

North Western Melbourne - Core Funding

2022/23 - 2026/27

Activity Summary View



CF-COVID-VVP - 6000 - COVID-19 Vaccination of Vulnerable Populations AWP 24-25



Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

CF-COVID-VVP

Activity Number *

6000

Activity Title *

COVID-19 Vaccination of Vulnerable Populations AWP 24-25

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 *

The aim of this activity is to ensure continued access to COVID-19 vaccinations for specific vulnerable populations that have been identified as having persistent difficulty accessing vaccines.

Description of Activity *

Commissioning of primary care vaccination providers to provide COVID-19 vaccinations to vulnerable populations specifically those that are homebound, people with disabilities and supporting timely vaccination in RACHs.

Commissioning of highly targeted local solutions that provide outreach and support the uptake of COVID-19 vaccinations to the following vulnerable cohorts; individuals living in supported accommodation, temporary accommodation women's shelters.

individuals who are homeless or in insecure housing, those living with mental health and AOD issues, non-Medicare eligible groups and individuals from diverse communities including Culturally and Linguistically Diverse (CALD) groups,

Explore emerging vulnerable cohorts who may have a barrier to access vaccination.

Needs Assessment Priorities *

Needs Assessment

NWMPHN Needs Assessment 2022-2025

Priorities

Priority	Page reference
Immunisation - lower rates of immunisation	184



Activity Demographics

Target Population Cohort

Whole of population. Population health and service data will inform this activity to enable targeted support to address the needs of identified priority populations most at risk of poor health outcomes.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

North Western Melbourne Primary Health Network (NWMPHN) is committed to ensuring stakeholder engagement is embedded in our culture and core functions.

Stakeholder engagement occurs throughout all seven activities that comprise our commissioning approach:

- Assess and prioritise needs
- Review evidence to inform planning and design

- Design services to address need
- Prepare the system for delivery
- Support implementation
- Manage performance and drive continuous improvement
- Evaluate the impact

We use a range of mechanisms to engage with our communities. This includes working with our Community and Clinical Councils, Expert Advisory Groups (EAGs) and People Bank members.

The Clinical and Community Councils provide advice to the Board about the unique needs of the region, and principles and mechanisms for engaging local stakeholders. The EAGs provide subject matter expertise, insights and advice to support operational model and service design, focusing on safety, quality, and integration. NWMPHN has EAGs for:

- General Practice
- Alcohol and Other Drugs
- Mental Health
- Aboriginal and Torres Strait Islander Health
- Older Adults

People Bank is a register of people who would like to participate in activities that help to improve the health of people in the region. Members participate in a range of different activities including workshops, governance groups, surveys, and tender evaluation panels.

We continue to also consult and seek specific advice from relevant strategic and local organisations and other stakeholders, such as peak and professional bodies, governments, the primary health care sector and local health services and hospital networks.

This activity will also include meaningful key stakeholder input in the procurement and program development process. Commissioned provider(s) will also be expected to consult with community members when designing and implementing their activities.

Collaboration

NWMPHN's approach to collaboration and engagement is underpinned by the IAP2 model. Best practice in public engagement is influenced by the Spectrum of Public Participation developed by the International Association of Public Participation. This spectrum includes five levels of participation, Inform, Consult, Involve, Collaborate and Empower.

Collaboration will be utilised wherever possible throughout the commissioning cycle as NWMPHN recognises that working in this way adds value and strengthens our reach. Mutually meaningful collaboration is pursued and maintained in a systematic way across the organisation, which facilitates timely access to existing and new collaboration approaches. This is critical to driving a team-based and integrated approach to delivering person-centred primary care.

Collaboration with key stakeholders will occur throughout the commissioning process. Consequently, the following stakeholders may be involved in prioritisation, planning and design, implementation, monitoring and evaluation of activities:

- Community participants – consumers, patients, carers, and people with lived experience, priority populations, community leaders
- Health care professionals
- NWMPHN regional and strategic partnerships and collaboratives
- Local health services and hospital networks
- Community health services
- General practice
- Residential aged care facilities
- Pharmacy
- Allied health
- Community-based organisations
- Research institutes
- Academic and training institutions

- Peak and professional bodies
- Victorian Department of Health
- Local government
- Other PHNs
- Media
- Other identified providers



Activity Milestone Details/Duration

Activity Start Date

28/06/2022

Activity End Date

30/12/2024

Service Delivery Start Date

01/07/2022

Service Delivery End Date

31/12/2024

Other Relevant Milestones

NA



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: 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?

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

Please refer to the Consultation and Collaboration sections of this Activity for the co-design details. Co-design has taken place with the Community and Clinical Councils, local public health units, service providers, and informed by local community engagement, including with local bilingual workers.



CF - 1000 - Improve physical and mental health and wellbeing of people w chronic conditions AWP 24/25



Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

CF

Activity Number *

1000

Activity Title *

Improve physical and mental health and wellbeing of people w chronic conditions AWP 24/25

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 aims to improve the physical and mental health and wellbeing of people with chronic conditions in the NWMPHN community, particularly priority populations most at risk of poor health outcomes.

The focus is on commissioning services that are responsive to identified local needs and supporting people to navigate service systems and enhance self-management capabilities.

The activity also aims to promote community primary health care options to reduce potentially preventable hospitalisations, in line with NWMPHN's strategic objective to transform primary healthcare.

Description of Activity *

NWMPHN will commission outcome-based services that support healthy ageing and ongoing management of chronic conditions in general practice. Strategically this activity aligns with AC-EI - 5 - NWMPHN Early intervention initiatives to support healthy ageing and chronic conditions.

NWMPHN has:

- Completed commissioning 10 general practices to deliver early intervention initiatives to older people to promote healthy ageing and ongoing management of chronic conditions.

- Supported general practice to develop innovative models of care that examine how to establish and implement effective multidisciplinary approaches to the prevention and management of chronic conditions that consider the social determinants of health.
- Implemented monitoring and evaluation standards and capabilities that ensure that commissioned services are effective and meet the needs of the community.

NWMPHN will:

- Deliver communities of practice to support shared learnings, system integration opportunities, and drive quality improvement activities
- Complete an evaluation of the program, the findings of which will be used to support general practice to implement comprehensive chronic illness models of care that complement existing funding streams.

The approaches or mechanisms, i.e. enablers, that may be used to support implementation of this activity include quality improvement, health literacy, workforce development, clinical and referral pathways for chronic disease management and older adults, and digital health.

NWMPHN will also:

- Improve timely detection and intervention of the physical and mental health needs of people at risk of or living with chronic conditions. This includes commissioning of innovative approaches to improve social connectedness among patients at risk of poor health outcomes.
- Improve integration of care to reduce unplanned hospital presentations or admissions of people living with chronic conditions. This includes commissioning of services and delivery of a programs that support the collaborative development of care pathways in areas such as chronic pain, palliative care, and providing allied health services to residents of aged care homes.
- The approaches or mechanisms, i.e. enablers, that may be used to support implementation of this activity include: care navigation to improve access and equity, quality improvement, health literacy, workforce development, clinical and referral pathways, and digital health. After hours initiatives will also be considered, as appropriate.

