

# Transforming health TOGETHER

STRATEGIC PLAN 2021-2023







This artwork was painted by Walbunja woman Loretta Parsley, a Traditional Custodian of Yuin country with a strong connection to the south east coast of NSW.

The artwork is in the form of a cultural map and depicts the South Eastern NSW PHN region.

The areas in the artwork are defined by local government territories and include 12 places of significance: Wollongong, Shellharbour, Kiama, Shoalhaven, Jervis Bay, Eurobodalla, Bega Valley, Snowy/Monaro, Queanbeyan, Goulburn/Mulwaree, Yass Valley and Upper Lachlan Shire.

## ACKNOWLEDGEMENT OF COUNTRY

COORDINARE acknowledges that Aboriginal people are the First People of this country and pay respect to their Elders past, present and emerging and acknowledge their continuing connections to their ancestral lands.

COORDINARE is not qualified to determine nor define the Aboriginal Countries and understands the sophisticated and complex relationships with Aboriginal people and the land. However, it is our current understanding that within the organisation's 50,000+ km geographic footprint are large areas of the Traditional Lands of:

- **Yuin Nation** – from Kiama down to Eden and out to Braidwood, including the townships of Nowra and Moruya
- **Dharawal Nation** – the area across southern Sydney down to the Illawarra Shoalhaven region and west to Moss Vale, encompassing Bass Point, Helensburgh and Wollongong
- **Ngunnawal/Ngambri Nations** – excluding the ACT and including Queanbeyan, Yass and Bungendore areas
- **Ngarigo Nation** – the Monaro Snowy Mountains region down to the Victorian border, including the NSW towns of Cooma and Delegate

Of note, Goulburn was a common ground and meeting place for many of the neighbouring Nations.

### A note about language

Language carries history and creates meaning.

At COORDINARE, the term 'Aboriginal' is generally used in preference to 'Aboriginal and Torres Strait Islander,' in recognition that Aboriginal peoples are the original inhabitants of South Eastern NSW.

In recent years, the term 'patient' has become less favoured by people using and delivering health services. COORDINARE uses the word 'consumer' throughout this document in recognition of the choice, control and power of people now accessing services, and their role in their care, service planning, delivery and evaluation.

# INTRODUCTION

We are very pleased to present COORDINARE's Strategic Plan 2021 – 2023. This plan outlines how we will achieve our vision - one coordinated regional health system that provides exceptional care, promotes healthy choices and supports resilient communities.

The past few years have had a severe impact across our region as we experienced drought, the devastating Black Summer bushfires and the COVID-19 pandemic. The full impact of these events on our communities, our economy and our health and wellbeing will take years to unfold.

Natural disasters and the pandemic have also given us insights and opportunities. 2020 has reinforced the importance of working collaboratively across professional and organisational boundaries, listening to consumers and building strong community networks. Our existing strategic alliances and partnerships have allowed us to coordinate, redirect and mobilise services quickly, embed telehealth and virtual health care, deploy additional mental health resources, and support providers to introduce COVID-safe practices. More recently, we have played a vital role in the COVID-19 vaccine rollout.

COORDINARE's achievements are based on a comprehensive and strategic approach to planning, commissioning and integrating services. Our business model focuses our attention and resources to achieve the greatest impact collectively. Using this approach allows us to consider the diversity and needs of the region and translate strategic priorities into clear and practical activities that result in better health care for people.

Our success depends upon strong partnerships and collaboration. Throughout 2020 we have consulted with our partners and communities to identify our most pressing needs and co-design our commissioned service responses.

Working together, we can harness the energy and influence of our clinical, community, political and organisational leaders from across the region to achieve positive change for our communities.

This Strategic Plan broadly outlines our priorities for action for the next two years. It is firmly grounded on our strengths and provides overarching approaches and priorities that allow for flexibility in the face of change. COORDINARE has selected these priorities to create the greatest impact – transforming health care as we work towards recovery from natural disasters and coexisting with the pandemic.

We thank all the consumers, community representatives, health care providers and stakeholders who have contributed to this Strategic Plan. We look forward to continuing to work together to improve the health and wellbeing of our local communities.



