

# Eastern Melbourne - After Hours Primary Health Care 2022/23 - 2026/27 Activity Summary View



## AH-HAP - 1 - After Hours Homelessness Access Program (July 2024)



### Activity Metadata

**Applicable Schedule \***

After Hours Primary Health Care

**Activity Prefix \***

AH-HAP

**Activity Number \***

1

**Activity Title \***

After Hours Homelessness Access Program (July 2024)

**Existing, Modified or New Activity \***

Modified



### Activity Priorities and Description

**Program Key Priority Area \***

Other (please provide details)

**Other Program Key Priority Area Description**

After Hours

**Aim of Activity \***

The PHN is funded to support primary health care access for people experiencing homelessness or at risk of homelessness, where it is demonstrated that there are physical, geographic, or other barriers to accessing primary care services, by addressing service gaps, barriers, health impacts and integration issues in the PHN region. The program should promote local service coordination and skills to provide care with a patient's usual primary care provider.

**Description of Activity \***

A consultant will be engaged to undertake a Health Needs Assessment (HNA) which;

- Reviews the literature to understand the evidence to inform best practice around health service integration
- Is informed by engaging with service providers and community members to understand & address;

- A) gaps in primary health care service arrangements accessed by people experiencing homelessness or at risk of homelessness
- B) barriers to accessing primary health care service arrangements by people experiencing homeless or at risk of homelessness
- C) the health impacts of people experiencing homelessness or at risk of homelessness
- Improves primary health care service integration
- Improves patient and community awareness and access to information on primary health care services for people experiencing homelessness or at risk of homelessness; and
- Supports general practices to improve primary health care access for the target group.
- The HNA will inform relevant commissioned services.

**Objectives of the two Health Needs Assessments**

- Undertake a desktop review to understand:
  - o health care access and navigation barriers and opportunities for both cohorts
  - o primary care services and interventions that demonstrate cultural safety – in particular general practice
  - o services that demonstrate improved health outcomes for both cohorts
- Building on existing demographic and geographic data determine:
  - o CALD populations, including elements such as religious affiliations and languages spoken across the EMPHN catchment.
  - o those who are homeless or at risk of homelessness, including primary and secondary homelessness.
- Identify specific health and social prescribing providers across the catchment for each cohort (i.e. service directory and geographic breakdown)
- Determine the barriers and opportunities to health care access and navigation for:
  - o CALD populations across the catchment (e.g. language barriers, health literacy, literacy, navigation, cultural or religious beliefs).
  - o those who are homeless or at risk of homelessness (e.g. identity, eligibility criteria, socioeconomic, psychosocial complexity).
- Generate recommendations:
  - o indicators of impact in these areas (e.g. how to improve access, navigation, and delivery of culturally appropriate services and training for workforce), support for general practices to improve access.
  - o support for general practices on how to improve cultural safety for these groups.

The Needs Assessment Priorities is best reflected by the 2023 discrete AH HNA, page 27.

**Needs Assessment Priorities \***

**Needs Assessment**

EMPHN Health Needs Assessment 2022

**Priorities**

Priority	Page reference
Addressing increasing prevalence of use of Alcohol and other drugs	p82
Addressing Mental Health and Suicide prevention challenges	p84



**Activity Demographics**

**Target Population Cohort**

Homeless or at risk of homelessness

**In Scope AOD Treatment Type \***

**Indigenous Specific \***

No

**Indigenous Specific Comments**

**Coverage**

Whole Region

Yes



**Activity Consultation and Collaboration**

**Consultation**

EMPHN has adopted the International Association for Public Participation (IAP2) framework to inform how consumers, clinicians, service providers, peak bodies and other interested parties can work together to inform PHN activities, including (but not limited to) commissioned services and other support activities. IAP2 methods legitimise differing levels of participation dependent on the goals, timeframes, resources and levels of concern in the decision to be made. At EMPHN consultation is the minimum threshold for engagement. This will occur via relevant committees, such as the Clinical Council and Consumer Advisory Committee, and through other groups and mechanisms as appropriate.

