

Hunter
PRIMARYCARE
2020 ANNUAL REPORT



We listen. Care. Connect.

ABOUT THIS REPORT

This report is for the period 1 July 2019 to 30 June 2020. Financial data has been audited by PKF, Newcastle NSW 2300. This report is available to download from hunterprimarycare.com.au

ACKNOWLEDGEMENTS

Hunter Primary Care acknowledges the financial and other support from the Australian Government Department of Health and Hunter New England Central Coast Primary Health Network (HNECCPHN).

Hunter Primary Care acknowledges Aboriginal and Torres Strait Islander people as the First Peoples of our region and we pay our respects to their Elders past and present with whom we share this great country.

DIVERSITY COMMITMENT

Hunter Primary Care is committed to embracing diversity and eliminating all forms of discrimination in the provision of health services. We welcome all people irrespective of ethnicity, lifestyle choice, faith, sexual orientation and gender identity.

Aboriginal and Torres Strait Islander readers are warned that the following Report may contain images of deceased persons which may cause sadness or distress.



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WHO ARE WE?

At Hunter Primary Care, our focus is on you.
We support people to live a healthy life.

As a not-for-profit organisation, we have been providing quality health care and wellbeing services to the Hunter community for almost 30 years.

We understand that everyone's healthcare journey is different and listen to each individual's needs and goals. We deliver a range of health and wellbeing services to the community in collaboration with our network of trusted health professionals.



LISTEN – We understand everyone's health care journey is different



CARE – We deliver quality primary health, mental health and after hours care through collaboration with our network of health professionals



CONNECT – We link you with services and supports to give you the skills, choice and control to manage your physical and mental wellbeing

OUR REGION

The Hunter Primary Care region is located on the NSW east coast and services the following areas: Newcastle, Lake Macquarie, Port Stephens, Maitland, Cessnock, Singleton, Muswellbrook, Upper Hunter, Dungog, Great Lakes, Gloucester, Greater Taree, Wyong, Tamworth and Armidale.

Our region covers the traditional Aboriginal nations of Anaiwan, Awabakal, Biripi, Darkinjung, Gaewegal, Kamilaroi, Wonaruah and Worimi people.

AREA OF OPERATIONS



OUR STRATEGY

Our Pathways STRATEGIC FRAMEWORK

OUR FUTURE



GROWTH AND INNOVATION

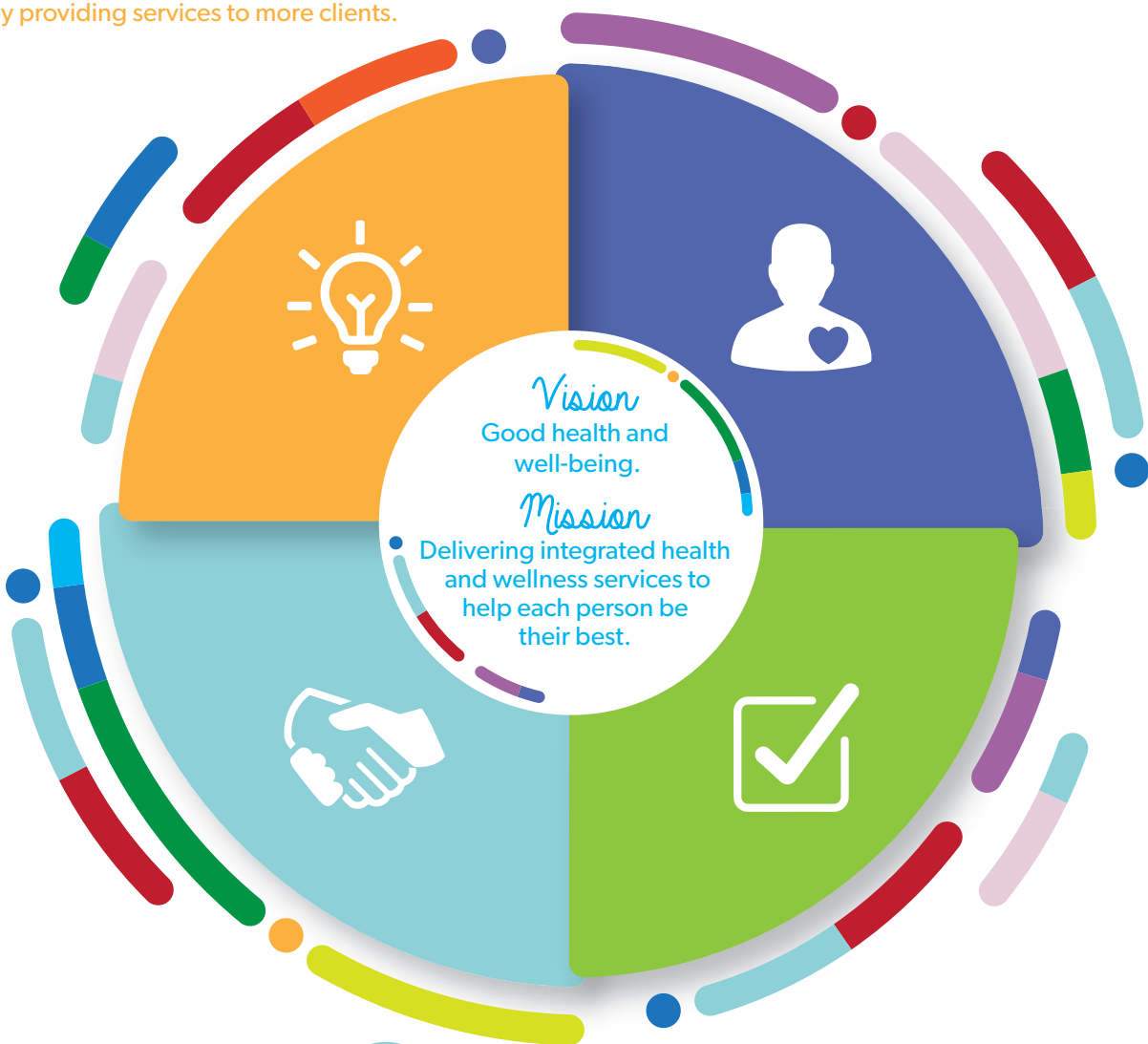
Grow the business to improve our financial sustainability, improve economies of scale, increase our capacity to invest in the business and to improve our social impact by providing services to more clients.

OUR PEOPLE



PEOPLE AND CULTURE

Develop the capability of our workforce through ongoing learning, training and attracting suitable staff.



OUR COMMUNITY



CLIENT EXPERIENCE

Develop client services through client engagement to improve client outcomes and satisfaction.

OUR BUSINESS



QUALITY AND SYSTEMS

Continue to improve our processes and information systems to become more effective, efficient and adaptable to meet current and future business needs.

A MESSAGE FROM OUR CHAIR

There is no denying that this year has been challenging for us all. Who could have predicted this time last year that our world would be turned upside down by a global pandemic with such far reaching impacts on every aspect of our personal and working lives? As Hunter Primary Care (HPC) Chair, I am pleased and proud to say that the unwavering commitment of HPC staff has meant that the unprecedented disruptions of the world have not disrupted the quality of services delivered to our community.

The hard work of the HPC IT department enabled staff to securely, safely and efficiently work remotely during the pandemic.

As well as being a year of challenges and uncertainty, 2019/20 was also a year of growth for HPC in many respects. I am happy to report that financial growth was recorded across the organisation overall thanks to new contracts for Access and Referral Management (PRIMA), Hunter Psychosocial Support Service and headspace Newcastle along with an increase to our NDIS Support Coordination services.

I would like to congratulate Management and the entire team at headspace Newcastle. Despite being over 80% busier than the national average for headspace centres, the team continues to equal the national average for clinical outcomes and client satisfaction. headspace Newcastle's expanded premises opened in October 2019, adding a further seven clinical rooms allowing them to increase the staffing and service levels significantly. One unfortunate consequence of the pandemic has been an increased demand for mental health support. At HPC we are well placed to meet that challenge.

At the same time the impact of the pandemic did see a reduction in attendances at the GP Access clinics. I would like to acknowledge and recognise the efforts of our staff and GPs who have made adjustments in the light of this operating environment, including the expansion of the use of telehealth.

While restrictions meant that we weren't able to attend NAIDOC Week events this year, HPC continues its commitment to delivering quality health and well-being services to Aboriginal and Torres Strait Islander communities.

Over the past 12 months, Yudhilidin, HPC's Care Coordination service for Aboriginal and Torres Strait Islander people with severe and complex mental illness, worked tirelessly to provide support to over 250 people across the Greater Hunter and Mid Coast regions. The support allowed the team to assist people and build their capacity to manage supports.



We were also thrilled to be successful recipients in the first round of grants awarded through the Department of Health, Indigenous Australians Health Programme Emerging Priorities grant. The round one grants will equate to a national investment of almost \$35 million towards the intervention and prevention of a disease or chronic health conditions.

Our project, supporting 'Closing the Gap' initiatives, will develop and deliver a unique health prevention/awareness social media campaign created by young Aboriginal people for young Aboriginal people. The campaign will aim to work towards 'Closing the Gap' and increasing the number of Aboriginal children and youth presenting for their annual 715 Health Checks. I look forward to following the project closely over the coming months.

I would also like to express my thanks to the entire HR team, led by HR Manager Janelle White. Janelle and her team have worked tirelessly to support HPC Executive, senior managers and staff throughout COVID-19 to provide support and information to staff about working from home arrangements. The HR team has also been busily working behind the scenes to prepare a new draft Enterprise Agreement, including the development of a new remuneration framework, along with implementing and designing a number of initiatives arising from the 2019 organisational culture survey.

Finally, on behalf of the Board, I would like to thank CEO Brenda Ryan, the Executive team and all HPC staff members for their hard work and dedication to the organisation and the community we serve, especially during this trying year. I look forward to a successful and less disruptive 2020/2021.

Richard Anicich AM, Chair

A MESSAGE FROM OUR CEO

HPC's Annual Report highlights our achievements over the past twelve months. Notably, with 2020 being one of the most disruptive periods that any of us would ever have experienced working in health.

As we move through unprecedented times, HPC has remained focused on the future and continues to explore new ways of approaching business and service delivery, with a vision of achieving growth and excellence.

A key organisational focus for 2020 was to deliver critical primary health care services and develop new strategies to deliver new services to community members who need support, particularly those who present with severe and complex health issues.

In October 2019, we were able to address the escalating demand for youth mental health services in the region, with significant expansion of headspace services in Newcastle and Port Stephens, as well as the delivery of Youth Complex supports in the Lake Macquarie region. headspace Newcastle now has seven additional clinical rooms as well as four extra mental health clinicians which has reduced the waiting time for appointments.

With national statistics reporting that around 75 per cent of mental health disorders emerge before the age of 25, HPC is committed to continued work with local and national headspace teams to support this critical service.

Telehealth

HPC's staff rapidly embraced the delivery of telehealth supports and services during the coronavirus pandemic, with patients receiving care online, by video or by phone, as well as continued face-to-face consultation where possible. HPC staff exhibited unwavering commitment to ensuring that their clients were supported during a period of spatial isolation that quickly converted into social isolation, causing stress and anxiety for many. HPC continues to adopt technological interventions wherever needed, to deliver quality services and supports to meet the demands of the community.

