

PRIMARY HEALTH NETWORK (PHN) PROGRAM LOGIC

<p>Goal:</p> <p>To keep people well, particularly people with chronic health conditions and mental illness, and reduce avoidable hospital presentations through the delivery of effective primary care.</p>	<p>Objectives:</p> <ol style="list-style-type: none"> 1. Increase the efficiency and effectiveness of primary health care services, particularly for people at risk of poor health outcomes. 2. Improve coordination of health care to ensure people receive the right care, in the right place, at the right time.
<p>Participation:</p> <p>PHNs; State/Territory government agencies and Local Health Networks (LHNs) or their equivalent; peak bodies (industry and consumer); general practice and other health service providers including Aboriginal Community Controlled Health Organisations (ACCHOs); pharmacy and allied health; mental health, alcohol and other drugs; disability and aged care sectors; and health consumers and carers.</p>	<p>Theory of Change:</p> <p>PHNs understand the health needs and local health system of their respective regions. PHNs use this knowledge to implement effective commissioning, capacity-building and coordination of health care in their region. PHNs are therefore best placed to deliver targeted and tailored approaches that improve the health outcomes of their community.</p>
<p>Assumptions:</p> <ul style="list-style-type: none"> • PHNs are capable and effective in delivering their role as commissioners to identify and address health needs. • PHNs are suitably engaged or have capability to engage with the primary care sector at an appropriate level to motivate and support desired change. • The commissioning model is fit for purpose. 	<p>External Factors:</p> <ul style="list-style-type: none"> • Determinants of health • Demographic changes • Health workforce • Level of funding • Private health insurance • Environmental: natural disasters, pandemics • Operations of State/Territory government health systems • Private industry (including data, pharmaceutical, pathology, and corporate health practice businesses)

PHNs strengthen the health system through delivery of 3 core functions:

Coordinate and integrate local health care services in collaboration with LHNs and ACCHOs to improve quality of care, people's experience and efficient use of resources	Commission primary care and other health services to address population health needs and gaps in service delivery and to improve access and equity	Capacity-build and provide practice support to primary care and other healthcare providers to improve quality care delivery
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AREAS OF SCOPE	INPUTS	ACTIVITIES	OUTPUTS	MEDIUM TERM OUTCOMES	IMPACTS
PHN Network Governance Core Funding Population health Practice support Digital health	Australian health and aged care system Australian Government health policy and initiatives	Coordinate <ul style="list-style-type: none">• PHNs collaborate and build connections with local stakeholders and healthcare providers.• PHNs develop regional solutions or joint plans with LHNs that integrate and improve delivery of patient-centred care.• Strengthen care pathways in line with local and national needs and priorities.	<ul style="list-style-type: none">• Joint partnerships between PHNs and local stakeholders including healthcare providers.• Increased accessibility and awareness of care pathways among health care providers.	<ul style="list-style-type: none">• Local health care providers are connected through productive partnerships and/or co-commissioned activities.	<ul style="list-style-type: none">• Improved sustainability: Coordination in the primary care system improves efficiency.
Emergency preparedness Program Funding* Mental health and suicide prevention Alcohol and other drugs Health services in aged care	PHN Program policy, funding, governance and support Other funding Data and health system intelligence	Commission <ul style="list-style-type: none">• Conduct needs assessments to identify and understand service gaps, key issues, set regional priorities and inform PHN activity.• Strategically plan, co-design, implement, monitor and evaluate activities that address regional health and/or service needs.• Localise and deliver place-based approaches for the implementation of national programs.• Identify and deliver innovative solutions or models of care that addresses health gaps or inequalities.	<ul style="list-style-type: none">• Activities are planned and delivered in alignment with prioritised needs and program objectives.• PHN-commissioned activities have measurable outcomes that respond to the needs of their local community.	<ul style="list-style-type: none">• GPs and other healthcare providers use clinical pathways to guide referrals.• Activities provide value for money.• Learnings and insights contribute to building evidence for better clinical and patient outcomes.• The primary care workforce is supported, leading to best practice care and workforce satisfaction.• Data are used to support continuous quality improvement.	<ul style="list-style-type: none">• Improved consumer experience: Consumers of PHN-supported services have a positive experience receiving care that is appropriate to their needs.
First Nations health Workforce Emergency response (e.g., COVID-19, bushfires and floods) Medicare Urgent Care Clinics	PHN governance mechanisms and organisational capability Australian Government local networks	Capacity-build <ul style="list-style-type: none">• Support health providers to work to their full scope of practice and to deliver culturally safe, high-quality care.• Support service providers in thin and underserved markets.• Provide support and resources to local service providers, including general practice, that promotes the adoption and use of digital health systems and resources.• Leverage data and analytics to optimise and drive continuous improvement activities.	<ul style="list-style-type: none">• PHN-delivered education and development opportunities improve health workforce capability.• First Nations people, culturally and linguistically diverse people, and other priority population groups receive culturally safe services.• Increased adoption and integration of digital health systems by general practice and other service providers.• Increased quality and accessibility of data and insights supports continuous quality improvement in the primary health sector.		<ul style="list-style-type: none">• Improved provider experience: The primary care workforce has improved sustainability and support to work to their full scope of practice.• Improved health outcomes: Consumers of PHN-commissioned services have improved health and wellbeing outcomes.• Improved health equity: Improved access to primary care for members of priority populations.

* Many program areas listed have existing program logics. These logics depict the broader intended program model including and beyond the PHN Program. These program logic models should be considered in parallel with this PHN Program Logic.