**Collaboration**

As noted, EMPHN has adopted the IAP2 framework to inform stakeholder participation. Wherever possible, EMPHN will attempt to work with consumers, clinicians and other stakeholders throughout more elaborate participation levels, such as involvement, collaboration and empowerment. EMPHN has mapped a range of workflows and processes that support bringing stakeholders into the processes of needs assessments, topic prioritisation, design, and evaluation planning. EMPHN consider that the shared construction and interpretation of complex health problems with stakeholders creates stronger and more effective interventions. Culturally informed consultation will be engaged to ensure that collaboration is culturally safe and trauma informed.



**Activity Milestone Details/Duration**

**Activity Start Date**

30/06/2023

**Activity End Date**

29/06/2024

**Service Delivery Start Date**

**Service Delivery End Date**

**Other Relevant Milestones**



## Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No  
 Continuing Service Provider / Contract Extension: No  
 Direct Engagement: No  
 Open Tender: No  
 Expression Of Interest (EOI): No  
 Other Approach (please provide details): No

Is this activity being co-designed?

Is this activity the result of a previous co-design process?

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

Has this activity previously been co-commissioned or joint-commissioned?

Decommissioning

Decommissioning details?

Co-design or co-commissioning comments



## Activity Planned Expenditure

### Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
Homelessness Access Program	\$0.00	\$133,353.00	\$0.00	\$0.00	\$0.00

Totals

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Homelessness Access Program	\$0.00	\$133,353.00	\$0.00	\$0.00	\$0.00	\$133,353.00
Total	\$0.00	\$133,353.00	\$0.00	\$0.00	\$0.00	\$133,353.00

**Funding From Other Sources - Financial Details**

**Funding From Other Sources - Organisational Details**



**Activity Comments**

**Activity Status**

Submitted

**PHN Comments**

Subject	Description	Commented By	Date Created
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**Comments from the Department**

Comment	Date Created
Latest DOV has not yet been executed and updated to PPERS. Please await PPERS to be updated with new income then adjust the budget for all funding streams accordingly. Please do not re-submit this AWP until PPERS has been updated. Thank you.	08/07/2024

Approved



# AH-MAP - 1 - After Hours Multicultural Access Program (July 2024)



## Activity Metadata

### Applicable Schedule \*

After Hours Primary Health Care

### Activity Prefix \*

AH-MAP

### Activity Number \*

1

### Activity Title \*

After Hours Multicultural Access Program (July 2024)

### Existing, Modified or New Activity \*

Modified



## Activity Priorities and Description

### Program Key Priority Area \*

Other (please provide details)

### Other Program Key Priority Area Description

After Hours

### Aim of Activity \*

The program aims to support primary health care access by people from CALD backgrounds by addressing service gaps, barriers, health impacts, navigation, and integration issues. The program should promote local service coordination and skills to provide care with a patient's usual primary care provider.

### Description of Activity \*

The PHN will engage a consultant to undertake a Health Needs Assessment (HNA) which addresses challenges and barriers faced by people from CALD backgrounds when accessing primary health care. The HNA will consider gaps in service arrangements, how to improve service integration, and service delivery models which avoid duplication which facilitate access to primary health care services. The HNA will include stakeholder and community engagement to promote awareness and access to primary care and will support general practices to link patients to appropriate services. The HNA will inform ways to improve the effectiveness or viability of medical deputising services for people from CALD backgrounds.

A consultant will be engaged to undertake a Health Needs Assessment (HNA) which;

- Reviews the literature to understand the evidence to inform best practice around health service integration
- Is informed by engaging with service providers and community members to understand o barriers to accessing primary health care service arrangements by people from multicultural backgrounds including cultural safety considerations

- the health impacts of people from multicultural backgrounds
- general practice supports to improve primary healthcare access

#### Objectives of the two Health Needs Assessments

- Undertake a desktop review to understand:

o health care access and navigation barriers and opportunities for both cohorts  
 o primary care services and interventions that demonstrate cultural safety – in particular general practice  
 o services that demonstrate improved health outcomes for both cohorts

- Building on existing demographic and geographic data determine:

o CALD populations, including elements such as religious affiliations and languages spoken across the EMPHN catchment.  
 o those who are homeless or at risk of homelessness, including primary and secondary homelessness.

