# Brisbane North - PHN Pilots and Targeted Programs 2024/25 - 2027/28 Activity Summary View



# PP&TP-GCPC - 2000 - PHN Palliative Care — Greater Choice for At Home Palliative Care (GCfAHPC)



#### **Activity Metadata**

Applicable Schedule \*

**PHN Pilots and Targeted Programs** 

Activity Prefix \*

PP&TP-GCPC

Activity Number \*

2000

**Activity Title \*** 

PHN Palliative Care - Greater Choice for At Home Palliative Care (GCfAHPC)

Existing, Modified or New Activity \*

Modified



#### **Activity Priorities and Description**

Program Key Priority Area \*

Other (please provide details)

**Other Program Key Priority Area Description** 

Palliative care

Aim of Activity \*

The World Health Organisation explicitly recognises palliative care under the human right to health. Access to person-centred palliative care reduces unnecessary suffering for the person with a life-limiting condition, trauma for their loved ones, and inappropriate use of health resources. Access to quality palliative care continues to be identified as an important need for the Brisbane North PHN region.

In line with the Greater Choice for At Home Palliative Care overarching outcomes, this activity aims to:

• Continue to strengthen the Brisbane North Community Palliative Care Collaborative with the aim of improving connection

between providers to enhance service responsiveness, integration, quality and coordination of care.

- Continue workforce support and engagement activities to improve the skills, knowledge, and confidence of workers in supporting quality at-home palliative care in the region.
- Commence community development activities to form compassionate communities that enable agency and choice for people with life limiting illness and their loved ones, supported by their community.

#### **Description of Activity \***

#### Brisbane North Community Palliative Care Collaborative

The most frequently cited barrier for access to quality palliative care in Brisbane North PHN region is the siloing of services caused by lack of awareness of and communication between providers. Siloing leads to duplication of efforts and poor continuity of care. These resource inefficiencies prohibit services from being responsive to changing need and have a negative impact on patient experience and outcomes. Timely and accurate information sharing between providers enables responsiveness, integration, and coordination of care.

The Brisbane North Community Palliative Care Collaborative (BNCPCC) is an existing group of cross-sector stakeholders interested in improving community palliative care. Members recognise the power of this group to reduce siloing within the region, however this requires group maturity. Since 2022, work has been undertaken to build relationships within the group, form the group identity and empower the group to undertake shared change initiatives. Whilst benefits have already been realised, ongoing intention and nurturing is required to continue maturing the group before it could be self-sustaining.

#### **Workforce Support**

It is acknowledged that all health, aged care, and disability support workers would benefit from improved knowledge, skills, and confidence in palliative care.

There are currently thirty-eight (38) palliative care projects happening/available targeting different workforce and community groups within the Brisbane North PHN region. To maximise this investment, Brisbane North PHN will strategically target key areas identified by need which are either not being addressed, or will complement existing initiatives.

Targets include, but are not limited to:

- General practice workforce- continuing from the past three years, this workforce will continue centering around one annual event with supporting resources promoted throughout the year.
- Disability support workforce- continuing on from the "improving access to At Home Palliative Care for People with Disability Action Plan" implementation, activities will continue and be enhanced
- Community pharmacy workforce- continuing on the Palliative Care in Community Pharmacy project, and complementing related National Palliative Care Projects, community pharmacies will continue to be supported and engaged.
- Deathcare workforce- Provide opportunity for health and death workers to gain mutual understanding of the respective sectors and available options within the region, to improve continuity of care from diagnosis through bereavement.

#### **Compassionate Communities**

Over the past four-years, interest and momentum has grown locally across Australia and globally, for death literate compassionate communities. Compassionate communities are networks of people willing and able to support fellow community members through palliative care, end of life, and bereavement. It recognises that 95% of time spent caring for a person with a life limiting condition is carried out by informal carers (i.e. non-paid, non-professionals) within that person's network. Death Literacy withinthe Brisbane North PHN regional population is currently unknown.

Creation of a compassionate community is built on a foundation of community development and public health palliative care. Compassionate communities have been shown to benefit the people with life limiting conditions and their loved ones through improved experience of care and wrap-around holistic support. Health system benefits have also been shown through reduced service burden including emergency department presentations.

#### Target Cohort:

The target population for this project is people of all ages within the Brisbane North PHN region with life-limiting conditions, their loved ones, and the people who care (formally and informally) for them, and the communities in which they live.