In early 2020, the Yudhilidin team, who deliver recovery support for Aboriginal and Torres Strait Islander people with significant mental health issues, welcomed the Ngangkari traditional healers to our region. HPC responded to a community need for more holistic health and wellbeing services for Aboriginal clients and was able to offer a number of individual healing sessions to community. Further traditional healing supports and services are currently being researched through the Yudhilidin program.

Our NDIS Support Coordination services has expanded considerably over the past twelve month with a recorded growth of 388 (223%) participants.



HPC's solid reputation and increasing promotion of our NDIS Support Coordination services in the Hunter region has resulted in a demand for our services and a steady expansion of the NDIS Support Coordination team.

The past 12 months has also seen an expansion of our interests in 'Closing the Gap' to deliver health awareness and early intervention/prevention programs to support Aboriginal and Torres Strait Islander youth. Through funding received from the PHN's Healthy Community Weight grants, the HPC teams developed the Yantiin Kalabara – 5 ways to a healthier you program aimed at good health and wellbeing education in primary school aged children, scheduled for delivery in regional schools early 2021.

In mid-2020, HPC was a successful recipient of a Department of Health's Indigenous Health Emerging Priorities Grant, that is aimed at 'Closing the Gap' in health inequalities between Indigenous and non-Indigenous Australians. The project is a social media health awareness campaign due for delivery in March 2021.

The HPC strategic journey that was established in 2019 has seen the implementation of four organisational initiatives: Growth and Innovation, People and Culture, Quality and Systems and Client Experience.



Growth and Innovation

HPC's inaugural Innovation Challenge was launched in February 2020. To bring to life the innovation commitment, staff were invited to submit their ideas on a theme of 'How can HPC use technology to grow?'

A HPC panel evaluated the 24 ideas that were submitted to the Challenge and vetted the submissions based on the most viable and sustainable innovations. Three finalist ideas were supported by HPC and projects are being developed for launch in December 2020. Funded projects include a mobile phone 'crisis card' / safety plan app for Psychology clients, customisable digital documents/forms for care coordination, and a song/animation to engage young people with drug and alcohol services.

People and Culture

In response to key outcomes from the 2019 culture survey, initiatives have been implemented across the business, to improve our work place culture – to build an even better HPC for all. The HPC Staff Recognition Awards was launched in April, to encourage peer to peer acknowledgement and nomination for colleagues who exhibit the core values of Respect, Integrity, Excellence, and Recognition. HPC is committed to continuing the Staff Recognition Awards and aims to extend the awards to annual CEO Awards later this year.

Quality and Systems

A new Client Management System (CMS) will be a major change to the way HPC staff work together as an organisation and interact with our clients. Over the past six months, significant time and effort has been placed into planning the integration of a new CMS and managing the transition to new ways of working. Several more important steps in the implementation process are still underway and will be rolled out within this financial year.

Client Experience

Pathway 2 involves a series of projects that aim to improve the client experience across all services within HPC.

In particular, Pathway 2 has focused on developing strategies to streamline collection of data relating to client satisfaction with HPC, client improvement after engaging with HPC, and data related to service delivery key performance indicators. A thorough internal review of existing processes across all services within Hunter Primary Care has been completed and a series of recommendations has been proposed. Work towards implementation of these recommendations currently underway.

Reconciliation Commitment

HPC continues a solid commitment to reconciliation by ensuring that all staff have an opportunity to further understand the importance of Aboriginal and Torres Strait Islander peoples' culture. We are currently working to submit a Stretch tier Reconciliation Action Plan (RAP) to Reconciliation Australia for endorsement by December 2020.

A copy of our current Innovate RAP can be found at hunterprimarycare.com.au/reconciliation-action-plan/

HPC staff are noted as exemplary in the approach individuals and teams have taken to embrace change and pivot the business through our recent extreme and challenging times. Our staff have worked diligently and tirelessly to support the needs of our clients in our current, ever-changing landscape.

Without the strength of all teams working across disparate areas of the business, we would not be able to deliver such outstanding supports for the clients that we support in the community.

Appreciation is extended to the Board for their support and leadership over the past 12 months; and the Executive and staff for their professional commitment to ensuring HPC remains at the forefront of primary health care services and supports in the Hunter region. Gratitude is also extended to our members and referrers for their support; and our stakeholders and clients for your enduring confidence in our work.

As an organisation, HPC will continue to enhance and support our valued workforce. We will aim to expand our regional footprint by ensuring that we maintain the quality of our services, develop our evidenced base approach, embrace innovation and implement change as we approach 2021.

In conclusion, I invite you to take a closer look at our achievements over the past twelve months, in the 2020 Annual Report.

Brenda Ryan, Chief Executive Officer



Hunter Primary Care Executive team: Primary Care Executive – Keith Drinkwater, Mental Health Services Executive – Katrina Delamothe, Corporate Services Executive – Jack Hanson and CEO – Brenda Ryan.

GOVERNANCE & MANAGEMENT

The CEO is responsible for overseeing the operations of the company to ensure activities align with and meet the strategic objectives and direction of the organisation as determined by the Board.

The Constitution of Hunter Primary Care Limited (ACN 061 783 015) sets out the responsibilities of the Board and gives it the power to govern the organisation in order to achieve its strategic objectives. The Board, at 30 June 2020, has eight members – four Member-nominated Directors and four Board-nominated Directors.

The Board is responsible for:

- Corporate governance;
- Setting the strategic direction for the company and goals for management;
- Monitoring the performance of the company against the strategic frame-work and goals;
- Ensuring compliance with statutory responsibilities and;
- Overseeing risk management.

HPC manages the governance of the organisation through its Board, policies and four Board sub-committees.

Finance, Audit and Risk Management Committee

Assisting the Board to effectively discharge its responsibilities for financial reporting, internal and external audit functions, risk management, internal control and compliance framework and its external accountability responsibilities.

Clinical Governance Committee

Providing advice on issues relating to clinical safety, quality and scope of practice for Hunter Primary Care and its services, including:

- Developing Board policies pertaining to clinical governance for approval by the Board;
- Reviewing and reporting complaints and clinical incidents; and
- Providing advice to management and/or the Board regarding operational or strategic issues related to clinical governance.

Nomination and Remuneration Committee

Assisting the Board in fulfilling its responsibilities to members of HPC on matters relating to the Constitution of the company, the composition, structure and operation of the Board, CEO selection, and remuneration.

The Nomination and Remuneration Committee also assists the Board by recommending Board policy and nominations that require Board approval.

Information, Communication and Technology Governance Committee

Assisting the Board to ensure IT governance in providing effective safeguards and controls, providing guidance on proposed IT initiatives and projects prior to the approval process; and providing governance oversight by monitoring progress on major IT projects.

HPC also utilises advice and feedback from a number of program related advisory groups, reference groups and consortia to provide guidance and direction on service delivery and program priorities. A number of collaborative projects are also undertaken with the Hunter New England Local Health District (HNELHD).



BOARD OF DIRECTORS



Mr Richard Anicich AM, Chair BCom, LLB, FAICD

Elected in November 2015 and re-elected in November 2018, Richard is Chair of the Board and also Chair of the Nomination and Remuneration Committee.

Richard is a consultant to Sparke Helmore Lawyers. He is Chair of the Committee for the Hunter and a past President of the Hunter Business Chamber (2011 - 2014). Richard is also the Chair of Rural and Remote Medical Services Ltd.

He is a Conjoint Professor of Practice in the School of Law at the University of Newcastle and a member of the Advisory Boards for both the Faculty of Business and Law and for the School of Law.

In 2018, Richard was appointed a Member of the Order of Australia (AM) for significant service to the community of the Hunter, to business development and medical research, and to the law.



Dr Milton Sales OAM, Deputy Chair MBBS, Dip RANZCOG, FRACGP

Elected in November 2012 and re-elected in November 2016 and 2017, Milton is Chair of the Clinical Governance Committee.

Milton is a Practice Principal and GP in the Newcastle region, as well as a supervisor for medical students for the University of Newcastle and GP Registrars for GP Synergy. He is also the current Programme Committee Chair and previous Chair of the Hunter Postgraduate Medical Institute (HPMI).

Over the past 38 years, Milton has been following a passion for improving health care through continuing professional health education program delivery via HPMI.



Mr Steven Adams, AdvDip Bus Man, FAICD

Appointed in February 2012, elected November 2015 and re-elected November 2017 and 2019, Steven is a member of the Clinical Governance Committee

Steven is a proud Kamilaroi Man and Hunter business owner with a background in engineering, construction, defence industry, vocational education, health and community enterprises and currently also serves on the Boards of WentWest PHN, Lloyd McDermott Foundation, Gidgee Group of Companies and First Nations Rugby.

Steven was a founding Director of the NSW Indigenous Chamber of Commerce and has served on numerous Boards, Committees and Ministerial Taskforces over the past 20 years which include: Engineers Without Borders Indigenous Advisory Board, Empowered Communities, Alliance People Solutions (Owner/Director), Youth Express Inc. (Vice Chair), Upper Hunter Mining and Engineering Skills Group (Founding Chair), and Defence Reserves Support Council (Hunter Chair and NSW Vice Chair).

Steven ensures that Aboriginal perspective and input are included at the highest level of governance and decision making and brings an understanding and working knowledge of the Federal health reforms currently being implemented nationally such as 'Closing The Gap' initiatives.



Dr Sarah Bayley, BMed, BN, FRACGP, GAICD

Elected November 2019, Sarah is a member of the Clinical Governance Committee.

Sarah is a practice principal and GP in Raymond Terrace in the Hunter region. Sarah studied Medicine at the University of Newcastle and completed her internship and residency in Newcastle working at The John Hunter, Mater and Maitland hospitals.

She spent eight years working as a medical educator in the Vocational training of specialist GPs.

Sarah has a special interest in Governance and served as Chair of the Board of Valley to Coast (VTC) – General Practice Training for 8 of her 10 years at VTC.



Ms Jennifer Hayes, BBus, MBus, CPA, GAICD

Elected November 2015 and re-elected November 2017, Jennifer is Chair of the Finance, Audit and Risk Management Committee. Jennifer has over 20 years' experience in Executive and Non-executive positions in a diverse range of sectors including fast moving consumer goods, utilities, primary health and tertiary education.

Jennifer is Chief Financial Officer of Hunter Water Corporation and formerly held corporate leadership positions with Mars Incorporated as Finance Director Central Europe, Group Financial Controller, Australia/New Zealand and CFO New Zealand.

Jennifer is a Board member of Regional Development Australia (Hunter), Chair of Cessnock City Council Audit Committee and a former member of the University Council of Charles Sturt University. Jennifer is also co-founder of the City2City Community Foundation, raising funds for Albury Wodonga Health.



Dr Peter Hopkins, MBBS(Hons), MMedSc(EPI), FRACGP

Elected November 2014 and re-elected in November 2016 and 2019, Peter is a member of the Nomination and Remuneration Committee and a member of the Information, Communication and Technology Governance Committee.

