



**Eastern Melbourne**  
Primary Health Care Collaborative

**Launch and Workshop**  
**June 17, 2016**

**Summary Report**

# Background

Eastern Melbourne Primary Health Care Collaborative was launched on June 17, 2016

The launch coincided with a workshop of 70 stakeholders from across the EMPHCC catchment

The objectives of the launch and the workshop were to:

- Launch the EMPHCC;
- Provide information to participants about the objectives, areas of focus (*chronic disease and complex conditions for people at risk of poor health outcomes across the catchment,*) structures and processes of the EMPHCC;
- Provide participants with relevant information and data to understand the health status of local populations, health system performance and partner organisation's strategic priorities;
- Identify potential priorities areas for action that will leverage off the Collaborative to deliver improvements in health outcomes for people in eastern Melbourne.

# Background

Following the launch, workshop participants were asked to address a number of questions designed to identify potential areas of focus, desired outcomes and possible actions of the Collaborative.

The workshop outputs are presented in the following slides,

- Firstly as a summary, with key themes identified, and
- Secondly in detail, organised by each individual working groups' responses.



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# Summary of responses

Identified key themes

# What is worth improving by us?

Analysis of the participants' response identified possible initiatives/projects for the Collaborative. The initiatives fell into the following broad categories:

- Place based (geographical focussed) approaches to addressing inequities in health status and outcomes (and service access)
- Patient cohort based initiatives – responding to high system utilisers or at risk groups
- Work on underpinning system infrastructure / system enablers, such as:
  - Shared data
  - Digitised health information (to support easier communication and information sharing)
  - Shared measurement systems/performance measures
- Key themes present in most of the responses included:
  - Engagement of consumers and communities (models of co-design)
  - Importance of collaboration between agencies
  - The relationship between and impact of social factors on health status and health outcomes

# How would you be able to tell that these differences have been achieved? What measures would you use?

Across all the working groups, the following were consistently identified:

## For individual consumers?

- Improved health outcomes
- Improved satisfaction with the system
- Improved service access
- Services delivered close to home
- Improved ability to navigate the system
- Improved health literacy
- More trust in the system

## For organisations?

- Better communication between agencies
- Improved models of care
- Shared data
- Shared performance measurement
- Better understanding of patient pathways and expectations of providers

## For the primary health care system

- Improved health outcomes
- Improved efficiency - targeting
- Better understanding of patient pathways and expectations of providers
- Strong prevention system

## For the health system broadly?

- Reduced avoidable admissions and ED presentations
- Decreased wait times
- Shared data access at individual level
- Streamlined and accurate clinical information sharing
- Improved efficiencies

# What are the big opportunities?

Across the 10 working groups the following were the big opportunities shared at the final report out, note that 2 groups identified Shared Agreement on Data)

1. Creating opportunities for cross sector collaboration – collective impact at the service level, through the creation of hubs, shared care models in areas of inequity – leading to improved access and improved patient journey	2. Simplification of systems for patient /client and service provider navigation (service mapping and App)
3. Extension of the Health Pathways Program for those with chronic illness	4. Shared agreement on data that informs decision making
5. Addressing the wicked problems - understand what the key drivers of health needs/care are for a small number of high volume conditions such as heart failure, COPD, cellulitis	6. Develop and implement an intelligent, integrated digital health record
7. Addressing the inequity in health and social outcomes for the people of the Shire of Yarra Ranges	8. Utilising Community Infrastructure – Activate communities (Community Pharmacies)
9. Improving clinical handover through improved pathways and sharing of information between agencies and devising ways for patients to hold their own information	

# Identifying the potential work – key themes

For their identified opportunity, working groups were asked to consider the following questions:

- What would success look like?
- What would need to happen for success to be achieved?
- How could work in this area be advanced?
- Who needs to be involved?
- What information do you need that you don't have now?
- What are the risks?
- The responses to these questions varied across the groups, depending on what the group had identified as their opportunity. There were however a number of key themes across all the groups



# Identifying the potential work – key themes

Success was usually identified from the perspective of the client/patient/consumer, e.g. improved service access, improved outcomes, reduced duplication, reduced waiting

Critical success factors included:

- The importance of collaboration – of agencies working together, and critically that consumers/patients were engaged in the work of the Collaborative
- Funding as a shared resource, irrespective of its source and current holder including the potential need for redistribution
- The critical role for technology to support communication, information sharing, performance measurement

# Identifying the potential work – key themes

- The importance of focus – making sure the Collaborative has a clear and manageable focus (not too broad so that nothing could be effectively delivered)
- The importance of data, having a shared data set and view of the data
- Ensuring processes for evidence based/data informed decision making – truly understanding the current situation before moving towards action
- Building on existing (soft and hard) infrastructure in the system such as existing partnerships, existing systems (Health Pathways) existing providers
- The importance of understanding the whole system, – in particular the role of and partnership with the private system
- Learn from others – partnerships with providers overseas; academic / research collaborations