#### In 2025/26, Brisbane North PHN will:

• Continue to strengthen the Brisbane North Community Palliative Care Collaborative with the aim of improving connection between providers to enhance service responsiveness, integration, quality and coordination of care. This will be achieved through activities that include but are not limited to:

o Facilitating regular meetings

o Hosting an online site to facilitate out-of-session information sharing.

- Continue workforce support and engagement activities to improve the skills, knowledge and confidence of workers in supporting quality at-home palliative care in the region. This will be achieved through activities that include but are not limited to: o Hosting education sessions to upskill health, aged care, and disability support workforces in supporting at-home palliative care o Creating workforce resources to support navigation and sector knowledge about palliative care in the Brisbane North PHN region.
- And commence community development activities to grow compassionate communities that enable agency and choice for people with life limiting illness and their loved ones, supported by their community. This will be achieved through activities that include but are not limited to:
- o Measuring the death literacy of community within the Brisbane North PHN region
- o Collaborating with community to co-design a community development activity plan.

#### Needs Assessment Priorities \*

#### **Needs Assessment**

North Brisbane and Moreton Bay Joint Regional Needs Assessment 2025-27

#### **Priorities**

Priority	Page reference
Population Health - Health Needs Level 1	2-3
Service System - Service Needs Level 1	5



#### **Activity Demographics**

#### **Target Population Cohort**

People of all ages within the Brisbane North PHN region with life-limiting conditions, their loved ones, and the people who care (formally and informally) for them, and the communities in which they live.

In Scope AOD Treatment Type \*

Indigenous Specific \*

Yes

#### **Indigenous Specific Comments**

The Brisbane North Community Palliative Care Collaborative currently has a First Nations representative. Additional consultation, collaboration and partnership with Aboriginal and Torres Strait Islander consumers and service providers will be undertaken as required with each activity to ensure cultural safety and appropriateness.

The Gwandalan Palliative Care Project (a nationally funded Aboriginal and Torres Strait Islander culture upskilling project) will be consulted to identify opportunities for collaboration, integration or promotion with those resource in the context of project work in the Brisbane North region.

#### Coverage

Whole Region

Yes



#### **Activity Consultation and Collaboration**

#### Consultation

The Brisbane North Community Palliative Care Collaborative (BNCPCC) is a group with representatives from local public, private and non-government specialist palliative care services, primary care and community health providers, residential aged care facilities, government-funded palliative projects, universities, and consumers. This group will continue to be a primary advisory body for all activities under the Greater Choice for At Home Palliative Care measure.

Both the Disability and Pharmacy Action Plans being implemented have been created through a co-design process in the previous financial year. All activities under the plans have significant consultation and working group opportunities to work collaboratively with stakeholders.

The Metro North Specialist Palliative Care Service will continue to be engaged to ensure congruence and complement between the Metro North Hospital and Health Service Palliative Care Clinical Service Plan and related strategies and Brisbane North PHNs activities.

State and National palliative projects and schemes have and will continue to be consulted to strategically align to maximise impact and avoid duplication. Initiatives to consult include, but are not limited to, PEPA, IPEPA, ELDAC, Specialist Palliative Care in Aged Care (SPACE), PalAssist, PalConsult, Medical Aid Subsidy Scheme Palliative Equipment Program (MASS PCEP), PCOC, Gwandalan, Caring@home, PalliPHARM, Queensland Voluntary Assisted Dying (VAD) Implementation, End of Life Conversation Simulations, other PHN projects funded by Greater Choice for At Home Palliative Care measure, and other related internal PHN projects.

Organisations engaged and will continue to be engaged include but are not limited to the Office of Advance Care Planning, Advance Care Planning Australia, Palliative Care Queensland, Palliative Care Australia, Cancer Council Queensland, Centre for Palliative Care Research and Education, Residential Aged Care District Assessment and Referral Service (RADAR; Metro North Health) and other PHNs. Public and private residential aged care facilities, public and private hospitals, general practices and other health providers within the region may be consulted on specific aspects throughout the project.

#### Collaboration

The PHN will work as part of the Brisbane North Community Palliative Care Collaborative to shape activities which respond to the prioritised needs of the region. The Brisbane North Community Palliative Care Collaborative will act as an advisory body for all activities, providing collective subject matter expertise.

The PHN will also collaborate with The Metro North Palliative Care Service, private and non-government specialist palliative care services and government funded palliative care projects where appropriate to maximise resource investment, reach and outcomes for the region.

Activities may have steering or working groups, as appropriate. These will sit under the Brisbane North Community Palliative Care Collaborative, unless otherwise specified.



