Australian Capital Territory - PHN Pilots and Targeted Programs 2025/26 - 2028/29
Activity Summary View

PP&TP-LARC - 1 - Long-acting reversible contraception (LARC) Centres of Excellence (CoE)

Activity Metadata

Applicable Schedule *

PHN Pilots and Targeted Programs

Activity Prefix *

PP&TP-LARC

Activity Number *

1

Activity Title *

Long-acting reversible contraception (LARC) Centres of Excellence (CoE)

Existing, Modified or New Activity *

New Activity

Activity Priorities and Description

Program Key Priority Area *

Population Health

Other Program Key Priority Area Description

Aim of Activity *

This activity provides funding to support the establishment and operation of a LARC CoE in the ACT. The LARC CoE will provide:
• LARC insertion and removal training to health professionals to increase skill, capability and confidence in performing LARC services.
• LARC insertion and removal services at no cost to patients.
- Contraceptive counselling.
• an intake and referral service for health professionals to refer patients where the provider is not trained or confident in delivering these services.
• an assessment of any required outreach service to regional areas surrounding the ACT, for delivery of LARC training to health

professionals and/or services to patients from those areas.

Description of Activity *

ACT PHN has selected an appropriate provider, who meets the neccessary requirements to deliver the LARC CoE, the same provider who is currently delivering the Endometriosis and Pelvic Pain Clinic. ACT PHN will undertake:
• Commissioning the existing and appropriate service provider to establish and operate a LARC CoE for the ACT.
• Provide administrative support and funding to the commissioned service provider to enable the operation of the LARC CoE.
• Report on the operations and outcomes of the commissioned LARC CoE.
• Undertake ongoing monitoring, evaluation and reporting of activity outcomes, including supporting the LARC CoE's participation and contribution to evaluation activities.

Needs Assessment Priorities *

Needs Assessment

Australian Capital Territory-Needs Assessment 2024/25 - 2026/27_V1

Priorities

Priority	Page reference
Chronic conditions	38
Care Across the Continuum	16



Activity Demographics

Target Population Cohort

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Milestone Details/Duration

Activity Start Date

03/03/2026

Activity End Date

29/06/2029

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones

Contract execution
Service commencement
Performance and reporting



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



Summary of activity changes for Department

Activity Status

Submitted

Subject	Description	Commented By	Date Created

PP&TPLARC-Ad - 2 - Long-acting reversible contraception CoE – Admin

Activity Metadata

Applicable Schedule *

PHN Pilots and Targeted Programs

Activity Prefix *

PP&TPLARC-Ad

Activity Number *

2

Activity Title *

Long-acting reversible contraception CoE – Admin

Existing, Modified or New Activity *

New Activity

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 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



Summary of activity changes for Department

Activity Status

Submitted

Subject	Description	Commented By	Date Created

PP&TP-GCPC - 2 - Greater Choice for At Home Palliative Care in the ACT - Operational

Activity Metadata

Applicable Schedule *

PHN Pilots and Targeted Programs

Activity Prefix *

PP&TP-GCPC

Activity Number *

2

Activity Title *

Greater Choice for At Home Palliative Care in the ACT - Operational

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 fund operational expenditure associated with activity

Description of Activity *

To fund operational expenditure associated with activity

Needs Assessment Priorities *

Needs Assessment

Australian Capital Territory-Needs Assessment 2024/25 - 2026/27_V1

Priorities

Priority	Page reference
Older adults' health	155
Chronic conditions	38
Care Across the Continuum	16

Activity Demographics

Target Population Cohort

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

Activity Milestone Details/Duration

Activity Start Date

04/11/2021

Activity End Date

29/06/2029

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



Summary of activity changes for Department

Activity Status

Submitted

Subject	Description	Commented By	Date Created

PP&TP – BB - 1 - Stream 1 - Bulk Billing Initiative

Activity Metadata

Applicable Schedule *

PHN Pilots and Targeted Programs

Activity Prefix *

PP&TP – BB

Activity Number *

1

Activity Title *

Stream 1 - Bulk Billing Initiative

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 *

The purpose of this activity is to provide people living in the ACT with more bulk billed primary care services

Description of Activity *

CHN has commissioned three providers through an open procurement process to establish three new, fully bulk-billed practices in identified priority locations in Canberra. Funding will support provider operational expenditure as per the funding agreement. The providers will be responsible for the attraction, relocation and upskilling of approximately 10 GPs per practice. The practices will work to improve health equity, access and outcomes by promoting earlier intervention and continuity of care. The intent is for providers to achieve practice viability and a sustainable workforce by the end of the funding period.

