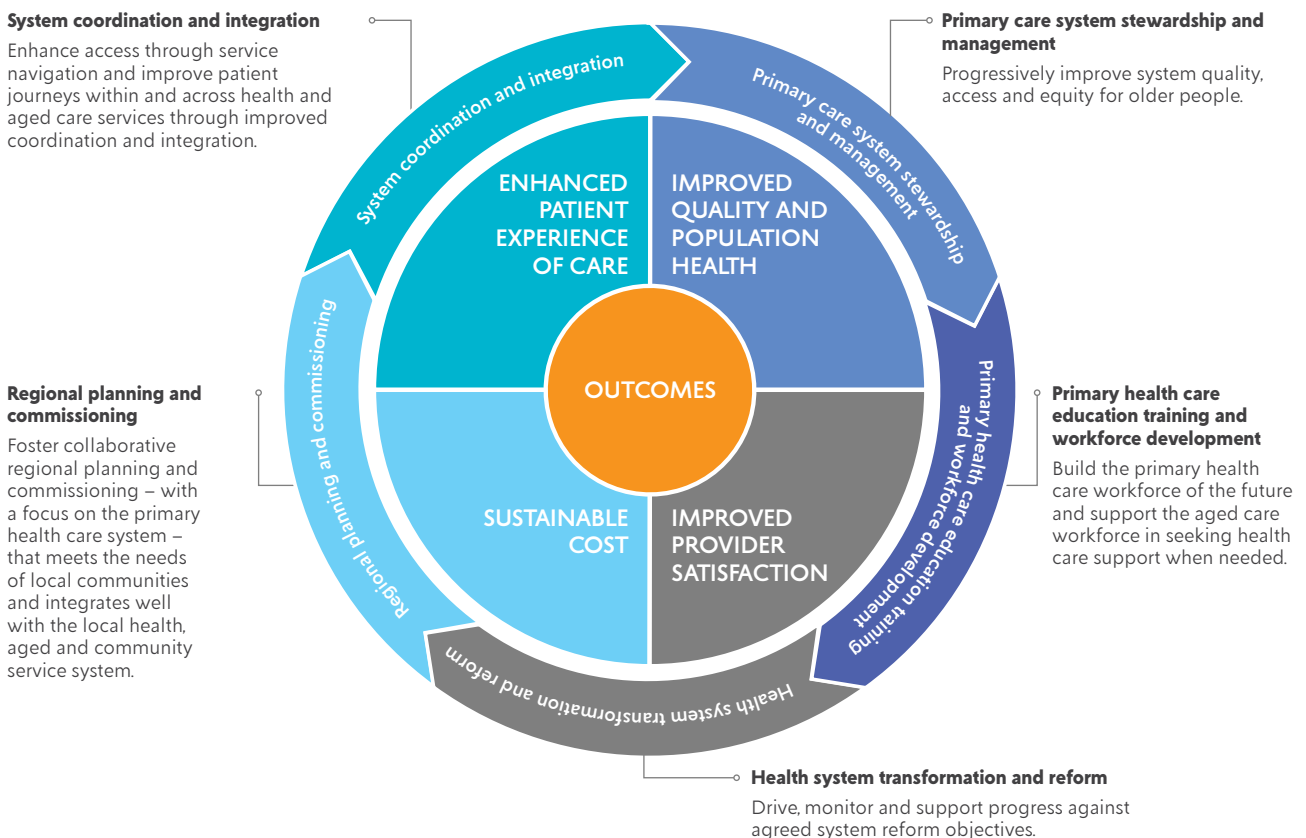
Changing demographics resulting in rising needs for high quality health and aged care services, community expectations, and the reforms arising from the recommendations of the Royal Commission and 2021 Federal Budget, mean that the potential for PHNs to extend their role in relation to the health of older people is significant. Using the roles outlined in the PHNs of the Future White Paper, opportunities for PHNs to build on current work and capabilities to address health and service system challenges are identified below.

National PHN Network Purpose Statement (Preliminary)

The PHN Program furthers an integrated, coordinated primary health care system that delivers high quality, patient centred care.

PHNs are the experts on the primary health needs of their region and the central drivers for reform, integration and equitable access across its health and social care system. As regional commissioners, they reduce fragmentation and address unmet needs working with Local Health Networks, Local Health Districts and other partners through innovative and consistent service delivery. PHNs support the health care workforce to build capacity and capability and are positioned to support coordinated primary health care responses to emergency and natural disasters.

