

Northern Territory - Core Funding 2023/24 - 2026/27 Activity Summary View



CF-COVID-VVP - 3 - COVID3 - Vaccination of Vulnerable Populations



Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

CF-COVID-VVP

Activity Number *

3

Activity Title *

COVID3 - Vaccination of Vulnerable Populations

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 *

This activity is implemented in conjunction with "COVID-19 Primary Care Support"

This Activity aims to provide support and facilitate local solutions to vaccinate vulnerable populations who may have difficulty in accessing COVID-19 and other vaccines in collaboration with vaccination providers including general practice, pharmacy, and other healthcare providers.

Description of Activity *

This Activity will assist PHNs to provide support and facilitate local solutions to vaccinate vulnerable populations who may have difficulty in accessing COVID-19 Vaccines in collaboration with COVID-19 vaccination providers including general practice.

pharmacy, contracted providers, state health services and nurse practitioners (as appropriate). These groups include (but are not limited to):

those who are experiencing homelessness;

people with disability or are frail and cannot leave home;

people in rural and remote areas with limited healthcare options;

culturally, ethnically and linguistically diverse people;

those who are not eligible for Medicare and/or live in an area without access to a state, territory or Commonwealth Vaccination Clinic; and

aged care and disability workers.

NT PHN's Primary Care Support team will continue to:

encourage and support GPs and other eligible vaccine providers to use existing funding mechanisms (i.e. MBS items) to continue to provide COVID-19 vaccinations to vulnerable members of the community.

In coordination with the Centre for Disease Control, provide sector updates where COVID-19 ATAGI advise changes.

provide re-imburements equivalent to the MBS item value for services targeted to community members not eligible for Medicare such as CALD communities).

Offer financial support will be considered via Expressions of Interest from healthcare providers to conduct more proactive activities with the aim to increase vaccination rates.

In addition, as the Northern Territory continues to transition to living with COVID, this activity will also support the need to promote uptake of immunisations more broadly, including:

supporting vaccine providers to deliver COVID vaccines in conjunction with other vaccinations, such as JEV, influenza and childhood immunisations.

Collaboration with NT Health to employ a Coordinator for the 2023 influenza vaccine rollout for 2023, including the communications campaign.

NT PHN's ongoing participation in immunisation-related coordination efforts such as working groups and advisory groups.

Needs Assessment Priorities *

Needs Assessment

NT PHN Needs Assessment 2021/22-2023/24_November 2021

Priorities

Priority	Page reference
Pop Health - COVID-19 vaccination	36
Pop Health - Support and enable primary care services including private practice and Aboriginal Community Controlled Health Organisation services to manage COVID-19 positive patients in the community	36



Activity Demographics

Target Population Cohort

Aboriginal people and communities, CALD populations, refugees, NT Residents

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

This activity involves ongoing consultation with the sector which takes place in existing forums such as the NT Vaccine Advisory Group, the Public Health Directorate, AMSANT and the Centre for Disease Control.

Collaboration

Ongoing collaboration for this activity exists with GP practices, AMSANT, NT Health, ACCHS, Melaleuca, RACFS and Disability organisations.



Activity Milestone Details/Duration

Activity Start Date

22/08/2021

Activity End Date

30/12/2024

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?

Yes

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

Ongoing collaboration for co-design of this activity exists with AMSANT and NT Health via working groups (see consultation and collaboration sections)



CF - 1 - CF 1: Rural Primary Health Services (RPHS)



Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

CF

Activity Number *

1

Activity Title *

CF 1: Rural Primary Health Services (RPHS)

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Aboriginal and Torres Strait Islander Health

Other Program Key Priority Area Description**Aim of Activity ***

To increase availability of, and access to, primary health care services that are responsive to locally identified need in small remote communities.

Description of Activity *

This activity involves commissioning services that respond to locally identified need. Services are delivered in remote and very remote locations across the Northern Territory, primarily servicing Indigenous clients within their communities. Commissioned services vary across locations, dependent on the need of each region. Services may include:

- Increased access to allied health
- Maternal and child health and nutrition program.
- Youth focused mental health and alcohol and other drugs program.
- Mobile primary health clinic
- Increased Indigenous workforce
- Family strengthening
- Social and emotional wellbeing
- Early childhood development and youth health
- Health promotion and preventive health.

Workforce access, capacity and capability are critical areas of need to support the delivery of commissioned programs by NT PHN. Where required this activity could include workforce development initiatives to improve access , quality and sustainability of services to the communities in the Northern Territory.

Needs Assessment Priorities *

Needs Assessment

NT PHN Needs Assessment 2021/22-2023/24_November 2021

Priorities

Priority	Page reference
Pop Health - Social determinants of health are addressed through high level collaboration and advocacy outside the health system	32
Pop Health - Health of Aboriginal children	32
Pop Health - Equity of access to services for Territorians who are socially disadvantaged or living in rural and remote locations	32
ATSI Health - Culturally safe and trauma informed services	31
Pop Health - Local capacity, viability and sustainability of place-based services achieved through shared resources, coordination across primary and social care sectors	30
Pop Health - Health promotion and prevention around health behaviours/lifestyle factors including alcohol, tobacco & other drugs misuse, alcohol misuse & pregnancy, healthy diet & active lifestyle	35
ATSI Health - Service responsiveness to / appropriateness for Aboriginal people	29
ATSI Health - Local decision making, community control and regionalisation	29
ATSI Health - Access for Aboriginal people to both mainstream and Aboriginal specific health services	29



Activity Demographics

Target Population Cohort

Indigenous people

In Scope AOD Treatment Type *

Indigenous Specific *

Yes

Indigenous Specific Comments

Programs for Indigenous people living in remote communities

Coverage

Whole Region

No

SA3 Name	SA3 Code
Daly - Tiwi - West Arnhem	70203
Katherine	70205
East Arnhem	70204
Alice Springs	70201
Barkly	70202



Activity Consultation and Collaboration

Consultation

NT PHN meet and consult with all contracted providers to deeper understand community challenges and needs. NT PHN also conducts regional planning and needs assessment activities to inform funding priorities.

