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WESTERN VICTORIA

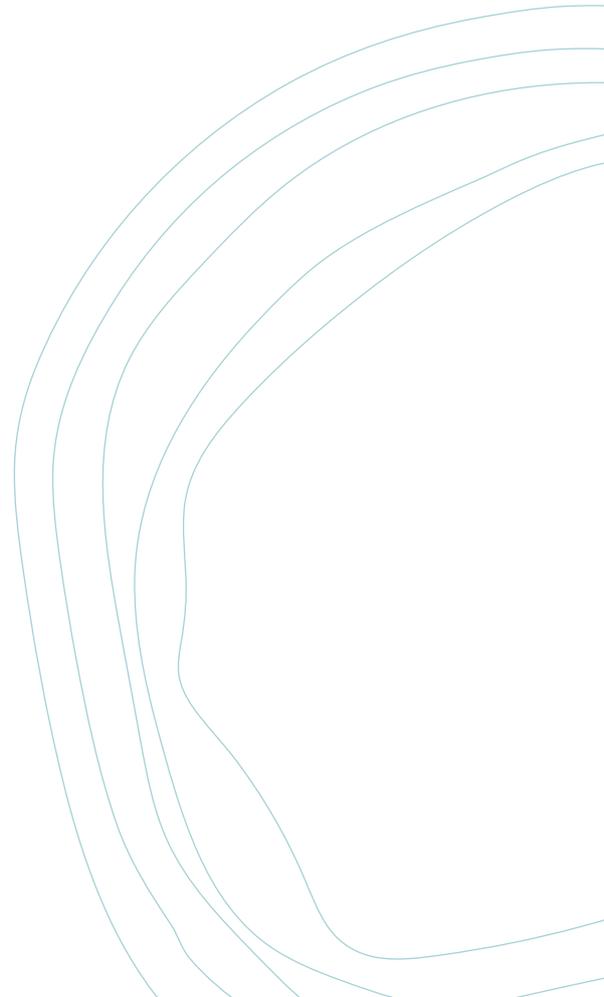
An Australian Government Initiative

Annual Report 2020

Five years of growth

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About this report

The Western Victoria Primary Health Network (WVPHN) Annual Report 2020 provides an overview of our activities and performance from July 1, 2019 to June 30, 2020.

This report provides details on our services, how we have performed and information on the people who have worked with us and for us.

This report was presented at the WVPHN Annual General Meeting on 29 October 2020.

Theme of this report

WVPHN has been operating for five years – established 1 July 2015.

The design of this report depicts five stylised growth lines, similar to growth rings in a tree.

It also represents the organisation as being part of the health care landscape, deeply integrated in the region and continuing to grow.

We welcome your feedback

Feedback is important to us and contributes to improving future reports for our readers. We welcome your comments about this annual report and ask you to forward them to communications@westvicphn.com.au

The Annual Report 2020 is available online and can be downloaded: <https://www.westvicphn.com.au/about-us/publications/annual-reports>



Who We Are

Western Victoria Primary Health Network acknowledges the traditional owners and custodians of the lands and waterways - the Wadda Wurrung, Gulidjan, Gadabanud, Keeray Wurrung, Gunditjmara, Djab Wurrung, Wotjobaluk, Dja Dja Wurrung, Jadawadjarli, Wergaia, Jaadwa and Jupagalk peoples.

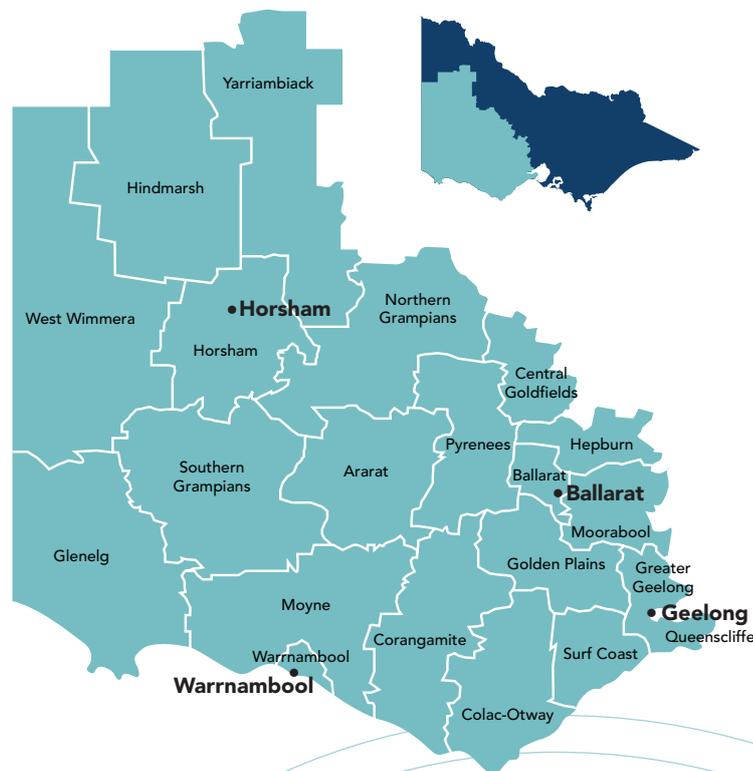
We recognise their diversity, resilience, and the ongoing place that Aboriginal and Torres Strait Islander people hold in our communities. We pay our respects to the Elders, both past and present and commit to working together in the spirit of mutual understanding, respect and reconciliation.