Peter is the owner of Marketown Health. He was the founding Chair of the Hunter Division of General Practice and then for the Hunter Urban Division of General Practice. He continued on that Board throughout its existence and was on the Board when it became the Hunter Medicare Local until 2012 and was re-elected in 2014.

Peter was on the Board of GPNSW (then the Alliance of NSW Divisions of General Practice) from 2001 to 2007. He was Chair of that group from 2003 to 2005.





Mr Scott Puxty , BCom, Dip Law, MBusAdmin, GAICD

Elected in November 2015 and re-elected in November 2018, Scott is a member of the Nomination and Remuneration Committee.

Scott is a partner of Cattle, Carmichael Legal and is a lawyer with 20 years' experience working in the areas of commercial dispute resolution, workplace relations, compliance and risk management.

Scott was previously a partner of two national law firms for almost 10 years. Throughout his career, Scott has worked with a diverse range of local and international corporate clients in the areas of health and disability services, hospitality, IT, infrastructure, manufacturing and engineering, mining and property development, as well as state and federal government agencies and NGOs.

Scott presently serves as a Public Officer for the Barkuma Neighbourhood Centre, a Hunter based Aboriginal NGO.



Mr Laurence "Ben" Wilkins , BPharm, AACPA, GAICD

Elected in November 2012 and re-elected in November 2014, 2016 and 2017, Ben is Chair of the Information, Communication and Technology Governance Committee and a member of the Finance, Audit and Risk Management Committee.

Ben is a registered pharmacist in Newcastle, a former proprietor and has experience in business management as well as clinical pharmacy services. Ben's appointments include the Pharmacy Board of Australia and the Board of Hunter New England Local Health District. Ben has an interest in the use of technology to improve health outcomes and provides Clinical Reference Lead services for the Australian Digital Health Agency.

Ben is passionate about preventative health measures around lifestyle while improving the community's wellbeing, particularly via Hunter Primary Care services.



OUR RECONCILIATION ACTION PLAN

HPC has a strong commitment towards reconciliation and we are focused on building relationships based on mutual respect and trust between Aboriginal and Torres Strait Islander peoples and non-Indigenous Australians.

HPC acknowledges the diversity of Aboriginal and Torres Strait Islander cultures across Australia, and the importance of providing culturally sensitive services that meet community and individual needs. Our reconciliation journey is an important step towards creating a more inclusive and respectful nation – where the contribution of Aboriginal and Torres Strait Islander peoples and their cultures are valued.

During 2020, HPC has worked towards the completion of our Innovate Reconciliation Action Plan (RAP) July 2019-July 2021 that has provided a framework for us to realise a vision for reconciliation. The RAP demonstrates our commitment to implementing and measuring practical actions that aims to build respectful relationships and create opportunities for Aboriginal and Torres Strait Islander peoples. To strengthen and expand on our commitment towards reconciliation, we are developing and implementing programs for cultural learning, Aboriginal and Torres Strait Islander employment and supplier diversity. HPC's Reconciliation Action Plan Working Group consists of a diverse group of people from multidisciplinary backgrounds across all areas of the organisation. Seven Aboriginal staff are active members of the current working group.

Through the RAP commitments and HPC's Aboriginal and Torres Strait Islander health service programs, HPC will be recognised as an organisation that is progressing and making a difference in Aboriginal and Torres Strait Islander health outcomes and working towards 'Closing the Gap' in Aboriginal and Torres Strait Islander people's life expectancy.



Image: (Auntie) June Rose and (Auntie) Debbie Watson

The Healing Power of the Ngangkari

In partnership with New Horizons Wellbeing Warriors, HPC welcomed the Ngangkari Healers to the Hunter region in early March 2020.

Ngangkari are traditional Aboriginal healers of the Anangu of the Western Desert in Central Australia, which includes the Pitjantjatjara, Ngaanyatjarra and Yankunytjatjara peoples. The Ngangkari practice centuries old therapeutic techniques that have been passed on through generations. The Ngangkari are born with the gift of healing and their practice is increasingly becoming commonplace in Western health settings to work beside medical doctors, particularly in South Australia.

The Ngangkari healers treat spiritual, mental and physical ailments and believe they can help the Indigenous community in ways that the mainstream health system cannot.

(Auntie) Debbie Watson, (pictured with (Auntie) June Rose), travelled from South Australia to the Hunter to work with communities. Auntie Debbie explains that Ngangkari work in pain relief, and restoring the body's spiritual alignment. The Ngangkari practice techniques such as rubbing, massage and touch, pampuni, along with a blowing technique, mapampa. Different native plants are also used to treat ailments from headaches to breathing issues or aching muscles and joints. But perhaps the biggest advantage over mainstream healthcare is a deep understanding and connection to the cultural and spiritual lives of Indigenous patients.

"When people get sick, we take away the pain. We see inside the mind," Auntie Debbie says.

When she was growing up, more than 500km southwest of Alice Springs, her father began teaching her traditional healing skills.

"I started doing healing and touching people's spirit and taking the pain away," Auntie Debbie said.

Ngangkari are immersed in Aboriginal ways of being and cannot easily translate what they do to a wide audience. And the way they work cannot be explained through the scientific framework Western understanding demands.

Image: Ngangkari Healer (Auntie) Debbie Watson





'Closing the Gap' initiatives

Yantiin Kalabara – 5 ways to a healthier you

HPC is committed to 'Closing the Gap' to enable and empower Aboriginal and Torres Strait Islander people to live healthy and prosperous lives.

HPC developed the Yantiin Kalabara – 5 ways to a healthier you program in 2019, a 'Closing the Gap' initiative funded through the Hunter New England Central Coast Primary Health Network's (HNECCPHN) Healthy Weight Community grants.

Yantiin Kalabara is an Aboriginal phrase that means 'everyone shining bright'; a workshop based model delivered through regional primary and high schools with a large percentage of Aboriginal and Torres Strait Islander enrolments. Aimed at educating young people in regional areas to make healthy living choices, the workshops involve a number of interactive stations that provide information about positive health impacts including making healthy eating habits, choosing water as a drink, increasing physical activity and decreasing screen time. Through our 'Closing the Gap' initiatives, we are focusing on the early intervention and prevention of illness and chronic disease.



Image Top : HPC Dietitian, Kate Wood, with Cody Faulkner, Aboriginal Health Worker

Image Bottom: The Yantiin Kalabara program has been design to support good health and wellbeing for younger generations



Image: Merinda Dryden, HPC Project Facilitator

Indigenous Health Emerging Priorities Grant

In early 2020, HPC was successful in the first round of grants awarded through the Department of Health, Indigenous Australians Health Programme Emerging Priorities grant.

Announced by the Morrison Government in July, the round one grants will equate to a national investment of almost \$35 million towards the intervention and prevention of a disease or chronic health conditions.

Supporting ‘Closing the Gap’ initiatives, our project will develop and deliver a health prevention/awareness campaign on social media, created by young Aboriginal people for young Aboriginal people.

Throughout the campaign, we will aim to establish power and control for Aboriginal youth to guide their communities towards ‘Closing the Gap’ between Indigenous and non-Indigenous health inequities. We will be working across communities in the HNECCPHN region to ensure that various communities are represented and consulted.

Outcomes of the campaign will aim to increase the numbers of Aboriginal children/youth groups presenting for annual 715 health checks. The targets are to increase children from 18 per cent to 46 per cent and youth from 17 per cent to 42 per cent, by 2023.

The co-design nature of the project presents an opportunity for young Aboriginal community members to collaborate and create a robust promotional campaign directed at youth culture, and focused on early intervention of chronic disease.

Our strategy to create an Aboriginal youth-led health awareness campaign, aligns directly with recent research into social media usage in Indigenous communities.

Recent research indicates that age is directly associated with social media use for health, with younger groups being reportedly more receptive to using social media, particularly in relation to their health and wellbeing.

Further research also suggests that Australian Aboriginal communities are embracing social media for sharing health messages in a two-way exchange.

This project is an Australian Government initiative through the Department of Health.



Integrated Team Care (ITC) Services

HPC currently delivers the Care Coordination and Supplementary Services (CCSS) program across the whole of the Hunter region that includes Newcastle, Maitland, Lake Macquarie, Greater Taree, Forster, Dungog, Cessnock, Gloucester, Muswellbrook, Upper Hunter, Singleton and Port Stephens LGAs.

Our CCSS service can match people who have long-term illnesses with an experienced Care Coordinator, who has a wide range of knowledge about local health services and can assist clients to manage their own health and wellness.

The service is also provided by Aboriginal Outreach Workers who support individual clients to engage with Aboriginal communities. The objectives of the ITC activities are to help people receive better treatment and management of chronic conditions, and foster collaboration and support between the mainstream primary care and the Aboriginal and Torres Strait Islander health sectors.

In all of our Aboriginal Health and Wellbeing services, HPC staff are continually aiming to improve the capacity of mainstream primary care services to deliver culturally appropriate services to Aboriginal and Torres Strait Islander people.

IN THE MEDIA

Hunter Primary Care maintains services and supports in time of crisis

<https://www.newcastleherald.com.au/story/6733223/hunter-primary-care-maintains-services-and-supports-in-time-of-crisis/>

Bringing that extra level of support to the Hunter

<https://www.newcastleherald.com.au/story/6533942/bringing-that-extra-level-of-support-to-the-hunter/>

New system harnessing technology to create quality healthcare

[connections-for-allhttps://www.newcastleherald.com.au/story/6337906/new-system-harnessing-technology-to-create-quality-healthcare-connections-for-all/](https://www.newcastleherald.com.au/story/6337906/new-system-harnessing-technology-to-create-quality-healthcare-connections-for-all/)

Support helps Rebecca find her feet and get back to living

<https://www.newcastleherald.com.au/story/6825651/support-helps-rebecca-find-her-feet-and-get-back-to-living/>

Support helps Hunter residents find their feet and get back to living

<https://www.newcastleherald.com.au/story/6875212/support-to-find-your-feet/>

Specialist support experts

<https://www.newcastleherald.com.au/story/6381959/specialist-support-experts/>

A healthy diet is important for brain development

<https://www.newcastleherald.com.au/story/6593053/a-healthy-diet-is-important-for-brain-development/>

How to slow the spread of covid-19

<https://www.newcastleherald.com.au/story/6686690/how-to-slow-the-spread-of-covid-19/>

Hunter mental health services stretched to the limit during COVID-19 pandemic

<https://www.newcastleherald.com.au/story/6918865/hunter-mental-health-services-stretched-to-the-limit-during-covid-19-pandemic/>

Creating a mentally healthy workplace

<https://www.newcastleherald.com.au/story/6439354/creating-a-mentally-healthy-workplace/>

Connected to community

<https://www.newcastleherald.com.au/story/6126285/connected-to-community/>

Hunter GPs and Pharmacists call for calm amid COVID-19 hysteria

<https://www.newcastleherald.com.au/story/6672321/hunter-gps-and-pharmacists-call-for-calm-amid-covid-19-hysteria/>

Newcastle needed a little more headspace to meet growing demand for services

<https://www.newcastleherald.com.au/story/6463932/newcastle-needed-a-little-more-headspace-to-meet-growing-demand-for-services/>

Why is the Newcastle headspace service about 50 per cent busier than the national average

<https://www.newcastleherald.com.au/story/6463821/why-is-the-newcastle-headspace-service-about-50-per-cent-busier-than-the-national-average/>

Hunter Primary Care to establish power and control for Aboriginal youth

<https://hunterheadline.com.au/hh/business-news/hunter-primary-care-to-establish-power-and-control-for-aboriginal-youth/>



OUR SERVICES

ABORIGINAL HEALTH & WELLBEING

CARE COORDINATION & SUPPLEMENTARY SERVICES

The Care Coordination Team has delivered the Integrated Team Care service, known by the community as the Care Coordination and Supplementary Service (CCSS), for the ninth consecutive year. The service supports the National, 'Closing the Gap', initiatives by supporting Aboriginal and Torres Strait Islander people living with long-term conditions which may include:

- Diabetes
- Cardiac or Heart Disease
- Respiratory or Lung Disease
- Renal or Kidney Disease
- Cancer
- Mental Health conditions

SNAPSHOT OF ACTIVITIES

During the 2019/2020 financial year, 436 people were supported with an average 25 referrals per month.