Collaboration

NT PHN engage with all contracted providers to develop a service delivery plan (SDP) prior to commencement of the fiscal year. Affording providers, the opportunity to consult with community, learn from previous years' service delivery, allowing for refinement and adaptation of their SDP to reflect availability of workforce, evolving community need and refinement in service delivery models.



Activity Milestone Details/Duration

Activity Start Date

30/06/2015

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: 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



CF - 2 - CF 2: Visiting Allied Health Services



Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

CF

Activity Number *

2

Activity Title *

CF 2: Visiting Allied Health Services

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 *

To increase availability of, and access to, allied health services for people living and working in regional and remote communities, particularly those experiencing chronic conditions.

Description of Activity *

Commission visiting allied health practitioners to provide outreach services for regional and remote communities across the Northern Territory. This activity is integrated with the Medical Outreach Indigenous Chronic Disease Program (MOICDP) which achieves improved coordination, integration, and cost efficiencies. Together they form NT PHN's integrated Outreach Health Services Program (OHSP).

Workforce access, capacity and capability are critical areas of need to support the delivery of commissioned programs by NT PHN. Where required this activity could include workforce development initiatives to improve access, quality and sustainability of services to the communities in the Northern Territory.

Needs Assessment Priorities *

Needs Assessment

Priorities

Priority	Page reference
Pop Health - Equity of access to services for Territorians who are socially disadvantaged or living in rural and remote locations	32
Pop Health - Local capacity, viability and sustainability of place-based services achieved through shared resources, coordination across primary and social care sectors	30



Activity Demographics

Target Population Cohort

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

SA3 Name	SA3 Code
Daly - Tiwi - West Arnhem	70203
Katherine	70205
East Arnhem	70204
Alice Springs	70201
Barkly	70202



Activity Consultation and Collaboration

Consultation

NT PHN and RWA regularly engage with remote health service and outreach providers to collaborate and consult on service delivery challenges, barriers and enablers. NT PHN and RWA also facilitates regional governance committees that consult and

make shared decisions about resource allocations which may impact this activity

Collaboration



Activity Milestone Details/Duration

Activity Start Date

30/06/2015

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: 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?

Yes

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



CF - 7 - CF 7: Health Justice Partnerships through the Katherine Individual Support Program (KISP)



Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

CF

Activity Number *

7

Activity Title *

CF 7: Health Justice Partnerships through the Katherine Individual Support Program (KISP)

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 *

To improve the accessibility, coordination and integration of case management and outreach services for people who are homeless or at risk of homelessness in the Katherine community.

Description of Activity *

This initiative aims to provide an innovative partnership between health and legal services, centered on human service delivery. The goal is to gather evidence that will help evaluate the benefits of this approach. KISP is a program that offers multidisciplinary shared care, case management, and outreach services to vulnerable individuals who are homeless or at risk of homelessness within the Katherine community. KISP is a shared program of work that is funded by the Northern Territory Department of Health's Harm Minimisation Unit under the National Partnership on Northern Territory Remote Aboriginal Investment, Community Safety Implementation Plan.

This activity seeks to improve outcomes by incorporating, within the shared care team, access to legal services that support individuals to address legal challenges that significantly impact short- and long-term health outcomes. Having established a health justice partnership, KISP will continue to support individuals to address the root causes of their complex health and wellbeing needs relating to the social determinants of health (e.g. family violence, disability, homelessness, mental illness and harmful use of alcohol and other drugs). Specifically, health justice partnerships will provide vulnerable clients with access to:

- Culturally safe and appropriate legal advice and support within the health care setting, with optional support and participation of

key members of the regular shared care team (e.g.: Aboriginal Health Practitioners).

- Support to address health-harming legal challenges. Examples of support include domestic violence interventions, access to the National Disability Insurance Scheme, access to housing and diversion from the justice system into mental health and alcohol and other drug treatment programs. An integrated team of professionals who can assist with the broad range of issues impacting an individual's health, removing the need to navigate complex and disconnected support pathways.

Over the activity period KISP/Health Partnership will continue to explore gaps within the Health and Homelessness servicing which can be addressed by further developing relationships and enhanced access to Legal services and information.

Needs Assessment Priorities *

Needs Assessment

NT PHN Needs Assessment 2021/22-2023/24_November 2021

Priorities

Priority	Page reference
Pop Health - Social determinants of health are addressed through high level collaboration and advocacy outside the health system	32
Pop Health - Health literacy, particularly in relation to alcohol and other drugs, mental health, oral health, chronic conditions and health behaviours	32
Pop Health - Equity of access to services for Territorians who are socially disadvantaged or living in rural and remote locations	32
Pop Health - Access to specialised supports and services for vulnerable groups including LGBTQI, CALD, refugee, veterans and victims of domestic violence	31
ATSI Health - Culturally safe and trauma informed services	31
Pop Health - Local capacity, viability and sustainability of place-based services achieved through shared resources, coordination across primary and social care sectors	30
Pop Health - Coordination and integration of service responses between health, housing, homelessness, domestic violence, justice, and other sectors to address health outcomes	33
Pop Health - Health promotion and prevention around health behaviours/lifestyle factors including alcohol, tobacco & other drugs misuse, alcohol misuse & pregnancy, healthy diet & active lifestyle	35
ATSI Health - Service responsiveness to / appropriateness for Aboriginal people	29
ATSI Health - Local decision making, community control and regionalisation	29
Pop Health - Coordination of strategic health planning involving key stakeholders	29

ATSI Health - Access for Aboriginal people to both mainstream and Aboriginal specific health services	29
---	----



Activity Demographics

Target Population Cohort

Vulnerable First Nations people living in Katherine

In Scope AOD Treatment Type *

Indigenous Specific *

Yes

Indigenous Specific Comments

Coverage

Whole Region

No

SA3 Name	SA3 Code
Katherine	70205



Activity Consultation and Collaboration

Consultation

The established KISP consortium enables consultation and collaboration across all involved stakeholders and community. The Health Justice Partnership model meets with the community services sector to consult and collaborate on processes, methods of

engagement with clients, and collaborative case management practices.