We support self-determination for Aboriginal and Torres Strait Peoples and organisations and we will work with them in partnership on Closing the Gap.

WVPHN is one of 31 Primary Health Networks (PHNs) across Australia and one of six in Victoria. We are a not-for-profit organisation, membership based, and a company limited by guarantee.

The WVPHN region covers an area of 79,234.4 square kilometers (ABS 2011) with a total population of 617,931 persons (ABS 2016) residing across 21 local government areas (LGAs). We have a Clinical Advisory Council and a Community Advisory Council to provide the organisation with insights into key regional health care needs and give advice to the Board on key strategic priorities.

Our Board is skills-based and made up of four elected and five appointed Directors. As of 30 June 2020 the organisation comprised 89 staff (75 EFT) working across four regional offices in Horsham, Ballarat, Geelong and Warrnambool.



Our key functions

We work closely with GPs and other health care providers and services to build capacity to deliver high quality patient-centred care and improve health outcomes.

We use our knowledge and understanding of local health care needs to:

1. Support General Practice
2. Commission or purchase locally-needed services
3. Integrate local services and systems

Our stakeholders include: the people of our communities; the three tiers of government; community organisations such as community health, aged care and disability services; general practice; Aboriginal health services; allied health providers including pharmacies; aged care providers; universities; research alliances; peak bodies; rural workforce agencies and the many private and public rural and regional hospitals across the region.

We share knowledge and work collectively to meet national, local and organisational indicators, measured by the Primary Health Network performance framework.

The key objectives set for Primary Health Networks by the Commonwealth Government are:

- To increase the efficiency and effectiveness of health services for patients, particularly those at risk of poor health outcomes
- To improve coordination of care to ensure patients receive the right care, in the right place, at the right time.

All Primary Health Networks have seven key national health priority targets. These are:

1. Mental health
2. Aboriginal and Torres Strait Islander health
3. Population health
4. Health workforce
5. Digital health
6. Aged care
7. Alcohol and Other Drug Treatment.

Organisation structure

Western Victoria Primary Health Network Limited (the Company) is a company limited by guarantee. The Corporations Act 2001 sets out our key legal obligations as a company. A variety of other legislation and regulations bind the Company in relation to workplace relations, occupational health and safety, information management and financial governance.

WVPHN is a member of the Victorian Hospitals Industrial Association (VHIA) which provides ongoing advice about workplace relations and has current accreditation with the Quality Improvement Council's Health and Community Standards which incorporates quality standards relating to governance and management. The Company is governed by a Board of Directors operating under a Constitution (June 2015), which can only be changed through agreement of Members at a general meeting.

Registered Name:

Western Victoria Primary Health Network Limited

Registered Address: 131 Myers Street Geelong 3220

ABN: 87 061 300 918

ACN: 061 300 918

Charitable Status

WVPHN is registered as a charity with the Australian Charities and Not-for-Profit Commission.

Locations

WVPHN offices are located in Geelong, Horsham, Ballarat and Warrnambool:

- 131 Myers Street, Geelong
- 101 Drummond Street North, Ballarat
- 81 Hamilton Street, Horsham
- Bayside City Plaza, 24-36 Fairy Street, Warrnambool

Membership

WVPHN membership is available to individuals who are GPs, Practice Nurses, other primary health care practitioners working in private practice, and representatives of local health services. For further information go to: westvicphn.com.au/about-us/membership

Western Victoria Primary Health Network commissioned this work by Aboriginal Artist Nathan Patterson.