OUR ROLES



OUR ENABLERS

<p>Governance Effective and inclusive governance that facilitates a coordinated approach from planning to evaluation.</p>	<p>Relationships and Alliances Enduring relationships within and across sectors, and all levels of government</p>	<p>Health and System Intelligence Embedded data to support commissioning drive continuing quality improvement and demonstrate outcomes</p>	<p>Investment and Financing Adequate investment that leverages existing funding and reflects the integrated nature of care</p>	<p>Freedom to Innovate Autonomy to adapt system elements to meet regional need, reduce barriers and eliminate perverse incentives</p>
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* Department of Health

Scope

In relation to the Aged Care priority as currently defined by the Department of Health, PHNs have determined their focus should be on the health of older people, rather than the care of older people (e.g. services provided through the Australian Aged Care Program).

The scope implies PHNs will focus on a broad range of activities that contribute to healthy ageing, such as:

- health promotion and disease prevention
- increasing access to and quality of primary health care services for older people
- improving integration and coordination across the aged care and health care sectors
- workforce education
- supporting comprehensive, coordinated, evidence-based interdisciplinary health care, and
- working with communities to ensure that health and aged care services reach and are accessible and appropriate to the needs of older persons in our regions.

While the focus of PHNs is on the health of older people, an understanding and appreciation of the context and impact of the care of older people on their health and wellbeing will underpin all PHN responses.

PHN roles

System coordination and integration

Despite the best endeavours of both the Commonwealth and States/Territories, the health system that confronts older Australians is complex and fragmented. Available services can be difficult to access, confusing for service users and their advocates, and in most cases, lacking in the information that older people need to make well informed decisions about their health needs.

Silos and blocks between primary health care, aged care and the acute health care sectors lead to unnecessary hospital presentations, fragmentation of care, and communication breakdowns. Lack of access to specialist clinical expertise (including palliative care) also contributes to unnecessary transfers from the aged care system into the acute health system.

Opportunities

PHNs can continue to:

- identify innovation and improve communication, coordination and integration of services
- consider how access and appropriateness of existing primary health care services may be improved for older people

In addition, specific opportunities were identified in the 2021 Federal Budget, which recognised the significant coordination and integration role that PHNs will lead utilising funds allocated for:

- development of local dementia care pathways which support General Practitioners to refer patients to the support they need
- enhanced support and face-to-face services to assist senior Australians accessing and navigating the aged care system. This will include a network of Community Care Finders who will help to access and navigate aged care services and other supports at the local community level.

PHNs to procure and manage these services in their communities. This commissioning will benefit from PHN's significant knowledge of local service networks, characteristics of their populations – particularly those vulnerable populations, and PHN's experience in service navigation and pathways development and implementation. Additionally, the data and intelligence gathered from the Community Care Finder and navigation process will continue to inform the further development and refinement of the PHNs' commissioning activities to ensure that older people's expectations and experience are central to the design and redesign of commissioned services.

- monitoring the impact of streamlining the current assessment process for aged care to identify gaps in system accessibility and opportunities for improved coordination, integration and reform
- PHNs can work collaboratively with local Commonwealth Department of Health teams being established in eight PHN regions to demonstrate the value of PHN's regional presence to improve rural and regional stewardship of aged care in the initial rollout stage.

Regional planning and commissioning

As people age, their frequency of engagement with the primary health system increases, with 98.3 per cent of older Australians seeing a GP in the last year. In fact, more than 90 per cent of people aged over 65 years have a regular General Practitioner and people aged over 85 years were almost five times more likely to see a GP on 12 or more occasions than those aged between 15 and 24¹⁰ years. Primary health care is extremely important in caring for and managing the health concerns of older people.

The Royal Commission into Aged Care Quality and Safety identified that one of the key causes of substandard care in aged care is people are not consistently receiving the health care they need.¹¹

Equitable health and aged care systems require service availability for all eligible people on the basis of need. A regional planning approach is essential to ensuring that funded services and activities meet the needs and priority of each local community – including the needs of older people from marginalised groups. PHNs have evidenced that regionally designed, delivered, and evaluated models of service tend to have maximum impact and integrate well with other parts of the local health and community service system.¹²

Opportunities

The 2021 Federal Budget included an announcement that “Primary Health Networks will ... utilise their regional expertise and on the ground capabilities to support the health of senior Australians” through:

- telehealth care for aged care residents
- enhanced out of hours support for residential aged care
- early monitoring and identification of health needs to support people to live at home for longer.