Collaboration

The Health Justice Partnership model works in a coordinated approach with key community and health services to provide supports collaboratively to consumers under the KISP model. Coordination of community services takes a flexible approach in response to consumer needs and issues identified through engagement of the Health Justice Partnership Model.



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

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: No

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?

Yes

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 KISP Consortium was established from the onset of the program; bringing together all key stakeholders to ensure there was an opportunity to discuss and plan the service with all relevant voices at the table. The Health Justice Partnership Objectives which inform the approach of the program were co-designed by this group.



CF - 10 - CF 10: Primary and Tertiary Care Interface Integration



Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

CF

Activity Number *

10

Activity Title *

CF 10: Primary and Tertiary Care Interface Integration

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 *

This activity has evolved to become part of a coordinated approach to improving efficiency, effectiveness and consumer experience and outcomes at the interface between Primary Care (particularly GPs) and the Tertiary system i.e. services offered across the Northern Territory's hospitals.

Description of Activity *

Originally designed to develop and provide public health expertise, this activity has evolved as part of a coordinated approach to improving efficiency, effectiveness and consumer experience and outcomes at the interface between Primary Care (particularly GPs) and the Tertiary system. Through employment of a GP liaison officer co-located in NT Health and NT PHN, the activity involves supporting patient care pathways and avoidance of unnecessary or preventable hospital attendance, support coordination, timely referrals and transfer of care with a focus on primary care. It develops pragmatic solutions and coordinates activity across a range of initiatives in their implementation, including hands on support to GPs across the Northern Territory for troubleshooting and service navigation.

The activity will directly contribute to the aims and objectives of HSI 1: To enable primary health care services, including General Practitioners, to enhance their quality-of-service provision to improve health outcomes for all Territorians.

Needs Assessment Priorities *

Needs Assessment

NT PHN Needs Assessment 2021/22-2023/24_November 2021

Priorities

Priority	Page reference
Pop Health - Prevent STIs and BBVs from being acquired and support early diagnosis and treatment of STIs and BBVs before onward transmission	36
Digital Health - Digital health literacy	30
Pop Health - Utilisation of clinical information and data to influence CQI	30
Pop Health - Quality evidence-based care relevant to unique NT context	29
Pop Health - Coordination of strategic health planning involving key stakeholders	29



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

NT Health:

Executive Director Remote Health and Primary Care

Deputy Chief Executive - Commissioning and System Improvement

General Manager Alice Springs Hospital

Royal Darwin and Palmerston Hospital: Deputy Chief Executive, Director Clinical Excellence, GP Liaison officer.

Working groups and Steering Committee for the NT Health Potentially Preventable Hospitalisations project

NT GPs responding to October 2023 GPLO survey.

Primary and Tertiary care interface operational working group.

Collaboration

Various work units within NT Health, including hospital outpatients and emergency department.

AMSANT, ACCHS, Neami and other NT PHN commissioned services.



Activity Milestone Details/Duration

Activity Start Date

30/06/2020

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: No

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

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

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

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

Decommissioning

Decommissioning details?

Co-design or co-commissioning comments



HSI - 1 - HSI 1: General Practice and Primary Health Care Support and Enablement



Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

HSI

Activity Number *

1

Activity Title *

HSI 1: General Practice and Primary Health Care Support and Enablement

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 *

To enable primary health care services, including General Practitioners, to enhance their sustainability and quality-of-service provision to improve health outcomes for all Territorians. It will also build the capacity of the NT primary care workforce to use emerging digital health technologies to improve patient experience and health care efficiency.

Description of Activity *

This activity involves the provision of a tailored set of activities to enable primary care health services to better support their staff and patients.

Elements critical to these activities include:

- Identify gaps and implement strategies to support primary care services, including mainstream General Practice clinics by providing onsite and/or virtual support with data cleansing, report building and through the provision of monthly benchmarking reports.
- Champion and facilitate innovation and integration activities across the NT, including facilitating and improving mechanisms for coordination and integration by supporting GP Liaison Officer activities including education events, GP forums and improving referral pathways.
- Embed a culture of Continuous Quality Improvement (CQI) in primary care support activities and evidence-based practice.

- Collect population health data in accordance with Data Sharing Agreements and use it to inform and drive quality improvement activities in primary care.
- Support the implementation of the Quality Improvement Practice Incentive for mainstream practices, including data extraction, practice eligibility, AIHW data submissions and enabling practices to access resources for quality improvement tailored to their needs.
- Support General Practices to achieve and maintain accreditation status through providing resources and onsite support with the aim to improve procedures and policies.
- Assist clinics with resources, advice and strategies to actively target patients with complex health needs through co-ordinated Chronic Disease Management, to improve patient health outcomes and staff retention.
- Facilitate networking opportunities for Practice Managers to connect with peers, introduce NT PHN initiatives, share ideas and experience-based problem solving, and foster relationship building.
- Support the co-design, development and implementation of digital health initiatives which will integrate with the NT health system to improve collaboration, communication and patient journeys, e.g. My Health Record and Provider Connect Australia.
- Partner with NT health to identify and address system integration issues to improve the NT health system for patients.
- Contribute to the national reform agenda, implementing relevant projects to meet agenda outcomes e.g. GP Grants Program, MyMedicare registration and patient enrolment to MyMedicare.
- Provide resources for practices to develop Disaster and Emergency Plans.
- Workforce access, capacity and capability are critical areas of need to support the delivery of commissioned programs by NT PHN. Where required this activity could include workforce initiatives to improve retention, recruitment and sustainability of services to the communities in the Northern Territory.