The painting depicts natural and spiritual elements of the land. It features Bunjil an indigenous ancestral being, depicted as a wedge-tailed eagle. It is believed that, in the Dreamtime, Bunjil took shelter in a cave located in the part of Gariwerd (Grampians National Park) that is now known as the Black Range Scenic Reserve.

Report from the Chair



On behalf of the Board of WVPHN I present this fifth annual report to our funding bodies, the primary health care providers of western Victoria, our members, staff and other interested stakeholders.

Summary of financial report

The financial result for 2019-20 was a surplus of \$118,000, due to the completion of a number of state-based programs. This result was achieved despite a number of the additional challenges in the last quarter of the year with COVID-19 and its impact on the organisation.

The 2019-20 financial year was the second year of our three-year funding agreement with the Commonwealth Government. The Department of Health has re-contracted us for a further two years till 30 June 2023. Total revenue for the financial year was \$36 million; 96.5 per cent of which was from government grants, with the vast majority being from the Commonwealth Government.

Of the total Government funding of \$34.8 million, direct commissioned and programed services to the communities amounted to \$24.2 million or 69.5 per cent of total grant income. Employee expenses for 2019-20 increased by \$534,000 or 7.8 per cent in order to meet increased program activity.

WVPHN continued to demonstrate a stable and solid financial position on the balance sheet, with cash reserves of \$5.6 million and a current working capital ratio of 1.18 (current assets/ current liabilities) for the financial year (2018-19 was 1.29), with total assets of \$31 million.

A most unusual year

2020 has been a year like no other. This has not been a year of 'business as usual'. It has, in fact, been a year where much of the usual work was delayed while our communities and those across the world isolated against an unseen enemy.

Staff across WVPHN offices have, since March this year, essentially worked from home, with the only staff coming into office locations being those responsible for the distribution of personal protective equipment (PPE) to health care providers.

This new way of working has its difficulties but thanks to technology, staff were still in touch communicating and continuing their tasks. Over these months the Board has been kept up to date on how these new arrangements were working and how staff morale was being addressed.

On behalf of the Board, I thank all staff and management for their continued focus and hard work during the year.

Our new Strategic Directions

Over the past six months, the Board has collaborated with senior staff to develop a new three-year Strategic Directions document. This was undertaken by multiple zoom meeting sessions rather than the usual extended workshop process. Valuable consultation on key aspects of the document has been undertaken with the Clinical Advisory Council members and Community Advisory Council members who have provided important advice and feedback. I am delighted to launch the Strategic Directions 2020-2023 at our AGM on 29 October 2020.

Farewell to Dr Leanne Beagley

Earlier this year our highly-regarded CEO Dr Leanne Beagley resigned her position with us to take on a national role as CEO of Mental Health Australia. Leanne left us with a record of significant achievement over the past three year. Her belief in the important purpose of the work of the PHN was unwavering and on behalf of the Board we thank Leanne for her professionalism and hard work.

Welcome to Rowena Clift

The Board was delighted to appoint Rowena Clift as our new CEO, taking up the position in June.

Rowena previously worked in a variety of executive roles in the health sector, including Acting CEO at Ballan and District Health Care, as the Director of Service and System Integration at WVPHN, and Executive leadership roles at Ballarat Health Services and the Royal Children's Hospital.

The Board also extends thanks to Acting CEO Tony Ficca for his leadership during the interim period.

Thank you

On behalf of the Board, I would like to sincerely thank the Executive, Senior Managers, Clinical Leads, Clinical and Community Advisory Council Members and all WVPHN staff on their commitment to our purpose and for their hard work in meeting the multiple unexpected challenges of this extraordinary year..

Lynne McLennan
Chair

Report from the CEO

I am delighted to present my report for WVPHN's Annual Report 2020: my first as CEO.

I started in this role in early June, during the coronavirus pandemic, to a workforce who were primarily working from home. Fortunately, I am very familiar with the organisation and many of the staff in my role as executive director for several years prior to my secondment as Acting CEO for Ballan Health Services. Needless to say, I am delighted to be back.

A challenging year

From the severe bushfires over summer that swept across areas of Victoria and New South Wales, to the impact of COVID-19, PHNs have worked together assisting emergency responses and supporting health care across our communities.

But it was also a year where PHNs across the country made remarkable and important contributions.

Early into the pandemic the Commonwealth Government asked PHNs to work toward the opening of respiratory clinics across the country. The WVPHN team quickly worked with local health services to open five respiratory clinics in western Victoria and provide them ongoing assistance.