**Dianne Kitcher**  
CEO



**Richard Spencer**  
Chair

# OUR REGION

COORDINARE – the South Eastern NSW Primary Health Network (PHN) – is one of 31 PHNs across Australia and one of 10 PHNs in NSW. Our region stretches from Helensburgh in the north, past Eden to the Victorian border in the south, and inland to Cooma/Monaro, Queanbeyan, Yass and Goulburn.

Our reach and local connections provide a unique opportunity to improve the health, wellbeing and care of one of the largest rural and regional populations in NSW.

COORDINARE works with diverse government, non-profit, education and research, and private health care organisations to improve health outcomes across this unique region.

The drought, bushfires and COVID-19 have directly impacted the industry, economy, education, health and wellbeing of our local communities. The COVID-19 pandemic represents both challenges and opportunities for the future of our region, our health care needs and ways of working.



**631,901**

Total Population

51.9% major cities  
38.5% inner regional areas  
9.6% outer regional areas

19.9% aged over 65 years

**25,800+**

Aboriginal people (4.2%)

**55,200+**

Culturally and linguistically diverse people (9.3%)

High socio-economic disadvantage:  
42% of the population

13 million tourists spend a total of 18 million nights per year<sup>1</sup>

**1,353**

Houses destroyed by Black Summer bushfires<sup>2</sup>

Local government areas and territories	Population	Local government areas and territories	Population
1 Wollongong	216,071	7 Bega Valley	34,348
2 Shellharbour	72,240	8 Snowy Monaro	20,733
3 Kiama	23,008	9 Queanbeyan Palerang	59,969
4 Shoalhaven	104,371	10 Goulburn Mulwaree	30,862
5 Jervis Bay	404	11 Yass Valley	16,963
6 Eurobodalla	38,298	12 Upper Lachlan Shire	7,961



198 general practices  
784 + GPs



2 Local Health Districts  
22 public hospitals  
16 emergency departments  
30 community health centres



4 Aboriginal Community Controlled Health Organisations

<sup>1</sup> Prior to 2019/ 2020 bushfires and COVID-19 pandemic

<sup>2</sup> Bushfire data compiled from National Recovery and Resilience Agency, Local Area Profiles database. <https://recovery.gov.au/our-community/local-area-profiles#/map>



# STRATEGIC PLAN AT A GLANCE

## VISION

One coordinated regional health system that provides exceptional care, promotes healthy choices, and supports resilient communities.

## PURPOSE

Supporting primary care in our region to be consumer-centred, accessible, equitable, safe and high quality, comprehensive, population-oriented, and coordinated across all parts of the health system.

## VALUES

We build trusted and meaningful relationships

We respect and include diverse voices

We act with integrity

We embrace change with purpose

## OUTCOMES/KEY RESULTS



Improved health outcomes



Better consumer experience



Enhanced provider satisfaction



Increased value for money

## STRATEGIC APPROACHES

- Putting consumers front and centre in all that we do
- Supporting general practice as the cornerstone of primary care
- Commissioning services for those most at risk of poor health outcomes
- Partnering to integrate services and systems

## PRIORITIES FOR ACTION

These priorities are the areas where COORDINARE can have the greatest impact in the medium-term.

- Disaster preparedness and response
- Aboriginal health
- Mental health and suicide prevention
- Digital health adoption
- Social determinants of health
- Agile and responsive organisation