Needs Assessment Priorities *

Needs Assessment

NT PHN Needs Assessment 2021/22-2023/24_November 2021

Priorities

Priority	Page reference
Pop Health - Health literacy, particularly in relation to alcohol and other drugs, mental health, oral health, chronic conditions and health behaviours	32
Pop Health - Support and enable primary care services including private practice and Aboriginal Community Controlled Health Organisation services to manage COVID-19 positive patients in the community	36
Pop Health - Local capacity, viability and sustainability of place-based services achieved through shared resources, coordination across primary and social care sectors	30
Digital Health - Viable, accessible, appropriate, and accepted digital health approaches	30
Digital Health - Digital health literacy	30
Health Workforce - Skills mix of health professionals address health needs	30
Pop Health - Utilisation of clinical information and data to influence CQI	30
Health Workforce - Locally responsive,	30

sustainable primary care service and workforce models that meet community needs, particularly those of minority or vulnerable groups	
Pop Health - Health promotion and prevention around health behaviours/lifestyle factors including alcohol, tobacco & other drugs misuse, alcohol misuse & pregnancy, healthy diet & active lifestyle	35
Pop Health - Follow up and management of chronic disease including use and quality of GP chronic disease management plans	35
ATSI Health - Local decision making, community control and regionalisation	29
Pop Health - Quality evidence-based care relevant to unique NT context	29
Pop Health - Coordination of strategic health planning involving key stakeholders	29



Activity Demographics

Target Population Cohort

Mainstream general practices and other primary care service providers where required

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Litchfield	70103
Daly - Tiwi - West Arnhem	70203
Darwin Suburbs	70102
Katherine	70205
Darwin City	70101
East Arnhem	70204
Alice Springs	70201
Barkly	70202
Palmerston	70104



Activity Consultation and Collaboration

Consultation

42 General Practices, across Darwin and Palmerston, Katherine, Alice Springs and Nhulunbuy

NT Health: Public Health Directorate, Centre for Disease Control, Royal Darwin Hospital GP Liaison Officer

Rural Workforce Agency NT

NINCo

Collaboration

42 General Practices across Darwin and Palmerston, Katherine, Alice Springs and Nhulunbuy

Australian Association of Practice Management (AAPM)

Royal Australian College of General Practitioners (RACGP)

Australian Medical Association (AMA)

NT Health: Public Health Directorate, Centre for Disease Control, Office of the Chief Health Officer, Breast Screen NT, Cervical Screen NT, Bowel Screen NT, Adult Allied Health

Power & Water

Primary sense & WA Primary Health Alliance (WAPHA)

Local Allied Health Providers

Local Specialists visiting NT

Rural Workforce Agency NT

Commonwealth government teams e.g. MyMedicare, GP Grants Program, PIP QI, AIHW

North Queensland Primary Health Network (NQPHN)

NINCo

Charles Darwin University (CDU)

Melaleuca Australia



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2025

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones

Develop depository of off the shelf QI activities aligning to the QIM ten measures – 30 June 2025

Improved accessibility to primary care resources and toolkits by hosting dedicated tile on NT PHN website – 30 February 2024

Establish a rolling Baseline Data Management Strategy to measure and apply strategies to meet current and changing needs for practice sustainability – 30 December 2024

70% of practices will have developed and maintain an Emergency and Disaster Management Plan – 30 June 2025



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): 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



HSI - 3 - HSI 3: Strategic Initiatives, Performance and Partnerships



Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

HSI

Activity Number *

3

Activity Title *

HSI 3: Strategic Initiatives, Performance and Partnerships

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 ***

This activity brings together NT PHN's key functions to support strategic planning and strategy implementation, strategic and/or national initiatives, needs assessment, performance monitoring and evaluation, and partnerships.

Description of Activity *

This activity will:

Continue to build a comprehensive understanding of regional and jurisdictional health needs and priorities, to inform investment decisions and health systems improvement through engagement with all parts of the health system, community and consumers, research and data.

Provide strategic leadership, driving reform activity informed by national agenda, evidence and local knowledge.

Work closely with stakeholders, including community, consumers, Carers and kin, to plan, implement, manage and evaluate culturally appropriate, safe and locally responsive solutions to meet the unique health needs of our community, improve health equity and Close The Gap.

Partner with collaborators and community to shape a robust, responsive, equitable, integrated and coordinated primary and mental healthcare system.

Develop strong partnerships and collaborations with those who share our aspirations for health equity outside of the sector, such as education, housing, public safety, justice, local government, social inclusion, and early childhood development.

Continually improve monitoring and evaluation of provider and PHN performance against strategic and operational objectives including an increased focus on experience and outcomes and in alignment with PHN Program Performance and Quality Framework.

Implement initiatives to build the workforce and improve capacity of the Primary Care and Mental Health system and stakeholders to deliver health service continuity, responsiveness, quality and sustainability.

Build data resources and capabilities and leverage partnerships in research to better inform decision making and the effective use of limited resources.

Identify opportunities so that NT PHN can provide strong advocacy for health equity and access in the Northern Territory.

Needs Assessment Priorities *

Needs Assessment

NT PHN Needs Assessment 2021/22-2023/24_November 2021

Priorities

Priority	Page reference
Pop Health - Social determinants of health are addressed through high level collaboration and advocacy outside the health system	32
Pop Health - Health literacy, particularly in relation to alcohol and other drugs, mental health, oral health, chronic conditions and health behaviours	32
Pop Health - Local capacity, viability and sustainability of place-based services achieved through shared resources, coordination across primary and social care sectors	30
Digital Health - Digital health literacy	30
Pop Health - Utilisation of clinical information and data to influence CQI	30
Health Workforce - Locally responsive, sustainable primary care service and workforce models that meet community needs, particularly those of minority or vulnerable groups	30
Pop Health - Coordination and integration of service responses between health, housing, homelessness, domestic violence, justice, and other sectors to address health outcomes	33
MH - Coordinated regional planning, identify opportunities for co-commissioning and service integration	34
Pop Health - Health promotion and prevention around health behaviours/lifestyle factors including alcohol, tobacco & other drugs misuse, alcohol misuse & pregnancy, healthy diet & active	35

lifestyle	
ATSI Health - Service responsiveness to / appropriateness for Aboriginal people	29
ATSI Health - Local decision making, community control and regionalisation	29
Pop Health - Quality evidence-based care relevant to unique NT context	29
Pop Health - Coordination of strategic health planning involving key stakeholders	29



Activity Demographics

Target Population Cohort

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Litchfield	70103
Daly - Tiwi - West Arnhem	70203
Darwin Suburbs	70102
Katherine	70205
Darwin City	70101
East Arnhem	70204
Alice Springs	70201
Barkly	70202
Palmerston	70104



Activity Consultation and Collaboration

Consultation

This activity is informed by NT PHNs stakeholder network including:

NT PHN Board

Clinical and Community Advisory Councils

Membership of the NT Aboriginal Health Forum

NT PHN Mental Health and Suicide Prevention Regional Planning Project Control Group

Membership of numerous committees such as: Aboriginal Health Partnership Committee, Diabetes Network, NT Chronic Conditions Consultative Committee, Mental Health and Suicide Prevention Bilateral Agreement - Quarterly Bilateral Meeting, NT AHF SEWB working group and various PHN collaborative working groups.