We extend our thanks to UFS Medical, Kardinia Health, Lyndoch, Epic Health and Lister House for being so responsive in setting up and commencing operations for the betterment of our community's health and safety.

We also established online Project ECHO sessions with GPs and other health care providers on responding to COVID-19 issues; we arranged for Communities of Practice in each of our sub regions for health care providers to share knowledge and information; and our HealthPathways team became national leaders in their field by creating and publishing the first clinical pages for the treatment of coronavirus.

The management of information continued with health alerts and COVID-19 updates distributed to health care providers as well as staff and other stakeholders to ensure the right information was being distributed to our community.

A critical task for us was the distribution of personal protective equipment (PPE). Up to 30 June 2020, WVPHN had distributed 250,420 surgical masks, 3,678 P2 masks and 1,350 gowns. For more information about our COVID-19 response see page 14.

And through it all we were cognizant of looking after the health and wellbeing of our staff while they worked from home. I would like to personally thank staff for their diligence, commitment and long hours to meet the COVID-19 challenge thus far.

Mental health planning

During this year, a Joint Regional Mental Health and Suicide Prevention Plan was developed that outlines the regional approach to mental health and suicide prevention planning across the care spectrum in western Victoria.

The Commonwealth Government tasked PHNs and local health services with the shared responsibility to develop joint regional plans in response to the Fifth National Mental Health and Suicide Prevention Plan. WVPHN, Barwon Health, South West Healthcare and Ballarat Health Services made a joint commitment to planning in western Victoria.

The plan sets the foundation to create a better service delivery system that is person-centred, easier to navigate and provides an increasingly holistic service approach to meet the mental health needs of the community.

I look forward to the Comprehensive Service Development Plan, to be published by mid-2022.

Our 'Reflect' RAP

This year WVPHN took step one to the develop our Reconciliation Action Plan (RAP) – A Reflect RAP.



Committing to a Reflect RAP allows us to spend time scoping and developing relationships with Aboriginal and Torres Strait Islander stakeholders, deciding on our vision for reconciliation and exploring our sphere of influence, before committing to specific actions or initiatives. This process will help to produce future RAPs that are meaningful, mutually beneficial and sustainable.

Continuing to connect

Through our ongoing planning and co-design work we will continue to have conversations with primary health care providers and stakeholders on our key activities and the health care requirements of our community.

Our new Strategic Directions will provide guidance for the organisation, but our continued engagement with the health care sector is pivotal in understanding current and changing needs of our communities.

Thank you

Finally, I thank the Board, Senior Leadership Team, staff and former CEO Dr Leanne Beagley for their support and encouragement in my new role. I look forward to building on the good work already done as well as pushing the boundaries further for excellence in primary health care.

Rowena Clift
CEO



Financial Summary

Western Victoria Primary Health Network Limited

ABN 87 061 300 918

STATEMENT OF COMPREHENSIVE INCOME

For the year ended 30 June 2020

	2020 \$	2019 \$
Revenue and other income	36,055,266	31,743,049
Employee benefits expense	(7,372,291)	(6,838,193)
Depreciation and amortisation expense	(1,226,204)	(220,061)
Other expenses	(27,338,842)	(24,684,457)
Surplus for the year	117,929	338
Total comprehensive income for the year	117,929	338



STATEMENT OF FINANCIAL POSITION

as at 30 June 2020

	2020 \$	2019 \$
Current assets		
Cash and cash equivalents	27,461,130	22,377,948
Trade and other receivables	409,877	186,289
Accrued income	341,235	102,881
Prepayments	250,956	142,848
Total current assets	28,463,198	22,809,966
Non-current assets		
Property, plant and equipment	228,745	319,784
Intangible assets	336,462	267,905
Right of use asset	1,935,425	-
Security deposit	100,000	100,000
Total non-current assets	2,600,632	687,689
Total assets	31,063,830	23,497,655
Current liabilities		
Trade and other payables	6,334,351	5,560,481
Deferred grants	16,263,731	11,768,048
Provisions	651,940	468,730
Lease liabilities	831,605	-
Total current liabilities	24,081,627	17,797,259
Non-current liabilities		
Provisions	174,942	132,507
Lease liabilities	1,153,912	-
Total non-current liabilities	1,328,854	132,507
Total liabilities	25,410,481	17,929,766
Net assets	5,653,349	5,567,889
Equity		
Retained earnings	5,653,349	5,567,889
Total equity	5,653,349	5,567,889

Strategic Plan 2017-2020

This is the final year of the **WVPHN Strategic Plan 2017-2020, which is built around five pillars:**

1. **Building effective relationships**
2. **Strong vibrant primary health care system focused on wellness and health outcomes**
3. **Accessible and locally responsive services**
4. **Sustainable, efficient and effective services**
5. **High performing PHN governance, systems and staff**

The following articles illustrate some of the work that has been done as part of our strategic direction. Most of this work was completed in the first six months of the year, before COVID-19.