- Identify specific health and social prescribing providers across the catchment for each cohort (i.e. service directory and geographic breakdown)

- Determine the barriers and opportunities to health care access and navigation for:

o CALD populations across the catchment (e.g. language barriers, health literacy, literacy, navigation, cultural or religious beliefs).  
 o those who are homeless or at risk of homelessness (e.g. identity, eligibility criteria, socioeconomic, psychosocial complexity).

- Generate recommendations:

o indicators of impact in these areas (e.g. how to improve access, navigation, and delivery of culturally appropriate services and training for workforce), support for general practices to improve access.

o support for general practices on how to improve cultural safety for these groups.

The Needs Assessment Priorities is best reflected by the 2023 discrete AH HNA, pages 18-21.

### Needs Assessment Priorities \*

#### Needs Assessment

EMPHN Health Needs Assessment 2022

#### Priorities

Priority	Page reference
Addressing increasing prevalence of use of Alcohol and other drugs	p82
Large and growing CALD population	p86
Addressing Mental Health and Suicide prevention challenges	p84



### Activity Demographics

#### Target Population Cohort

Multicultural

#### In Scope AOD Treatment Type \*

#### Indigenous Specific \*

No

#### Indigenous Specific Comments

## Coverage

### Whole Region

Yes



## Activity Consultation and Collaboration

### Consultation

EMPHN has adopted the International Association for Public Participation (IAP2) framework to inform how consumers, clinicians, service providers, peak bodies and other interested parties can work together to inform PHN activities, including (but not limited to) commissioned services and other support activities. IAP2 methods legitimise differing levels of participation dependent on the goals, timeframes, resources and levels of concern in the decision to be made. At EMPHN consultation is the minimum threshold for engagement. This will occur via relevant committees, such as the Clinical Council and Consumer Advisory Committee, and through other groups and mechanisms as appropriate.

### Collaboration

As noted, EMPHN has adopted the IAP2 framework to inform stakeholder participation. Wherever possible, EMPHN will attempt to work with consumers, clinicians and other stakeholders throughout more elaborate participation levels, such as involvement, collaboration and empowerment. EMPHN has mapped a range of workflows and processes that support bringing stakeholders into the processes of needs assessments, topic prioritisation, design, and evaluation planning. EMPHN consider that the shared construction and interpretation of complex health problems with stakeholders creates stronger and more effective interventions. Culturally informed consultation will be engaged to ensure that collaboration is culturally safe and trauma informed.



## Activity Milestone Details/Duration

### Activity Start Date

30/06/2023

### Activity End Date

29/06/2024

### Service Delivery Start Date

### Service Delivery End Date

### Other Relevant Milestones



## Activity Commissioning



Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No  
Continuing Service Provider / Contract Extension: No  
Direct Engagement: No  
Open Tender: No  
Expression Of Interest (EOI): No  
Other Approach (please provide details): No

Is this activity being co-designed?

Is this activity the result of a previous co-design process?

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

Has this activity previously been co-commissioned or joint-commissioned?

Decommissioning

Decommissioning details?

Co-design or co-commissioning comments



### Activity Planned Expenditure

#### Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
Multicultural Access Program	\$0.00	\$135,000.00	\$0.00	\$0.00	\$0.00

Totals

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Multicultural Access Program	\$0.00	\$135,000.00	\$0.00	\$0.00	\$0.00	\$135,000.00
Total	\$0.00	\$135,000.00	\$0.00	\$0.00	\$0.00	\$135,000.00

**Funding From Other Sources - Financial Details**

**Funding From Other Sources - Organisational Details**



**Activity Comments**

**Activity Status**

Submitted

**PHN Comments**

Subject	Description	Commented By	Date Created
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**Comments from the Department**

Comment	Date Created
Latest DOV has not yet been executed and updated to PPERS. Please await PPERS to be updated with new income then adjust the budget for all funding streams accordingly. Please do not re-submit this AWP until PPERS has been updated. Thank you.	08/07/2024