Participation in various research projects including, but not limited to: VOICE project, Digital Health CRC, Top End Academic Health Partners.

Collaboration

Collaboration with all key health partners, communities and consumers occurs across multiple facets of the strategic activities to ensure the direction of the organisation is informed by the health needs of Territorians in urban, regional, rural and remote Northern Territory.

NT PHN participates as members in various external committees, working groups and executive leadership groups to ensure contribution is made at an operation and systems level. NT PHNs strategic direction is guided and informed through collaboration with:

NT PHN Board

Clinical and Community Councils

NT Aboriginal Health Forum

NT Government Department of Health

Aboriginal Medical Services Alliance NT
Commonwealth Government Department of Health and Aged Care
Health services
Community members
Consumers
People with lived experience



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2025

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones

Health Needs Assessment in development for submission Nov 24
Northern Territory Suicide Prevention Plan launched Sept 23
Northern Territory Joint Regional Mental Health and Wellbeing plan completion Jun 24



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): 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



HSI - 9 - HSI 9 - Dementia Consumer Pathway Resource



Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

HSI

Activity Number *

9

Activity Title *

HSI 9 - Dementia Consumer Pathway Resource

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Aged Care

Other Program Key Priority Area Description**Aim of Activity ***

The aim of this activity is to ensure the consumer pathway resources are both nationally consistent at a high level and reflective of individual services and supports within the NT.

Description of Activity *

NT PHN has developed consumer-focused dementia support pathway resources detailing the support available for people living with dementia, their carers and families. This activity involves the promotion and updates of these resources amongst primary care providers and other relevant networks via:

Continual inclusion to NT HealthPathways review cycle, implemented on a 36-month basis.

Continued Collaboration with Dementia Australia to ensure resources are current and appropriate.

Distribution of physical resources directly to primary care providers and relevant networks to create ease of access to these resources to the public.

Utilising digital platforms – NT PHN website, various newsletters, and social media channels to disseminate information about the resources.

Sharing and education of resources at communities of practices and other community networking events

Undertake evaluations to establish the value of current resources and pivot accordingly to refresh and renew resources.

Schedule annual review of consumer resources, liaising with Dementia Australia, uploading new services

Needs Assessment Priorities *

Needs Assessment

NT PHN Needs Assessment 2021/22-2023/24_November 2021

Priorities

Priority	Page reference
Aged Care - Capacity for management of complex clinical care including management of chronic disease, psychogeriatric conditions, and palliative care in Aged Care and Disability services	31
Aged Care - Access to quality, coordination and continuity of primary health care services for people living with a disability and those receiving aged care services	31
Digital Health - Digital health literacy	30



Activity Demographics

Target Population Cohort

People living with dementia, their carers and families in the Northern Territory

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

Dementia Australia

NT HealthPathways team working in dementia and aged care pathways suite.

Carers NT

Collaboration

NT Department of Health – subject matter experts, including but not limited to, lead clinicians liaise and endorse dementia pathways and consumer resource.

Dementia Australia – continuous input will be required to information a nationally consistent approach. The NT office for Dementia Australia will be engaged on a local level to inform needs and implementation.

Carers NT – input provided as required.

QNT HealthPathways Working Group – engaging with other QLD HealthPathways team to share ideas and support deliverables.

Residential Aged Care Facilities

Clinicians working with the elderly and people living with dementia for the promotion of resources.

People living with dementia and carers via clinical consultations, community groups, Carer groups, residential aged care facilities, etc

NT HealthPathways team



Activity Milestone Details/Duration

Activity Start Date

30/06/2021

Activity End Date

29/06/2025

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones

Resources designed ready for distribution through multiple networks to reach consumers Q4 2024



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): No

Other Approach (please provide details): No

Is this activity being co-designed?

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

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

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

Decommissioning

Decommissioning details?

Co-design or co-commissioning comments



HSI - 10 - HSI 10 - Clinical Referral Pathways



Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

HSI

Activity Number *

10

Activity Title *

HSI 10 - Clinical Referral Pathways

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 *

**This activity is implemented in conjunction with sub-activities B.8.1. "Aged Care Clinical Referral Pathways" B.8.2 "Dementia Clinical Referral Pathways"

The aim of this activity is to improve referral quality, assist healthcare providers to navigate local health services, reduce medical specialist waitlists and support clinicians new to the Territory or remote setting.

NT PHN hosts 537 localised pathways within the NT HealthPathways program incorporating Clinical pathways, Requests and Resources to compliment treatment and management of common conditions. The pathways are designed primarily for general practice teams, although they are also available to all NT health professionals, including specialists, hospital staff and allied health.

Accessible 24 hours a day, NT HealthPathways is available via desktop or mobile device, supporting after-hours care and assisting decision-making. HealthPathways offers clinicians locally agreed information to make the right decisions, at the right time together with patients at the point of care.

Description of Activity *

NT HealthPathways have localised a wide range of pathways across a diverse range of clinical domains, including but not limited to: aged care and dementia, Aboriginal and Torres Strait Islander health, Alcohol and Other Drugs, Mental Health, Palliative Care.

Chronic Disease, Child and Youth Health and pandemic events.

Clinical Editors and NT HealthPathways coordinators continue to focus on pathway review to maintain the integrity of localised pathways, and pathway developments that relate to utilisation. In addition, the team focuses on unlocalised pathways, and other priorities identified through the Primary and Tertiary Care interface group and members.