#### **Activity Milestone Details/Duration**

#### **Activity Start Date**

28/11/2021

# Activity End Date 30/10/2025 Service Delivery Start Date Service Delivery End Date Other Relevant Milestones



#### **Activity Commissioning**

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

Not Yet Known: No

**Continuing Service Provider / Contract Extension:** Yes

**Direct Engagement:** No **Open Tender:** No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

Yes

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

No

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

No

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

No

**Decommissioning** 

No

**Decommissioning details?** 

#### **Co-design or co-commissioning comments**

The Brisbane North Community Palliative Care Collaborative (BNCPCC) is a group with representatives from local public, private and non-government specialist palliative care services, primary care and community health providers, residential aged care facilities, government-funded palliative projects, universities, and consumers. The activities undertaken by BNCPCC will be codesigned by the group in conjunction with additional relevant stakeholders.



#### **Activity Planned Expenditure**

#### **Planned Expenditure**

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28
Greater Choice for At Home Palliative Care - Interest	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Greater Choice for At Home Palliative Care	\$0.00	\$462,752.89	\$0.00	\$0.00	\$0.00

#### **Totals**

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Greater Choice for At Home Palliative Care - Interest	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Greater Choice for At Home Palliative Care	\$0.00	\$462,752.89	\$0.00	\$0.00	\$0.00	\$462,752.89
Total	\$0.00	\$462,752.89	\$0.00	\$0.00	\$0.00	\$462,752.89

**Funding From Other Sources - Financial Details** 

**Funding From Other Sources - Organisational Details** 



#### **Activity Comments**

#### **Activity Status**

Submitted

#### **PHN Comments**

Subject	Description	Commented By	Date Created
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#### **Comments from the Department**

Comment	Date Created
Comment	Date Created

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### PP&TP-GP-Ad - 1000 - PP&TP-GP-Ad - PHN Strengthening Medicare – General Practice Grants Administration



#### **Activity Metadata**

#### Applicable Schedule \*

**PHN Pilots and Targeted Programs** 

**Activity Prefix \*** 

PP&TP-GP-Ad

**Activity Number \*** 

1000

**Activity Title \*** 

PP&TP-GP-Ad - PHN Strengthening Medicare – General Practice Grants Administration

Existing, Modified or New Activity \*

Existing



#### **Activity Priorities and Description**

#### Program Key Priority Area \*

Other (please provide details)

#### Other Program Key Priority Area Description

Primary and Community Care Quality Improvement

Aim of Activity \*

This represents the admin/operational component for this activity. All content specific information is in the associated activity.

**Description of Activity \*** 

This represents the admin/operational component for this activity. All content specific information is in the associated activity.

#### Needs Assessment Priorities \*

#### **Needs Assessment**

North Brisbane and Moreton Bay Joint Regional Needs Assessment 2025-27

#### **Priorities**

Priority	Page reference
Service System - Service Needs Level 1	5



#### **Activity Demographics**

#### **Target Population Cohort**

This represents the admin/operational component for this activity. All content specific information is in the associated activity.

In Scope AOD Treatment Type \*

Indigenous Specific \*

No

**Indigenous Specific Comments** 

#### Coverage

**Whole Region** 

Yes



#### **Activity Consultation and Collaboration**

#### Consultation

This represents the admin/operational component for this activity. All content specific information is in the associated activity.

#### Collaboration

This represents the admin/operational component for this activity. All content specific information is in the associated activity.



#### **Activity Milestone Details/Duration**

#### **Activity Start Date**

29/03/2023

**Activity End Date** 

29/06/2025

**Service Delivery Start Date** 

**Service Delivery End Date** 

**Other Relevant Milestones** 



#### **Activity Commissioning**

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: No

**Direct Engagement:** Yes **Open Tender:** No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

No

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

No

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

No

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

No

**Decommissioning** 

No

Decommissioning details?