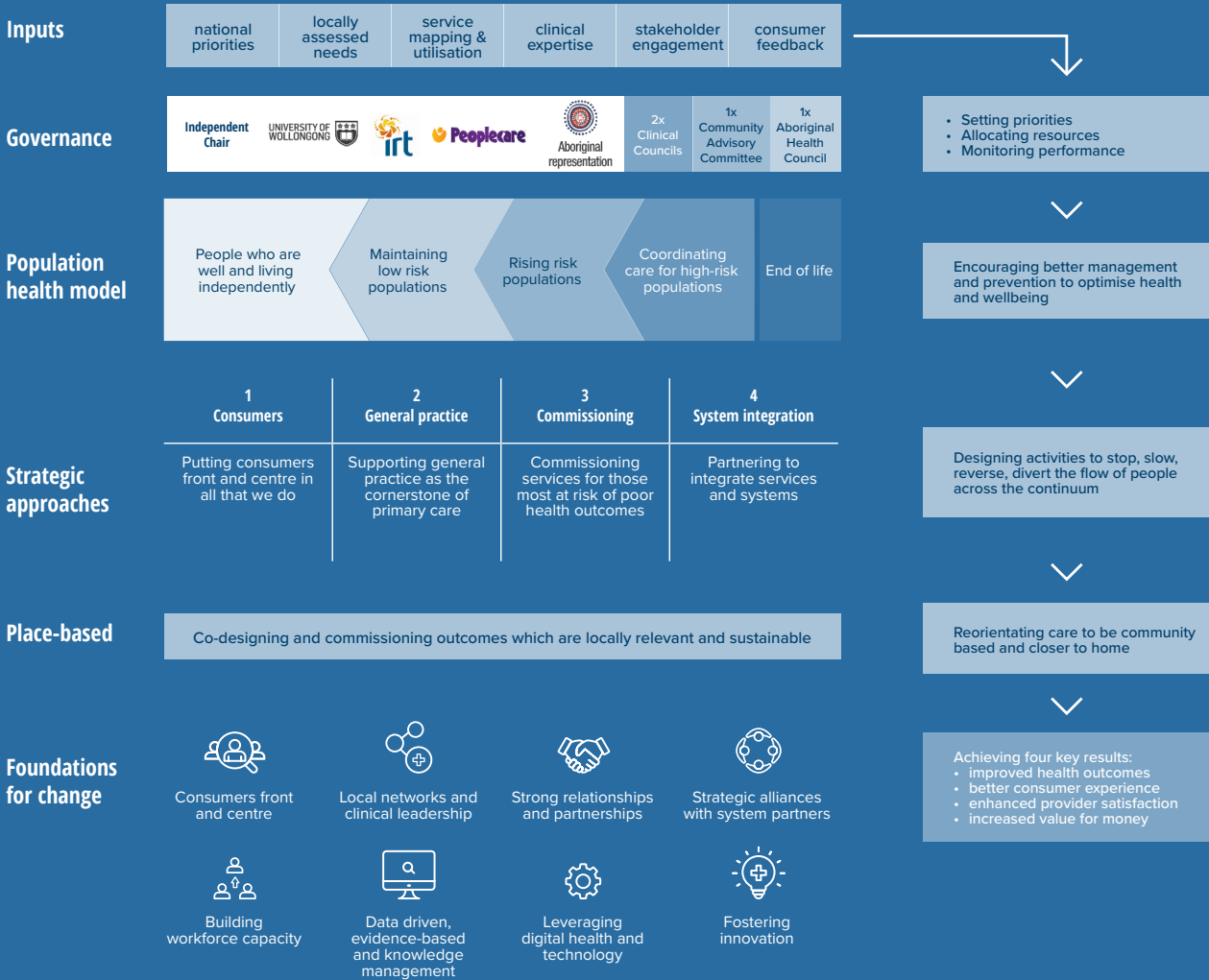
# BUSINESS MODEL

COORDINARE's business model is a dynamic regional health planning approach that uses data and evidence to achieve the quadruple aim of:

- improved health outcomes
- better consumer experience
- enhanced provider satisfaction and
- increased value for money.

We harness lessons learnt from working with consumers and providers from our local communities. We maximise our impact by translating knowledge and evidence into better practice and system improvement across South Eastern NSW.

**Vision: One regional health system that provides exceptional care, promotes healthy choices and supports resilient communities.**







# STRATEGIC APPROACHES

## 1. Putting consumers front and centre in all that we do

Involving consumers in their care and working together with vulnerable communities has multiple benefits. Active involvement improves health outcomes, increases health service efficiencies and trust in the health care team and reduces health care costs to the consumer and the health system. When providers form partnerships with consumers and carers, consumer experiences improve, and the design and planning of organisational processes, safety systems, quality initiatives and training can be more effective.

COORDINARE puts consumers front and centre in all that we do. Our Consumer Engagement Framework outlines our commitment to work effectively with consumers, learn from their lived experiences, and involve them in planning, designing, monitoring and evaluating commissioned services to improve health care in our region.