Needs Assessment Priorities *

Needs Assessment

Australian Capital Territory-Needs Assessment 2024/25 - 2026/27_V1

Priorities

Priority	Page reference
People at Risk of Poor Health Outcomes	121



Activity Demographics

Target Population Cohort

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Milestone Details/Duration

Activity Start Date

16/12/2025

Activity End Date

29/06/2028

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: Yes
Expression Of Interest (EOI): Yes
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



Summary of activity changes for Department

Activity Status

Submitted

Subject	Description	Commented By	Date Created

PP&TP – BB - 2 - Stream 2 - Interchange Health Co-op

Activity Metadata

Applicable Schedule *

PHN Pilots and Targeted Programs

Activity Prefix *

PP&TP – BB

Activity Number *

2

Activity Title *

Stream 2 - Interchange Health Co-op

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 *

The purpose of this activity is to provide people living in the ACT with more bulk billed primary care services.

Description of Activity *

CHN through a direct approach procurement process, will provide seed funding to support Tuggeranong Family Medical Practice (formerly Interchange) to establish a long-term viable bulk billing business model, underpinned by a sustainable workforce. Funding will support operational expenditure as per the funding agreement, continuity of care for existing and new patients, and comprehensive wrap-around primary care to patients with complex health needs and those at risk of poorer health outcomes.

Needs Assessment Priorities *

Needs Assessment

Australian Capital Territory-Needs Assessment 2024/25 - 2026/27_V1

Priorities

Priority	Page reference
People at Risk of Poor Health Outcomes	121



Activity Demographics

Target Population Cohort

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Milestone Details/Duration

Activity Start Date

16/12/2025

Activity End Date

29/06/2026

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: No
Continuing Service Provider / Contract Extension: No
Direct Engagement: Yes
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



Summary of activity changes for Department

Activity Status

Submitted

Subject	Description	Commented By	Date Created

PP&TP-EPP - 1 - ACT Endometriosis and Pelvic Plain Clinic

Activity Metadata

Applicable Schedule *

PHN Pilots and Targeted Programs

Activity Prefix *

PP&TP-EPP

Activity Number *

1

Activity Title *

ACT Endometriosis and Pelvic Plain Clinic

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 *

Enable the delivery of and improve access to endometriosis and pelvic pain services in primary care setting.

Description of Activity *

The provision of multi-disciplinary care with a focus on improving diagnostic delay and to promote early access to intervention, care and treatment options for endometriosis, pelvic pain, perimenopause and menopause.
The provider has achieved this by ensuring:
a. improved access for patients to diagnostic, treatment and referral services for endometriosis and pelvic pain;
b. improve access for patients to care, treatment and management for perimenopause and menopause
c. provision of access to new information, support resources, care pathways and networks
d. provision of an appropriately trained workforce with expertise in endometriosis, pelvic pain, perimenopause and menopause
e. increased access to support services, either through a nurse navigator or referral pathway
B. Enhanced Endometriosis and Pelvic Pain services
The provider has met this objective through presenting training sessions to a range of different audiences.

Needs Assessment Priorities *

Needs Assessment

Capital Health Network (ACT PHN) 2021 to 2024 Needs Assessment

Priorities

Priority	Page reference
Care Across the Continuum	21
Chronic conditions	41



Activity Demographics

Target Population Cohort

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Milestone Details/Duration

Activity Start Date

31/03/2023

Activity End Date

29/06/2026

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones

6 monthly performance and financial reporting



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



Summary of activity changes for Department

Activity Status

Submitted

Subject	Description	Commented By	Date Created

PP&TP-EPP-Ad - 1 - Administration of the ACT Endometriosis and Pelvic Pain Clinic

Activity Metadata

Applicable Schedule *

PHN Pilots and Targeted Programs

Activity Prefix *

PP&TP-EPP-Ad

Activity Number *

1

Activity Title *

Administration of the ACT Endometriosis and Pelvic Pain Clinic

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 *

The aim of the program is to support the establishment of the ACT Endometriosis and Pelvic Pain Clinic.

