

Eastern Melbourne - PHN Pilots and Targeted Programs 2023/24 - 2027/28 Activity Summary View



PP&TP-GP-Ad - 1 - Strengthening Medicare – General Practice Grants Program (ADMIN) - June 2024



Activity Metadata

Applicable Schedule *

PHN Pilots and Targeted Programs

Activity Prefix *

PP&TP-GP-Ad

Activity Number *

1

Activity Title *

Strengthening Medicare – General Practice Grants Program (ADMIN) - June 2024

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

Aim of Activity *

The aim of this activity is to support general practices to make improvements to their practices to expand patient access and provide better, safe, accessible quality care.

Description of Activity *

This activity includes:

- Establishing, administering and managing the Strengthening Medicare – General Practice Grants Program in relation to general practices (excluding eligible Aboriginal Community Controlled Health Services (ACCHS))

- Provision of grants to enable investments in innovation, training, equipment, and minor capital works in digital health capability and/or infection prevention and/or maintaining RACGP Standards for general practices accreditation.

- Receiving and assessing applications, arranging payment of grant funds, managing enquiries, providing reports to the Department, and contributing to evaluation activities.

Needs Assessment Priorities *

Needs Assessment

EMPHN Health Needs Assessment 2021

Priorities

Priority	Page reference
Pandemic Response	p86
Increase uptake of digital health	p83
Declining workforce and increased pressures on workforce due to pandemic	p84



Activity Demographics

Target Population Cohort

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

28/02/2023

Activity End Date

30/12/2024

Service Delivery Start Date

04/2023

Service Delivery End Date

30/06/2024

Other Relevant Milestones

30 September 2024 - Final Performance Report

30 September 2024 - Final Financial Acquittal Report



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: Yes

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): Yes

Is this activity being co-designed?

No

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

No

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?

Co-design or co-commissioning comments



Activity Planned Expenditure

Planned Expenditure

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28
Interest - PHN Pilots and Targeted Programs	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Strengthening Medicare – General Practice Grants Program - Admin	\$299,571.22	\$0.00	\$0.00	\$0.00	\$0.00

Totals

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Interest - PHN Pilots and Targeted Programs	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Strengthening Medicare – General Practice Grants Program - Admin	\$299,571.22	\$0.00	\$0.00	\$0.00	\$0.00	\$299,571.22
Total	\$299,571.22	\$0.00	\$0.00	\$0.00	\$0.00	\$299,571.22

Funding From Other Sources - Financial Details

Funding From Other Sources - Organisational Details



Summary of activity changes for Department

Activity Status

Ready for Submission

Approved by DOHAC



PP&TP-GP - 1 - Strengthening Medicare – General Practice Grants Program - June 2024



Activity Metadata

Applicable Schedule *

PHN Pilots and Targeted Programs

Activity Prefix *

PP&TP-GP

Activity Number *

1

Activity Title *

Strengthening Medicare – General Practice Grants Program - June 2024

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description**Aim of Activity ***

The aim of this activity is to support general practices to make improvements to their practices to expand patient access and provide better, safe, accessible quality care.

Description of Activity *

This activity includes:

- Establishing, administering and managing the Strengthening Medicare – General Practice Grants Program in relation to general practices (excluding eligible Aboriginal Community Controlled Health Services (ACCHS))
- Provision of grants to enable investments in innovation, training, equipment, and minor capital works in digital health capability and/or infection prevention and/or maintaining RACGP Standards for general practices accreditation.
- Receiving and assessing applications, arranging payment of grant funds, managing enquiries, providing reports to the Department, and contributing to evaluation activities.

Needs Assessment Priorities *

Needs Assessment

EMPHN Health Needs Assessment 2021

Priorities

Priority	Page reference
Pandemic Response	p86
Increase uptake of digital health	p83
Declining workforce and increased pressures on workforce due to pandemic	p84



Activity Demographics

Target Population Cohort

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

28/02/2023

Activity End Date

30/12/2024

Service Delivery Start Date

04/2023

Service Delivery End Date

30/06/2024

Other Relevant Milestones

30 September 2024 - Final Performance Report

30 September 2024 - Final Financial Acquittal Report



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: Yes

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): Yes

Is this activity being co-designed?

No

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

No

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?

Co-design or co-commissioning comments



Activity Planned Expenditure

Planned Expenditure

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28
Interest - PHN Pilots and Targeted Programs	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Strengthening Medicare – General Practice Grants Program	\$3,656,417.01	\$0.00	\$0.00	\$0.00	\$0.00

Totals

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Interest - PHN Pilots and Targeted Programs	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Strengthening Medicare – General Practice Grants Program	\$3,656,417.01	\$0.00	\$0.00	\$0.00	\$0.00	\$3,656,417.01
Total	\$3,656,417.01	\$0.00	\$0.00	\$0.00	\$0.00	\$3,656,417.01

Funding From Other Sources - Financial Details

Funding From Other Sources - Organisational Details



Summary of activity changes for Department

Activity Status

Ready for Submission

Approved by DOHAC



PP&TP-EPP - 1 - Endometriosis and Pelvic Pain Clinics - June 2024



Activity Metadata

Applicable Schedule *

PHN Pilots and Targeted Programs

Activity Prefix *

PP&TP-EPP

Activity Number *

1

Activity Title *

Endometriosis and Pelvic Pain Clinics - June 2024

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

Aim of Activity *

The aim of this activity is to establish an endometriosis and pelvic pain clinic in a primary care setting that will provide targeted care for people who are suffering from endometriosis and pelvic pain.