# AH-MAP-Ops - 1 - After Hours Multicultural Access Program Operational (July 2024)



## Activity Metadata

### Applicable Schedule \*

After Hours Primary Health Care

### Activity Prefix \*

AH-MAP-Ops

### Activity Number \*

1

### Activity Title \*

After Hours Multicultural Access Program Operational (July 2024)

### Existing, Modified or New Activity \*

Modified



## Activity Priorities and Description

### Program Key Priority Area \*

Other (please provide details)

### Other Program Key Priority Area Description

After Hours

### Aim of Activity \*

The program aims to support primary health care access by people from CALD backgrounds by addressing service gaps, barriers, health impacts, navigation, and integration issues. The program should promote local service coordination and skills to provide care with a patient's usual primary care provider.

### Description of Activity \*

The PHN will engage a consultant to undertake a Health Needs Assessment (HNA) which addresses challenges and barriers faced by people from CALD backgrounds when accessing primary health care. The HNA will consider gaps in service arrangements, how to improve service integration, and service delivery models which avoid duplication which facilitate access to primary health care services. The HNA will include stakeholder and community engagement to promote awareness and access to primary care and will support general practices to link patients to appropriate services. The HNA will inform ways to improve the effectiveness or viability of medical deputising services for people from CALD backgrounds.

### Needs Assessment Priorities \*

#### Needs Assessment

## Priorities

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### Activity Demographics

#### Target Population Cohort

Multicultural

#### In Scope AOD Treatment Type \*

#### Indigenous Specific \*

No

#### Indigenous Specific Comments

#### Coverage

##### Whole Region

Yes

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### Activity Consultation and Collaboration

#### Consultation

EMPHN has adopted the International Association for Public Participation (IAP2) framework to inform how consumers, clinicians, service providers, peak bodies and other interested parties can work together to inform PHN activities, including (but not limited to) commissioned services and other support activities. IAP2 methods legitimise differing levels of participation dependent on the goals, timeframes, resources and levels of concern in the decision to be made. At EMPHN consultation is the minimum threshold for engagement. This will occur via relevant committees, such as the Clinical Council and Consumer Advisory Committee, and through other groups and mechanisms as appropriate.

#### Collaboration

As noted, EMPHN has adopted the IAP2 framework to inform stakeholder participation. Wherever possible, EMPHN will attempt to work with consumers, clinicians and other stakeholders throughout more elaborate participation levels, such as involvement, collaboration and empowerment. EMPHN has mapped a range of workflows and processes that support bringing stakeholders into the processes of needs assessments, topic prioritisation, design, and evaluation planning. EMPHN consider that the shared construction and interpretation of complex health problems with stakeholders creates stronger and more effective interventions. Culturally informed consultation will be engaged to ensure that collaboration is culturally safe and trauma informed.

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### Activity Milestone Details/Duration

**Activity Start Date**

30/06/2023

**Activity End Date**

29/06/2024

**Service Delivery Start Date**

**Service Delivery End Date**

**Other Relevant Milestones**



**Activity Commissioning**

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No

Continuing Service Provider / Contract Extension: No

Direct Engagement: No

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

Is this activity the result of a previous co-design process?

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

Has this activity previously been co-commissioned or joint-commissioned?

Decommissioning

Decommissioning details?

Co-design or co-commissioning comments



## Activity Planned Expenditure

### Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
Multicultural Access Program - Ops	\$0.00	\$15,000.00	\$0.00	\$0.00	\$0.00

### Totals

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Multicultural Access Program - Ops	\$0.00	\$15,000.00	\$0.00	\$0.00	\$0.00	\$15,000.00
Total	\$0.00	\$15,000.00	\$0.00	\$0.00	\$0.00	\$15,000.00

### Funding From Other Sources - Financial Details

### Funding From Other Sources - Organisational Details



## Activity Comments

### Activity Status

Submitted

### PHN Comments

Subject	Description	Commented By	Date Created
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### Comments from the Department

Comment	Date Created
Latest DOV has not yet been executed and updated to PPERS. Please await PPERS to be updated with new income then adjust the budget for all funding streams accordingly. Please do not re-submit this AWP until PPERS has been updated. Thank you.	08/07/2024