Needs Assessment Priorities *

Needs Assessment

NWMPHN Needs Assessment 2022-2025

Priorities

Priority	Page reference
Chronic conditions - range, higher rates, lower uptake of management plans	186



Activity Demographics

Target Population Cohort

- People with chronic conditions
- Whole of population

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Darebin - South	20602
Brunswick - Coburg	20601
Macedon Ranges	21002
Darebin - North	20902
Sunbury	21004
Essendon	20603
Hobsons Bay	21302
Yarra	20607
Maribyrnong	21303
Keilor	21001
Moreland - North	21003
Tullamarine - Broadmeadows	21005
Melbourne City	20604
Melton - Bacchus Marsh	21304
Wyndham	21305
Brimbank	21301



Activity Consultation and Collaboration

Consultation

North Western Melbourne Primary Health Network (NWMPHN) is committed to ensuring stakeholder engagement is embedded in our culture and core functions.

Stakeholder engagement occurs throughout all seven activities that comprise our commissioning approach:

- Assess and prioritise needs
- Review evidence to inform planning and design
- Design services to address need
- Prepare the system for delivery
- Support implementation
- Manage performance and drive continuous improvement
- Evaluate the impact

We use a range of mechanisms to engage with our communities. This includes working with our Community and Clinical Councils and Expert Advisory Groups (EAGs).

The Clinical and Community Councils provide advice to the Board about the unique needs of the region, and principles and mechanisms for engaging local stakeholders. The Expert Advisory Groups provide subject matter expertise, insights and advice to support operational model and service design, focusing on safety, quality, and integration. NWMPHN has EAGs for:

- General Practice
- Alcohol and Other Drugs
- Mental Health
- Aboriginal Health
- Older Adults

We continue to also consult and seek specific advice from relevant strategic and local organisations and other stakeholders, such as peak and professional bodies, governments, the primary health care sector and local hospital networks.

This activity will also include meaningful key stakeholder input in the procurement and program development process. Commissioned provider(s) will also be expected to consult with community members when designing and implementing their activities.

Collaboration

NWMPHN's approach to collaboration and engagement is underpinned by the IAP2 model. Best practice in public engagement is influenced by The Spectrum of Public Participation developed by the International Association of Public Participation. This spectrum includes five levels of participation, Inform, Consult, Involve, Collaborate and Empower.

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- Community health services
- General practice
- Residential aged care facilities
- Pharmacy
- Allied health
- Community-based organisations
- Research institutes
- Academic and training institutions
- Peak and professional bodies
- Victorian Department of Health
- Local government
- Media
- Other identified providers



Activity Milestone Details/Duration

Activity Start Date

27/06/2019

Activity End Date

28/06/2025

Service Delivery Start Date

September 2019

Service Delivery End Date

30 June 2025

Other Relevant Milestones

N/A



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: Yes

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?

N/A

Co-design or co-commissioning comments

Priorities under this activity have been informed by a previous co-design activity that engaged consumers with co-morbid chronic conditions and providers to understand their experiences and to identify potential solutions to issues and system gaps.

Consumer and provider input into the specifications of activities is sought through a range of methods as appropriate using co-design.



CF - 2000 - Improve physical, mental and emotional health & wellbeing of children & families AWP 24/25



Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

CF

Activity Number *

2000

Activity Title *

Improve physical, mental and emotional health & wellbeing of children & families AWP 24/25

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 aims to improve outcomes for children and families who are at risk of poor health due to physical, psychological, emotional, social or environmental factors. The focus is on commissioning services or activities that are responsive to identified local needs and supporting families to navigate service systems and enhance self-management capabilities.

The activity also aims to promote integrated primary health care options to reduce potential preventable hospitalisations.

Description of Activity *

NWMPHN will commission outcome-based services that support children and families to receive safe, high quality, coordinated and person-centred care in their community. This includes:

- Improving the physical and mental health and wellbeing of children and families by fostering supportive environments and promoting mental health literacy and the development of relevant pathways to health and community services.
- Improving population health through early identification of developmental delays and/or behavioural concerns. This will involve coordination of services or initiatives that target childhood development with primary health care and other relevant services.
- Increase the ability of children to thrive by improving primary care capability and service delivery to care for children, young

people and their families/carers. This includes a focus on risk factors and vulnerabilities for child safety, and development of new care pathways, including integrated specialist models of care and targeted mental health/AOD initiatives.

In addition, the approaches or mechanisms, i.e. enablers, that may be used to implement this activity include care navigation and access, quality improvement, health literacy, workforce development, clinical and referral pathways and digital health. After hours initiatives will also be considered, as appropriate.

Needs Assessment Priorities *

Needs Assessment

NWMPHN Needs Assessment 2022-2025

Priorities

Priority	Page reference
Alcohol and Other Drug Services - demand, prevalence and complexity	184
Mental Health - demand, prevalence, complexity	183



Activity Demographics

Target Population Cohort

Children and families

Priority populations most at risk of poor health outcomes eg children who are developmentally vulnerable across multiple key domains

Identified geographical locations of disadvantage or regional growth areas

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

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Darebin - South	20602
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- Community health services
- General practice
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- Pharmacy
- Allied health
- Community-based organisations
- Research institutes
- Academic and training institutions
- Peak and professional bodies
- Victorian Department of Health
- Local government
- Other PHNs
- Media
- Other identified providers



Activity Milestone Details/Duration

Activity Start Date

27/06/2019

Activity End Date

28/06/2025

Service Delivery Start Date

30/06/2019

Service Delivery End Date

30/06/2025

Other Relevant Milestones

N/A

**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:** Yes**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

Yes

Decommissioning details?

NWMPHN will undertake a review of current service provider agreements against this activity and NWMPHN priorities to align with the funding schedule from 1 July 2025. A strategy for the portfolio's activities from 1 July 2025 will be developed with the intention of recommissioning via a tender. Should current programs be decommissioned, significant planning will be established to ensure that existing clients are appropriately transitioned to new services where appropriate. NWMPHN will support these providers throughout this period and monitor approach and progress.

Co-design or co-commissioning comments

NWMPHN is committed to engagement and partnership with community, consumers and their families and clinicians at all key phases of the commissioning and project lifecycles (needs assessment, planning and design, service procurement, implementation and monitoring and evaluation).

Co-design methodologies will be employed to ensure service users and clinicians have genuine input in the design and development of interventions that may be generated.

NWMPHN's parent body, Melbourne Primary Care Network, has a Stakeholder Engagement Framework and a Community Participation Plan that outlines the role of consumers at all levels of the organisation's work.



CF - 3000 - HealthPathways AWP 24/25



Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

CF

Activity Number *

3000

Activity Title *

HealthPathways AWP 24/25

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 aims to ensure readily accessible and up-to-date care pathways guidance on the HealthPathways Melbourne platform, to enable improved health outcomes for our community by connecting our consumers and clinicians through seamless pathways of care.

HealthPathways are localised, developed and reviewed in response to:

- population need;
- new or innovative models of care; and
- broader service redesign undertaken by the PHN in collaboration with health service/system stakeholders.

HealthPathways form a core component of workforce development and capability building activities aiming to reduce potentially preventable hospitalisations for people living in northwestern Melbourne. HealthPathways is a platform operated by many PHNs across Australia and is a digital health system.

Description of Activity *

HealthPathways is an on-line evidence-based guidelines and referral pathways platform, to ensure the right care for the patient, in the right place, at the right time.