Description of Activity *

This activity includes:

- Access to multi-disciplinary care with a focus on improving diagnostic delay and to promoting early access to intervention, care and treatment.
- Build the primary care workforce to manage this chronic condition
- Provide improved access to new information and care pathways
- Identify appropriate general practices to form the clinic.
- A range of additional activities including (but not limited to) advanced training qualifications, further study, hiring additional practice staff (e.g. allied health, nurse navigators), enhanced referral pathways with local providers, equipment purchase.

- Provide data for program monitoring and continuous evaluation.
- Support GP clinics in regularly collecting quantitative & qualitative data and outcome measures.

Needs Assessment Priorities *

Needs Assessment

EMPHN Health Needs Assessment 2021

Priorities

Priority	Page reference
Responding to Chronic and Complex Delayed Care	p85



Activity Demographics

Target Population Cohort

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

31/03/2023

Activity End Date

29/06/2026

Service Delivery Start Date

01/04/2023

Service Delivery End Date

30/06/2026

Other Relevant Milestones

30 September 2025 - Performance Report

30 September 2025 - Financial Acquittal Report

15 November 2025 - Other - Your Organisation must confirm that your Needs Assessment is current.

30 April 2026 - Your Organisation must review their multi-year Activity Work Plan and submit any amendments, and an updated Budget.

30 September 2026 - Final Performance Report

30 September 2026 - Your Organisation must submit an Audited Income and Expenditure Statement and Declaration for the Activity Period 1 July 2025 to 30 June 2026.



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: Yes

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?

No

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?

Co-design or co-commissioning comments



Activity Planned Expenditure

Planned Expenditure

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28
Interest - PHN Pilots and Targeted Programs	\$128,822.78	\$0.00	\$0.00	\$0.00	\$0.00
Endometriosis and Pelvic Pain GP Clinics	\$679,999.99	\$360,000.00	\$360,000.00	\$0.00	\$0.00

Totals

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Interest - PHN Pilots and Targeted Programs	\$128,822.78	\$0.00	\$0.00	\$0.00	\$0.00	\$128,822.78
Endometriosis and Pelvic Pain GP Clinics	\$679,999.99	\$360,000.00	\$360,000.00	\$0.00	\$0.00	\$1,399,999.99
Total	\$808,822.77	\$360,000.00	\$360,000.00	\$0.00	\$0.00	\$1,528,822.77

Funding From Other Sources - Financial Details

Funding From Other Sources - Organisational Details



Summary of activity changes for Department

Activity Status

Ready for Submission

Approved by DOHHA



PP&TP-EPP-Ad - 1 - Endometriosis and Pelvic Pain Clinics (ADMIN) - June 2024



Activity Metadata

Applicable Schedule *

PHN Pilots and Targeted Programs

Activity Prefix *

PP&TP-EPP-Ad

Activity Number *

1

Activity Title *

Endometriosis and Pelvic Pain Clinics (ADMIN) - June 2024

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description**Aim of Activity ***

The aim of this activity is to establish an endometriosis and pelvic pain clinic in a primary care setting that will provide targeted care for people who are suffering from endometriosis and pelvic pain.

Description of Activity *

This activity includes:

- Access to multi-disciplinary care with a focus on improving diagnostic delay and to promoting early access to intervention, care and treatment.
- Build the primary care workforce to manage this chronic condition
- Provide improved access to new information and care pathways
- Identify appropriate general practices to form the clinic.
- A range of additional activities including (but not limited to) advanced training qualifications, further study, hiring additional practice staff (e.g. allied health, nurse navigators), enhanced referral pathways with local providers, equipment purchase.

- Provide data for program monitoring and continuous evaluation.
- Support GP clinics in regularly collecting quantitative & qualitative data and outcome measures.

Needs Assessment Priorities *

Needs Assessment

EMPHN Health Needs Assessment 2021

Priorities

Priority	Page reference
Responding to Chronic and Complex Delayed Care	p85



Activity Demographics

Target Population Cohort

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

31/03/2023

Activity End Date

29/06/2026

Service Delivery Start Date

01/04/2023

Service Delivery End Date

30/06/2026

Other Relevant Milestones

30 September 2025 - Performance Report

30 September 2025 - Financial Acquittal Report

15 November 2025 - Other - Your Organisation must confirm that your Needs Assessment is current.

30 April 2026 - Your Organisation must review their multi-year Activity Work Plan and submit any amendments, and an updated Budget.

