

Commissioning Framework



phn
EASTERN MELBOURNE

An Australian Government Initiative

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Eastern Melbourne PHN acknowledges the Wurundjeri people and other people of the Kulin Nations on whose unceded lands our work in the community takes place. EMPHN respectfully acknowledges their Ancestors and Elders past, present and emerging.

1. Purpose of this document

Commissioning is core to achieving our vision of better health outcomes, better health experiences and a more integrated health system for the east and north east Melbourne community. This document outlines the framework and principles used by Eastern Melbourne Primary Health Network (EMPHN) when designing and commissioning health services and aims to articulate our shared and transparent approach towards working with our stakeholders and meeting community need.

2. About EMPHN

Our aim is to improve the health of our community by ensuring people receive the right care, in the right place, at the right time.

EMPHN is a Primary Health Network funded by the Australian Government Department of Health to improve health services, care and support for people living in east and northeast Melbourne. EMPHN also receives additional funding from the Victorian State Government.

EMPHN is a locally led, not-for-profit organisation. We aim to improve patient care by assessing the specific needs of the our community and commissioning tailored services to meet those needs, address any gaps in the health care system and support a more integrated approach to care and planning. We invest in initiatives to address health areas identified by the Australian Government as national priorities, including:

- Mental health
- Aboriginal and Torres Strait Islander health
- Population health (or immunisation)
- Workforce (or General practice support)
- Digital health
- Aged care
- Alcohol and other drugs
- Chronic disease.

3. Context for commissioning

The EMPHN Commissioning Framework is aligned to EMPHN’s Strategic Plan for 2020-2025.

This plan outlines the EMPHN vision and sets ambitious targets for transforming how primary health care is delivered within the eastern and north eastern region of Melbourne. It addresses five strategic priorities, within which are transformative strategies to address these priorities (see below). Both the Commissioning Framework and Strategic Plan are designed to address the specific health needs of the community we serve.



4. EMPHN Commissioning Framework

Commissioning is a strategic, collaborative and evidence-based approach to planning and purchasing services. It must be holistic and outcomes focused to ensure solutions and models are designed to meet community needs. It is a cycle that includes needs assessment, community consultation, design, implementation and evaluation. Outcomes of evaluation and assessment are fed back into the system to inform planning.

EMPHN commissioning is underpinned by a commitment to continuous improvement and to our organisational values of integrity, working together and courage. We aim for our commissioning practices to support more integrated, efficient and effective healthcare by:

- Creating genuine partnerships and integrated ways of working to bring agencies together and transform the system of care
- Encouraging self-determination for Aboriginal and Torres Strait Islander Peoples and prioritising the services needed for this
- Strengthening the role of general practice and creating opportunities for shared and coordinated care responses
- Providing opportunities for neighbourhood-based responses to tackle issues of place-based disadvantage.

OUR COMMUNITY

Eastern and north eastern Melbourne is home to almost 1.5 million people and covers the areas from the inner-eastern suburbs of Melbourne to Yarra Valley in the east and semi-rural communities as far north as Kinglake. It is a mixed catchment, with areas of high affluence interspersed with pockets of entrenched socioeconomic disadvantage. Our population is diverse and includes culturally and linguistically diverse (CALD) communities, Aboriginal and Torres Strait Islander communities and a high concentration of older persons.

4.1 Commissioning principles

Commissioning at EMPHN is driven by five key principles.

1. Needs base

Drawn from an analysis of quantifiable data and consumer experience, the needs base is informed by identified gaps in local service provision and recognises that responses should involve co-design with consumers and local service providers.

2. Evidence base

We base our decisions on the best available evidence. We also contribute to the wider evidence base through rigorous evaluation and ongoing collection of data and program analysis.

3. Strengthening local networks

Through trusted and collaborative partnerships, we aim to maintain and build the capabilities of local primary care providers to provide integrated and flexible responses to consumers and carers with complex needs.

4. Probity and value

Rigorous contract design, monitoring and evaluation of commissioned projects, alongside transparent procurement and contract processes ensure the best outcomes for consumers as well as value for money.