# AH-HAP-Ops - 1 - After Hours Homelessness Access Program Operational (July 2024)



## Activity Metadata

### Applicable Schedule \*

After Hours Primary Health Care

### Activity Prefix \*

AH-HAP-Ops

### Activity Number \*

1

### Activity Title \*

After Hours Homelessness Access Program Operational (July 2024)

### Existing, Modified or New Activity \*

Modified



## Activity Priorities and Description

### Program Key Priority Area \*

Other (please provide details)

### Other Program Key Priority Area Description

After Hours

### Aim of Activity \*

The PHN is funded to support primary health care access for people experiencing homelessness or at risk of homelessness, where it is demonstrated that there are physical, geographic, or other barriers to accessing primary care services, by addressing service gaps, barriers, health impacts and integration issues in the PHN region. The program should promote local service coordination and skills to provide care with a patient's usual primary care provider.

### Description of Activity \*

- A consultant will be engaged to undertake a Health Needs Assessment (HNA) which;
- addresses gaps in primary health care service arrangements accessed by people experiencing homelessness or at risk of homelessness
  - addresses barriers to accessing primary health care service arrangements by people experiencing homeless or at risk of homelessness
  - addresses the health impacts of people experiencing homelessness or at risk of homelessness
  - Improves primary health care service integration
  - Improves patient and community awareness and access to information on primary health care services for people experiencing homelessness or at risk of homelessness; and
  - Supports general practices to improve primary health care access for the target group.
  - The HNA will inform relevant commissioned services.

## Needs Assessment Priorities \*

### Needs Assessment

#### Priorities

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### Activity Demographics

#### Target Population Cohort

Homeless or at risk of homelessness

#### In Scope AOD Treatment Type \*

#### Indigenous Specific \*

No

#### Indigenous Specific Comments

#### Coverage

##### Whole Region

Yes

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### Activity Consultation and Collaboration

#### Consultation

EMPHN has adopted the International Association for Public Participation (IAP2) framework to inform how consumers, clinicians, service providers, peak bodies and other interested parties can work together to inform PHN activities, including (but not limited to) commissioned services and other support activities. IAP2 methods legitimise differing levels of participation dependent on the goals, timeframes, resources and levels of concern in the decision to be made. At EMPHN consultation is the minimum threshold for engagement. This will occur via relevant committees, such as the Clinical Council and Consumer Advisory Committee, and through other groups and mechanisms as appropriate.

#### Collaboration

As noted, EMPHN has adopted the IAP2 framework to inform stakeholder participation. Wherever possible, EMPHN will attempt to work with consumers, clinicians and other stakeholders throughout more elaborate participation levels, such as involvement, collaboration and empowerment. EMPHN has mapped a range of workflows and processes that support bringing stakeholders into the processes of needs assessments, topic prioritisation, design, and evaluation planning. EMPHN consider that the shared construction and interpretation of complex health problems with stakeholders creates stronger and more effective interventions. Culturally informed consultation will be engaged to ensure that collaboration is culturally safe and trauma informed.





## Activity Milestone Details/Duration

### Activity Start Date

30/06/2023

### Activity End Date

29/06/2024

### Service Delivery Start Date

### Service Delivery End Date

### Other Relevant Milestones



## Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No

Continuing Service Provider / Contract Extension: No

Direct Engagement: No

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

Is this activity the result of a previous co-design process?

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

Has this activity previously been co-commissioned or joint-commissioned?

Decommissioning

Decommissioning details?

Co-design or co-commissioning comments



### Activity Planned Expenditure

#### Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
Homelessness Access Program - Ops	\$0.00	\$14,817.00	\$0.00	\$0.00	\$0.00

#### Totals

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Homelessness Access Program - Ops	\$0.00	\$14,817.00	\$0.00	\$0.00	\$0.00	\$14,817.00
Total	\$0.00	\$14,817.00	\$0.00	\$0.00	\$0.00	\$14,817.00

#### Funding From Other Sources - Financial Details

#### Funding From Other Sources - Organisational Details



### Activity Comments

#### Activity Status

Submitted

#### PHN Comments

Subject	Description	Commented By	Date Created
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#### Comments from the Department

Comment	Date Created
Latest DOV has not yet been executed and updated to PPERS.	08/07/2024

Please await PPERS to be updated with new income then adjust the budget for all funding streams accordingly. Please do not re-submit this AWP until PPERS has been updated. Thank you.