30 September 2026 - Final Performance Report

30 September 2026 - Your Organisation must submit an Audited Income and Expenditure Statement and Declaration for the Activity Period 1 July 2025 to 30 June 2026.



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: Yes

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?

No

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?

Co-design or co-commissioning comments



Activity Planned Expenditure

Planned Expenditure

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28
Interest - PHN Pilots and Targeted Programs	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Endometriosis and Pelvic Pain GP Clinics - Admin	\$78,196.00	\$26,028.00	\$21,028.00	\$0.00	\$0.00

Totals

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Interest - PHN Pilots and Targeted Programs	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Endometriosis and Pelvic Pain GP Clinics - Admin	\$78,196.00	\$26,028.00	\$21,028.00	\$0.00	\$0.00	\$125,252.00
Total	\$78,196.00	\$26,028.00	\$21,028.00	\$0.00	\$0.00	\$125,252.00

Funding From Other Sources - Financial Details

Funding From Other Sources - Organisational Details



Summary of activity changes for Department

Activity Status

Ready for Submission

Approved by DOHHA C



PP&TP-GCPC - 2 - PHN Pilots and Targeted Programs - Greater Choice for at Home Palliative Care - June 2024



Activity Metadata

Applicable Schedule *

PHN Pilots and Targeted Programs

Activity Prefix *

PP&TP-GCPC

Activity Number *

2

Activity Title *

PHN Pilots and Targeted Programs - Greater Choice for at Home Palliative Care - June 2024

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Aged Care

Other Program Key Priority Area Description**Aim of Activity ***

The aim of this program is to design activities that increase awareness, facilitate and coordinate access to safe, quality palliative and end of life care at home, including people who reside in residential aged care.

Description of Activity *

This includes activities such as:

- Building on investment to date to further embed palliative care initiatives, undertaken as part of the pilot of the GCfAHPC program
- Sharing information, learnings, resources and tools to support other PHNs participating in the program, to plan and implement activities.
- Collaborating with existing initiatives, to ensure education and training delivered incorporates evidence-based material already available and does not duplicate.
- Ensure ongoing integration/ collaboration/ participation with relevant stakeholders (e.g. Royal Commission into Aged Care Quality and Safety, Eastern Metropolitan Region Palliative Care Consortia) in activities focused on enhancing palliative care services for older people.
- Collaborating with state, territory and local government and other local health networks to ensure activities link into mapped palliative care service arrangements for the EMPHN catchment.

- Establishment of a community of practice for interested general practitioners to drive quality improvement in the space.
- Other activities as identified through health needs assessment or stakeholders.
- Recruit up to 2 FTE staff members (or equivalent part-time staff) to continue to support embedding of palliative care initiatives.
- Collect quantitative and qualitative data and report on outcome measurements, including baseline data, and contribute and provide data and information for the national evaluation.

Needs Assessment Priorities *

Needs Assessment

EMPHN Health Needs Assessment 2021

Priorities

Priority	Page reference
Addressing needs of Ageing Population	p82



Activity Demographics

Target Population Cohort

Residents in residential aged care facilities, patients of General Practice, clients of community health organisations, people with lower referral rates to specialist palliative care services (e.g., people with dementia or chronic disease, people with disability). While this program is not Indigenous specific, we will collaborate with Victorian Aboriginal Community Controlled Health Organisation (VACCHO) and Aboriginal Liaison workers with the local Integrated Team Care program, to establish how we may support and/or promote their initiatives and services with primary care, aged care and other health professionals.

Indigenous Specific Comments

While this program is not Indigenous specific, we will collaborate with Victorian Aboriginal Community Controlled Health Organisation (VACCHO) and Aboriginal Liaison workers with the local Integrated Team Care program, to establish how we may support and/or promote their initiatives and services with primary care, aged care and other health professionals.

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

02/02/2022

Activity End Date

30/10/2025

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: Yes

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?

No

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

No

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?

Co-design or co-commissioning comments



Activity Planned Expenditure

Planned Expenditure

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28
Greater Choice for At Home Palliative Care - Interest	\$6,690.25	\$0.00	\$0.00	\$0.00	\$0.00
Greater Choice for At Home Palliative Care	\$492,213.52	\$300,000.00	\$0.00	\$0.00	\$0.00

Totals

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Greater Choice for At Home Palliative Care - Interest	\$6,690.25	\$0.00	\$0.00	\$0.00	\$0.00	\$6,690.25
Greater Choice for	\$492,213.52	\$300,000.00	\$0.00	\$0.00	\$0.00	\$792,213.52

At Home Palliative Care						
Total	\$498,903.77	\$300,000.00	\$0.00	\$0.00	\$0.00	\$798,903.77

Funding From Other Sources - Financial Details

Funding From Other Sources - Organisational Details



Summary of activity changes for Department

Activity Status

Ready for Submission

Subject	Description	Commented By	Date Created
Activity Update	Minor changes to Activity Description.	Anisha Balakrishnan	13/06/2024

Approved by