The specific allocation of funds to PHNs for these purposes will enable all PHNs to generate more specific data and intelligence to commission appropriate services to enhance the availability of, and equitable access to, appropriate health services designed with the expectations and experiences of older people inbuilt.

PHNs will continue to integrate and commission services to meet the needs and expectations of older people within existing priority areas such as alcohol and other drugs, mental health, and chronic conditions.

PHNs have a role in commissioning early intervention and prevention services to address risk factors early and deferring the need for older people to access aged care services for as long as possible.

Primary health care system stewardship and management (quality)

Older people accessing Commonwealth-funded aged care services have complex co-morbidities, are frailer, and generally experience poorer health than peers of a similar age who are living in the community without services. People receiving aged care services, particularly in residential aged care, have inadequate access to pharmacists and medication review, despite being higher users of medicines. There is limited access to services from allied health professionals and mental health services tend to focus on acute, severe or complex mental health issues at the expense of prevention, early intervention or treating milder forms of mental illness and/or social isolation.¹³

The quality of health care, and its coordination for older people is critically important. Quality care includes ensuring accessibility to relevant information – such as through the My Health Record and Advance Care Directives – as people transition between health and aged care systems. Improving the quality of care through supporting innovation, adding to the evidence-base, and translating research into practice can have a significant impact on older people’s health journey and outcomes.

Opportunities

The use of data to inform quality improvement activities for specific population groups, and health conditions – including the management of chronic conditions in primary health care for older people is an important role of the partnership between PHN and general practice. Significant opportunities remain for PHNs to continue this work.

10 The Royal Australian College of General Practitioners, 2017

11 Royal Commission into Aged Care Quality and Safety, 2021

12 National PHN Cooperative submission - Counsel Assisting's final submissions to the Royal Commission into Aged Care Quality and Safety

13 Royal Commission into Aged Care Quality and Safety, 2021

Potential primary health reforms such as voluntary patient registration and an increased focus on prevention across the lifecycle will provide an opportunity for PHNs to apply knowledge gained through involvement in the Health Care Homes pilot and other patient centred medical home models to assist general practices to deliver enhanced person-centred, value-driven approaches to the health care of older people.

There are opportunities for PHNs to continue to support health and aged care providers in the use of digital technologies to improve integration and transitions of care. The use of digital technologies are also relevant to the sharing of Advance Care Directives and care plans – including plans for end-of-life care – between relevant health and aged care providers.

Furthermore, planned increases in investment such as the Medical Research Future Fund – Dementia, Ageing and Aged Care Mission, provide ongoing opportunities for PHNs to translate research findings into practice across the continuum of care from preventive care through to palliative care.

Primary health care education, training and workforce development

The ageing population creates an ongoing need for the health and aged care workforces to possess and/or develop relevant skills related to increases in the complexity of health care for older Australians. These include skills in relation to (but not limited to) dementia care, palliative care, mental health, medication management, caring for diverse populations and wound management.¹⁴

Workforce shortages – particularly in rural, regional and remote Australia – escalate the need to ensure the available workforce has access to relevant opportunities for education, training and ongoing workforce development.

It is not the role of PHNs to address the full range of workforce education and training required by workers in the aged care sector, however PHNs play an important role in building capability within their region to understand the primary health needs of older people, and to develop and provide education on local clinical and service pathways.

Capability building of this nature enables the

workforce involved in the care of older people to provide an appropriate primary response within their relevant scope of practice and to know how to refer or seek additional health care support (e.g. specialist services) when required.

PHNs are uniquely positioned to understand and respond to the needs of the communities in which they operate, to identify education and workforce development needs, and to facilitate cross-sectoral collaboration between researchers and practitioners across the primary health care, acute care and aged care interface.

Opportunities

PHNs can continue and/or enhance the delivery of ongoing professional development activities for general practices, allied health practitioners and other primary health care staff.

Needs assessments, as part of PHN commissioning cycles, provide an opportunity to identify capability gaps and training needs.

The 2021 Federal Budget allocation of funding for the development of dementia care pathways will provide an opportunity for educating the local primary health care workforces in their use.

As new technologies emerge – e.g. Project ECHO, decision support tools – PHNs can play an important role in educating the workforce about their availability and use.

PHNs can also use their local partnerships to continue to foster knowledge sharing, support networks and collaboratives, and related activities that build the capability of the local workforce in relation to improving the health of older persons.

Health system transformation and reform

The Royal Commission into Aged Care Quality and Safety highlighted many gaps and challenges in system navigation, delivery of coordinated care, and provision of high-quality clinical care to older people in the aged care system.