HPC Aboriginal Outreach Workers supported over 200 people with an average of 20 referrals per month.

HIGHLIGHTS & ACHIEVEMENTS

The team continues to focus on collecting patient reported-outcome measures (PROMs) and patient reported-experience measures (PREMs) from clients.

Their experiences and health and well-being outcome results provide the team with feedback to inform service improvements.

FUTURE DIRECTION

The HPC Care Coordination team is now delivering the CCSS for the 10th consecutive year in consultation with the HNECCPHN. The revised model of care has been implemented to support clients who require lifestyle medicine and or lifestyle health skills supports. These new additions underpin the future direction and sustainability of the program.

These include the introduction of health support focusing on healthy weight along with lifestyle support groups in areas such as healthy cooking, reading food labels and moving more. This work continues in collaboration with the Australasian Society of Lifestyle Medicine and HNECCPHN.

With traditional face-to-face supports turned digital overnight due to the COVID-19 pandemic, the Care Coordination team will be providing supportive outreach to clients 55 years and older who may be experiencing social isolation during the pandemic. The outreach support will focus on coaching clients in the use of available technology to optimise their social connection options. These include, but not limited to – social and health and well-being apps, group meeting platforms to meet family, friends and community, on-line social interest groups, and telehealth platforms to access their GP, Allied Health and specialist support.



YUDHILIDIN

Yudhilidin, meaning 'guidance' is a Care Coordination service for Aboriginal and Torres Strait Islander people with severe and complex mental illness that has an impact on their daily lives. The service provides care coordination to clients to ensure they receive a holistic, culturally appropriate, recovery orientated service, delivered by mostly Aboriginal staff, enabling high levels of engagement of Aboriginal people.

The service is focussed on connection to supports, particularly those that meet immediate psychosocial needs and mental health treatment requirements. The team will have a yarn to help identify health and wellbeing goals and provide information regarding culturally appropriate supports in the local community, and attend appointments as required to facilitate connection. The team will remain involved for a period of up to six months to ensure facilitation to services has been successful.

Through the provision of guidance and support, the Care Coordinator's role is to ensure that at the end of an episode of care the person has the confidence and capacity to manage their own health journey.

SNAPSHOT OF ACTIVITIES

Service was provided to over 250 people across the Greater Newcastle, Hunter and Mid Coast Regions with service durations varying from four to six months, allowing time to assist people and build their capacity to manage the supports they required.

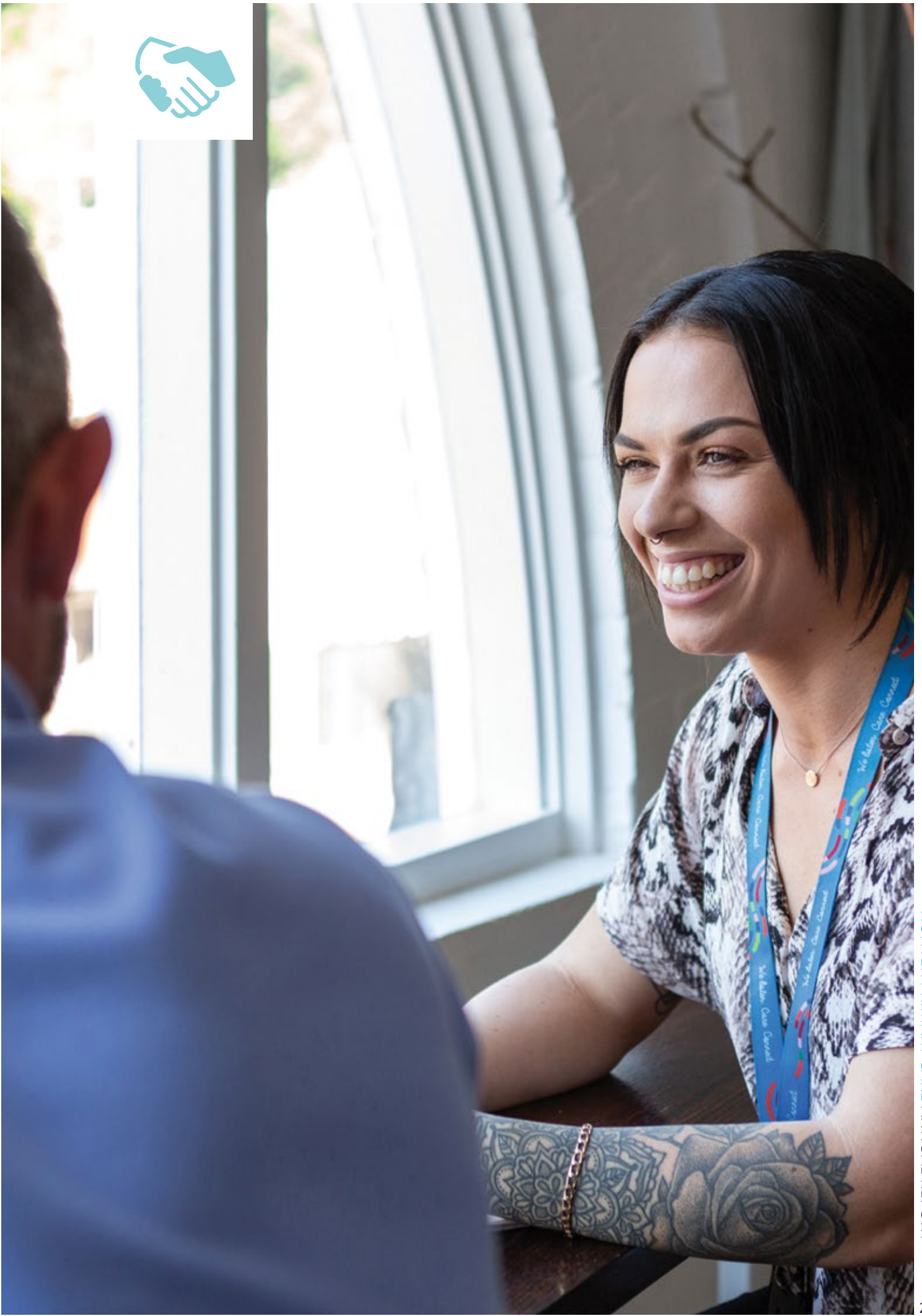
FUTURE DIRECTIONS

Continue to provide culturally appropriate support to Aboriginal and Torres Strait Islander people with complex and multifaceted mental health needs in this program. HPC hope to be able to continue to develop the service and maintain valuable service relationships beyond January 2021.

HIGHLIGHTS & ACHIEVEMENTS

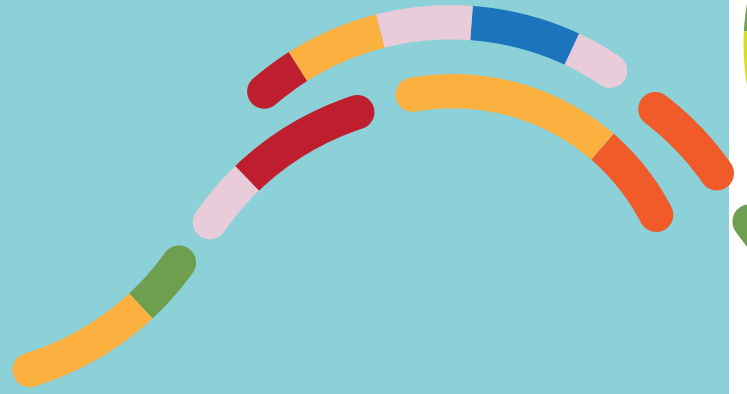
- 100% of the NDIS applications that were assessed by the NDIA were successful, and participants gained an NDIS plan to assist them into the future on an ongoing basis.
- Strong connections were established with a number of service providers and participants were able to make some resilient connections to family and health services.
- Participants and services have attributed Yudhilidin with successful outcomes for participants and helping people take ownership of their lives.

100%
of NDIS applicants
were successful



DISABILITY & WELLBEING

NDIS SERVICES



HPC is an accredited NDIS provider, delivering a range of services that assist people who have significant health issues. This includes Support Coordination, Improved Health and Wellbeing through Dietetics, Exercise Physiology or Occupational Therapy and therapy supports including assistive technology.

HPC NDIS Services team includes a range of qualified health professionals and qualified Support Coordinators. The team also specialise in mental health with a range of qualified staff to assist with any coordination needs for psychosocial disability.

In addition, HPC is increasingly sought after as the provider for Specialist Support Coordination for people with additional complexities, significant mental health concerns or undertaking significant life transitions. HPC delivers high quality services with qualified and experienced staff.

SNAPSHOT OF ACTIVITIES

NDIS participants with HPC are supported to navigate through specialist and mainstream health services.

HPC has developed positive working relationships with a wide range of quality NDIS service providers and provides NDIS services in the greater Newcastle, Port Stephens, Lower and Upper Hunter Regions.

FUTURE DIRECTIONS

HPC will continue to work with clients to reach their goals and aspirations in supporting them with their NDIS plan and implementation.

HIGHLIGHTS & ACHIEVEMENTS

- HPC provided NDIS Services to over 560 people with a disability during the 2019/2020 financial year.
- HPC is witnessing people making significant changes in their lives with the benefit of NDIS funded packages.
- HPC supported many people who are accessing the NDIS for the first time to understand and effectively use their NDIS funding.

560

People with a disability have received services



GENERAL HEALTH & WELLBEING

AGED CARE EMERGENCY SERVICE



The Aged Care Emergency Service (ACE) supports Residential Aged Care staff to provide the right care, at the right time and in the right place for their residents when they become unwell.

The ACE service is dependent on collaborative relationships between HPC, Residential Aged Care Facilities (RACFs), HNECCPHN, NSW Ambulance (NSWA), General Practitioners (GPs), residents, families, and carers.

The service provides consultancy, clinical support, and advice for RACF staff. A feature of the ACE service is its multi-faceted model of care. At the centre of the model is the 'resident' and the ethos of ensuring they receive the right care at the right time in the right place.