NWMPHN will continue to commission services to facilitate primary care access to HealthPathways Melbourne. This relates specifically to the procurement of the HealthPathways license through Streamliners NZ Limited. HealthPathways Melbourne is jointly operated by NWMPHN and Eastern Melbourne PHN.

Continued development of content for and promotion of the HealthPathways platform to a primary care audience supports strengthened clinical decision making and simplifies transitions of care. This activity ensures that lessons arising from the development of care pathways, in collaboration with sector partners, can be captured and translated for a primary care audience. It also ensures that the HealthPathways platform is further developed as a credible source of content, thereby facilitating initiatives that underpin transformation of primary care, such as MyHealthRecord and MyAgedCare.

Key content topics of development and review align with and further support broader training and education of practitioners to better meet the needs of priority populations and to address identified priority areas. This includes Children and Families, Chronic Conditions, Mental Health, Alcohol and Other Drugs, Suicide Prevention and Aged Care.

Promotion of the HealthPathways platform thereby offers a single channel to support many messages directed to the primary care audience, which ultimately aim to improve health outcomes in northwestern Melbourne.

As a complement to broader care pathways work, this activity also continues to support the development of statewide pathways that align with clinical practice guidelines and broader sectoral reforms in partnership with the state government and its departments and agencies.

Needs Assessment Priorities *

Needs Assessment

NWMPHN Needs Assessment 2022-2025

Priorities

Priority	Page reference
Blood borne viruses and STI's - demand, increasing among young people and women	186
COVID-19 - high rates of mental health distress	185
Preventative health checks - lower rates of screening	185
Chronic conditions - range, higher rates, lower uptake of management plans	186
Comorbid conditions - complexity and demand	184
Immunisation - lower rates of immunisation	184
Smoking Cessation - higher rates	184
Alcohol and Other Drug Services - demand, prevalence and complexity	184
Mental Health - demand, prevalence, complexity	183



Activity Demographics

Target Population Cohort

Whole of population

In Scope AOD Treatment Type ***Indigenous Specific ***

No

Indigenous Specific Comments**Coverage****Whole Region**

Yes

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Darebin - South	20602
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Keilor	21001
Moreland - North	21003
Tullamarine - Broadmeadows	21005
Melbourne City	20604
Melton - Bacchus Marsh	21304
Wyndham	21305
Brimbank	21301

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

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- Older Adults

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This activity will also include meaningful key stakeholder input in the procurement and program development process. Commissioned provider(s) will also be expected to consult with community members when designing and implementing their activities.

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Collaboration with key stakeholders will occur throughout the commissioning process. Consequently, the following stakeholders may be involved in prioritisation, planning and design, implementation, monitoring and evaluation of activities:

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- Local health services and hospital networks
- Community health services
- General practice
- Residential aged care facilities
- Pharmacy
- Allied health
- Community-based organisations
- Research institutes
- Academic and training institutions
- Peak and professional bodies

- Victorian Department of Health
- Local government
- Other PHNs
- Media
- Other identified providers



Activity Milestone Details/Duration

Activity Start Date

27/06/2019

Activity End Date

28/06/2025

Service Delivery Start Date

July 2019

Service Delivery End Date

30/06/2025

Other Relevant Milestones

N/A



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?

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?

Yes

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

Yes

Decommissioning

No

Decommissioning details?

N/A

Co-design or co-commissioning comments

Please refer to the Collaboration section of this Activity for the co-commissioning details.



HSI - 1 - Health Systems Improvement AWP 24-25



Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

HSI

Activity Number *

1

Activity Title *

Health Systems Improvement AWP 24-25

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Workforce

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

GENERAL PRACTICE SUPPORT:

Capability building is the focus of our general practice support to enable general practice to deliver safe, high quality, coordinated, accessible person-centred care to their communities. This includes providing support, guidance, and resources to support the implementation of primary care reform and associated initiatives.

The aim of this activity is to:

- support general practice to collaborate with other primary health care providers and hospital colleagues to ensure an integrated and seamless care journey through multidisciplinary team care
- adopt health reform activities including but not limited to MyMedicare, General Practice Aged Care Incentive Program (GPACI) Frequent Hospital Users and Multi-disciplinary Team Models of Care
- Undertake data-driven improvement (including focus on PIP QI measures)
- Deliver evidence-based care supporting people to stay well and out of hospital
- Adopt digital health initiatives

STAKEHOLDER ENGAGEMENT & COLLABORATION:

NWMPHN is committed to ensuring collaborative stakeholder engagement is embedded in the culture and core functions of the organisation. We recognise that strong and meaningful engagement and collaboration with our stakeholders is critical to achieving our commissioning objectives and our vision for a healthy community and healthy system, and that effective engagement delivers benefits for all participants. We will capitalise and build upon the collective efforts of stakeholders across the health system to improve health outcomes for our communities.

The aim of this activity is to:

- Enhance our stakeholder engagement by evolving our approach in line with contemporary best-practice and continually developing associated organisational capability.
- Evolve our community participation model to ensure that community needs are understood and addressed, and opportunities are provided for community participation in the commissioning cycle. This acknowledges that communities have the right to influence decisions that impact their health.
- Develop and maintain successful collaborative relationships and partnerships across the health and care sector, including with service providers, peak and professional bodies, local and state government, and with consumers and local communities.
- Build and maintain robust sub-regional health system collaborations to leverage resources across the primary and acute care interface and local, state and commonwealth governments to achieve improvements against the quadruple aim and greater impact for the communities of northwestern Melbourne.

POPULATION HEALTH:

This activity aims to support and deliver integrated population health planning across the commissioning cycle. This includes building on NWMPHN's capacity to undertake the process of identifying population health needs, working with key stakeholders (including community members) to co-design and build solutions, directing resources towards these solutions, and monitoring and reviewing delivery.

The aim of the activity is to:

- Support NWMPHN's organisational strategic and commissioning goals through the provision of accurate, timely and relevant population health data, analysis and information.
- Build organisational capacity and capability regarding population health, evidence informed decisions and development, data analysis and insight building, research and evaluation.
- Ensure NWMPHN is the leader and regional data custodian and integrator for population health information.
- Continue to build and maintain digital services, data governance and supporting technical infrastructure (storage, analytics, and information systems) to support population health data quality, integrity, security, reporting and use.

Ultimately, we aim to align all commissioning activity and approaches to the identified needs of our region.

Description of Activity *

GENERAL PRACTICE SUPPORT:

Based on the NWMPHN Vision for Primary Care developed in partnership with consumers and the General Practice Expert Advisory Group the following activities will be undertaken in partnership with general practice to achieve the above aims:

Activity: Capability building

- Providing general practice with access to evidence based continuing professional development, tools and resources
- Actively support data drive quality improvement in general practice
- Provide support to practice to understand and implement policy and health reform activities

Activity: Communication

- Delivering timely and relevant localised information to health care providers
- Inform primary health care of reforms and the impact on their businesses and practice

Activity: Champion

- Advocating for primary care as the foundation for a high-performing and sustainable health system
- Engage primary health care providers to inform planning, implementation and evaluation of PHN activities; and advocate on behalf of primary health care providers and patients.