Delivering on-the-ground support

WVPHN officially launched the Ballarat Suicide Prevention Place Based Trial and the Great South Coast Suicide Prevention Place Based Trial this year, initiatives that are aimed at delivering activities to reduce suicide rates in these locations.

WVPHN is coordinating the trials in partnership with the Commonwealth Government, the Victorian Department of Health and Human Services and a range of health care service providers. Leading the development of the trial activities have been local leadership groups made up of health sector organisations and community leaders. Sean Duffy, Ballarat Community Health CEO, and Cr Anita Rank, Mayor of Glenelg Shire Council, are the Chairs of the Ballarat and Great South Coast leadership groups, respectively.

Activities announced at both launches target specific demographics that were identified as high-risk of suicide. For example, Outside the Locker Room is offering mental health support to 30 organisations across Ballarat including sporting clubs and school groups.

While in Great South Coast, the National Centre for Farmer Health will collaborate with the community – including the members of the farming community – to develop a model for delivering peer-supported evidence based psychological therapy to farmers experiencing depression or distress.



As part of the two trials WVPHN developed a brand and logos for the activities. This branding and assets will be used by service providers.

BALLARAT Suicide Prevention Place Based Trial



GREAT SOUTH COAST Suicide Prevention Place Based Trial

Brand description

When you're feeling low, a smile from someone can go a long way in lifting your spirits and provide a sense of connection, comfort and support.

This up-turned umbrella creates a "smile" but it also evokes the idea that we are here to catch the rain or tears. It's buoyant, boat-like shape is symbolic of the support for individuals through their difficult times.

This brightly-coloured Umbrella Smile reflects an optimistic outlook and a sunny disposition, it greets you with a "smile".

Digital Health service uptake

WVPHN has long advocated for telehealth services to be extensively integrated in daily practice to provide options for people living in rural areas and where travelling to visit the GP or any primary health care provider is a barrier or deterrent to receiving treatment.

Nine urgent health care centres in western Victoria participated in the After Hours Telehealth Pilot to improve access to health services, with a focus on rural and remote areas. Each centre used My Emergency Dr which provides direct access to specialist advice.

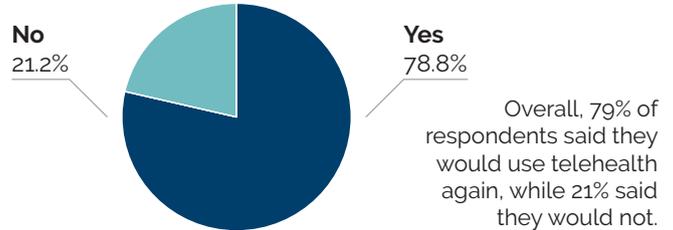
The pilots also aimed to complement the important role that GPs play in the provision of after hours care in the community and responded to some of the significant workforce demands and challenges in rural areas.

The pilot involved the following health services: Maryborough District Health Service; Rural Northwest Health; Stawell Regional Hospital; Hepburn Health Service; Great Ocean Road Health – Lorne and Apollo Bay; Terang and Mortlake Health Service; Ballan District Health and Care; East Grampians Health Service.

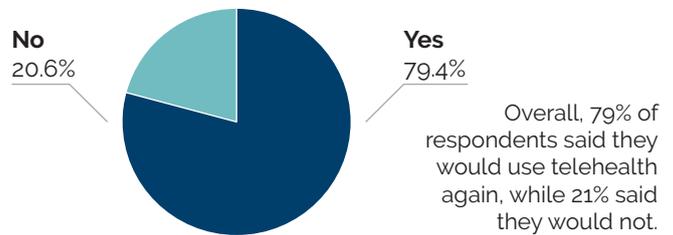
Western Victoria PHN is now working in partnership with Deakin University to undertake an evaluation of the After Hours Telehealth Pilot to determine whether telehealth is a financially viable solution to manage after hours service priority issues and whether the model is sustainable.