The team will also continue to work collaboratively with GP Liaison Officer(s) to inform development priorities, promote the utilisation of the platform and address subject matter expert responsiveness challenges faced by the clinical editors team.

Needs Assessment Priorities *

Needs Assessment

NT PHN Needs Assessment 2021/22-2023/24_November 2021

Priorities

Priority	Page reference
Pop Health - Access to after-hours primary care	30
Pop Health - Utilisation of clinical information and data to influence CQI	30
ATSI Health - Service responsiveness to / appropriateness for Aboriginal people	29
Pop Health - Quality evidence-based care relevant to unique NT context	29



Activity Demographics

Target Population Cohort

Health care providers in the Northern Territory, with a focus on General Practitioners

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

NT PHN and NT Health collaborate via the Primary and Tertiary Care interface governance, which includes executive sponsorship and an operational working group to inform program priorities, advocate for program outcomes, foster high-level partnerships and streamline decision-making across NT health systems.

Program activities are also directed by Commonwealth deliverables.

The development and localisation of all HealthPathways Incorporates close consultation with subject matter experts largely employed by NT Health.

NT PHN team continues to work with Streamliners to manage the technical writing hours workflows and activity.

Collaboration

NT HealthPathways partners with several key Working Groups across the health sector to contribute to pathway priorities, development and socialisation. Key contributions from these groups support pieces of work within the Review Cycle, flagging new guidelines, changes to patient criteria and updates of provider services.

Agreed collaboration with local medical specialists remains a core necessity to development with subject matter experts (SME) engaged across Top End and Central Australian health services. Alongside engagement, is the endorsement and SME recommendations from NT Directors of Medical Services.

Other ongoing areas of collaboration include the HealthPathways community with Lead Region collaborations and participation to the Streamliner's led, Australian-wide Pathway Sharing Group. Instrumental in supporting the community to develop national pathways. This was evident in the rapid localisation of COVID-19 pathways. Since the commencement, several pathway suites, including Rural Health and Veteran Health, continues to benefit our usership.

The collaboration with the GP Liaison Officer continues to demonstrate the effectiveness of the role with increased engagement within GP and tertiary sector to contribute to outcomes



Activity Milestone Details/Duration

Activity Start Date

30/06/2017

Activity End Date

29/06/2025

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones

Manage Review Cycle

continuous information sharing posting latest news articles and industry updates (as needed)

Health alerts (as needed)



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): 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



HSI - 11 - HSI 11 - Aged Care Clinical Referral Pathways



Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

HSI

Activity Number *

11

Activity Title *

HSI 11 - Aged Care Clinical Referral Pathways

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 *

**This activity is implemented in conjunction with activity B.8. "Clinical Referral Pathways" and sub-activities B.8.2 "Dementia Clinical Referral Pathways"

This activity aims to develop a dedicated Aged Care clinical and resource pathways as a suite in NT HealthPathways. Intersecting with dementia and palliative care pages, additional pathways include Urgent, Non-urgent and Advice pages providing referral criteria and local service providers to contribute to health outcomes.

Description of Activity *

To meet this Department deliverable, NT PHN will continue to:

Develop aged care referral pathways relevant to the health needs of the NT

Review and research health care providers and services in the sector to incorporate into HealthPathways Directory

Identify resources and information for health professionals and patients

review and improve the existing aged care pathway to ensure currency, accuracy, and consistency with medical best practice and

local services.

Engage with subject matter experts and appropriate peak bodies

Publish and socialise pathway suites to the clinical community

The overarching suite contains several resource pages and patient resource options. Several pages are still underdevelopment as the team continue to engage with time-poor medical specialists during workforce shortages, resulting to development delays

Needs Assessment Priorities *

Needs Assessment

NT PHN Needs Assessment 2021/22-2023/24_November 2021

Priorities

Priority	Page reference
Pop Health - Access to after-hours primary care	30
Pop Health - Utilisation of clinical information and data to influence CQI	30
ATSI Health - Service responsiveness to / appropriateness for Aboriginal people	29
Pop Health - Quality evidence-based care relevant to unique NT context	29



Activity Demographics

Target Population Cohort

Health care providers in the Northern Territory, with a focus on General Practitioners

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

Pathways were informed by Commonwealth directed deliverables with pathway priorities endorsed by the NT HealthPathways Governance Committee. Members consulted to support prioritisation, integration and awareness of HealthPathways to the sector. This included Chief Health Officer of Northern Territory, Executive representatives from NT Health, NT PHN AMSANT and Darwin Private Hospital.

Close consultation with subject matter experts (Heads of Departments/Specialists) additionally contributed to clinical content, alongside Executive Directors of Medical and Clinical Services in Central Australia and Top End regions whom assisted with Subject Matter Expert recommendations.

Collaboration

HealthPathways partnered with several key Working Groups to contribute to pathway development and reviews. These groups supported pieces of work when undertaking page reviews, flagging new guidelines, changes to patient criteria and updating provider service information.

All clinical pathways are developed in collaboration with subject matter experts from Top End and Central Australia where possible. Majority of SMEs are Specialists or Head of Department with other SMEs engaged as relevant across the sector to provide expertise overview on a pathway, such as Allied Health expertise etc.

Further collaborations to meet Aged Care and Dementia deliverables included QLD HealthPathways operation teams to combine resources to meet the scope of work, allocate regions to pages and assist PHNs to meet this body of work.



Activity Milestone Details/Duration

Activity Start Date

30/06/2017

Activity End Date

29/06/2025

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones

17 aged care pathways have been localised

Associated pathways include eight dementia clinical pathways; 14 palliative care pathways; Elder Abuse and Neglect and older Adults' health

Supporting clinical pages includes several request pages

Review of supplementary pages for carer supports and Carer stress and wellbeing

Update service directory details

Undertake pathway reviews for Request pages



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): 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



HSI - 12 - HSI 12 - Dementia Clinical Referral Pathways



Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

HSI

Activity Number *

12

Activity Title *

HSI 12 - Dementia Clinical Referral Pathways

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 ***

**This activity is implemented in conjunction with activity “Clinical Referral Pathways” and sub activities “Aged Care Clinical Referral Pathways” and Dementia Consumer Pathway Resource **

This activity focuses on the development and localisation of Dementia pathways within NT Health pathways.