The following steps are in place to support Residential Aged Care Facility staff with decision-making:

1. The use of evidence-based algorithms to manage common health issues within the Residential Aged Care Facility.

The ACE management team coordinates a 3rd yearly review of the clinical algorithms. Each algorithm is reviewed by the relevant clinical streams and networks within HNELHD to ensure they reflect the latest evidence based practice. The three yearly review is currently being undertaken.

2. A 24-hour telephone consultation service (the ACE line) supported by Registered Nurses, for RACF staff to access clinical guidance.

During business hours and Saturday mornings the ACE line is monitored by Registered Nurses within the emergency departments of the 9 hospitals engaged in the ACE service. Each RACF is allocated to a local hospital.

Afterhours, including weekends and public holidays, the ACE line is monitored by GP Access Patient Streaming Service.

3. Identification of clear goals of care prior to transferring to an emergency department.

Utilising ISBAR 4 Aged Care, RACF staff provide clinical handover via the ACE line to ensure the resident's goals of care are met.

4. Proactive case management within the emergency department.

A clear and concise handover prior to the arrival of the resident in the ED can streamline the journey through the emergency department.

5. Empowerment of Residential Aged Care Facility staff through established Communities of Practice, linkages to clinical experts, focus groups and educational workshops.

The success of the ACE service has been the collaboration of all people involved in the care of residents when they become acutely unwell.

SNAPSHOT OF ACTIVITIES

The ACE service collaborates with 151 aged care facilities and 9 emergency departments. HPC provides after-hours telephone support to 98 of these facilities. The service facilitates 7 interagency meetings three times a year to bring together representatives from aged care facilities, emergency departments, hospital staff, NSW Ambulance, home care package providers, HPC, practice nurses, HNECCPHN and educational facilities. The aim of these communities of practice is to share innovations, latest evidence based best practice and establish and refine collaborative ways of working to facilitate the right care in the right place and at the right time for people residing in aged care facilities.

During the COVID-19 pandemic the ACE service has transformed these meetings into one large online meeting on a weekly basis. Representatives from the Public Health Unit, HNELHD and HNECCPHN have been participating to ensure Aged Care Facilities have the most up to date information to assist RACFs in their outbreak prevention preparations.

The 24hr ACE telephone service received **8,800** calls made by RACF staff, with **60%** of these calls to the after-hours service provided by HPC.

151

Residential Aged Care Facilities

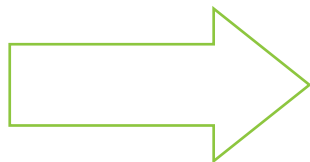
9

Emergency Departments in Hunter New England Local Health District



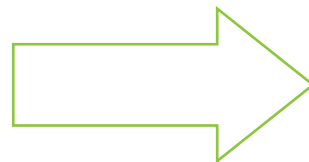
51

Clinical guidelines



4

Process algorithms



27

Clinical algorithms

8,800



ACE Calls 60% in afterhours

709

Stakeholders receiving regular newsletters

Regular community of practice meeting Weekly during

COVID-19



CARE COORDINATION

The Primary Care Coordination Team provides a diverse range of support to the Hunter region by:

- Continuing to provide NDIS services for participants in capacity building supports across the Hunter in:
 - **Support Coordination:** providing quality assistance to participants and their networks to link to mainstream services and navigate the NDIS to utilise the funding to meet their needs and goals
 - **Health and Wellbeing:** providing tailored exercise and nutritional plans to manage NDIS participants', disability, health and wellbeing; and
 - **Daily Living:** Prescribing assistive technology and providing support in daily living skills and plans to assist the participant to maintain their independence
- Supporting Communities and Justice (formerly NSW Family and Community Services) and the Hunter Residence Group's transition of clients to their new community based living
- Care Coordination and Supplementary Service chronic disease management program for our Aboriginal and Torres Strait Islander communities for its ninth consecutive year

SNAPSHOT OF ACTIVITIES

The Care Coordination and Supplementary Service team continues to embed evidenced based Lifestyle Medicine interventions in their chronic disease programs. Our interdisciplinary team of nurses, allied health and Aboriginal health workers are passionate about how lifestyle improvements can create measurable and sustainable change in the health and well-being of the community. The team has introduced health support groups along with lifestyle skills support in areas such as healthy cooking, reading food labels and moving more. This work continues in collaboration with the Australasian Society of Lifestyle Medicine and HNECCPHN.



HIGHLIGHTS & ACHIEVEMENTS

HPC has continued into its sixth year of collaboration with Communities and Justice (formerly NSW Family and Community Services) and the Hunter Residence Group to support the transition of residents to community based living.

The allied health team undertook an extensive review of 96 individual clients prior to their transition into new community based accommodation to ensure their meal time management plans were compliant to the international dysphagia standards.

In providing the Care Coordination and Supplementary Service program to the Aboriginal and Torres Strait Islander community, the team has delivered:



32,753

Occasions of Service

1,259

Occasions where an Allied Health service was facilitated and or funded



Occasions where GP/ Specialist services were arranged and or funded

855

Occasions where transport to health appointments was funded or arranged

2,027



65,714



Medical Aids funded and facilitated through other funding sources.

COVID-19

The coronavirus pandemic has led to a significant risk to our clients. The team has adopted service delivery to include video consultations as an option to ensure clients remain engaged and have access to our supports and services.

FUTURE DIRECTIONS

COVID-19 saw traditional face-to-face service delivery methods pivot to digital methods overnight. The team will continue to adhere to NSW Health public health precautions and control measures and will continue to offer clients the options of virtual telehealth appointments.



GP ACCESS AFTER HOURS

GP Access After Hours (GP Access) is an approved medical deputising service that provides comprehensive after-hours primary care to the Maitland, Newcastle and Lake Macquarie regions of NSW.

GP Access has served the community for over 20 years and is led by a dedicated management, administration and Clinical Directorate Team. GP Access is staffed with registered nurses and administrative personnel and a cooperative of 200 plus experienced GPs from 80 local General Practices working for GP Access.

GP Access Clinics are integrated with local Emergency Departments with agreed protocols for transfer of patients between the EDs and clinics.

The GP Access service comprises the following elements:

A PATIENT STREAMING SERVICE (PSS)

The PSS is a nurse-led telephone based service that triages incoming calls and directs callers to the level of care that matches their immediate medical need. The PSS can provide “over the phone” clinical advice from a registered nurse or GP; make an appointment for the caller at a GP Access clinic; or advise the caller to access other care appropriate to their needs e.g. call Triple Zero, attend their nearest ED, access a chemist, or to see their own GP the next day.

The PSS also provides:

- Management of ACE calls in the after-hours period, providing advice and clinical support to Aged Care Facility residents and staff
- Call Managed Services for GPs who work outside the GP Access footprint, to minimise after-hours disruption
- Support for the Community Acute Care/Post Care (CAPAC Service)
- Management of time critical after-hours pathology results for participating GPs

The PSS operates from Monday to Friday evenings 5:30pm until 8:00am the next day; Saturday 12:00pm until 8:00am Monday and 24 hours on Public Holidays.

GP ACCESS CLINICS

There are five GP Access clinics; four are co-located with hospital EDs (Belmont, John Hunter, Calvary Mater Newcastle and Maitland hospitals) and the fifth is located in the Westlakes Community Health Centre at Toronto. Each clinic is staffed by an administrative officer, registered nurse and GP. The clinic service operates:

- Monday to Friday evenings 6:00pm until 11:00pm
- Saturday 1:00 pm until 11:00pm
- Sundays and Public Holidays 9:00am until 11:00pm

On-call GPs provide phone advice, home visits and residential aged care visits as required and provide back up to the clinic GPs when required. A free transport service is available to transport patients to and from clinic appointments, if clinically appropriate, and if the patient is unable to attend the clinic due to lack of transport.

SNAPSHOT OF ACTIVITIES

During the 2019/20 financial year, GP Access clinic appointments totalled 49,033, a decrease of 5,206 on the previous year.

From March to June 2020, GP Access experienced an unexpected decline in activity through both the PSS and Clinics due to the impact of COVID-19. Though the drop in activity was quite rapid, our service has quickly adapted with call volumes and clinic appointments having now stabilised. The Management and Clinical Directorate teams are commended for their hard work in ensuring that all aspects of the service were maintained during this time, with no staff needing to be stood down.

The Management and Clinical Directorate team worked tirelessly to ensure that robust processes and procedures were in place for the safety and wellbeing of staff and patients in these unprecedented times.

The frontline, administration staff, nurses and doctors of GP Access must also be commended for their demonstrated adaptability, flexibility and dedication to the ever changing environment that has been dominated by the COVID-19 phenomena.

Introduction of telehealth services by the Commonwealth, saw the implementation of new processes, allowing GP Access to continue caring for the community through this platform.

Solid working relationships between GP Access and the local emergency departments saw the continued appropriate referrals of patients between the two services during this time of lower activity for both areas.

The GP Access PSS managed a total of 69,956 calls, with 60,205 of these calls coming directly from the public line, a total of 5,661 less calls taken through the PSS due to the impact of COVID-19.

GP Access accepted close to 11,000 patients directly from the Emergency Departments, which includes the use of our early booking lines. The service also accepted 231 Paramedic referrals which is an increase of 62 referrals from the previous year.

2019/20 also saw a steady increase of calls to the ACE line, with the patient streaming service attending to 3,475 calls from the aged care facilities, which is an increase of 2,911 since the commencement of ACE in 2014. The ACE service supports delivery of care in the facility, where appropriate, thus reducing unnecessary trips to hospital. The nurse-led ACE line support is well regarded by our contributing Aged Care Facilities. GP Access GPs have only been required to make two urgent after-hours visits to Aged Care Facilities during the reporting period. These low call-out numbers can be attributed, in major part, to the quality of support provided to ACE callers via the PSS.

In the 2019/20 financial year, it is estimated that GP Access Clinics and PSS saved the health system \$14,281,910 in efficiencies (not including benefits of the ACE service to NSW Ambulance, local Emergency Departments and, most importantly, the Aged Care residents).

The GP Access early booking line has remained available for GPs, Ambulance and local Emergency Departments to direct individuals to GP Access for assessment and where appropriate into one of our five clinics.

GP Access Maitland Clinic has continued to provide additional support to Hunter New England Local Health District by accepting appropriate referrals from Kurri Kurri Hospital Emergency Department.

49,033

Number of patients seen in clinics

69,956

Number of calls managed (total PSS calls)



11,000



Number of patients accepted from emergency departments

3,475

Number of calls received from Aged Care Facilities

14,281,910



GP Access Clinics and PSS saved the health system

HIGHLIGHTS & ACHIEVEMENTS

- Implementation of new rostering system Optima to approximately 100 staff and over 200 GPs whilst dealing with impact of COVID-19 to the service
- Successful Accreditation status achieved
- Successful DEED application to remain in service as an Approved Medical Deputising Service
- Ongoing membership and active participation in the GP Deputising Association (GPDA)
- Telehealth implementation allowing to provide additional services to community

FUTURE DIRECTIONS

- Success with HNECCPHN EOI to continue services
- Expansion into rural areas





MENTAL HEALTH & WELLBEING

headspace NEWCASTLE

headspace is the National Youth Mental Health Foundation providing early intervention mental health services to 12-25 year olds, along with assistance in promoting young people's wellbeing. This covers four core areas: mental health, physical health, work and study support, and alcohol and other drug services. headspace Newcastle was established in 2013 and services a wide range of regional, urban and rural areas across the Hunter region.