Description of Activity *

ACT PHN will establish, support and monitor the Endometriosis and Pelvic Pain Clinic through:
-Identification of a suitable provider
-Establish a service agreement with a suitable provider
-Support the use funding to provide enhanced services
for the treatment and management of endometriosis and pelvic pain, based on the needs
of the community, including but not limited to recruitment of specialised staff, including nurse practitioner and allied health professionals, fit-out costs for pelvic physiotherapy areas, associated equipment; and resources, training and development.
-Collect and monitor service data.

Needs Assessment Priorities *

Needs Assessment

Capital Health Network (ACT PHN) 2021 to 2024 Needs Assessment

Priorities

Priority	Page reference
Care Across the Continuum	21
Chronic conditions	41

Activity Demographics

Target Population Cohort

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

Activity Milestone Details/Duration

Activity Start Date

28/02/2023

Activity End Date

29/06/2026

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: No
Continuing Service Provider / Contract Extension: No
Direct Engagement: No
Open Tender: No
Expression Of Interest (EOI): 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



Summary of activity changes for Department

Activity Status

Submitted

Subject	Description	Commented By	Date Created

PP&TP-DVP - 1 - DVP Operational

Activity Metadata

Applicable Schedule *

PHN Pilots and Targeted Programs

Activity Prefix *

PP&TP-DVP

Activity Number *

1

Activity Title *

DVP Operational

Existing, Modified or New Activity *

Existing

Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

At-risk populations

Aim of Activity *

Delivery of the Family, Domestic and Sexual Violence Pilot

Description of Activity *

Operational aspects of the 3 streams:
-family domestic violence
-sexual violence
-child sexual violence

Including but not limited to recruitment of program staff, stakeholder engagement, program localisation and co-design, administration costs, IT.

Needs Assessment Priorities *

Needs Assessment

Capital Health Network (ACT PHN) 2021 to 2024 Needs Assessment

Priorities

Priority	Page reference
People at Risk of Poor Health Outcomes	75

Activity Demographics

Target Population Cohort

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

Activity Milestone Details/Duration

Activity Start Date

30/06/2023

Activity End Date

29/06/2026

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones

Activity Commissioning

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

Not Yet Known: No
Continuing Service Provider / Contract Extension: No
Direct Engagement: No
Open Tender: No
Expression Of Interest (EOI): 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



Summary of activity changes for Department

Activity Status

Submitted

Subject	Description	Commented By	Date Created

PP&TP-DVP - 2 - Strengthening Primary Care Sector Response to Domestic and Family Violence

Activity Metadata

Applicable Schedule *

PHN Pilots and Targeted Programs

Activity Prefix *

PP&TP-DVP

Activity Number *

2

Activity Title *

Strengthening Primary Care Sector Response to Domestic and Family Violence

Existing, Modified or New Activity *

Existing

Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

People at risk of poor health outcomes

Aim of Activity *

"This activity aims to:
1. Strengthen the primary care sector's capacity and capability to respond, refer and better support victim-survivors of domestic and family violence (DFV) in the ACT region, by:
- improving primary care sector's understanding and awareness of their role in addressing DFV; and
- improving primary care staff's readiness and ability to recognise DFV, through whole-of-practice training, education and capacity-building activities.
2. Improve system integration between primary care services and specialist DFV support services in the ACT region, by:
- improving DFV service provider's understanding of primary care sector's role in supporting victim-survivors of DFV
- improving partnerships and trust between primary care and DFV sector
- improving integration of primary care system response with ACT Government's DFV initiatives and reforms
- increasing the number and quality of referrals from primary care to specialist DFV support services; and
- improving service navigation for victim-survivors of DFV, through commissioning of link workers within support services. "