5. Cultural diversity

Acknowledges the need to provide inclusive and culturally safe services for CALD and Aboriginal and Torres Strait Islander communities, including the recognition that the experiences of trauma and loss have intergenerational effects and the need to enable self-determination by Aboriginal and Torres Strait Islander communities.

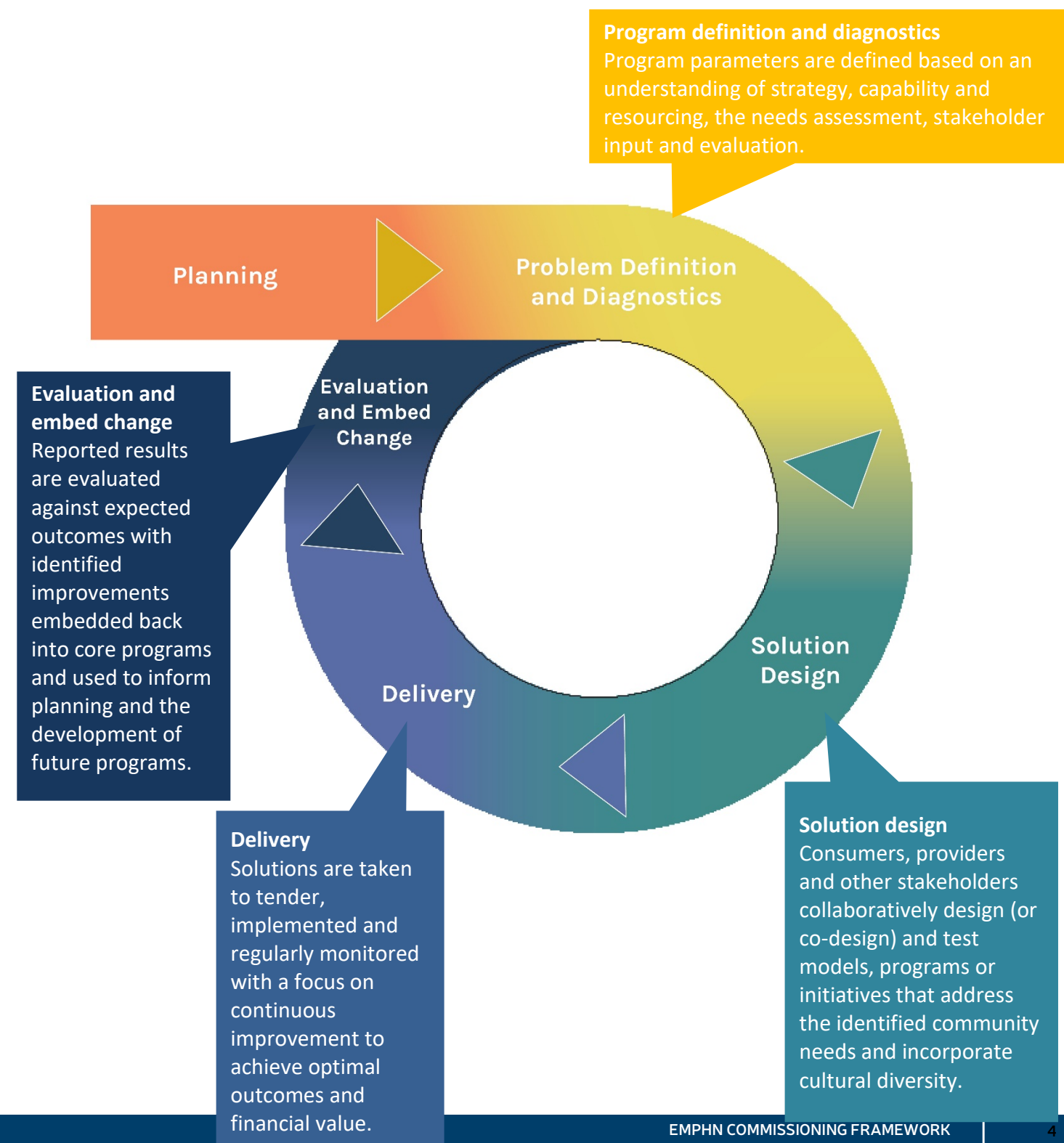
COMMISSIONING AND RECONCILIATION

EMPHN's innovative Reconciliation Action Plan (RAP) 2020–2022 symbolises our move towards a deeper commitment to reconciliation and building relationships with Aboriginal and Torres Strait Islander organisations and communities. As part of this work, EMPHN actively works to ensure it commissions culturally safe and appropriate services that meet local needs and strives to improve engagement with Aboriginal and Torres Strait Islander communities. A set of guiding principles underpin this work including:

- Autonomy – self-determination, supported, empowering and collaborative
- Respect, integrity and dignity
- Strong and effective leadership
- Holistic – health, wellbeing, social, emotional and culturally appropriate services.

4.2 EMPHN Commissioning Cycle

The EMPHN commissioning cycle consists of four key phases, underpinned by quality control and continuous improvement.



before being submitted to the Board for approval.

4.3 Consultation and collaboration

Consultation, collaboration and program-level co-design is integral to a community focused healthcare system, and EMPHN works closely with a coalition of partners across all phases of the commissioning cycle. Our partners provide vital strategic advice and expertise to identify gaps in the health system and emerging community needs, as well as supporting the development and evaluation of new services and interventions.

EMPHN regularly consults stakeholders through community consultations, forums and workshops to gain valuable insight on the direction and design of commissioned activities. The EMPHN Board also receives strategic advice on health service need and design from key local advisory groups and health collaboratives including:

- EMPHN Clinical Council
- EMPHN Community Advisory Committee
- Eastern Melbourne Health Alliance (EMHA)
- Better Health North East Melbourne (BHNEM)
- Aboriginal Community Controlled Organisations (ACCO) and National Aboriginal Community Controlled Health Organisations (NACCHO).

4.4 Decommissioning

Decommissioning refers to the planned process of removing, reducing or replacing a particular service, model or intervention. Decommissioning will occur in line with our commissioning principles and where a commissioned service:

- Does not meet contractual obligations, typically assessed through quality or performance indicators
- No longer meets the needs of the community or population sector targeted, typically identified through our needs assessment
- No longer aligns with our strategic direction, typically identified through annual strategic planning processes.
- Has had funding discontinued

4.5 Governance and accountability

The EMPHN Board has ultimate oversight over the commissioning process and reports to the Australian Government Department of Health on a regular basis through:

- Needs assessment
- Activity work plans
- Six-month reports
- 12-month reports.

The EMPHN Commissioning Framework is monitored and reviewed on an annual basis. Any updates and revisions to the Framework will be reviewed and endorsed by the Strategy and Risk Committee

5. Related policies and procedures

- EMPHN Strategic Plan 2020-2025
- EMPHN Innovate Reconciliation Action Plan 2020-2022
- EMPHN Clinical Governance Framework
- EMPHN Stakeholder Engagement Framework
- EMPHN Risk Statement
- EMPHN Procurement Policy
- EMPHN Commissioning Procedure

6. Definitions

Collaboratives	Two entities set up by EMPHN to encourage collaboration and shared design across health services. Eastern Melbourne Health Alliance and Better Health North East Melbourne include representation from state government, local hospital networks, community health and the PHN (representing primary health).
Commissioning	Commissioning is a strategic, collaborative evidence-based approach to planning and purchasing services that is outcomes focused, with health services centred on the needs of patients. The annual cycle (process) used by EMPHN to identify, design and procure activities. The commissioning cycle at EMPHN has four phases: program definition and diagnostics, solution design, delivery, and evaluation and embed change.
Consumer	In this document, this is defined as the person who receives a health service and the carer or family member of a person receiving a health service.
Provider	Any person or organisation providing services to the EMPHN through a contracting arrangement.

Stakeholder	Any person or organisation with an interest in the services EMPHN commissions or provides. A person or organisation involved in delivering services, partnering with providers or co-designing commissioned health services. Consumers are stakeholders and the recipients of health services.
Transformative strategies	Plans and activities that aim to make drastic and significant changes to a business or system.

For more information

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