SNAPSHOT OF ACTIVITIES

headspace Newcastle received around 1,800 referrals in the 2019/2020 financial year, and provides services to over 400 individuals each month. Despite being over 80% busier than the national average for headspace centres, clinical outcomes and client satisfaction continue to be equal to the national average.

headspace Newcastle's community development officer has worked across the community to promote young people's wellbeing.

14 School based presentations and workshops

10

Activities for Aboriginal and Torres Strait Islander young people

41 Activities with LGBTIQA young people

17 Activities with culturally and linguistically diverse young people

3 Large scale community events including The Drop music festival

4 Parents' and Carers' forums supported by Port of Newcastle, with over 180 attendees

In a year highly disrupted by COVID-19, the headspace Newcastle team have continued to engage with significant numbers of young people who the team have been able to support using innovative approaches to engaging the youth community and headspace stakeholders.

For a summary of our recent events, please visit the headspace Newcastle [Facebook page](#).

HIGHLIGHTS & ACHIEVEMENTS

- In October 2019 headspace Newcastle's expanded premises were opened, with funding from the Commonwealth Government. This expansion has added additional clinical rooms, plus open plan office space, and has supported increases in staffing and service levels significantly
- A new program for youth with complex mental health needs was implemented in the Port Stephens and Lake Macquarie areas. A new pilot early intervention program for young people at risk of developing eating disorders has also continued. The program is currently nearing conclusion and is being evaluated in conjunction with international researchers
- A record amount of donations has been received, from fundraising initiatives including Tomago staff donations (\$10,500), Caves Beach Community fundraiser (\$11,000) and The Edwards Hall (\$8,000)
- Community development highlights have included developing a virtual tour of headspace Newcastle, the production of an LGBTQIA card game by the As You Are group, NRL state of mind and NRL Grassroots workshops, and Q&A video produced featuring headspace clinical staff

FUTURE DIRECTIONS

- The community development focus is moving from building awareness of headspace, towards building capacity in local communities to support the mental health of their young people
- Further initiatives to support youth impacted by COVID-19 continue to be developed, particularly for young adults impacted by unemployment and travel/social restrictions. In the current environment the headspace Newcastle team are aiming to further embrace new technologies and digital platforms to engage the community
- Continuing to look at additional options for supporting young people in geographically isolated areas in our region, including physical outreach and greater implementation of telehealth solutions



HUNTER PSYCHOSOCIAL SUPPORT SERVICE

Hunter Psychosocial Support Service (HPSS) is funded by the HNECCPHN to assist people with a severe mental illness, who have reduced psychosocial function and are not eligible for the NDIS.

The program recognises the relationship between mental wellbeing and other social factors that impact on a person, and is designed to build living skills and connect with the right services based on individual participant's goals. HPSS focuses on building capacity and stability in people's lives by helping them identify goals and strategies, and support to work on these for up to nine months.

SNAPSHOT OF ACTIVITIES

Participants have been engaged in HPSS to build their social skills, manage daily living needs, increase family connections, build on physical wellbeing, financial management and budgeting, maintaining a home, managing drug and alcohol issues or increasing vocational skills and education.

Participants have been assisted to link in with a wide range of services to meet their needs. Where one to one support is needed, the person can also benefit from the support of a Mentor.

FUTURE DIRECTIONS

HPC hope to be able to continue this service beyond June 2021.

HIGHLIGHTS & ACHIEVEMENTS

- Hunter Primary Care HPSS commenced in early 2019. The service has been well received in the community and assists those where there is an identified gap in the systems of available support. One participant who has completed the service said:

“It's supported me to create the life I want and not one centred around my mental illness, a life of opportunity and achievement. Doors have opened to opportunities I didn't even know possible and I've been supported and encouraged to keep moving forward and build my life.”

PSYCHOLOGY SERVICES

HPC Psychology Services provide accessible, effective, and responsive mental health and substance use services for people across the Hunter and Mid Coast regions, including residents in Aged Care Facilities.

All of our mental health services are focused on people in the community who are not able to access privately funded mental health services where there is commonly a gap fee to engage services.

The services provided also focus on priority groups in the community including; Aboriginal & Torres Strait Islander peoples, children and young people, women in the perinatal period and people experiencing self-harm or suicidal ideation.

Mental health and drug and alcohol services are delivered in a stepped care framework, ranging from psychological services for people experiencing mild to moderate mental health to clinical care coordination services for people with complex and enduring mental health issues in the community. HPC can also link clients to HNECCPHN funded low intensity psychological services.

SNAPSHOT OF ACTIVITIES

Referral Activity

- PRIMA provided over 10,000 services through leadership of this program across Hunter, Central and Mid Coast and New England areas, over 5000 of those in the Hunter area

Mental Health Services programs

- Across the Mental Health Services programs over 3,000 clients were seen for approximately 21,000 service contact hours in the 2019/20 year. This equates to a 25% increase in service activity compared to the previous year
- Half of all the services activity was focused on vulnerable populations including Aboriginal and Torres Strait Islander people, children, women in the perinatal period and people experiencing self-harm and suicidal ideation
- Over one-third of all activity was undertaken in rural and remote areas of the Hunter and Mid Coast regions
- The aged care program received funding to deliver mental health treatment to residents in aged care facilities in eight new LGAs

Drug & Alcohol Services

- Across the Drug & Alcohol Services over 600 clients experiencing substance use and comorbid mental health issues were seen for over 3,700 service contact hours, which is an increase of 18% compared to the previous year.
- Six postgraduate clinical psychology students were provided D&A clinical placements training opportunities as part of the D&A Mentoring program at HPC in the 2019/20 year
- HPC staff have also been trained in drug and alcohol assessment as well as behaviour change and motivational interviewing strategies

HIGHLIGHTS & ACHIEVEMENTS

Responsiveness to adversity in the community: Bushfires and COVID-19

- HPC Psychology Services has worked to provide psychological support to people affected by the Bushfires in the region.
- Along with other services delivered by HPC, Psychology Services adapted quickly and effectively with the COVID-19 pandemic by continuing to deliver across PRIMA and the treatment services via a combination of telehealth (phone and video consultation), along with face-to-face services as required

Growth of primary mental health services in the region

- HPC Psychology Services has received increased funding from the HNECCPHN to deliver increased stepped care interventions in the Hunter and MidCoast regions
- Psychological therapy services in Residential Aged Care Facilities have expanded into an additional eight LGAs, across 55 facilities in the Hunter and Mid Coast regions, delivering over 300% more activity across the regions compared to last year
- Clinical care coordination services commenced in the year. These services provide an invaluable addition to the stepped care interventions available at HPC, focused on people experiencing more complex and enduring mental health issues in the community. The service has provided over 800 hours of support to its clients. The service will continue to expand throughout 2020/21

Initial Assessment and Referral service, PRIMA commenced

- The PRIMA service is focused on utilising an evidence based Commonwealth Government model for the referral management of people requiring primary mental health services. The aim of PRIMA is to ensure that people in the community access the right level of mental health care at the right time

HPC Innovation Challenge

- Two staff from HPC Psychology Service were successful in the inaugural HPC Innovation Challenge; including Claire Nussey for the development of a 'crisis card/safety planning' App for use with mobile phones, as well as Dr Kylie Bailey to develop an animated story song to engage young people with drug and alcohol services

Drug & Alcohol (D&A) Program

- The HPC D&A Treatment service will continue to be funded by the HNECCPHN for a further two years into 2022, including new funding to deliver direct services to residents at We Help Ourselves (WHOS), a Drug and Alcohol rehabilitation service operating in the Hunter Valley
- The D&A Mentoring Program has continued to provide opportunities for postgraduate clinical psychology students to gain valuable experience and skills in addressing substance misuse occurring comorbidly with mental health presentations. The program also provides training, education and upskilling for all clinical staff in alcohol and other drug interventions

FUTURE DIRECTIONS

COVID-19: ongoing psychological support in the community

- Addressing the ongoing impact of the COVID-19 pandemic in the community will be a focus for HPC, including Psychology Services. The ability and experience to deliver flexible services in the community, specifically telehealth, positions HPC Psychology Services well to respond to the challenges the community face with dealing with the pandemic and other adverse events

PRIMA

- The initial focus for PRIMA into the 2020/21 year will be to ensure the ability for electronic referrals to be received from GPs across the HNECCC region, supporting GPs in transitioning to the utilisation of e-referrals

Mental Health Services and Drug & Alcohol Treatment

- Following a significant period of program and service development, the 2020/21 year will focus on consolidation and enhancing the collaborative relationships with stakeholders and referrers, with the aim to maintain the level of activity across the funded regions
- The delivery of clinical care co-ordination services will continue to be developed and expanded into 2020/21
- HPC Psychology Services will undertake an internal program evaluation of the Aged Care program, as well as the Drug & Alcohol Treatment service to identify areas for improvement and training

New business development and innovation

- An ongoing focus for Psychology Services will be to explore opportunities to diversify and develop services, both in areas of expertise such as primary mental health or in evolving and innovative practices at the forefront of mental health service delivery



THE WAY BACK SUPPORT SERVICE

The Way Back Support Service is a Beyond Blue initiative providing non-clinical care and practical support to individuals for up to three months following a suicide attempt.

SNAPSHOT OF ACTIVITIES

Throughout 2019/20 The Way Back received 465 referrals with 77% accepting the service offer. Each month, the service is in touch with around 90 people and provides approximately 300 phone calls and 45 visits.

The service has continued its emphasis on improving access and providing culturally appropriate support for Aboriginal people.

With the addition of an identified Aboriginal Support Coordinator, the service connected with 20 Indigenous clients each month.

HIGHLIGHTS & ACHIEVEMENTS

- The Way Back has now completed a four year trial which has included qualitative and quantitative evaluation of the service model. HPC is excited to be moving to the next stage of a national rollout. The service will continue in the Hunter and also expand across multiple sites nationally.
- In November 2019, The Way Back was proud to present at NSW Ministry of Health Suicide Prevention Fund Forum.
- Despite the impact of COVID-19, The Way Back has been able to continue service while modifying practice to ensure the health of staff and clients are paramount. The introduction of telehealth services has provided an additional means of connecting to the service.

FUTURE DIRECTIONS

The Way Back has continued to enjoy a successful partnership with the Calvary Mater Newcastle Hospital's Toxicology and Consultation-Liaison Psychiatry team who are the primary referrers into the service. With the trial period coming to an end, The Way Back has now broadened its referral pathway to include people admitted directly to the HNE Mental Health Inpatient Units following a suicide attempt.

Support for Indigenous people following a suicide attempt has continued to evolve and from July 2020, will be known as 'Aboriginal and Torres Strait Islander Aftercare'. The service will continue to work closely with The Way Back with a strong focus on cultural connection and wellbeing.