Description of Activity *

"The three core activities within CHN's model of support for strengthening the primary care sector response to domestic and family violence (DFV) are:
1. Workforce capacity building activities to support primary care providers in the early identification and intervention of DFV and

coordinated referrals to support services:
- CHN has developed localised training resources in consultation with key stakeholders from the DFV and primary care sector to ensure a place-based approach.
- CHN has commissioned a provider & will continue to deliver formal accredited DFV training for whole-of-practice staff (general practitioners, practice nurses, allied health professionals, and other primary care staff, including non-clinical staff) in the ACT region.
- CHN has developed organisational supports and resources for general practice and other primary care providers.
2. System integration measures to improve health service navigation for victim-survivors of DFV and increase collaboration between primary care and the DFV sector:
- CHN has commissioned link workers within the community sector to enable collaboration and integration between primary care and specialist DFV support services. Their primary function includes:
- Supporting capacity building activities within the DFV sector
- Serving as a one-point-of-referral from primary care to DFV services for victim-survivors
- Providing ongoing engagement, secondary consultations, general/patient-specific advice and informal training to the primary care staff
- Supporting DFV services to close the referral loop with primary care
- Providing case coordination, risk assessment, safety planning and connection to appropriate DFV support services
- CHN established Communities of Practice and networking events and will continue to work with primary care and the DFV sector to increase opportunities for collaboration across the sector
3. Locality integration measures to improve linkages between DFV responses at primary and secondary care levels:
- CHN will continue to build the program within the local context, implement the modelhas and advocate for primary care to be integrated into ACT Government's DFV initiatives. "

Needs Assessment Priorities *

Needs Assessment

Australian Capital Territory-Needs Assessment 2024/25 - 2026/27_V1

Priorities

Priority	Page reference
People at Risk of Poor Health Outcomes	121

Activity Demographics

Target Population Cohort

"All primary care staff (both clinical and non-clinical) from general practices, ACCHS, and allied health practices in the whole-of-ACT region

Women and children experiencing, or at risk of domestic and family violence, in the whole-of-ACT Region. "

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Milestone Details/Duration

Activity Start Date

31/05/2023

Activity End Date

29/06/2028

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: No
Continuing Service Provider / Contract Extension: No
Direct Engagement: Yes
Open Tender: No
Expression Of Interest (EOI): No
Other Approach (please provide details): No

Is this activity being co-designed?

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



Summary of activity changes for Department

Activity Status

Submitted

Subject	Description	Commented By	Date Created

PP&TP-DVP - 3 - Strengthening Primary Care Sector Response to Sexual Violence

Activity Metadata

Applicable Schedule *

PHN Pilots and Targeted Programs

Activity Prefix *

PP&TP-DVP

Activity Number *

3

Activity Title *

Strengthening Primary Care Sector Response to Sexual Violence

Existing, Modified or New Activity *

Existing

Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

People at risk of poor health outcomes

Aim of Activity *

"""This activity aims to:
1. Strengthen the primary care sector's capacity and capability to respond, refer and better support victim-survivors of child sexual abuse (CSA) in the ACT region, by:
- improving primary care sector's understanding and awareness of their role in addressing CSA; and
- improving primary care staff's readiness and ability to recognise CSA, through whole-of-practice training, education and capacity-building activities.
2. Improve system integration between primary care services and specialist CSA support services in the ACT region, by:
- improving CSA service provider's understanding of primary care sector's role in supporting victim-survivors of CSA
- improving partnerships and trust between primary care and CSA sector
- improving integration of primary care system response with ACT Government's CSA initiatives and reforms
- increasing the number and quality of referrals from primary care to specialist CSA support services; and
- improving service navigation for victim-survivors of CSA, through commissioning of link workers within support services. """

Description of Activity *

"The three core activities within CHN's model of support for strengthening the primary care sector response to child sexual abuse (CSA) are:
1. Workforce capacity building activities to support primary care providers in the early identification and intervention of CSA and

coordinated referrals to support services:
- CHN has developed localised training resources in consultation with key stakeholders from the CSA and primary care sector to ensure a place-based approach.
- CHN has commissioned a provider to deliver formal accredited CSA training for whole-of-practice staff (general practitioners, practice nurses, allied health professionals, and other primary care staff, including non-clinical staff) in the ACT region.
- CHN developed organisational supports and resources for general practice and other primary care providers.
2. System integration measures to improve health service navigation for victim-survivors of CSA and increase collaboration between primary care and the CSA sector:
- CHN has commissioned link workers within the community sector to enable collaboration and integration between primary care and specialist CSA support services. Their primary function includes:
- Supporting capacity building activities
- Serving as a one-point-of-referral from primary care to CSA services for victim-survivors
- Providing ongoing engagement, secondary consultations, general/patient-specific advice and informal training to the primary care staff.
- Supporting CSA services to close the referral loop with primary care.
- Providing case coordination, risk assessment, safety planning and connection to appropriate CSA support services
- CHN established Communities of Practice and networking events for primary care and CSA sector to increase opportunities for collaboration across the sector.
3. Locality integration measures to improve linkages between CSA responses at primary and secondary care levels:
- CHN will continue to build the program within the local context, implement the model, and advocate for primary care to be integrated into ACT Government's CSA initiatives."