The recommendations of the Royal Commission and the work underway by the Primary Health Reform Steering Group in relation to the development of the Australian Government's Primary Health Care 10 year Plan identify the

¹⁴ Royal Commission into Aged Care Quality and Safety, 2021

need for health system reform in the face of the growing number of Australians with chronic conditions, mental health needs and frailty.¹⁵

There is agreement across numerous reports that our health and aged care systems need reform to re-orient them towards promoting wellbeing, preventing illness, undertaking early detection and responding with early and coordinated intervention in a timely way to alter disease trajectories and ongoing care needs.

PHNs are well placed to play a significant role in these health system transformation and reform agendas and therefore to improve the health outcomes and care journeys of older people in their regions.

Opportunities

There are a range of opportunities for PHNs to continue, extend and add to existing capabilities that will support their role in health system transformation and reform.

- working at a system level to improve transitions of care and support consumers, the community, and health and community service professionals to access and navigate the aged and health care systems through supports that increase choice and control
- developing and implementing innovative solutions to monitoring and identifying health needs
- commissioning a single assessment workforce
- supporting workforce education and change
- supporting general practices to enhance person-centred, integrated models of chronic disease management for older persons
- provide ongoing strategic and policy advice to commonwealth and state governments to influence decisions and reform directions at the interface of health and aged care
- underpin PHN and government reform-related decisions with advanced data analytics capacity at local, regional, state and national level.

System enablers

The PHNs of the Future White Paper reported that Australian PHN activities and best practice examples from global literature consistently

identified five key enablers for success which are clearly recognised in, and generalisable to, the Australian context.¹⁶

As part of the development of this paper, these enablers have been reviewed and are considered equally relevant in the delivery of PHN work to support the health of older people.

1. Governance – effective and inclusive governance that facilitates a coordinated approach from planning to evaluation
2. Relationships and alliances – ensuring relationships within and across sectors, and all levels of government, business and community
3. Health and system intelligence – embedded data to support commissioning, drive continuing quality improvement and demonstrate consumer experience and outcomes
4. Investment and financing – adequate investment that leverages existing funding and reflects the integrated nature of care
5. Freedom to innovate – autonomy to adapt system elements to meet regional need, consumer expectation, reduce barriers and eliminate perverse incentives

Roadmap for the future

This roadmap identifies outcomes that PHNs aspire to achieve to support healthy ageing in their regions. It provides a plan for building existing capabilities across the PHN network and taking up specific opportunities that have been identified in the Royal Commission and 2021 Federal Budget aged care reform initiatives. We would welcome the opportunity to take up additional funding and partnership opportunities along the way.

The roadmap is expressed in terms of three broad horizons for activities. Different PHNs may spend longer in some horizons than others depending on the starting point for their journey. The third horizon identifies capacities and actions to consolidate, enhance, evaluate and mature service and system responses to improve the quality of life experienced by older people in our regions.

15 Primary Health Reform Steering Group
16 PHN Cooperative, 2020

ROADMAP FOR THE FUTURE



HORIZON 1

HORIZON 2

HORIZON 3

System Coordination and Integration

Outcomes:

Better information for consumers and carers to inform choice and decision making

Easier access to services across the continuum of care

Improved journeys for older Australians across health and aged care services

Improved communication among, and interaction between, service providers to support high quality health and aged care

- Build relationships to improve regional service coordination and integration
- Identify and prioritise local needs and service gaps with/for older people
- Identify and co-design local service responses with/for older people
- Use local networks and knowledge to troubleshoot and find solutions
- Consider how access and appropriateness of existing primary healthcare services may be improved for older people
- Support improved communication, coordination and referral between aged care and primary health care providers (e.g. development of local dementia care pathways)
- Build capacity, coordinate and adopt local responses to emergency management situations that impact the health of older people (and others) in the community

- Commission Community Care Finders – 2023 to enhance service navigation supports
- Collaborate closely with and/or commission single assessment workforce from 2023 to monitor local impact of changes and opportunities for system integration and collaboration
- Work with the ADHA to support adoption of digital technologies for transitions between aged care and health care services

- Strengthen and expand service navigation roles
- Enhance use of data and intelligence from care finding roles to place older people's needs, expectations and experience at the centre of system design and service commissioning.
- Increase the system focus on prevention, screening and early intervention to support healthy ageing
- Use knowledge and relationships to continue to enhance system coordination and integration across health and aged care services



HORIZON 1

HORIZON 2

HORIZON 3

Regional Planning and Commissioning

Outcomes:

Older people have equitable access to primary health care.