## 2. Supporting general practice as the cornerstone of primary care

General practice is integral to a consumer-centred, efficient health care system. General practice plays a continuous role in care across a person's life, including maternity and parenthood, keeping people healthy, preventing disease, reducing demand for hospital services due to serious illness and chronic conditions, and supporting people and their families at the end of life. An ongoing relationship with a general practice is associated with better health outcomes and a better consumer experience<sup>1</sup>.

Supporting general practice as the cornerstone of our health care system is pivotal to making health care more effective and efficient. General practice is crucial for people needing team-based care, linking allied health and social care professionals and coordinating care with specialists to ensure people receive the right care, in the right place, at the right time.

<sup>1</sup> Bodenheimer T, Ghorob A, Willard-Grace R, Grumbach K. 2014. The 10 building blocks of high-performing primary care. *Ann Fam Med*, 12(2):166-71.





### 3. Commissioning services for those most at risk of poor health outcomes

As a regional commissioning body, we are uniquely positioned to create new partnerships, trial innovative service models, and influence system change for those most vulnerable and those experiencing barriers to accessing care.

Commissioning services for our region allows us to address local health care needs and improve outcomes by:

- understanding our population's needs through health needs assessment, service mapping, consultation and co-design
- encouraging new and innovative models of care
- supporting providers to build capacity and self-sustaining services
- using data-driven evidence and outcome evaluation to measure impact.

COORDINARE's approach to commissioning involves an ongoing and collaborative relationship with service providers and consumers, working together to meet contracted deliverables and quality standards.

### 4. Partnering to integrate services and systems

Integrated care involves providing seamless, effective and efficient care that reflects a person's health and social care needs. Integrated care is most important for people with multiple chronic and complex conditions particularly as they age. Collaboration is the key to providing exceptional health care, as no single provider can deliver truly integrated care.

Integrated care requires a greater focus on a person's individual needs, communication and connectivity between health care providers, and better access to health services closer to home such as general practice, ACCHOs or community-based services. COORDINARE has mature and successful partnerships with the two LHDS in our region, Illawarra Shoalhaven LHD and Southern NSW LHD, and we continue to improve service and system integration.

We work closely with the four Aboriginal Community Controlled Health Organisations (ACCHOs) across the region to identify needs, co-design and integrate services:

- Illawarra Aboriginal Medical Service
- Katungul Aboriginal Corporation Regional Health and Community Services
- South Coast Medical Service Aboriginal Corporation
- Waminda - South Coast Women's Health & Welfare Aboriginal Corporation.





# PRIORITIES FOR ACTION

This plan highlights six priorities that enable us to achieve our vision while adapting to new challenges and opportunities. Our priorities consolidate and build on past activities and drive our work in emerging areas of critical importance.

## Disaster preparedness and response

The South Eastern region of NSW experienced prolonged drought followed by unprecedented, widespread and catastrophic bushfire damage from November 2019 through to March 2020. The fires were followed by the global COVID-19 pandemic. In response to these events, PHNs took on new responsibilities, ranging from supporting communities in their recovery from drought and bushfire trauma to helping coordinate the Commonwealth Government's response to the COVID-19 pandemic.

PHNs and primary care have a crucial role in national, state and local disaster planning and preparation arrangements. General practice and ACCHOs must be supported as an essential service to ensure access to medical care during a natural disaster or a pandemic. In addition, COORDINARE must be prepared to support the sector to respond to disasters.

## Our action

COORDINARE will develop an Action Plan: Disaster and Preparedness Response informed by the external evaluation of our response to the recent disasters. The plan will include five broad areas of focus: disaster planning, role clarification, relationships and partnerships, workforce wellbeing and resilience, and communication and information systems.



## Aboriginal health

Our region is home to over 25,800 Aboriginal people on the lands of the Yuin, Dharawal, Ngunnawal/ Ngambri and Ngarigo Nations. Aboriginal people represent 4.2% of our local population. Working in partnership with ACCHOs and Aboriginal people is a key priority for COORDINARE to address unacceptable health inequities and improve health and wellbeing.

We commission targeted services for Aboriginal people needing care coordination, mental health and suicide prevention support, and drug and alcohol services. We also work with mainstream primary care to develop and improve meaningful cultural safety as we continue our journey of reconciliation.