- Advocate for and undertake initiatives that support increasing the general practice workforce in the region

Activity: Coordinator

- Fostering strong partnerships and collaborations across local, state and federal governments – between primary health, acute and specialist services
- Enhance evidence-based coordinated care through multidisciplinary care and models of care
- Support the development, implementation and uptake of HealthPathways

Activity: Commissioner

- Commissioning co-designed local and regional solution – to address service gaps, reduce the burden on emergency departments, better integrate health care and ensure equitable access
- Commission practices to undertake focused projects/QI initiatives to address service gaps and ensure equitable access, with a particular focus on deferred care

STAKEHOLDER ENGAGEMENT & COLLABORATION:

NWMPHN will build on a strong history of multi-faceted stakeholder engagement, established trusted relationships and robust partnerships to support the delivery of outcomes-based commissioning and health system improvement activities.

Activities include:

Stakeholder engagement and relationship development:

- Ongoing broad mapping and analysis of stakeholders, utilising insight gained to support stakeholder management approaches.
- Ongoing enhancement of our Clinical and Community Councils and Expert Advisory Groups, to ensure meaningful input in our commissioning strategy and decision making.
- Targeted stakeholder engagement, social listening and co-design with community.
- Consultation with stakeholders on the health needs assessment, regional plans and associated commissioning intentions.
- Evolution of NWMPHN's stakeholder engagement framework and community participation plan and development of a clinical participation plan informed by latest evidence and best-practice.
- Regular and timely communication of NWMPHN's commissioning intentions and progress of commissioning processes to the community and provider market.

Regional Collaborations:

- Participation as a founding member of the Health Service Partnerships and Public Health Units in the northeast and west of Melbourne.
- Ongoing participation in formal networks and collaborations such as, the Melbourne Ageing Research Centre.
- Ongoing participation in local government health and wellbeing plan consultations and local hospital network Primary Care and Population Health Advisory Committees.
- Participation in the Victorian and Tasmanian PHN Alliance.

POPULATION HEALTH PLANNING:

Activities include:

- Ensuring robust data governance and data security at all times
- Continuing to refine the NWMPHN approach to undertaking Health Needs Assessments which was recently redeveloped to include a method for quantify need.
- Continue to build on the methods by which we make the findings and insights generated through the HNA process relevant and usable for our community and stakeholders. This will be done through the development of detailed summaries, infographics, maps and other collateral to support evidence informed commissioning and system improvement.
- Continue to ensure our information systems are fit for purpose and effectively utilised and managed to support commissioning activity.
- Implement our Research and Evaluation Strategic Action Plan (launched at the start of 2024) and continue to build the research and evaluation capacity of the organisation through arrangements with expert organisations, research institutions and universities.
- Implement our renewed Monitoring, Evaluation, Research and Learning Framework (MERL) framework which will see refreshed guidance and tools to ensure MERL is undertaken at all stages of the commissioning cycle.
- Continue to work with state and local governments, health services and other partners such as community health services, to

increase the alignment of population health data and planning in the northwestern Melbourne region

- Continue to work with the Victorian Department of Health (through the Victorian Agency for Health Information (VAHI)) to undertake shared research and evaluation activities. This includes leading engagement in data sharing, data linkage and related project collaboration.
- Continue to use General Practice data to drive quality improvement in primary care and to support the Practice Incentive Program Quality Improvement (PIPQI) program and other initiatives
- Continue to work with other PHNs in developing shared services that support more efficient and effective population health planning and reporting
- Work towards and achieve ISO27001 accreditation to ensure we have the appropriate governance and data management policies, procedures and processes in place for managing the data we receive, store and work with for population health planning.

Needs Assessment Priorities *

Needs Assessment

NWMPHN Needs Assessment 2022-2025

Priorities

Priority	Page reference
Preventative health checks - lower rates of screening	185
COVID-19 - high rates of mental health distress	185
Blood borne viruses and STI's - demand, increasing among young people and women	186
Chronic conditions - range, higher rates, lower uptake of management plans	186
Comorbid conditions - complexity and demand	184
Immunisation - lower rates of immunisation	184
Smoking Cessation - higher rates	184
Alcohol and Other Drug Services - demand, prevalence and complexity	184
Mental Health - demand, prevalence, complexity	183



Activity Demographics

Target Population Cohort

Whole of population.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

North Western Melbourne Primary Health Network (NWMPHN) is committed to ensuring stakeholder engagement is embedded in our culture and core functions.

Stakeholder engagement occurs throughout all seven activities that comprise our commissioning approach:

- Assess and prioritise needs
- Review evidence to inform planning and design
- Design services to address need
- Prepare the system for delivery
- Support implementation
- Manage performance and drive continuous improvement
- Evaluate the impact

We use a range of mechanisms to engage with our communities. This includes working with our Community and Clinical Councils, Expert Advisory Groups (EAGs) and People Bank members.

The Clinical and Community Councils provide advice to the Board about the unique needs of the region, and principles and mechanisms for engaging local stakeholders. The EAGs provide subject matter expertise, insights and advice to support operational model and service design, focusing on safety, quality, and integration. NWMPHN has EAGs for:

- General Practice
- Alcohol and Other Drugs
- Mental Health
- Aboriginal and Torres Strait Islander Health
- Older Adults

People Bank is a register of people who would like to participate in activities that help to improve the health of people in the region. Members participate in a range of different activities including workshops, governance groups, surveys, and tender evaluation panels.

We continue to also consult and seek specific advice from relevant strategic and local organisations and other stakeholders, such as peak and professional bodies, governments, the primary health care sector and local health services and hospital networks.

This activity will also include meaningful key stakeholder input in the procurement and program development process. Commissioned provider(s) will also be expected to consult with community members when designing and implementing their activities.

Collaboration

NWMPHN's approach to collaboration and engagement is underpinned by the IAP2 model. Best practice in public engagement is influenced by the Spectrum of Public Participation developed by the International Association of Public Participation. This spectrum includes five levels of participation, Inform, Consult, Involve, Collaborate and Empower.

Collaboration will be utilised wherever possible throughout the commissioning cycle as NWMPHN recognises that working in this way adds value and strengthens our reach. Mutually meaningful collaboration is pursued and maintained in a systematic way

across the organisation, which facilitates timely access to existing and new collaboration approaches. This is critical to driving a team-based and integrated approach to delivering person-centred primary care.

Collaboration with key stakeholders will occur throughout the commissioning process. Consequently, the following stakeholders may be involved in prioritisation, planning and design, implementation, monitoring and evaluation of activities:

- Community participants – consumers, patients, carers, and people with lived experience, priority populations, community leaders
- Health care professionals
- NWMPHN regional and strategic partnerships and collaboratives
- Local health services and hospital networks
- Community health services
- General practice
- Residential aged care facilities
- Pharmacy
- Allied health
- Community-based organisations
- Research institutes
- Academic and training institutions
- Peak and professional bodies
- Victorian Department of Health
- Local government
- Other PHNs
- Media
- Other identified providers



Activity Milestone Details/Duration

Activity Start Date

27/06/2019

Activity End Date

28/06/2025

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones

NA



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?

na

Co-design or co-commissioning comments

Please refer to the Consultation and Collaboration sections in this Activity for the co-design details.