Needs Assessment Priorities *

Needs Assessment

Australian Capital Territory-Needs Assessment 2024/25 - 2026/27_V1

Priorities

Priority	Page reference
People at Risk of Poor Health Outcomes	121

Activity Demographics

Target Population Cohort

"All primary care staff (both clinical and non-clinical) from general practices, ACCHS, and allied health practices in the whole-of-ACT region

Children experiencing, or at risk of sexual violence/abuse, and adult survivors of childhood sexual abuse in the whole-of-ACT Region "

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Milestone Details/Duration

Activity Start Date

31/05/2023

Activity End Date

29/06/2028

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: No
Continuing Service Provider / Contract Extension: No
Direct Engagement: Yes
Open Tender: No
Expression Of Interest (EOI): 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?

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



Summary of activity changes for Department

Activity Status

Submitted

Subject	Description	Commented By	Date Created

PP&TP-DVP - 4 - Strengthening Primary Care Sector Response to Child Sexual Abuse

Activity Metadata

Applicable Schedule *

PHN Pilots and Targeted Programs

Activity Prefix *

PP&TP-DVP

Activity Number *

4

Activity Title *

Strengthening Primary Care Sector Response to Child Sexual Abuse

Existing, Modified or New Activity *

Existing

Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

People at risk of poor health outcomes

Aim of Activity *

"This activity aims to:
1. Strengthen the primary care sector's capacity and capability to respond, refer and better support victim-survivors of sexual violence (SV) in the ACT region, by:
- improving primary care sector's understanding and awareness of their role in addressing SV; and
- improving primary care staff's readiness and ability to recognise SV, through whole-of-practice training, education and capacity-building activities.
2. Improve system integration between primary care services and specialist SV support services in the ACT region, by:
- improving specialist SV service provider's understanding of primary care sector's role in supporting victim-survivors of SV
- improving partnerships and trust between primary care and SV sector
- improving integration of primary care system response with ACT Government's SV initiatives and reforms
- increasing the number and quality of referrals from primary care to specialist SV support services; and
- improving service navigation for victim-survivors of SV, through commissioning of link workers within support services. "

Description of Activity *

"The three core activities within CHN's model of support for strengthening the primary care sector response to sexual violence (SV) are:
1. Workforce capacity building activities to support primary care providers in the early identification and intervention of SV and

coordinated referrals to support services:
- CHN developed localised training resources in consultation with key stakeholders from the SV and primary care sector to ensure a place-based approach.
- CHN commissioned a provider to deliver formal accredited SV training for whole-of-practice staff (general practitioners, practice nurses, allied health professionals, and other primary care staff, including non-clinical staff) in the ACT region.
- CHN developed organisational supports and resources for general practice and other primary care providers.
2. System integration measures to improve health service navigation for victim-survivors of SV and increase collaboration between primary care and the SV sector:
- CHN commissioned link workers within the community sector to enable collaboration and integration between primary care and specialist SV support services. Their primary function includes:
- Supporting capacity building activities
- Serving as a one-point-of-referral from primary care to SV services for victim-survivors
- Providing ongoing engagement, secondary consultations, general/patient-specific advice and informal training to the primary care staff.
- Supporting SV services to close the referral loop with primary care.
- Providing case coordination, risk assessment, safety planning and connection to appropriate SV support services
- CHN established Communities of Practice and networking events for primary care and the SV sector to increase opportunities for collaboration across the sector.
3. Locality integration measures to improve linkages between SV responses at primary and secondary care levels:
-CHN will continue to build the program within the local context, implement the model, and advocate for primary care to be integrated into ACT Government's SV initiatives."