Co-design or co-commissioning comments



#### **Activity Planned Expenditure**

#### **Planned Expenditure**

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28
Interest - PHN Pilots and Targeted Programs	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN	\$0.00	\$39,625.15	\$0.00	\$0.00	\$0.00

Strengthening			
Medicare –			
General			
Practice			
Grants			
Program -			
Admin			

#### **Totals**

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Interest - PHN Pilots and Targeted Programs	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Strengthening Medicare – General Practice Grants Program - Admin	\$0.00	\$39,625.15	\$0.00	\$0.00	\$0.00	\$39,625.15
Total	\$0.00	\$39,625.15	\$0.00	\$0.00	\$0.00	\$39,625.15

**Funding From Other Sources - Financial Details** 

**Funding From Other Sources - Organisational Details** 



#### **Activity Comments**

#### **Activity Status**

Submitted

#### **PHN Comments**

#### **Comments from the Department**

Comment Date Created
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#### PP&TP-EPP - 4000 - Endometriosis & Pelvic Pain Clinics



#### **Activity Metadata**

Applicable Schedule \*

**PHN Pilots and Targeted Programs** 

**Activity Prefix \*** 

PP&TP-EPP

**Activity Number \*** 

4000

**Activity Title \*** 

**Endometriosis & Pelvic Pain Clinics** 

Existing, Modified or New Activity \*

Modified



#### **Activity Priorities and Description**

Program Key Priority Area \*

**Population Health** 

Other Program Key Priority Area Description

#### Aim of Activity \*

Endometriosis affects at least 1 in 9 Australian women and can have an extensive, devastating impact on the daily lives of sufferers. With those suffering waiting an average of seven years before diagnosis. Pelvic pain can be similarly complex and debilitating, with the impact being felt beyond individuals as it is estimated to cost the Australian economy \$6 billion a year. (AIHW).

The 2022-23 Budget committed \$16.4m over four years to support the establishment of targeted Endometriosis and Pelvic Pain (EPP) GP-led Clinics in primary care settings. The intention of these EPP clinics is to maximise the role of the GP-led multidisciplinary care team in the management of endometriosis and pelvic pain, and to embed the GP as a core part of the care pathway for this chronic condition, optimising the role of primary care.

The grant payment aims to:

- improve provision of early diagnosis
- improve treatment and management of endometriosis and pelvic pain

It is expected that these EPP clinics will enable more appropriate and timelier endometriosis care and management, leading to improved diagnosis timeframes and appropriate pain management for impacted patients.

EPP clinic objectives include:

- improved access for patients to diagnostic, treatment and referral services for endometriosis and pelvic pain
- provision of access to new information, support resources, care pathways and networks
- provision of an appropriately trained workforce with expertise in endometriosis and pelvic pain
- directly benefiting patients from rural and regional areas
- providing enhanced support to priority populations
- increased access to support services, either through a nurse navigator or referral pathway.

#### **Description of Activity \***

Two general practices in the North Brisbane and Moreton Bay region will be supported by Brisbane North PHN to deliver the endometriosis and pelvic pain GP grant program.

#### PHN activities include:

- creation of a contract based on the PHN's deed of variation
- development of qualitative and quantitative indicators and support from the PHN for data collection, outcome measures (NB. data provision will be agreed via correspondence after contract execution, as per Department of Health and Aged Care (DoHAC) guidance)
- monitor and report on provider performance against agreed indicators
- participate in national evaluation and reporting activities as requested by DoHAC

General practice activities may include, but are not limited to:

- delivery of services to endometriosis and pelvic pain patients
- advanced training qualifications (incl. further study)
- recruitment of additional practice staff (e.g. allied health, nurse navigators)
- enhanced referral pathways with local providers
- equipment purchase

The target population that will be supported under this DoHAC initiative include:

- individuals of all ages assigned female at birth
- women of all ages
- girls of all ages whom are experiencing endometriosis and pelvic pain; this includes patients without a formal diagnosis.

#### Needs Assessment Priorities \*

#### **Needs Assessment**

North Brisbane and Moreton Bay Joint Regional Needs Assessment 2025-27

#### **Priorities**

Priority	Page reference
Women's Health - Health Needs Level 1	3
Service System - Service Needs Level 1	5



#### **Activity Demographics**

#### **Target Population Cohort**

The target population that will be supported under this DoHAC initiative include:

- individuals of all ages assigned female at birth
- women of all ages
- girls of all ages whom are experiencing endometriosis and pelvic pain; this includes patients without a formal diagnosis.

#### In Scope AOD Treatment Type \*

Indigenous Specific \*

Yes

**Indigenous Specific Comments** 

One of the 2 EPP Clinics is First Nations specific at MATSICHS

Coverage

**Whole Region** 

Yes



#### **Activity Consultation and Collaboration**

#### Consultation

DoHAC led program. General practices were invited to express an interest in participating and were nominated to the DoHAC to determine suitability.

#### Collaboration

Funding was awarded with consideration of GP clinics being able to demonstrate existing expertise in women's health, improving provision of diagnosis, treatment and management of endometriosis and pelvic pain including capability of the healthcare team, a strong understanding of and networks within their local community, and the ability to link to relevant primary and tertiary care services. The DoHAC's Assessment Committee completed the assessment of applications and determined the clinics for each PHN.