HSI - 3100 - Primary Health Networks - HealthPathways AWP 24/25



Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

HSI

Activity Number *

3100

Activity Title *

Primary Health Networks - HealthPathways AWP 24/25

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Workforce

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

This activity aims to:

- support access to the HealthPathways platform by primary care practitioners in the NWMPHN region promote best-practice care and enhance local clinician's awareness of referral options and services
- improve collaboration and integration across the health care and other systems to enable improved health outcomes for the community by connecting consumers and clinicians through seamless pathways of care.

This funding will be utilised to enhance clinical and referral content on HealthPathways, create better linkages between primary health care services, local hospital services and other relevant providers, improve the patient journey, and increase practitioner capabilities and their quality of care.

HealthPathways are localised, developed and reviewed in response to:

- federal priorities, with the exception of Aged Care and Dementia which are standalone AWP Activities
- population need;

- new or innovative models of care.; and
- broader service redesign undertaken by the PHN in collaboration with health service/system stakeholders.

HealthPathways form a core component of workforce development and capability building aiming to reduce potentially preventable hospitalisations for people living in northwestern Melbourne.

Description of Activity *

HealthPathways is a collaborative platform that provides health practitioners with access to localised assessment, management and referral information on a large number of health conditions. It helps them to make informed decisions with their patients about the care that is right for them. HealthPathways Melbourne is jointly operated by NWMPHN and Eastern Melbourne PHN.

NWMPHN is committed to ensuring general practice teams and other primary care clinicians in our region continue to receive free access to HealthPathways Melbourne and have easy access to seamless and local referral pathways that support accurate, timely and safe transitions of care.

NWMPHN will achieve this by continuing to commission services to facilitate primary care access to HealthPathways Melbourne including the procurement of the HealthPathways license through Streamliners NZ Limited and the contracting of clinical editors to support the development or review of clinical and referral content across the platform.

To maximise effectiveness and general practice engagement with the platform, NWMPHN will continue to maintain the existing suites of pathways, ensuring the pathways are clinically relevant, accurate and functional to support general practice capability. Key content topics of development and review, align with and further support broader training and education of practitioners to better meet the needs of priority populations and to address identified priority areas. This includes Palliative Care, Chronic Conditions, Mental Health, Alcohol and Other Drugs and Suicide Prevention.

In addition, the HealthPathways platform offers a single channel of communications to primary care on important clinical and referral information. NWMPHN will continue to implement communication and engagement strategies across the region to raise awareness, engagement and utilisation of the pathways by both the end users, but also our health sector partners. Ongoing monitoring of the platform will also be undertaken to ensure we can continuously improve the platform offering and user experience.

Needs Assessment Priorities *

Needs Assessment

NWMPHN Needs Assessment 2022-2025

Priorities

Priority	Page reference
Blood borne viruses and STI's - demand, increasing among young people and women	186
COVID-19 - high rates of mental health distress	185
Preventative health checks - lower rates of screening	185
Chronic conditions - range, higher rates, lower uptake of management plans	186
Comorbid conditions - complexity and demand	184
Immunisation - lower rates of immunisation	184
Smoking Cessation - higher rates	184
Alcohol and Other Drug Services - demand, prevalence and complexity	184
Mental Health - demand, prevalence, complexity	183



Activity Demographics

Target Population Cohort

Whole of population

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

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- Assess and prioritise needs
- Review evidence to inform planning and design
- Design services to address need
- Prepare the system for delivery
- Support implementation
- Manage performance and drive continuous improvement
- Evaluate the impact

We use a range of mechanisms to engage with our communities. This includes working with our Community and Clinical Councils, Expert Advisory Groups (EAGs) and People Bank members.

The Clinical and Community Councils provide advice to the Board about the unique needs of the region, and principles and mechanisms for engaging local stakeholders. The EAGs provide subject matter expertise, insights and advice to support operational model and service design, focusing on safety, quality, and integration. NWMPHN has EAGs for:

- General Practice
- Alcohol and Other Drugs
- Mental Health
- Aboriginal and Torres Strait Islander Health

- Older Adults

People Bank is a register of people who would like to participate in activities that help to improve the health of people in the region. Members participate in a range of different activities including workshops, governance groups, surveys, and tender evaluation panels.

We continue to also consult and seek specific advice from relevant strategic and local organisations and other stakeholders, such as peak and professional bodies, governments, the primary health care sector and local health services and hospital networks.

This activity will also include meaningful key stakeholder input in the procurement and program development process. Commissioned provider(s) will also be expected to consult with community members when designing and implementing their activities.

Collaboration

NWMPHN's approach to collaboration and engagement is underpinned by the IAP2 model. Best practice in public engagement is influenced by the Spectrum of Public Participation developed by the International Association of Public Participation. This spectrum includes five levels of participation, Inform, Consult, Involve, Collaborate and Empower.

Collaboration will be utilised wherever possible throughout the commissioning cycle as NWMPHN recognises that working in this way adds value and strengthens our reach. Mutually meaningful collaboration is pursued and maintained in a systematic way across the organisation, which facilitates timely access to existing and new collaboration approaches. This is critical to driving a team-based and integrated approach to delivering person-centred primary care.

Collaboration with key stakeholders will occur throughout the commissioning process. Consequently, the following stakeholders may be involved in prioritisation, planning and design, implementation, monitoring and evaluation of activities:

- Community participants – consumers, patients, carers, and people with lived experience, priority populations, community leaders
- Health care professionals
- NWMPHN regional and strategic partnerships and collaboratives
- Local health services and hospital networks
- Community health services
- General practice
- Residential aged care facilities
- Pharmacy
- Allied health
- Community-based organisations
- Research institutes
- Academic and training institutions
- Peak and professional bodies
- Victorian Department of Health
- Local government
- Other PHNs
- Media
- Other identified providers



Activity Milestone Details/Duration

Activity Start Date

28/03/2022

Activity End Date

28/06/2025

Service Delivery Start Date

Service Delivery End Date

30/06/2025

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?

Yes

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

Yes

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

Yes

Decommissioning

No

Decommissioning details?

Co-design or co-commissioning comments

HealthPathways Melbourne is jointly operated by NWMPHN and Eastern Melbourne PHN who will jointly commission Streamliners New Zealand Ltd to support platform maintenance and ongoing pathway development.



HSI - 3200 - Aged Care HealthPathways AWP 24/25



Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

HSI

Activity Number *

3200

Activity Title *

Aged Care HealthPathways AWP 24/25

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Workforce

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

This activity aims to:

- support access to the HealthPathways platform by primary care practitioners in the NWMPHN region
- promote best-practice care and enhance local clinician's awareness of referral options and services in Aged Care
- improve collaboration and integration across the health care and other systems to enable improved health outcomes for the community by connecting consumers and clinicians through seamless pathways of care.

This funding will be utilised to enhance aged care clinical and referral content on the HealthPathways platform, create better linkages between primary health care services, local hospital services and other relevant providers, improve the patient journey, and increase practitioner capabilities and their quality of care.

HealthPathways form a core component of workforce development and capability building aiming to reduce potentially preventable hospitalisations for people living in North Western Melbourne

Description of Activity *

HealthPathways is a collaborative platform that provides health practitioners with access to localised assessment, management and referral information on a large number of health conditions. It helps them to make informed decisions with their patients

about the care that is right for them. HealthPathways Melbourne is jointly operated by NWMPHN and Eastern Melbourne PHN.