A survey of the telehealth pilot project was conducted with participating service providers. The following information are some of the results of this survey:

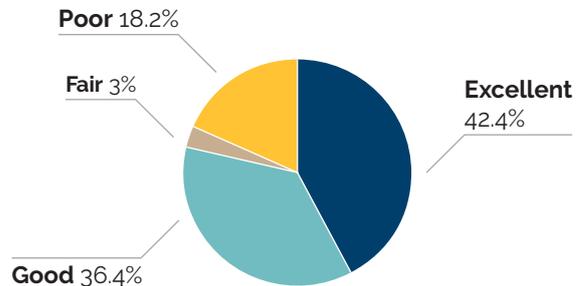
Would you use Telehealth again?



Would you recommend Telehealth to another person?



Your overall treatment experience at Telehealth?



Taking the lead on real-time prescription monitoring

With the SafeScript program becoming mandatory from 1 April 2020, Western Victoria PHN (WVPHN) continued its lead role in ensuring Victoria’s GPs and community pharmacists were properly prepared.

As part of our contract with the Department of Health and Human Services, WVPHN successfully established a model for online SafeScript training which was subsequently used by all PHNs in Victoria. A series of webinars were hosted in March and April 2020 to ensure both prescribers and dispensers of high-risk prescription medicines were well-versed in the new requirements.

Western Victoria piloted the SafeScript real-time prescription monitoring program from October 2018 as part of a strategy to reduce the death rate from prescription medicine overdoses. In 2017, 414 people died in Victoria due to overdosing on medicines they had been prescribed



– a figure much higher than the road toll for the same year. After deeming the western Victoria trial a success, the Victorian Government announced in April 2019 it would be rolled out statewide.

The monitoring of Schedule 8 medicines is now a permanent fixture in Victoria’s primary health care sector and one in which WVPHN has been proud to have helped facilitate.

Allied Health forum hits the right note

An impressive line-up of speakers joined with 40 allied health clinicians from throughout western Victoria for our inaugural Allied Health Forum.

Held in Creswick on 26 October 2019, the conference attracted a diverse range of clinicians representing the fields of occupational therapy, physiotherapy, osteopathy, exercise physiology, myotherapy, psychology and more.

Speakers included Victor McConvey from Parkinson's Victoria, occupational therapist Michelle Bihary, David Mitchell and Dr Greg Harris from Ballarat Orthopaedics and Sports Medicine, Anna McIntyre from NPS MedicineWise along with representatives from Pain Revolution who discussed the Local Pain Educator Program.



Allied Health Forum participants - Tamara Sproull, Brett Boyle and Katrina Martin.

Project ECHO Persistent Pain launched

Project ECHO Persistent Pain was launched this year by WVPHN in partnership with WorkSafe Victoria, Barwon Health and the Transport Accident Commission (TAC) to upskill primary health care clinicians to improve care for patients with persistent pain.



Project ECHO is an online program connecting primary health care providers with specialists and professional experts via telehealth sessions.

For each session, WVPHN facilitated an expert panel of pain specialists from Barwon Health, TAC and WorkSafe. Project ECHO encourages participants to share knowledge, discuss cases and develop new skills through an 'all teach, all learn' ethos.

The number of learning hours provided through this program this year was 290 (that is, the total number of attendances at a one-hour session across series one) and the average session attendance was 29 clinicians.

Each Project ECHO Persistent Pain session includes a brief lecture covering pain-related topics and is broadcast to registered participants throughout western Victoria. The sessions are designed to:

- Build a collaborative, multi-disciplinary community of practice among primary health care clinicians who work with people living with persistent pain in regional and rural communities
- Increase capacity among primary health care clinicians to manage low complexity pain conditions using evidence-based pain treatments
- Support people living with persistent pain in regional and rural communities to manage their pain and live their best life.

Next level learning

This year WVPHN established a Workforce Development Team to start re-evaluating and refreshing how we ensure our region's primary health practices and their staff are equipped with the skills and knowledge to deliver best practice care.

The team's focus is on:

- education and training in health care matters of relevance to primary health care
- strengthening relationships between primary care health care practitioners and the broader health system to improve integration of health care for patients and population health
- supporting general practitioners and other professionals in practices, including access to supervision, support and mentoring from colleagues and specialists
- through planning, advocacy and partnership with health and workforce agencies, advocating for filling gaps in the workforce which impact on the capacity of the primary care health system to deliver better outcomes for patients and the community.

Work is underway on a revised education program which draws on priorities identified in the latest needs assessment as well as input from our stakeholders including general practitioners, practice nurses, practice managers, allied health professionals and other health practitioners.

