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Gippsland PHN

Place Based Flexible Funding

Program

PROGRAM GUIDELINES

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1. Purpose of the Operational Guidelines

The purpose of the Operational Guidelines is to provide operational advice, expectations and guidance and should be read with reference to the Service Order for the delivery of the Gippsland PHN Placed Based Flexible Funding Program and the overarching Gippsland PHN Commissioned Services Program Guidelines.

The Guidelines are not intended to be the only source of guidance for clinicians, nor should they take precedence over state or federal policy, which is subject to change. The Guidelines should be followed subject to the clinician's judgement in each individual case.

2. Program summary

The Place Based Flexible Funding (PBFF) Program has a focus on increasing access to a range of primary and allied health services and activities for rural and remote communities particularly smaller and more remote communities targeted to identified health needs of these communities.

The PBFF Program supports Health Services target priority areas and population groups not currently resourced from other Government programs. Services will be provided in geographic locations within Gippsland where there is evidence of high prevalence of chronic conditions, high levels of socio-economic disadvantage and lower access to allied and other health services.

The Program Guidelines set out a range of supportive information and instructions to Health Services for the implementation and administration of the program

3. Aims and objectives

The aim of the PBFF Program is to improve the health and wellbeing of people living in Gippsland in rural and remote locations and is structured to align with Gippsland PHN's strategic objectives. The PBFF objectives are to:

- Provide and maintain access to allied health and primary care services based on the identified health needs of the community;
- Promote coordinated, multi-disciplinary, team-based approaches to the provision of integrated primary health care services;
- Establish and maintain effective community consultation practices for the planning management, flexible delivery and ongoing review of the program;
- Provide and maintain access to relevant health promotion and preventative health programs and activities designed to promote health and wellbeing; and
- Encourage people living in rural and remote locations in Gippsland to adopt or modify behaviours to better manage their health and wellbeing.

4. Program scope

The PBFF Program will give community-based Health Services greater flexibility in the range of primary health and allied health services offered, including activities promoting good health practices and prevention.



Primary health care services encompass active treatment, screening programs, health education on individual health risks, and more broadly, efforts to address health concerns for the entire community.

4.1 Primary and allied health services

Primary and allied health services delivered under the PBFF Program are defined as:

Service	Health Discipline	Additional requirements*
Allied Health	Audiology, chiropractic, dietetics, exercise physiology, occupational therapy, osteopathy, physiotherapy, podiatry, psychology, speech pathology/therapy	
Aboriginal Health	Aboriginal Health Workers, Aboriginal Mental Health Workers	
Nurses in Specialist Role	Community nursing, primary health care and community health, chronic and complex disease management, women's health, sexual health	
Social Work	Social welfare and social support	
Family Health	Child, youth, men's health, family and maternal health services	
Other	Alcohol and other drugs, sexual health, aged care (excluding residential), foot care therapy, oral health, massage therapy and transport	
Community Health Education, Promotion and Prevention	Health promotion and health education activities, including injury prevention, screening, public health activities and disease prevention	Gippsland PHN requires evidence of an integrated approach to delivery of health education, promotion and prevention programs, where possible, in alignment with the local





Service	Health Discipline	Additional requirements*
		government Municipal Public Health and Wellbeing Planning processes.
		Service providers may use reporting mechanisms outlined in their Service Order to reflect on any variation between the PBFF Program, and catchment integrated health promotion priorities.
Clinical/Health Coordination	Direct client role, e.g. assessment for services, case management/coordination activities	
Mental Health*	Mental health nursing, general counselling psychology, social and emotional wellbeing	Establishing a Stepped Care Model has bn identified as a fundamental planning component when planning and commissioning mental health service by Primary Health Networks (PHNs). Gippsland PHN seeks Health Services to scope a continuum of primary mental health care services for consumers within a Stepped Care Model.
		The Stepped Care Model improves access to treatment, ensure a range of services are available to meet the needs of individuals and population groups, and makes the best use of available workforce and technology.
		Mental health treatment services (mild, moderate, severe) are not approved for funding via PBFF. Mental health





Service	Health Discipline	Additional requirements*
		promotion and prevention programs can be delivered by PBFF, only with pre-approval from Gippsland PHN.

5. Workforce

5.1 Workforce competency

Primary and allied health professionals providing services through the Program are recognised health professionals with the qualifications and skills to provide expert clinical care and advice. They must practice in accordance with the relevant professional standards as established by their professional body and/or the regulating and registering authority, Australian Health Practitioner Regulation Authority (AHPRA).

Registered Nurses providing services through the Program must hold a competency in a specialist role such as asthma management, diabetes education, community nursing or mental health. A Registered Nurse with a specialist role is defined as a Registered Nurse who holds appropriate tertiary or vocational qualifications as per State Government and/or professional requirements or is employed in that specialist area.

Allied health assistants with Grade 3 Certificate qualifications, as per the Victorian Supervision and Delegation Framework for Allied Health Assistants and including the minimum training competency for general population and Enrolled Nurses with current APHRA registration are also acceptable clinicians providing services to the Program. Delegation to, and supervision of, allied health assistants, enrolled nurses and any other personnel providing a clinical service must adhere to the guidelines of their respective regulatory bodies.

5.2 Workforce models

When considering workforce models for the Program, Health Services can consider a range of employment models that is best suited to their location and workforce availability:

- Full-time or part-time employment of an allied health (or allied health assistant) or nursing professional by the Health Service;
- Subcontracting services through general practices or groups of general practices;
- Sharing an allied health or nursing position with another organisation;
- Contracting visiting allied health professionals;
- Sub-contracting an allied health or nursing position on a purchaser-provider basis; and
- Brokerage (e.g. General Practitioner refers an eligible patient to an allied health professional, who provides the service and bills the organisation which pays the allied health professional direct).