77%
accepting the
service offer

CONTINUITY OF SUPPORT

Continuity of Supports (CoS) and National Psychosocial Extension (NPS Ext) are services that are funded by the HNECCPHN for people previously provided a service by Partners In Recovery (PIR). As PIR finished in June 2019, all remaining clients were initially transferred into NPS Ext, where they are supported to apply for an NDIS plan and, if successful, support is continued according to their plan. If they are found ineligible for an NDIS plan, they can move into CoS where they can continue to be supported. Both services are for people with a severe and persistent mental illness, and focuses on building capacity through identification of goals and strategies, and connection to a wide range of services to meet their needs. While engaged in CoS, participants are assisted to re-test eligibility to the NDIS if this remains a goal.

SNAPSHOT OF ACTIVITIES

During this period, participants have been engaged to build their capacity and connect to services, linking to a wide range of services to meet their needs. CoS clients have been encouraged to reapply for the NDIS, and are assisted to do this if previously found ineligible.

Groups have been developed in co-design with clients to deliver a person centred group option as well as connection to other services.

HIGHLIGHTS & ACHIEVEMENTS

- Participants have been supported in these programs to achieve goals and work towards testing eligibility for NDIS.
- Clients engaged in these programs have been supported to access groups and work on building social skills, and build on capacity for achieving goals. Many clients have been supported to access the NDIS where there had been barriers or difficulties or where they had become disconnected from appropriate support services.

FUTURE DIRECTIONS

CoS and NPS Ext are funded until July 2021, during which time all clients will be assisted to apply or reapply to the NDIS if identified as a goal to ensure ongoing support until that time.



TRANSITIONAL CARE PACKAGES PROGRAM

The Transitional Care Packages (TCP) Program is a pilot initiative aimed at supporting people with complex psychosocial needs who are transitioning to the community following a hospital presentation.

The service provides three months of clinical care coordination for individuals following a brief admission to the Maitland Mental Health Unit. The service is focused on supporting people presenting with complex psychosocial factors and/or complex comorbidities alongside mild to moderate mental ill health.

Through coordinated clinical care, the Transitional Support Clinician work with clients to identify care needs and support referral and connection in the primary care/ community sector. The 12 week program aims to address the issues that led to the presentation, to increase self-efficacy and minimise avoidable mental health admissions and re-presentations to Emergency Departments.

SNAPSHOT OF ACTIVITIES

The TCP pilot program received 74 referrals from Maitland Mental Health Unit. Uptake of the service offer is very high, with 96% accepting the service and remaining involved on average for 78 days.

“ I absolutely love the support. I cannot tell you how much I have benefited from this service, its been brilliant’ Female client, aged 35-64 years ”

HIGHLIGHTS & ACHIEVEMENTS

- Due to the success of the initial phase, the pilot program has been extended for a further year.
- The program has a strong focus on connecting with community and has forged excellent partnerships with services within the Maitland area including Hunter Valley Mental Health Services. In the 28 days following initial hospital discharge, fewer than 10% of clients required a further mental health admission, which is helping people to remain out of hospital and supported in the community.
- Client feedback for this program has been overwhelmingly positive with 98% of feedback being positive.

FUTURE DIRECTIONS

In a short time, the service has demonstrated that it fills a much needed gap in the community. The program will be participating in an external evaluation of the program and is hopeful to be able to continue into the future.

98%

Positive Client Feedback





SUPPORT SERVICES

HUMAN RESOURCES MANAGEMENT SERVICES

HPC Human Resource Management team provides strategic and operational advice, support and services to the HPC business units for all human resources and work health and safety matters.

SNAPSHOT OF ACTIVITIES

Recruitment activity increased during the year resulting in a 10% increase in staff numbers.

10%
increase in
staff numbers

- Staff consultative group meetings were held to provide input and feedback about design and implementation of initiatives arising from the 2019 culture survey
- A new online learning management system was implemented across the organisation so that all staff could complete up-to-date compliance training and orientation training for new staff
- Supported many HPC staff to make the necessary adjustments to work from home following the onset of COVID-19
- Preparations for the negotiation of a new enterprise agreement, including the development of a new remuneration framework

HIGHLIGHTS & ACHIEVEMENTS

- Successful transition to remote learning for Cultural Awareness and LGBTI Inclusive Practice training in consultation with providers during COVID-19 social distancing restrictions
- Successful implementation of peer to peer recognition rewards to recognise staff who excel at demonstrating the HPC values
- Successful transition to work from home and to the provision of telehealth services at the onset of COVID-19
- Successful transition to electronic personnel files and electronic signatures for employment documents resulting in reduced printing, stationery and postage costs and floor space required for filing cabinets

FUTURE DIRECTIONS

An integrated People and Culture plan is being developed in line with the strategic direction of HPC with a number of initiatives to be implemented including:

- Negotiation of a new enterprise agreement
- A culture survey to measure our progress over the last two years
- A new performance and development process developed in consultation with managers and staff during 2019/20
- Introduction of leadership development program for senior managers

INFORMATION TECHNOLOGY

In addition to IT support of HPC staff, the IT department at HPC also provides IT support and services to businesses including general practices, allied health and specialists.

By the end of the financial year we were supporting 1,120 computers and servers located all over the Hunter region and beyond from Foster to Redfern and out as far as Merriwa. Our IT team has specialised expertise in primary health care information management and technology systems, including medical record software and security requirements, as well as experience in the wider health sector.

Over the past 12 months, COVID-19 has presented a number of challenges for our clients and as a result we deferred the annual price increase for Managed IT Support services.

SNAPSHOT OF ACTIVITIES

Over the past 12 months, the IT department has achieved some great results for HPC. The IT team provides support for 176 HPC computers and 42 servers. In the past year, a number of noteworthy projects were completed including:

- Implemented a Dark Fibre link between the Warabrook office and Steel River data centre
- Quadrupled capacity on the remote access server to allow staff to work from home efficiently and safely
- Implemented Office 365 and Teams to keep staff connected and productive while working from home
- Continued a program of refreshing IT infrastructure by replacing server infrastructure and expanding capacity into the Steel River data centre
- Revised and improved the IT Business Continuity and Disaster Recovery capability

HIGHLIGHTS & ACHIEVEMENTS

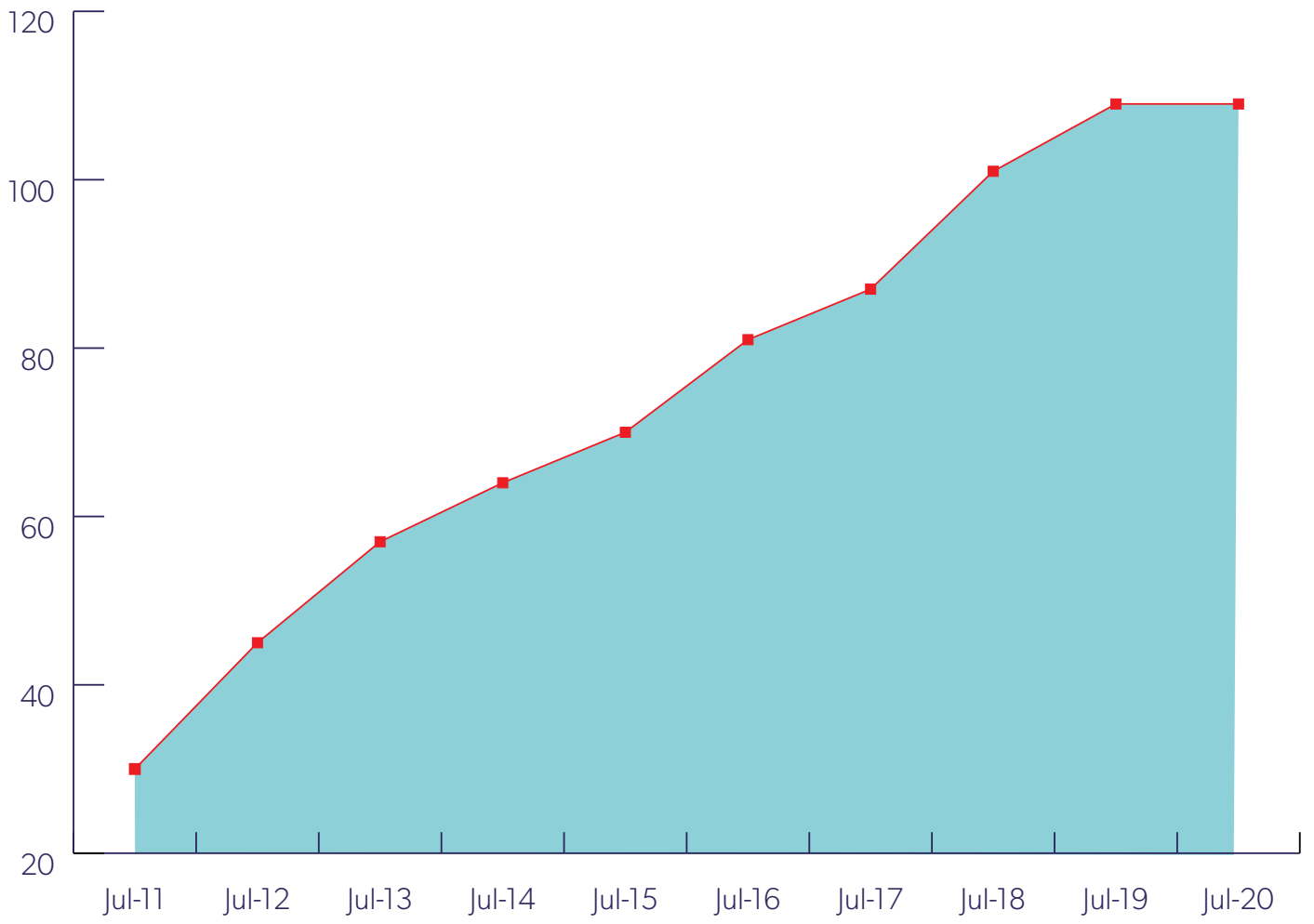
- Number of practices supported remained at 109
- Income growth continues to improve on a year on year basis
- Enabled a secure and efficient remote systems and communication capability for HPC staff during COVID-19 pandemic

FUTURE DIRECTIONS

In the coming year the IT department will endeavour to maintain the IT systems while supporting the IT focused strategic initiatives for HPC. For our external clients the focus will remain on service delivery and business development.

109
Practices
Supported

IT Managed Clients



FINANCIAL REPORT

Financial Performance

Hunter Primary Care Limited operates as a non-profit health promotion charity and community health services organisation. It is an independent public company limited by guarantee registered with the Australian Charities and Not-for-Profits Commission.

As a registered public company, Hunter Primary Care undergoes an annual independent financial audit to ensure its compliance with Australian Accounting Standards and the Australian Charities and Not-for-Profits Commission (ACNC) Act 2012.