Health and aged care services are available for older people on the basis of need.

The mix of health and aged care services is appropriate for the population and services are well integrated.

- Undertake regional needs assessment and planning
- Lead market development activities to build local capacity to respond to commissioning opportunities
- Commission services in response to identified primary health care service gaps
- Influence and shape the supply of local services
- Manage contracts to ensure the optimal delivery of commissioned services to address community needs and service gaps
- Evaluate provider performance and consumer-related outcomes
- Support the use of telehealth care for aged care residents
- Enhance out of hours support for residential aged care
- Commission innovative models for monitoring and identifying health needs to support people to live at home for longer
- Integrate and commission services within existing priority areas such as alcohol and other drugs, mental health and chronic conditions

- Increased commissioning of early intervention and prevention services to address risk factors to delay the need for aged care services
- Enhance data intelligence and analysis capabilities to monitor health and service needs, and evaluate commissioning outcomes

- Enhance collaborative commissioning models that foster integration between the health, aged care and community service systems.



HORIZON 1

HORIZON 2

HORIZON 3

Primary health care system stewardship and management (quality)

Outcomes:

Older people have equitable access to high quality primary health care.

The quality of services are monitored and continuous quality improvement drives improvements in system performance and outcomes.

Providers are supported in the use of new technologies (e.g. digital health, new funding models).

Evidence from research is translated into practice in a timely way.

- Improve the delivery of health services to older people in residential aged care facilities
- Drive ongoing improvements in health care systems and service delivery
- Identify opportunities to improve system performance and outcomes
- Identify and respond to the needs of under-served groups in the community
- Ensure equity of access to services for all older people
- Support health and aged care services in the use of digital technologies to share Advance Care Directives and care plans

- Enhance the collective capability of PHNs to use data to improve the quality of care provided by general practices to older people
- Support increased use of screening tools to aid early identification of issues that adversely impact health and the need for increased use of aged care services
- Assist general practices to implement reforms such as voluntary patient registration to deliver enhanced preventative and person-centred care

- Increase translation of research findings into practice
- Continue to innovate, develop and implement strategies to support primary health care quality improvements.



HORIZON 1

HORIZON 2

HORIZON 3

Primary health care education, training and workforce development

Outcomes:

The primary health care workforce has access to education and training relevant to the specific needs of older people.

The local aged care workforce know how to refer or seek health care support when required.

Workforce education and development needs are understood and communicated

Cross-sectoral collaborations between research and practitioners foster knowledge sharing and translation of research into practice.

- Build primary health care workforce capacity and capability to address the health needs of older people
- Identify workforce education and training needs and lead ongoing professional development activities
- Provide education in the use of HealthPathways
- Support general practices to implement continuous improvement activities (PIP-QI)
- Collaborate with rural workforce agencies to identify workforce needs and plan and deliver workforce solutions
- Facilitate the sharing of knowledge and support the translation of research evidence into practice

- Educate the workforce in the use of new technologies as they emerge – e.g. decision support tools, assistive technologies
- Adopt emerging technologies/models for meeting relevant primary health care education and training consistent with changing workforce preferences and needs

- Enhance cross-sectoral partnerships and collaborations to foster knowledge sharing, research and translation



HORIZON 1

HORIZON 2

HORIZON 3

Health system transformation and reform

Outcomes:

PHNs play a key role in driving and supporting health system transformation and reform in their regions.

Older people experience improvements in choice and in their quality of life.

- Foster close working relationships within communities and across health and aged care sectors
- Use commissioning expertise and knowledge to address local needs and priorities
- Co-design and pilot new solutions/service models
- Provide strategic advice to Commonwealth and State/Territory governments to influence decisions and reform directions at the interface of health and aged care

- Build PHN evaluation capabilities
- Provision of Community Care Finder services – from 2023
- Commissioning a single assessment workforce – from 2023
- Support workforce education and change
- Support general practices to enhance person-centred, integrated models of chronic disease management for older people (esp. as primary health reforms such as voluntary patient registration are introduced)
- Underpin PHN and government reform-related decisions with advanced data analytics capacity.

- Increase engagement and partnerships with research institutions
- Enhance monitoring and analysis of the local impacts of system reform initiatives.

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SUPPORTING HEALTHY AGEING
THE ROLE OF PHNs

WHITE PAPER [SUMMARY]

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