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Approved by DOHAC



## AH - 1 - After Hours (July 2024)



### Activity Metadata

**Applicable Schedule \***

After Hours Primary Health Care

**Activity Prefix \***

AH

**Activity Number \***

1

**Activity Title \***

After Hours (July 2024)

**Existing, Modified or New Activity \***

Modified



### Activity Priorities and Description

**Program Key Priority Area \***

Other (please provide details)

**Other Program Key Priority Area Description**

After Hours

**Aim of Activity \***

The aim of this activity is to increase access and improve systems related to after-hours care and support, particularly for vulnerable populations and those with mental health issues.

**Description of Activity \***

This includes activities such as:

- After hours palliative care, such as community based support both in and after-hours to avoid after-hours emergencies.
- After hours client and carer support and education designed to enable carers to support their loved ones in their location of choice for as long as possible.
- A range of differently focused and delivered activities that are designed to support consumers and carers in a range of ways, including fostering support networks, educating and practical support.
- Support for people with mental health issues that seek care after-hours through the provision of local nursing staff adjacent to emergency.

- After hours support (either directly or through emergency diversion), service connection and navigation, brief interventions and follow up for people with 'in scope' mental health concerns.

- Funding an after-hours mental health liaison role to work closely emergency staff to co-design service pathways and protocols to refer and direct patients to the after-hours mental health services.

- Engagement with community based mental health service providers such as stepped care providers to support direct access to right care after-hours pathways.

- Evaluation of services to understand expansion or other opportunities.

The Needs Assessment Priorities most aligns with the discrete After hours Primary Care Health Needs Assessment 2023.

1. Mental health issues and paediatrics are the health categories presenting after hours - P2

2. The Northeastern LGAs of Mitchell, Whittlesea, Banyule, Murrindindi Yarra Ranges are priority areas for improving after hours access and provision - P79

## Needs Assessment Priorities \*

### Needs Assessment

EMPHN Health Needs Assessment 2021

#### Priorities

Priority	Page reference
Addressing needs of Ageing Population	p82
Declining workforce and increased pressures on workforce due to pandemic	p84
Addressing Mental Health and Suicide prevention challenges	p84



### Activity Demographics

#### Target Population Cohort

Palliative care, Mental health

#### In Scope AOD Treatment Type \*

#### Indigenous Specific \*

No

#### Indigenous Specific Comments

#### Coverage

##### Whole Region

No

SA3 Name	SA3 Code
Manningham - East	21102
Nillumbik - Kinglake	20903
Whittlesea - Wallan	20904
Manningham - West	20702
Banyule	20901



## Activity Consultation and Collaboration

### Consultation

EMPHN has adopted the International Association for Public Participation (IAP2) framework to inform how consumers, clinicians, service providers, peak bodies and other interested parties can work together to inform PHN activities, including (but not limited to) commissioned services and other support activities. IAP2 methods legitimise differing levels of participation dependent on the goals, timeframes, resources and levels of concern in the decision to be made. At EMPHN consultation is the minimum threshold for engagement. This will occur via relevant committees, such as the Clinical Council and Consumer Advisory Committee, and through other groups and mechanisms as appropriate.

### Collaboration

As noted, EMPHN has adopted the IAP2 framework to inform stakeholder participation. Wherever possible, EMPHN will attempt to work with consumers, clinicians and other stakeholders throughout more elaborate participation levels, such as involvement, collaboration and empowerment. EMPHN has mapped a range of workflows and processes that support bringing stakeholders into the processes of needs assessments, topic prioritisation, design, and evaluation planning. EMPHN consider that the shared construction and interpretation of complex health problems with stakeholders creates stronger and more effective interventions. Culturally informed consultation will be engaged to ensure that collaboration is culturally safe and trauma informed.