Description of Activity *

This activity will be undertaken with input from Dementia Australia to ensure the pathways are both nationally consistent, at a high level and reflective of individual services and supports within the NT. As part of this activity, NT PHN will continue to:

develop dementia specific HealthPathways.

Review and research health care providers and services in this sector to incorporate into HealthPathways Directory

Align Dementia Australia resources to link to pathways

where an existing dementia HealthPathways is in place, NT PHN will review, and enhance the pathway to ensure it is comprehensive and reflects contemporary best practice dementia care. This will be informed by broad local consultation including

with, but not limited to, local primary care clinicians, other health, allied health, aged care providers and consumers about the current gaps and opportunities in the model of care for people living with dementia.

identify resource gaps and develop accordingly.

Raising awareness of the suite to encourage the uptake of dementia pathways to NT health professionals.

Review, maintain and enhance existing localised consumer resources that support older people and their carers and families to understand and make informed choices about health and aged care services that may be of benefit to them. NB: HealthPathways is not a public facing platform. Access is only granted to health professionals via a controlled login. Consumer resources are only available during a consultation at the For Information section of a pathway, providing resources for a patient. Additional points of resources, includes the Patient Resource tab. Alongside with Dementia Australia resources, additional resources will only be developed on the recommendation of the clinical editor or subject matter expert.

Needs Assessment Priorities *

Needs Assessment

NT PHN Needs Assessment 2021/22-2023/24_November 2021

Priorities

Priority	Page reference
Pop Health - Access to after-hours primary care	30
Pop Health - Utilisation of clinical information and data to influence CQI	30
ATSI Health - Service responsiveness to / appropriateness for Aboriginal people	29
Pop Health - Quality evidence-based care relevant to unique NT context	29



Activity Demographics

Target Population Cohort

Health care providers in the Northern Territory, with a focus on General Practitioners at the point of care

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

In alignment with required deliverables of this activity, pathway priorities were endorsed by the NT HealthPathways Governance Committee with members consulted to support development prioritisation and integration of HealthPathways to the sector. This included senior and executive representatives from NT Health Primary Health Care, community representatives, AMSANT and Darwin Private Hospital.

Ongoing consultation with Dementia Australia throughout the life of the project was at the forefront of patient and practitioner resourcing embedded in pathways.

Close consultation with subject matter experts (Heads of Departments/Specialists) as recommended by the Executive Directors of Medical and Clinical Services in Central Australia and Top End regions within NT Health

Collaboration

HealthPathways partnered with several key Working Groups to contribute to pathway development and reviews. These groups support pieces of work within the Review Cycle, flagging new guidelines, changes to patient criteria, information for the referrer and updates to provider services.

Several pathways attracted Lead Region opportunities that required collaboration with Streamliners' and other HealthPathways communities.

Peer collaborations to support the Dementia deliverables included NT PHN alignment with QLD HealthPathways teams to review the scope of work, allocate regions to pages and assist PHNs to meet this body of work.

Liaison Dementia Australia to ensure patient resources are available at the point of care, including a printable version of the flyer and meet the needs of the patient and practitioner i.e. HIS 9 - Dementia Consumer Pathway Resource.



Activity Milestone Details/Duration

Activity Start Date

30/06/2017

Activity End Date

29/06/2025

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones

Eight dementia specific pathways

Reviews and development on a broad range of Request pages (Urgent, Non-urgent, Advice)

Pathways intersected with aged care, older adults' health and carer support pages

Patient resources

Health professional information

Overcoming project delays when engaging with time-poor SMEs due to workforce shortages



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): 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



HSI - 13 - HSI 13: Data Governance



Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

HSI

Activity Number *

13

Activity Title *

HSI 13: Data Governance

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

Data Governance

Aim of Activity *

These activities are intended to improve data skills, infrastructure, security controls, and management capabilities to achieve certification against ISO 27001 by 2026.

Description of Activity *

NT PHN will establish and embed a new Data Governance structure to provide oversight and advice on data governance, information and cyber security.

This will be informed by participation in national digital and data governance programs including the Primary Health Transformation Program, and the Primary Health Insights Communities of Practice.

Discovery activities to develop a project to achieve certification under ISO 27001 by 2026.

Conduct a cyber security audit to test controls, and identify and classify risks, and provide opportunities for improvement, including the evaluation and refresh the program of cybersecurity and privacy training for all staff.

Support General Practices in the Northern Territory in the uptake of Primary Sense PHN Population Health Management Tool.

Needs Assessment Priorities *

Needs Assessment

NT PHN Needs Assessment 2021/22-2023/24_November 2021

Priorities

Priority	Page reference
Pop Health - Utilisation of clinical information and data to influence CQI	30



Activity Demographics

Target Population Cohort

NTPHN Staff & General Practices in the Northern Territory.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

Consultation with internal NT PHN stakeholders required for the development of the ISO 27001 Information Management System

Consultation with General Practices to support uptake of Primary Sense PHN Population Health Management Tool

Collaboration

PHNs Data Governance Committee, Primary Sense PHN Steering Committee, Primary Health Insights



Activity Milestone Details/Duration

Activity Start Date

30/06/2022

Activity End Date

29/06/2025

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones

New data strategy aligned to the NT PHN Strategic plan in place and socialised by 30/09/2024

Essential 8 Maturity Level 2 achieved by 30/06/2025

ISO 27001 gap analysis completed by 30/06/2025

Remediation activities for 27001 planned, sequenced, and underway with 25% completion by 30/06/2025

Pilot project with WAPHA on PHOCUS by 30/06/2025

Data from decommissioned systems archived in PHI by 31/12/2024

Unified data model designed and implemented by 30/06/2025



Activity Commissioning

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

Not Yet Known: Yes

Continuing Service Provider / Contract Extension: No

Direct Engagement: No

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



CG - 5 - CG 5: Community Advisory Council



Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

CG

Activity Number *

5

Activity Title *

CG 5: Community Advisory Council

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Other Program Key Priority Area Description

Aim of Activity *

Description of Activity *

Needs Assessment Priorities *

Needs Assessment

Priorities



Activity Demographics

Target Population Cohort

In Scope AOD Treatment Type *

Indigenous Specific *

Indigenous Specific Comments

Coverage

Whole Region



Activity Consultation and Collaboration

Consultation

Collaboration



Activity Milestone Details/Duration

Activity Start Date

Activity End Date

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): No
Other Approach (please provide details): No

Is this activity being co-designed?