Tackling inequity is part of our journey and a focus of our future actions as we work toward reconciliation. There is a role for all services, both Aboriginal community-controlled and mainstream, to work together to improve social and emotional wellbeing outcomes for Aboriginal people in the region.

## Our action

Our first Aboriginal Health Strategy laid solid foundations for our work. Our Action Plan: Aboriginal Health will focus on how COORDINARE can contribute to 'Closing the Gap' in health outcomes for Aboriginal people and their communities across South Eastern NSW. We will continue to work in partnership with the ACCHOs in our region to co-design and commission services specifically for Aboriginal people. We will strengthen our consultation and engagement with Aboriginal communities, increase our profile of Aboriginal-identified staff, and broaden Aboriginal input and representation on our governance structures, including at the Board level. We will launch our Innovate Reconciliation Action Plan and establish an Aboriginal Health Council as part of the formal governance arrangements of the organisation.





## Mental health and suicide prevention

There are high rates of mental and behavioural disorders, and psychological distress in our region, with a greater burden borne by Aboriginal people and people living in rural areas. An increased, targeted and sustained mental health care and suicide prevention response to natural disasters and the pandemic will be required for many years to come.

Our joint *South Eastern NSW Regional Mental Health and Suicide Prevention Plan 2018-2023* outlines a vision to create one mental health system - planned, delivered and monitored together - to provide better outcomes for people experiencing mental health issues or with mental illness. COORDINARE is also a lead agency in the Illawarra Shoalhaven Suicide Prevention Collaborative and received further funding to scale this approach across our region.

COORDINARE will continue to forge new partnerships and collaborative arrangements to prioritise need and develop local solutions, increasing access to services for people across our region.

## Our action

In the next 12 months, COORDINARE will complete a detailed review of our overall mental health and suicide prevention work to date, reflect on our commissioned services, our role in supporting general practice and peer workers and our collaborations with the LHDs, ACCHOs and other stakeholders. Our planned response will align with identified needs and be embedded within our *South Eastern NSW Regional Mental Health and Suicide Prevention Plan 2018-2023*.





## Digital health adoption

The COVID-19 pandemic accelerated the uptake of telehealth among providers and consumers. 97% of GPs now provide care consultations via telephone or video compared to 15% before the pandemic. Most of our commissioned services provided online or telehealth services as an alternative to face-to-face services.

Adopting digital health remains challenging - due to social factors, access to technology, and health system incentives. Barriers related to data security, privacy and trust can also hinder the adoption of digital health technologies.

Consumers tell us that telehealth is important for people in rural and regional areas, particularly for people displaced by disasters such as bushfires. However, approximately 20% of people across our region do not have access to reliable internet. COORDINARE will maintain the momentum achieved in digital health adoption and develop strategies to overcome the digital divide.

## Our action

COORDINARE will develop an Action Plan: Digital Health Adoption that will focus on the human and social aspects of embedding digital health into usual care practices for both providers and consumers. We will work to overcome barriers, so the digital divide does not further disadvantage consumers with limited access to technology.





## Social determinants of health

Social determinants such as access to housing, education and employment, social supports, as well as postcode, strongly influence health. While directly addressing these factors may be outside of the scope of our PHN, there are primary care-based approaches that can alleviate the impact of the social determinants of health.

GPs report they are often consulted about social issues and need the resources to assist and empower people to address these aspects of their lives. Social prescribing is a practical way to address the social determinants of health from within the primary care system. Social prescribing enables health professionals to refer consumers to local community services and supports to improve their health and wellbeing.

## Our action

We have begun a trial of social prescribing that enables providers to refer consumers to a range of existing community services to overcome social isolation and barriers to accessing health services, and ultimately reduce inequity in our society.





## **Agile and resilient organisation**

The ability to operate successfully within a rapidly changing environment is a prerequisite for organisational sustainability and effectively meeting our region's needs. Agility and resilience enable timely and appropriate responses to a dynamic external environment.

### **Our action**

COORDINARE will develop an Action Plan: An Agile and Resilient Organisation. We will continue to strengthen our governance and invest in our people, digital systems, and data capability to ensure that COORDINARE continues to be agile, efficient, and a high-performing organisation.





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