Needs Assessment Priorities *

Needs Assessment

Australian Capital Territory-Needs Assessment 2024/25 - 2026/27_V1

Priorities

Priority	Page reference
People at Risk of Poor Health Outcomes	121

Activity Demographics

Target Population Cohort

"All primary care staff (both clinical and non-clinical) from general practices, ACCHS, and allied health practices in the whole-of-ACT region

Women and children experiencing, or at risk of sexual violence, in the whole-of-ACT Region "

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

Activity Milestone Details/Duration

Activity Start Date

31/05/2023

Activity End Date

29/06/2028

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones

Activity Commissioning

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

Not Yet Known: No
Continuing Service Provider / Contract Extension: No
Direct Engagement: Yes
Open Tender: No
Expression Of Interest (EOI): No
Other Approach (please provide details): No

Is this activity being co-designed?

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



Summary of activity changes for Department

Activity Status

Submitted

Subject	Description	Commented By	Date Created

PP&TP-GCPC - 1 - Greater Choice for At Home Palliative Care in the ACT

Activity Metadata

Applicable Schedule *

PHN Pilots and Targeted Programs

Activity Prefix *

PP&TP-GCPC

Activity Number *

1

Activity Title *

Greater Choice for At Home Palliative Care in the ACT

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 *

Increase awareness, facilitate and coordinate access to safe quality palliative and end of life care in the home as well as improve integration across services.

Description of Activity *

Engaging the sector to co-design strategies (as appropriate) to improve the coordination of care, making linkages across the sectors – health, aged care, primary care, palliative care – to support access to services at the end of life, regardless of where people live, including residential aged care homes and measure outcomes.
• Engage in key palliative care committee groups x minimum of 3 meetings annually in the ACT including ACT Palliative Care Operations Committee and ACT Palliative Care Governance Group (led by ACTH) therefore ACT PHN/CHN will ensure attendance as per ToR and other related committees for solution brokering, strategic planning and policy development.
• Improve awareness (workforce and community) and access to safe, quality palliative care at home and support end-of-life care systems and services in primary health care and community care e.g. Formestablish an ACT Residential Aged Care (RACH) Collaborative to implement strategic and co-ordinated approach to Palliative and End-of-Life Care in RACH in the ACT.

Improved access to safe, quality palliative care at home
• Ensure access of up-to-date palliative screening, assessment, management and referral guidance aiming to update upto x 5 pathways is available for ACT healthcare professionals through HealthPathways. Generate and use data to support continuous

improvement
• Primary, community and aged care workforce education/training sessions minimum of 5 topics ofrelating to contemporary and relevant end-of-life care issues through face to face and online learning opportunities.
• Promotion of regional and national palliative events, resources and learning opportunities to the target population groups.
• Identify ways to ensure better palliative support at home for people at risk of poor palliative care outcomes (continue to build on Targeted Needs Assessment, evaluate outcomes from the Palliative Care in General Practice pilot program).

Support end-of-life care systems and services in primary health care, community care and for senior Australians in residential care
• Strengthen primary care by enabling earlier identification, monitoring, management and referral of palliative care patients.
• Improve referral from primary to specialist palliative care (SPC) through supporting the development of revised SPC eligibility criteria and referral process to specialist palliative care.
• Strengthen care coordination delivered across ACT by developing anand explore feasibility of an ACT Palliative Care Shared Care Model between ACT Primary Care and SPC.
• Support the reintroduction of a revised After-Hours Palliative Medicines in Community program in the ACT to strengthen community pharmacy capability in palliative care including improved access to palliative medicines, enhanced collaboration with specialist palliative care providers and improved capability through training and support.
• Support the use of telehealth including afterhours to provide clinical support for palliative patients at home including residential aged care homes.

All of these activities will be underpinned by consideration for priority population groups, cultural safety, and inclusion of patients, family and support networks.

Capital Health Network (ACT PHN) 2026 to 2029 Palliative Care Targeted Needs Assessment - Link TBA - CHN Website

Needs Assessment Priorities *

Needs Assessment

Australian Capital Territory-Needs Assessment 2024/25 - 2026/27_V1

Priorities

Priority	Page reference
Older adults' health	155
Chronic conditions	38
Care Across the Continuum	16



Activity Demographics

Target Population Cohort

Health care providers, care providers, people with life-limiting conditions, carers of people with life-limiting conditions

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Milestone Details/Duration

Activity Start Date

04/11/2021

Activity End Date

29/06/2029

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: Yes
Expression Of Interest (EOI): Yes
Other Approach (please provide details): No

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Yes

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

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

No

Decommissioning

No

Decommissioning details?

Co-design or co-commissioning comments



Summary of activity changes for Department

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