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

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

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

Decommissioning

Decommissioning details?

Co-design or co-commissioning comments



CG - 1000 - CG 1: People



Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

CG

Activity Number *

1000

Activity Title *

CG 1: People

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Other Program Key Priority Area Description

Aim of Activity *

Description of Activity *

Needs Assessment Priorities *

Needs Assessment

Priorities



Activity Demographics

Target Population Cohort

In Scope AOD Treatment Type *

Indigenous Specific *

Indigenous Specific Comments

Coverage

Whole Region



Activity Consultation and Collaboration

Consultation

Collaboration



Activity Milestone Details/Duration

Activity Start Date

Activity End Date

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): No
Other Approach (please provide details): No

Is this activity being co-designed?

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

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

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

Decommissioning

Decommissioning details?

Co-design or co-commissioning comments



CG - 2000 - CG 2: Office



Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

CG

Activity Number *

2000

Activity Title *

CG 2: Office

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Other Program Key Priority Area Description

Aim of Activity *

Description of Activity *

Needs Assessment Priorities *

Needs Assessment

Priorities



Activity Demographics

Target Population Cohort

In Scope AOD Treatment Type *

Indigenous Specific *

Indigenous Specific Comments

Coverage

Whole Region



Activity Consultation and Collaboration

Consultation

Collaboration



Activity Milestone Details/Duration

Activity Start Date

Activity End Date

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): No
Other Approach (please provide details): No

Is this activity being co-designed?

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

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

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

Decommissioning

Decommissioning details?

Co-design or co-commissioning comments



CG - 3000 - CG 3: Board



Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

CG

Activity Number *

3000

Activity Title *

CG 3: Board

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Other Program Key Priority Area Description

Aim of Activity *

Description of Activity *

Needs Assessment Priorities *

Needs Assessment

Priorities



Activity Demographics

Target Population Cohort

In Scope AOD Treatment Type *

Indigenous Specific *

Indigenous Specific Comments

Coverage

Whole Region



Activity Consultation and Collaboration

Consultation

Collaboration



Activity Milestone Details/Duration

Activity Start Date

Activity End Date

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): No
Other Approach (please provide details): No

Is this activity being co-designed?

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

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

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

Decommissioning

Decommissioning details?

Co-design or co-commissioning comments



CG - 4000 - CG 4: Clinical Council



Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

CG

Activity Number *

4000

Activity Title *

CG 4: Clinical Council

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Other Program Key Priority Area Description

Aim of Activity *

Description of Activity *

Needs Assessment Priorities *

Needs Assessment

Priorities



Activity Demographics

Target Population Cohort

In Scope AOD Treatment Type *

Indigenous Specific *

Indigenous Specific Comments

Coverage

Whole Region



Activity Consultation and Collaboration

Consultation

Collaboration



Activity Milestone Details/Duration

Activity Start Date

Activity End Date

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): No
Other Approach (please provide details): No

Is this activity being co-designed?

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

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

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

Decommissioning

Decommissioning details?

Co-design or co-commissioning comments



CF-COVID-PCS - 1 - COVID-19 Primary Care Support



Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

CF-COVID-PCS

Activity Number *

1

Activity Title *

COVID-19 Primary Care Support

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 activity is implemented in conjunction with “COVID-19 Vaccination of Vulnerable Populations”

This activity aims to support COVID-19 capacity and strategies across primary care, aged care and disability sectors.

Description of Activity *

This activity has been extended for 2024/25. NT PHN will continue to engage with the primary, aged care and disability sectors to gauge their needs in order to enable community to access COVID vaccine boosters as required aligned with ATAGI updates.

NT PHN supports the implementation of Australia's COVID-19 Vaccine and Treatment Strategy to the primary, aged care and disability sectors, including:

Support for General Practices, Aboriginal Community Controlled Health Services (ACCHs), residential aged care facilities (RACF), disability accommodation facilities and community pharmacies to increase their capacity to do proactive and in reach activities;

Information gathering on local needs and issues to inform response;

Liaison with local services such as RACFs and disability providers across accommodation to facilitate local service integration and

communication;

Support RACFs to access vaccination services where required;

support vaccine delivery sites in their establishment and operation, including where appropriate, performing functions of assurance and assessment of suitability and ongoing quality control support;

support vaccine delivery to be integrated within local health pathways to assist with the coordination of local COVID-19 primary care responses;

Support general practices with onboarding for covid vaccines including appropriate information

Flexibility has also been requested for this activity to expand to mental health and wellbeing supports for Mainstream General Practice as workforce and community needs in this regard had anecdotally had risen since the COVID-19 pandemic. As part of this, a pilot to roll out Employee Assistance program supports for General Practice will continue for the duration of the program.

Needs Assessment Priorities *

Needs Assessment

NT PHN Needs Assessment 2021/22-2023/24_November 2021

Priorities

Priority	Page reference
Pop Health - COVID-19 vaccination	36
Pop Health - Support and enable primary care services including private practice and Aboriginal Community Controlled Health Organisation services to manage COVID-19 positive patients in the community	36



Activity Demographics

Target Population Cohort

General community members, mainstream GP practice, RACFs, Disability supported accommodation, ACCHs

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

RACFs, Disability supported accommodation, ACCHs, Commonwealth Department of Health and Aged Care, Mainstream General Practices

Collaboration

RACFs, Disability supported accommodation, ACCHs, Commonwealth Department of Health and Aged Care, local and interstate service providers (i.e. VAP), EAP vendors i.e. Assure



Activity Milestone Details/Duration

Activity Start Date

29/06/2020

Activity End Date

29/12/2024

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): 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

Co-design ongoing with relevant stakeholders