## Activity Milestone Details/Duration

### Activity Start Date

29/06/2022

### Activity End Date

29/09/2025

### Service Delivery Start Date

01/07/2022

### Service Delivery End Date

30/06/2025

### Other Relevant Milestones



## Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

**Not Yet Known:** No  
**Continuing Service Provider / Contract Extension:** Yes  
**Direct Engagement:** No  
**Open Tender:** No  
**Expression Of Interest (EOI):** No  
**Other Approach (please provide details):** No

Is this activity being co-designed?

No

Is this activity the result of a previous co-design process?

Yes

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

No

Has this activity previously been co-commissioned or joint-commissioned?

No

**Decommissioning**

No

**Decommissioning details?**

After Hours Mental Health Nursing and Liaison Service will be transitioned to Mental Health Flx funding in July 2024 noting that this program will now be out of scope of DoHAC After Hours Program

**Co-design or co-commissioning comments**



## Activity Planned Expenditure

### Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
Interest - After Hours	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
After Hours Funding	\$0.00	\$2,137,858.38	\$666,000.00	\$0.00	\$0.00

**Totals**

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Interest - After Hours	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
After Hours Funding	\$0.00	\$2,137,858.38	\$666,000.00	\$0.00	\$0.00	\$2,803,858.38
Total	\$0.00	\$2,137,858.38	\$666,000.00	\$0.00	\$0.00	\$2,803,858.38

**Funding From Other Sources - Financial Details**

**Funding From Other Sources - Organisational Details**



**Activity Comments**

**Activity Status**

Submitted

**PHN Comments**

Subject	Description	Commented By	Date Created
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**Comments from the Department**

Comment	Date Created
Latest DOV has not yet been executed and updated to PPERS. Please await PPERS to be updated with new income then adjust the budget for all funding streams accordingly. Please do not re-submit this AWP until PPERS has been updated. Thank you.	08/07/2024





## AH-Op - 1 - After Hours Operational (July 2024)



### Activity Metadata

**Applicable Schedule \***

After Hours Primary Health Care

**Activity Prefix \***

AH-Op

**Activity Number \***

1

**Activity Title \***

After Hours Operational (July 2024)

**Existing, Modified or New Activity \***

Existing



### Activity Priorities and Description

**Program Key Priority Area \***

**Other Program Key Priority Area Description**

**Aim of Activity \***

**Description of Activity \***

**Needs Assessment Priorities \***

**Needs Assessment**

**Priorities**



## Activity Demographics

Target Population Cohort

In Scope AOD Treatment Type \*

Indigenous Specific \*

Indigenous Specific Comments

Coverage

Whole Region



## Activity Consultation and Collaboration

Consultation

Collaboration



## Activity Milestone Details/Duration

Activity Start Date

Activity End Date

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones



## Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No  
 Continuing Service Provider / Contract Extension: No  
 Direct Engagement: No  
 Open Tender: No  
 Expression Of Interest (EOI): No  
 Other Approach (please provide details): No

Is this activity being co-designed?

Is this activity the result of a previous co-design process?

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

Has this activity previously been co-commissioned or joint-commissioned?

Decommissioning

Decommissioning details?

Co-design or co-commissioning comments



## Activity Planned Expenditure

### Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
After Hours Operational	\$208,387.75	\$178,897.13	\$74,000.00	\$0.00	\$0.00
Interest - After Hours	\$40,727.06	\$31,250.98	\$0.00	\$0.00	\$0.00

**Totals**

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
After Hours Operational	\$208,387.75	\$178,897.13	\$74,000.00	\$0.00	\$0.00	\$461,284.88
Interest - After Hours	\$40,727.06	\$31,250.98	\$0.00	\$0.00	\$0.00	\$71,978.04
Total	\$249,114.81	\$210,148.11	\$74,000.00	\$0.00	\$0.00	\$533,262.92

**Funding From Other Sources - Financial Details****Funding From Other Sources - Organisational Details****Activity Comments****Activity Status**

Submitted

**PHN Comments**

Subject	Description	Commented By	Date Created
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**Comments from the Department**

Comment	Date Created
Latest DOV has not yet been executed and updated to PPERS. Please await PPERS to be updated with new income then adjust the budget for all funding streams accordingly. Please do not re-submit this AWP until PPERS has been updated. Thank you.	08/07/2024