NWMPHN is committed to ensuring general practice teams and other primary care clinicians in our region continue to receive free access to HealthPathways Melbourne and have easy access to seamless and local referral pathways that support accurate, timely and safe transitions of care.

NWMPHN will achieve this by continuing to commission services to facilitate primary care access to HealthPathways Melbourne including the procurement of the HealthPathways license through Streamliners NZ Limited and the contracting of clinical editors to support the development or review of clinical and referral content across the platform.

A key priority for HealthPathways Melbourne will be the review and improvement of our suite of Aged care HealthPathways.

NWMPHN will:

Provide GPs with access to up-to-date Aged Care pathways that:

- Provide evidence-based guidance on how to support their older adult patients to live safely and independently in the community e.g. falls prevention and chronic conditions and comorbidity management.
- Have been developed in consultation with local health practitioners.
- Include clinical and referral pathways that support health professionals to provide advice, referrals, and connections for senior Australians into local health, support and aged care services.
- Assist GPs to manage their patients when entering or residing in residential aged care facilities.
- Are closely developed/updated alongside a suite of Dementia pathways and will also complement other existing suites such as Palliative Care.

Use various communication channels (e.g. newsletter, social media, workforce development events) to promote the suite of aged care and dementia pathways to increase the awareness, engagement, and utilisation of these pathways by local health care practitioners (including GPs, allied health and practice staff) and engage local clinical practitioners, consumers and aged care stakeholders and experts in their development

HealthPathways Melbourne will continue to work collectively with our Victorian PHN colleagues to undertake this work and will engage closely with local primary care practitioners, consumers, and other relevant stakeholders, to ensure best practice and evidence-based models of care are translated into consistent, practical guidance for primary care. Further details regarding collaboration and consultation are outlined below.

In addition, the HealthPathways platform offers a single channel of communications to primary care on important clinical and referral information. NWMPHN will continue to implement communication and engagement strategies across the region to raise awareness, engagement and utilisation of the pathways by both the end users, but also our health sector partners. Ongoing monitoring of the platform will also be undertaken to ensure we can continuously improve the platform offering and user experience.

Needs Assessment Priorities *

Needs Assessment

NWMPHN Needs Assessment 2022-2025

Priorities

Priority	Page reference
Blood borne viruses and STI's - demand, increasing among young people and women	186
COVID-19 - high rates of mental health distress	185
Preventative health checks - lower rates of screening	185
Chronic conditions - range, higher rates, lower uptake of management plans	186
Comorbid conditions - complexity and demand	184
Immunisation - lower rates of immunisation	184
Smoking Cessation - higher rates	184
Alcohol and Other Drug Services - demand, prevalence and complexity	184
Mental Health - demand, prevalence, complexity	183



Activity Demographics

Target Population Cohort

Whole of population

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

North Western Melbourne Primary Health Network (NWMPHN) is committed to ensuring stakeholder engagement is embedded in our culture and core functions.

Stakeholder engagement occurs throughout all seven activities that comprise our commissioning approach:

- Assess and prioritise needs
- Review evidence to inform planning and design
- Design services to address need
- Prepare the system for delivery
- Support implementation
- Manage performance and drive continuous improvement
- Evaluate the impact

We use a range of mechanisms to engage with our communities. This includes working with our Community and Clinical Councils, Expert Advisory Groups (EAGs) and People Bank members.

The Clinical and Community Councils provide advice to the Board about the unique needs of the region, and principles and mechanisms for engaging local stakeholders. The EAGs provide subject matter expertise, insights and advice to support operational model and service design, focusing on safety, quality, and integration. NWMPHN has EAGs for:

- General Practice
- Alcohol and Other Drugs
- Mental Health
- Aboriginal and Torres Strait Islander Health
- Older Adults

People Bank is a register of people who would like to participate in activities that help to improve the health of people in the region. Members participate in a range of different activities including workshops, governance groups, surveys, and tender evaluation panels.

We continue to also consult and seek specific advice from relevant strategic and local organisations and other stakeholders, such as peak and professional bodies, governments, the primary health care sector and local health services and hospital networks.

This activity will also include meaningful key stakeholder input in the procurement and program development process. Commissioned provider(s) will also be expected to consult with community members when designing and implementing their activities.

Collaboration

NWMPHN's approach to collaboration and engagement is underpinned by the IAP2 model. Best practice in public engagement is influenced by the Spectrum of Public Participation developed by the International Association of Public Participation. This spectrum includes five levels of participation, Inform, Consult, Involve, Collaborate and Empower.

Collaboration will be utilised wherever possible throughout the commissioning cycle as NWMPHN recognises that working in this way adds value and strengthens our reach. Mutually meaningful collaboration is pursued and maintained in a systematic way across the organisation, which facilitates timely access to existing and new collaboration approaches. This is critical to driving a team-based and integrated approach to delivering person-centred primary care.

Collaboration with key stakeholders will occur throughout the commissioning process. Consequently, the following stakeholders may be involved in prioritisation, planning and design, implementation, monitoring and evaluation of activities:

- Community participants – consumers, patients, carers, and people with lived experience, priority populations, community leaders
- Health care professionals
- NWMPHN regional and strategic partnerships and collaboratives
- Local health services and hospital networks
- Community health services
- General practice
- Residential aged care facilities
- Pharmacy
- Allied health
- Community-based organisations
- Research institutes
- Academic and training institutions

- Peak and professional bodies
- Victorian Department of Health
- Local government
- Other PHNs
- Media
- Other identified providers



Activity Milestone Details/Duration

Activity Start Date

18/03/2022

Activity End Date

28/06/2025

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): 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?

Yes

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

Yes

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

Yes

Decommissioning

No

Decommissioning details?

Co-design or co-commissioning comments

HealthPathways Melbourne is jointly operated by NWMPHN and Eastern Melbourne PHN who will jointly commission Streamliners New Zealand Ltd to support platform maintenance and ongoing pathway development.



HSI - 3300 - Dementia - HealthPathways AWP 24/25



Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

HSI

Activity Number *

3300

Activity Title *

Dementia - HealthPathways AWP 24/25

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Workforce

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

This activity aims to:

- support access to the HealthPathways platform by primary care practitioners in the NWMPHN region
- promote best-practice care and enhance local clinician's awareness of referral options and services in aged care
- improve collaboration and integration across the health care and other systems to enable improved health outcomes for the community by connecting consumers and clinicians through seamless pathways of care.

This funding will be utilised to enhance clinical and referral content for dementia on HealthPathways, create better linkages between primary health care services, local hospital services and other relevant providers, improve the patient journey, and increase practitioner capabilities and their quality of care for people with dementia and their carers.

HealthPathways form a core component of workforce development and capability building aiming to reduce potentially preventable hospitalisations for people living in northwestern Melbourne.

Description of Activity *

HealthPathways is a collaborative platform that provides health practitioners with access to localised assessment, management and referral information on a large number of health conditions. It helps them to make informed decisions with their patients about the care that is right for them. HealthPathways Melbourne is jointly operated by NWMPHN and Eastern Melbourne PHN.

NWMPHN is committed to ensuring general practice teams and other primary care clinicians in our region continue to receive free access to HealthPathways Melbourne and have easy access to seamless and local referral pathways that support accurate, timely and safe transitions of care.