Online communications keeping the community 'In the Know'

Maintaining an informative and trustworthy flow of communications with our community has become more important than ever during 2019-20.

The launch of the new WVPHN website in October 2019 was a major milestone. The website is now mobile-friendly and easier to navigate. It has become the flagship for our communications, offering extensive and up-to-date information across the primary health priority areas. It has also become the go-to place to register for events and to access resources.

The website's true value came to the fore during COVID-19 as a key source of information and updates. The COVID-19 Health Alert page attracted a high number of page views.

It is the same story for social media which has had pivotal role in delivering advice, updates and alerts on COVID-19 and, prior to that, smoke-related health issues rising from the summer bushfires.

Website Statistics

Between 30 Oct 2019 to 30 June 2020 our website recorded:

- 130,783 page views
- 107,406 unique page views
- Top 5 pages:
 - Home page
 - COVID-19 Health Alert
 - Health Professionals landing page
 - WVPHN Careers
 - Psychological Therapy Services
- Devices:
 - Desktop: 55.7%
 - Mobile: 39.3%
 - Tablet: 5%

Social Media Statistics

As of 24 September 2020:

-  1,960 followers
-  1,660 followers
-  1,123 followers

Caption here



COVID-19 Changing the way we work

Supporting the opening of GP-led respiratory clinics

WVPHN supported the opening of GP-led respiratory clinics in Ballarat, Geelong, Bellarine, Horsham and Warrnambool as part of the Australian Government's \$2.4 billion health package in response to the COVID-19 outbreak.

The GP-led Respiratory Clinics were set up in these regional centres to test suspected COVID-19 cases in each of our four sub-regions so that western Victoria had central testing points as the pandemic reached across our region.

While acute hospitals have a role in managing very unwell patients, the primary care sector proved it could take the lead in testing and monitoring mild to moderate cases that do not require inpatient care.

Project ECHO COVID-19: Connecting local health practitioners with experts to combat the pandemic

WVPHN initiated the Project ECHO COVID-19 sessions to help connect local health practitioners with relevant experts and improve the flow of information and knowledge to support wider efforts to better understand and combat the current pandemic.

WVPHN brought together an expert panel for each teleECHO session. Each week, the panel comprises clinicians from across western Victoria who were experts in the chosen topic of discussion. Topics continued to reflect the changing issues and trends of the week. Facilitated by Geelong GP Dr Bianca Forrester, the sessions attracted an average attendance of 65 participants at each session and were designed to:

- Raise awareness of regional planning relating to COVID-19 testing, assessment and treatment services
- Help primary care practitioners better understand referral pathways both now and into the future as new services emerge in response to regional planning at local, state and national levels.

Online Communities of Practices to better connect our primary health care professionals

In response to the COVID-19 pandemic situation and the identified needs of practitioners in our local medical community, WVPHN set up an online community of practice (CoP) in each of our sub-regions. A total of 130 GPs across the region signed up to local COVID-19 CoPs.

The purpose of the CoPs was to enable clinicians to network and to share information about region-specific issues, responses, strategies and supports with respect to the COVID-19 pandemic. The CoPs were hosted on an online platform and were moderated by GPs.

Western Victoria HealthPathways: the Australian first COVID-19 clinical pathway

WVPHN HealthPathways continued to be the central source of clinical and referral information for health practitioners in western Victoria and our team was the first in Australia to develop the COVID-19 clinical pathway.

The pathway was rapidly adopted and localised across Australia, New Zealand and the United Kingdom.

WVPHN has continued to lead the way with the pathway suite now comprising 16 COVID-19 pathways, 12 of which are state-wide.

The WVPHN HealthPathways portal includes over 700 pages with information specific to our region and developed in consultation with local clinicians and health services.

Telehealth demand peaks

WVPHN played an important role in encouraging a significant uptake of new telehealth service accounts for health providers across western Victoria. This was particularly important for the social distancing requirements of COVID-19.

A total of 108 video call accounts were created during the year, including 78 at general practices, 12 in specialist services and four at Aboriginal Community Controlled Health Organisations. Other health services that have taken up telehealth options are allied health services, community health services and registered aged care facilities.

The increase was evident in telehealth MBS claims. Between May 2020 and August there was a 27 per cent increase in the MBS telehealth claims.

Survey general practice

In May, a general practice survey was rolled out to understand how WVPHN could better support practices to respond to the COVID-19 pandemic. A total of 470 GPs, practice nurses and other primary care professionals completed the survey.