Statement of Comprehensive Income For the Year Ended 30 June 2020

	2020	2019
	\$	\$
REVENUE		
Service revenue	7,241,617	5,840,209
Government grants	19,961,327	19,030,581
Interest received	124,694	221,945
Other income	1,596,807	54,088
TOTAL REVENUE	28,924,445	25,146,823
EXPENSES		
Employee benefits expense	19,633,815	17,410,245
Depreciation and amortisation expense	820,133	109,252
Administration expense	2,315,402	2,150,187
Sub-contractors expense	1,876,554	3,370,362
Occupancy expense	412,442	1,095,438
Other operating expenses	364,402	267,231
Finance Costs	368,621	-
TOTAL EXPENSES	25,791,369	24,402,715
SURPLUS/(DEFICIT) FOR THE YEAR	3,133,076	744,108

Hunter Primary Care delivered an operating surplus of \$3.133 million compared to a prior year surplus of \$0.744 million. Gross revenues increased by 15% (\$3.778 million) on the prior year. This increase in revenue was the result of a combination of factors. Program revenue increases gave rise to the most significant revenue movements, most notably with the new contracts for Access & Referral Management (PRIMA), Hunter Psychosocial Support (HPSS) and headspace expanding on the scope of previous contracts and contributing to an increase of \$3.6 million in year on year program revenue. In line with HPC's strategy to increase support coordination services, NDIS income increased by 300% (\$1.686 million) on 2019 NDIS income. Additionally, COVID-19 related funding for the year amounted to \$1.710 million.

These revenue increases were offset by a reduction in revenue of \$2.296 million as a result of the discontinuation of the Partners in Recovery program.

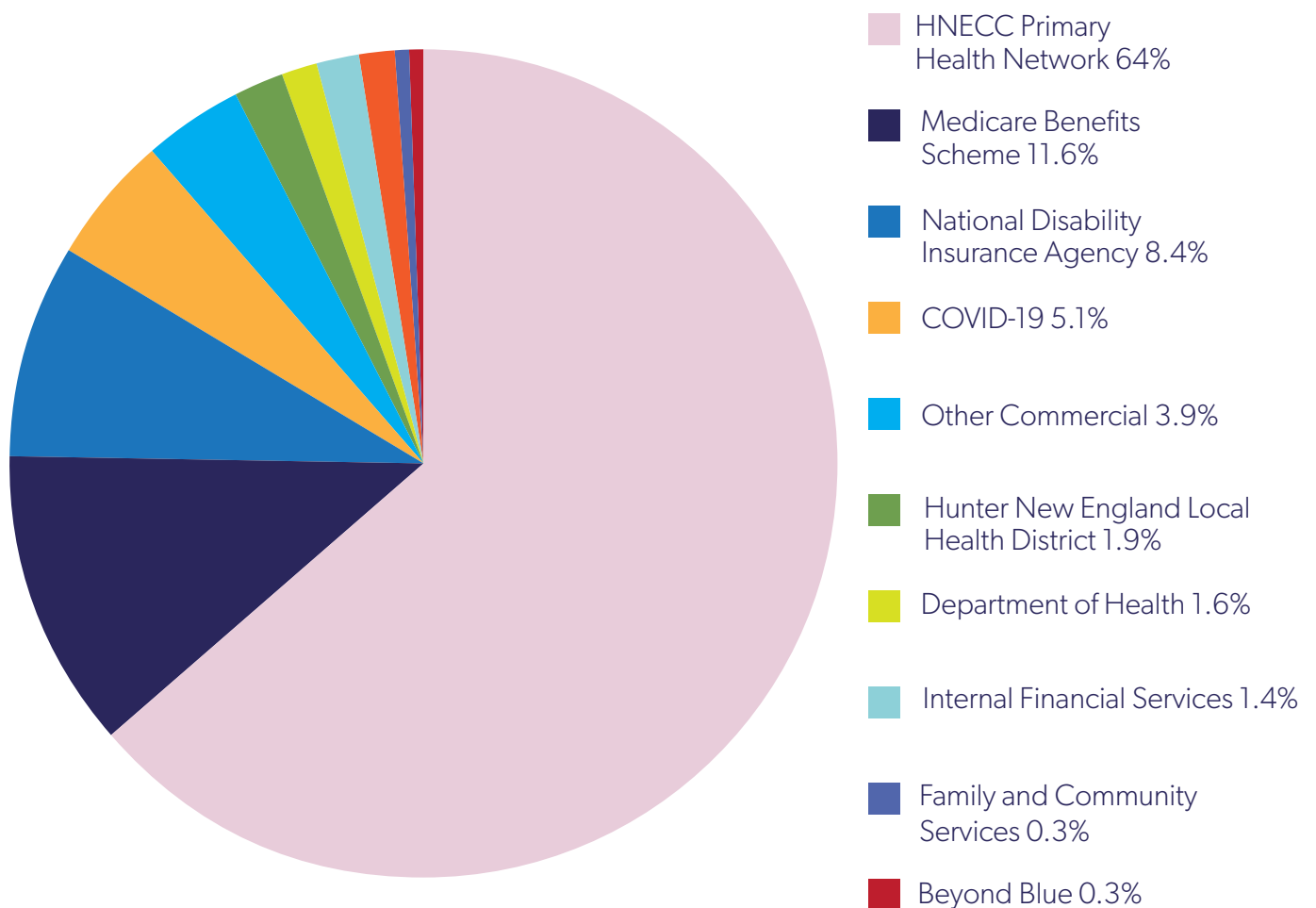
COVID-19

HPC received \$1.710 million in COVID-19 related funding in 2020 through JobKeeper and Boosting Cash for Employers incentive schemes. These funds were used to mitigate the impact of COVID-19 on operations and to enable HPC to adapt to a changed business environment as well as to provide assistance where employees' hours were reduced.

Snapshot of Revenues during 2019

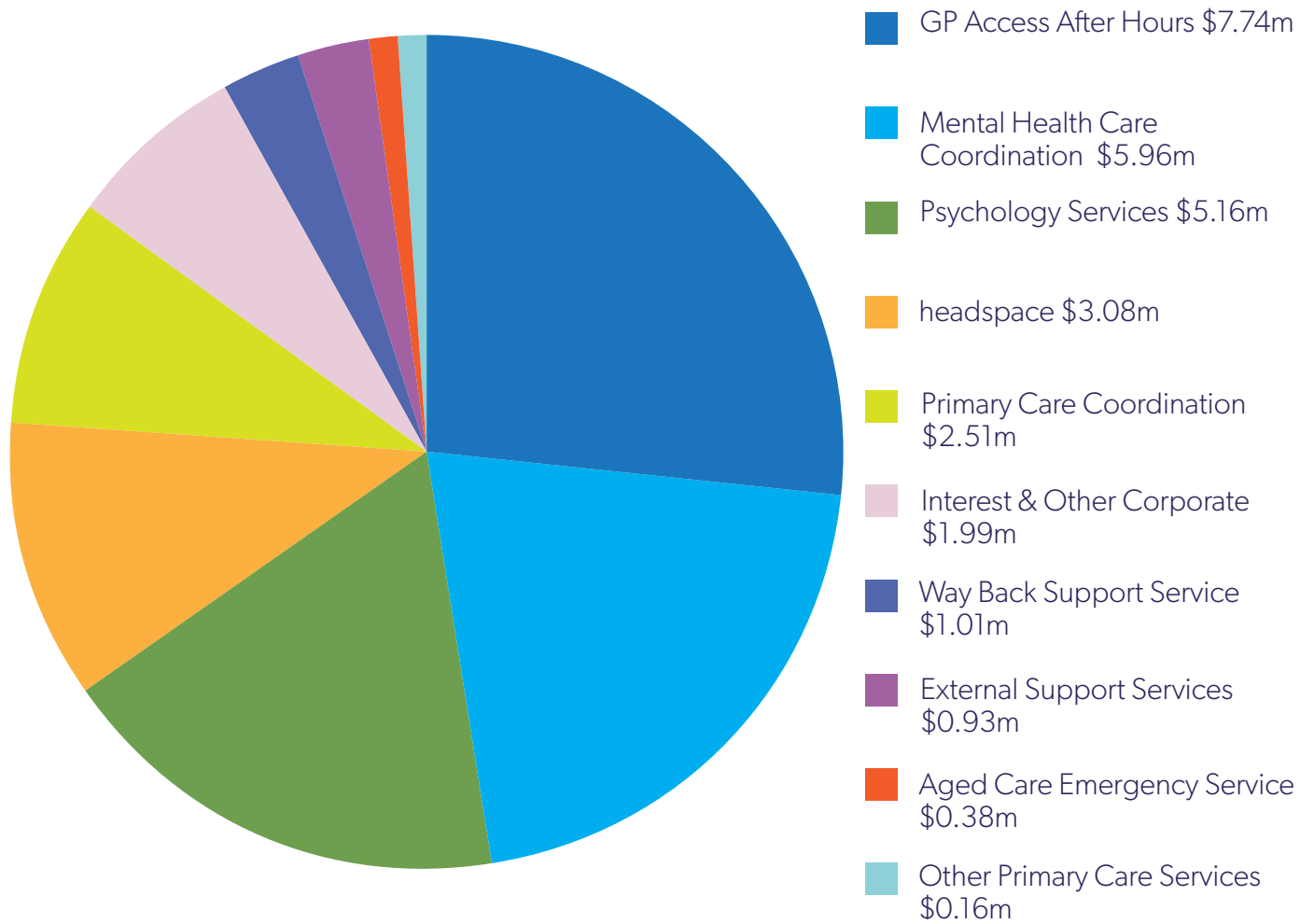
HPC receives its revenues from a variety of government and non-government sources, the most significant of which are the HNECCPHN, Medicare billings through the Medicare Benefits Scheme (MBS) and funds received through the National Disability Insurance Agency. The sources of income received by Hunter Primary Care for the 2019/20 year are presented in the below

Revenue Contribution by Source (2019/20)



HPC uses these revenues to support a range of services. Revenues by service for the 2019/20 year are presented in the below figure;

Revenue Contribution by Service (2019/20)



Statement of Financial Position
As at 30 June 2020

	2020	2019
	\$	\$
ASSETS		
Cash and cash equivalents	9,630,706	10,714,181
Trade and other receivables	3,618,426	1,217,707
Other current assets	383,149	406,551
TOTAL CURRENT ASSETS	13,632,281	12,338,439
NON CURRENT ASSETS		
Property, plant and equipment	8,031,122	1,109,159
TOTAL NON-CURRENT ASSETS	8,031,122	1,109,159
TOTAL ASSETS	21,663,403	13,447,598
LIABILITIES		
CURRENT LIABILITIES		
Trade and other payables	1,501,695	1,444,392
Provisions	2,123,425	1,722,788
Other financial liabilities	2,699,293	5,058,010
TOTAL CURRENT LIABILITIES	6,324,413	8,225,190
NON CURRENT LIABILITIES		
Lease Liabilities	6,653,053	-
Employee Provisions	345,455	384,807
Other non current liabilities	369,805	-
TOTAL NON-CURRENT LIABILITIES	7,368,313	384,807
TOTAL LIABILITIES	13,692,726	8,609,997
NET ASSETS	7,970,677	4,837,601
EQUITY		
Donation Reserve	69,028	45,066
Retained Earnings	7,901,649	4,792,535
TOTAL EQUITY	7,970,677	4,837,601

Future Directions

HPC's revenues have steadily increased year on year as the size and scope of our programs and initiatives grow and diversify. This continuing growth and diversification, in combination with net assets of \$7.971 million, mean HPC is well placed to capitalise on new opportunities and continue its growth into the future.

Comprehensive 2019/2020 financial statements can be found on the [Hunter Primary Care website](#).

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