HealthPathways Melbourne has worked collectively with our Victorian PHN colleagues to undertake this work and has engaged closely with key stakeholders such as Dementia Australia, to ensure best practice and evidence-based models of care are translated into consistent, practical guidance for primary care.

HealthPathways Melbourne has developed and published a Dementia HealthPathways suite that provides GPs and local health professionals with advice on:

- risk reduction and early intervention activities that aim to prevent or delay the onset or progression of Dementia
- evidence based strategies to address changes in mood, behavioural changes, medication management, driving and carer services
- MBS items to support the delivery of Dementia care in the community;
- Referral pathways to diagnostic services, memory services, carer services and other supporting therapies such as Allied Health or peak body service offerings.
- How to prepare and update chronic disease management plans specific for people experiencing Dementia

The Dementia HealthPathways suite has been closely developed alongside a suite of Aged Care pathways and complements other existing suites such as Palliative Care.

HealthPathways Melbourne worked collectively with our Victorian PHN colleagues to undertake this work, engage with key stakeholders such as Dementia Australia, to ensure best practice and evidence-based models of care are translated into consistent, practical guidance for primary care. Further details regarding collaboration and consultation are outlined below.

HealthPathways Melbourne will continue to maintain Dementia Pathways

- Review and improve dementia clinical pathways to better support prevention, mild cognitive impairment, younger onset dementia and end stage dementia.
- Update clinical pathways to address additional feedback received post the initial go-live date

In addition, the HealthPathways platform offers a single channel of communications to primary care on important clinical and referral information. NWMPHN will continue to implement communication and engagement strategies across the region to raise awareness, engagement, and utilisation of the pathways by both the end users, but also our health sector partners. Ongoing monitoring of the platform will also be undertaken to ensure we can continuously improve the platform offering and user experience.

Needs Assessment Priorities *

Needs Assessment

NWMPHN Needs Assessment 2022-2025

Priorities

Priority	Page reference
Preventative health checks - lower rates of screening	185
COVID-19 - high rates of mental health distress	185
Blood borne viruses and STI's - demand, increasing among young people and women	186
Chronic conditions - range, higher rates, lower uptake of management plans	186
Comorbid conditions - complexity and demand	184
Immunisation - lower rates of immunisation	184
Smoking Cessation - higher rates	184
Alcohol and Other Drug Services - demand, prevalence and complexity	184
Mental Health - demand, prevalence, complexity	183



Activity Demographics

Target Population Cohort

Whole of population

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

North Western Melbourne Primary Health Network (NWMPHN) is committed to ensuring stakeholder engagement is embedded in our culture and core functions.

Stakeholder engagement occurs throughout all seven activities that comprise our commissioning approach:

- Assess and prioritise needs
- Review evidence to inform planning and design
- Design services to address need
- Prepare the system for delivery
- Support implementation
- Manage performance and drive continuous improvement
- Evaluate the impact

We use a range of mechanisms to engage with our communities. This includes working with our Community and Clinical Councils, Expert Advisory Groups (EAGs) and People Bank members.

The Clinical and Community Councils provide advice to the Board about the unique needs of the region, and principles and mechanisms for engaging local stakeholders. The EAGs provide subject matter expertise, insights and advice to support operational model and service design, focusing on safety, quality, and integration. NWMPHN has EAGs for:

- General Practice
- Alcohol and Other Drugs
- Mental Health
- Aboriginal and Torres Strait Islander Health
- Older Adults

People Bank is a register of people who would like to participate in activities that help to improve the health of people in the region. Members participate in a range of different activities including workshops, governance groups, surveys, and tender evaluation panels.

We continue to also consult and seek specific advice from relevant strategic and local organisations and other stakeholders, such as peak and professional bodies, governments, the primary health care sector and local health services and hospital networks.

This activity will also include meaningful key stakeholder input in the procurement and program development process. Commissioned provider(s) will also be expected to consult with community members when designing and implementing their activities.

Collaboration

NWMPHN's approach to collaboration and engagement is underpinned by the IAP2 model. Best practice in public engagement is influenced by the Spectrum of Public Participation developed by the International Association of Public Participation. This spectrum includes five levels of participation, Inform, Consult, Involve, Collaborate and Empower.

Collaboration will be utilised wherever possible throughout the commissioning cycle as NWMPHN recognises that working in this way adds value and strengthens our reach. Mutually meaningful collaboration is pursued and maintained in a systematic way across the organisation, which facilitates timely access to existing and new collaboration approaches. This is critical to driving a team-based and integrated approach to delivering person-centred primary care.

Collaboration with key stakeholders will occur throughout the commissioning process. Consequently, the following stakeholders may be involved in prioritisation, planning and design, implementation, monitoring and evaluation of activities:

- Community participants – consumers, patients, carers, and people with lived experience, priority populations, community leaders
- Health care professionals
- NWMPHN regional and strategic partnerships and collaboratives
- Local health services and hospital networks
- Community health services
- General practice
- Residential aged care facilities
- Pharmacy
- Allied health
- Community-based organisations
- Research institutes

- Academic and training institutions
- Peak and professional bodies
- Victorian Department of Health
- Local government
- Other PHNs
- Media
- Other identified providers



Activity Milestone Details/Duration

Activity Start Date

18/03/2022

Activity End Date

28/06/2025

Service Delivery Start Date

01/01/2022

Service Delivery End Date

Other Relevant Milestones

Dementia HealthPathways were published by 1 January 2023.

Awareness raising and promotional initiatives, education and training events and evaluation activities to commence from 1 January 2023 following publication of the Dementia pathway suite.



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?

Yes

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

Yes

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

Yes

Decommissioning

No

Decommissioning details?

Co-design or co-commissioning comments

HealthPathways Melbourne is jointly operated by NWMPHN and Eastern Melbourne PHN who will jointly commission Streamliners New Zealand Ltd to support platform maintenance and ongoing pathway development.



HSI - 3400 - Primary Health Networks - Dementia consumer pathways resource AWP 24/25



Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

HSI

Activity Number *

3400

Activity Title *

Primary Health Networks - Dementia consumer pathways resource AWP 24/25

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Workforce

Other Program Key Priority Area Description

Aim of Activity *

This activity aims to:

- Develop and maintain dementia support pathway resources for people with lived experience of dementia and their support network to support them to make more informed choices regarding their care, and to provide them with greater visibility of relevant services within their local region and how to access them.

Description of Activity *

NWMPHN in partnership with EMPHN has developed a suite of dementia specific consumer resources for people with a lived experience of cognitive impairment or Dementia, and their carer networks.

To ensure effective and meaningful resources are developed and utilised by consumers, the resources were developed in consultation with carers and providers and informed by resources already developed by Dementia Australia.

The resources aim to address the following information at a minimum:

- Diagnostic process for Dementia
- Evidence based management options to support independence and quality of life in people newly diagnosed with dementia or memory issues.

- Contact details of relevant support services for both consumers and carers in the NWMPHN region, including services funded by local, state and federal government the private sector or community driven organisations. This includes but is not limited to Dementia Australia, Carers Gateway and My Aged Care.

The suite of resources take into consideration health literacy principles and will include specific resources designed to meet the needs of people from culturally and linguistically diverse backgrounds, including the translation of resources into multiple languages specific to our region. Local dementia supports and services are published on an online dementia directory. The online directory will be accessible via a link and QR code on the consumer resource.