#### **Activity Milestone Details/Duration**

**Activity Start Date** 

28/02/2023

**Activity End Date** 

30/12/2026

**Service Delivery Start Date** 

**Service Delivery End Date** 

**Other Relevant Milestones** 



#### **Activity Commissioning**

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: No

**Direct Engagement:** No **Open Tender:** No

Expression Of Interest (EOI): Yes

Other Approach (please provide details): No

Is this activity being co-designed?

No

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

No

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

No

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

No

Decommissioning

No

Decommissioning details?

Co-design or co-commissioning comments



#### **Activity Planned Expenditure**

#### **Planned Expenditure**

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28
Interest - PHN Pilots and Targeted Programs	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Endometriosis and Pelvic Pain GP Clinics	\$0.00	\$360,000.00	\$360,000.00	\$0.00	\$0.00

#### **Totals**

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Interest - PHN Pilots and Targeted Programs	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Endometriosis and Pelvic Pain GP Clinics	\$0.00	\$360,000.00	\$360,000.00	\$0.00	\$0.00	\$720,000.00
Total	\$0.00	\$360,000.00	\$360,000.00	\$0.00	\$0.00	\$720,000.00

**Funding From Other Sources - Financial Details** 

**Funding From Other Sources - Organisational Details** 



#### **Activity Comments**

#### **Activity Status**

Submitted

#### **PHN Comments**

Subject Description	Commented By	Date Created
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#### **Comments from the Department**

Comment Date Created	
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## PP&TP-EPP-Ad - 4001 - Endometriosis & Pelvic Pain Clinics - Admin



#### **Activity Metadata**

Applicable Schedule \*

**PHN Pilots and Targeted Programs** 

**Activity Prefix \*** 

PP&TP-EPP-Ad

**Activity Number \*** 

4001

**Activity Title \*** 

Endometriosis & Pelvic Pain Clinics - Admin

Existing, Modified or New Activity \*

Existing



#### **Activity Priorities and Description**

Program Key Priority Area \*

**Population Health** 

Other Program Key Priority Area Description

Aim of Activity \*

This represents the admin/operational component for this activity. All content specific information is in the associated activity.

**Description of Activity \*** 

This represents the admin/operational component for this activity. All content specific information is in the associated activity.

Needs Assessment Priorities \*

#### **Needs Assessment**

North Brisbane and Moreton Bay Joint Regional Needs Assessment 2025-27

#### **Priorities**

Priority	Page reference		
Women's Health - Health Needs Level 1	3		
Service System - Service Needs Level 1	5		



#### **Activity Demographics**

#### **Target Population Cohort**

In Scope AOD Treatment Type \*

Indigenous Specific \*

No

**Indigenous Specific Comments** 

Coverage

**Whole Region** 

Yes



#### **Activity Consultation and Collaboration**

Consultation

Collaboration



#### **Activity Milestone Details/Duration**

#### **Activity Start Date**

01/04/2023

**Activity End Date** 

28/12/2026

**Service Delivery Start Date** 

03/04/2023

**Service Delivery End Date** 

30/12/2026

**Other Relevant Milestones** 



#### **Activity Commissioning**

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: Yes

**Direct Engagement:** No **Open Tender:** No

Expression Of Interest (EOI): Yes

Other Approach (please provide details): No

Is this activity being co-designed?

No

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

No

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

No

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

No

Decommissioning

No

Decommissioning details?

**Co-design or co-commissioning comments** 



#### **Activity Planned Expenditure**

#### **Planned Expenditure**

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28
Interest - PHN Pilots and Targeted Programs	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Endometriosis	\$0.00	\$57,306.40	\$21,028.00	\$0.00	\$0.00
and Pelvic					
Pain GP					
Clinics -					
Admin					

#### **Totals**

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Interest - PHN Pilots and Targeted Programs	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Endometriosis and Pelvic Pain GP Clinics - Admin	\$0.00	\$57,306.40	\$21,028.00	\$0.00	\$0.00	\$78,334.40
Total	\$0.00	\$57,306.40	\$21,028.00	\$0.00	\$0.00	\$78,334.40

**Funding From Other Sources - Financial Details** 

**Funding From Other Sources - Organisational Details** 



#### **Activity Comments**

#### **Activity Status**

Submitted

#### **PHN Comments**

#### **Comments from the Department**

Comment Date Created
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