NWMPHN in partnership with EMPHN will:

- Make the suite of resources and the online dementia directory available to easily download, share or print from the HealthPathways platform, to enable GPs to easily distribute the resource to consumers and their carer networks during a consultation.
- Make the resources available through PHN websites and other relevant partner websites where possible (including Dementia Australian Helpline staff).
- Promote and increase awareness, engagement, and utilisation of the dementia consumer resources by clinicians including general practitioners with their patients, by leveraging our existing and established communication channels, and ensuring the resources are consistently promoted within other workforce development activities.
- Monitor, evaluate and improve the resources following implementation to ensure ongoing effectiveness and impact.

Where feasible, HealthPathways Melbourne will collaborate with our Victorian PHN partners on this activity to enhance efficiency and promote consistency across the state.

Needs Assessment Priorities *

Needs Assessment

NWMPHN Needs Assessment 2022-2025

Priorities

Priority	Page reference
Preventative health checks - lower rates of screening	185
Chronic conditions - range, higher rates, lower uptake of management plans	186
Mental Health - demand, prevalence, complexity	183



Activity Demographics

Target Population Cohort

Whole of population

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

North Western Melbourne Primary Health Network (NWMPHN) is committed to ensuring stakeholder engagement is embedded in our culture and core functions.

Stakeholder engagement occurs throughout all seven activities that comprise our commissioning approach:

- Assess and prioritise needs
- Review evidence to inform planning and design
- Design services to address need
- Prepare the system for delivery
- Support implementation
- Manage performance and drive continuous improvement
- Evaluate the impact

We use a range of mechanisms to engage with our communities. This includes working with our Community and Clinical Councils, Expert Advisory Groups (EAGs) and People Bank members.

The Clinical and Community Councils provide advice to the Board about the unique needs of the region, and principles and mechanisms for engaging local stakeholders. The EAGs provide subject matter expertise, insights and advice to support operational model and service design, focusing on safety, quality, and integration. NWMPHN has EAGs for:

- General Practice
- Alcohol and Other Drugs
- Mental Health
- Aboriginal and Torres Strait Islander Health
- Older Adults

People Bank is a register of people who would like to participate in activities that help to improve the health of people in the region. Members participate in a range of different activities including workshops, governance groups, surveys, and tender evaluation panels.

We continue to also consult and seek specific advice from relevant strategic and local organisations and other stakeholders, such as peak and professional bodies, governments, the primary health care sector and local health services and hospital networks.

This activity will also include meaningful key stakeholder input in the procurement and program development process. Commissioned provider(s) will also be expected to consult with community members when designing and implementing their activities.

Collaboration

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Activity Milestone Details/Duration

Activity Start Date

18/03/2022

Activity End Date

28/06/2025

Service Delivery Start Date

01/01/2023

Service Delivery End Date

30/06/2025

Other Relevant Milestones

It is expected that an initial suite of Dementia consumer and carer resources be available by January 2023



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?

Yes

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

No

Decommissioning

No

Decommissioning details?

Co-design or co-commissioning comments

HealthPathways Melbourne is jointly operated by NWMPHN and Eastern Melbourne. HealthPathways Melbourne is exploring with their Victorian HealthPathways partners how we may collaborate and potentially co-commission components of this work to ensure consistency across the state and more streamlined consultation with Dementia Australia, without compromising the local relevance and benefit of the resource for the consumer.



CG - 1 - Corporate Governance AWP 24/25



Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

CG

Activity Number *

1

Activity Title *

Corporate Governance AWP 24/25

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 - 4000 - COVID-19 Primary Care Support AWP 24/25



Activity Metadata

Applicable Schedule *

Core Funding

Activity Prefix *

CF-COVID-PCS

Activity Number *

4000

Activity Title *

COVID-19 Primary Care Support AWP 24/25

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 will provide support for:

- Australia's COVID-19 Vaccine and Treatment Strategy (Strategy) to the primary care, aged care and disability sectors
- General practice to provide care to COVID positive patients, including the provision of antiviral treatment

Description of Activity *

NWMPHN will provide support for:

Australia's COVID-19 Vaccine and Treatment Strategy (Strategy) to the primary care, aged care and disability sectors general practice to provide care to COVID positive patients, including the provision of antiviral treatment by undertaking the following activities:

- Provide guidance, advice and support to general practices, Aboriginal Community Controlled Health Services, RACFs and disability accommodation facilities through direct engagement and communication channels such as websites, newsletters and direct emails, including sharing of Department of Health Updates
- Where required, coordinate vaccine rollout with RACFs and disability accommodation facilities, including local service integration and communication, identification of risks and issues and working with sector and government to overcome these, liaising with

usual care providers (including general practice) and vaccine providers

- Provide support for vaccine delivery sites practices providing vaccination for COVID-19 including support with CVAS, ordering, troubleshooting, adding details on the Service Finder etc
- Support the Department of Health Vaccination team to follow up any local issues regarding vaccine providers
- Deliver messaging to NWMPHN communities encouraging vaccination uptake
- Provide education and updates to general practices regarding antiviral updates and changes

Needs Assessment Priorities *

Needs Assessment

NWMPHN Needs Assessment 2022-2025

Priorities

Priority	Page reference
COVID-19 - high rates of mental health distress	185
Immunisation - lower rates of immunisation	184



Activity Demographics

Target Population Cohort

Whole of population.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

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- Design services to address need
- Prepare the system for delivery
- Support implementation
- Manage performance and drive continuous improvement
- Evaluate the impact

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People Bank is a register of people who would like to participate in activities that help to improve the health of people in the region. Members participate in a range of different activities including workshops, governance groups, surveys, and tender evaluation panels.

We continue to also consult and seek specific advice from relevant strategic and local organisations and other stakeholders, such as peak and professional bodies, governments, the primary health care sector and local health services and hospital networks.

This activity will also include meaningful key stakeholder input in the procurement and program development process. Commissioned provider(s) will also be expected to consult with community members when designing and implementing their activities.

Collaboration

NWMPHN's approach to collaboration and engagement is underpinned by the IAP2 model. Best practice in public engagement is influenced by the Spectrum of Public Participation developed by the International Association of Public Participation. This spectrum includes five levels of participation, Inform, Consult, Involve, Collaborate and Empower.

Collaboration will be utilised wherever possible throughout the commissioning cycle as NWMPHN recognises that working in this way adds value and strengthens our reach. Mutually meaningful collaboration is pursued and maintained in a systematic way across the organisation, which facilitates timely access to existing and new collaboration approaches. This is critical to driving a team-based and integrated approach to delivering person-centred primary care.

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- Community health services

- General practice
- Residential aged care facilities
- Pharmacy
- Allied health
- Community-based organisations
- Research institutes
- Academic and training institutions
- Peak and professional bodies
- Victorian Department of Health
- Local government
- Other PHNs
- Media
- Other identified providers



Activity Milestone Details/Duration

Activity Start Date

28/06/2021

Activity End Date

29/12/2023

Service Delivery Start Date

01/07/2021

Service Delivery End Date

31/12/2023

Other Relevant Milestones

N/A



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?

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?

N/A

Co-design or co-commissioning comments

Please refer to the Consultation and Collaboration sections of this Activity for the co-design details.