Questions covered advocating for ongoing Telehealth, concerns about financial viability, and concerns about staff wellbeing in the recovery phase. Feedback from respondents included:

- 100 per cent wanted WVPHN to advocate for ongoing telehealth MBS items
- 39 per cent identified the greatest impact of COVID-19 to be on staff wellbeing (serious or severe) and 60 per cent were most concerned about staff wellbeing in the recovery phase
- 53 per cent were concerned about ongoing financial viability post-COVID.
- 38 per cent wanted support from WVPHN related to business continuity.
- 52 per cent wanted WVPHN to provide ongoing support for community campaigning on local health issues.

Other initiatives

- A GP Notification and Support program for COVID-19 positive cases in residential aged care facilities (RACF) was developed including identifying and supporting GPs who provide services to RACFs that experienced an outbreak.
- WVPHN worked with the Department of Health and Human Services to develop a regionalised COVID-19 Positive Care Management Pathway.
- WVPHN's created the COVID-19 Tracker to inform decisions regarding service need and access, population health and general monitoring of COVID-19 across the region.

Supporting our staff

As staff were required to work from home, WVPHN set in place a number of processes to support them while also planning for the organisation post COVID-19.

Initiatives included:

- Weekly COVID-19 online huddles
- Daily and then weekly communication updates and activities encouraging engagement.
- A buddy system for all staff.

Return to office planning was rolled out in preparation for staff returning to office-based work. The planning covered:

- WVPHN stages of 'work from office' recovery
- Facilities requirements (including office signage, sanitising supplies, compliance with physical distancing requirements for staff)
- Development of return to office procedures and protocols
- Scenario planning
- Communications planning.



Our Board

WVPHN is governed by a nine-member Board with a mix of five appointed and four elected Directors. The Board operates within the Board Charter, which applies to Directors individually and/or to the Board collectively.



Ms Lynne McLennan
Chair

Lynne is an experienced Chair and has worked for more than 20 years in primary care roles in rural and regional areas, across all levels of government. Since 2001, Lynne has been the CEO of UFS Dispensaries Ltd, is currently the Deputy Chair of the Committee for Ballarat and has more than six years as President of Ballarat Health Services.



Ms Karen Foster
Director

Karen is a communications professional who brings to the board many years' experience in journalism, public relations and marketing. A Port Fairy resident, Karen operates a design and communications agency from Warrnambool.



Mr Tyrone McCuskey
Director

Currently the CEO of McCallum Disability Services, Tyrone is a registered CPA and graduate of the Australian Institute of Company Directors with over two decades of senior management and director experience.



Mr Jim Elvey
Deputy Chair

Retired and living in Meredith, Jim had a high level career in local government, conducted a consulting practice over several years, performed as CEO to a national board and has held the positions of Director and Deputy President of Ballarat Health Services.



Professor Susan Brumby
Director

Susan is the founding Director of the National Centre for Farmer Health and has many years practical experience as a rural nurse, midwife and primary health care manager.



Dr Jon Barrell
Director

Jon has 33 years' experience of rural general practice in Daylesford and Trentham and is Director of Hepburn Primary Health Care Pty Ltd (Springs Medical). He is a strong advocate for effective, efficient and sustainable primary care and continues to work to enhance the training of future generations of primary care clinicians.



Mr Mark Harris - *Director*

Mark brings to the organisation the perspective of an experienced allied health professional, currently providing clinical services to the Geelong community. He has worked in health management at both government and local levels.



Dr Jane Opie
Director

Jane has worked as a general practitioner since the early 1990s including roles as a practice owner, GP subcontractor and clinical director overseeing clinical governance.



Dr Amir Rahimi
Director

Amir is an experienced general practitioner and medical administrator with almost 25 years post graduate working experience overseas and in Australia. He returned to Geelong to concentrate on aged care general practice after a few years experiencing diverse settings from large Melbourne hospitals to small rural settings in western Victoria.

Our Executive Team



Rowena Clift
CEO

Rowena commenced as Chief Executive Officer

in June 2020 and was previously Director of Service and System Integration at Western Victoria PHN. Rowena has over 20 years of experience in the health care industry and has qualifications in Nursing and Health Systems Management.



Samantha Sharp
Director Commissioning and Performance

Samantha commenced

with the organisation in February 2018 after spending the previous three and a half years at Moreland City Council as the Manager of Aged and Community Support. She has had significant experience in Home and Community Care services with a continuous quality improvement lens, driving quality outcomes.

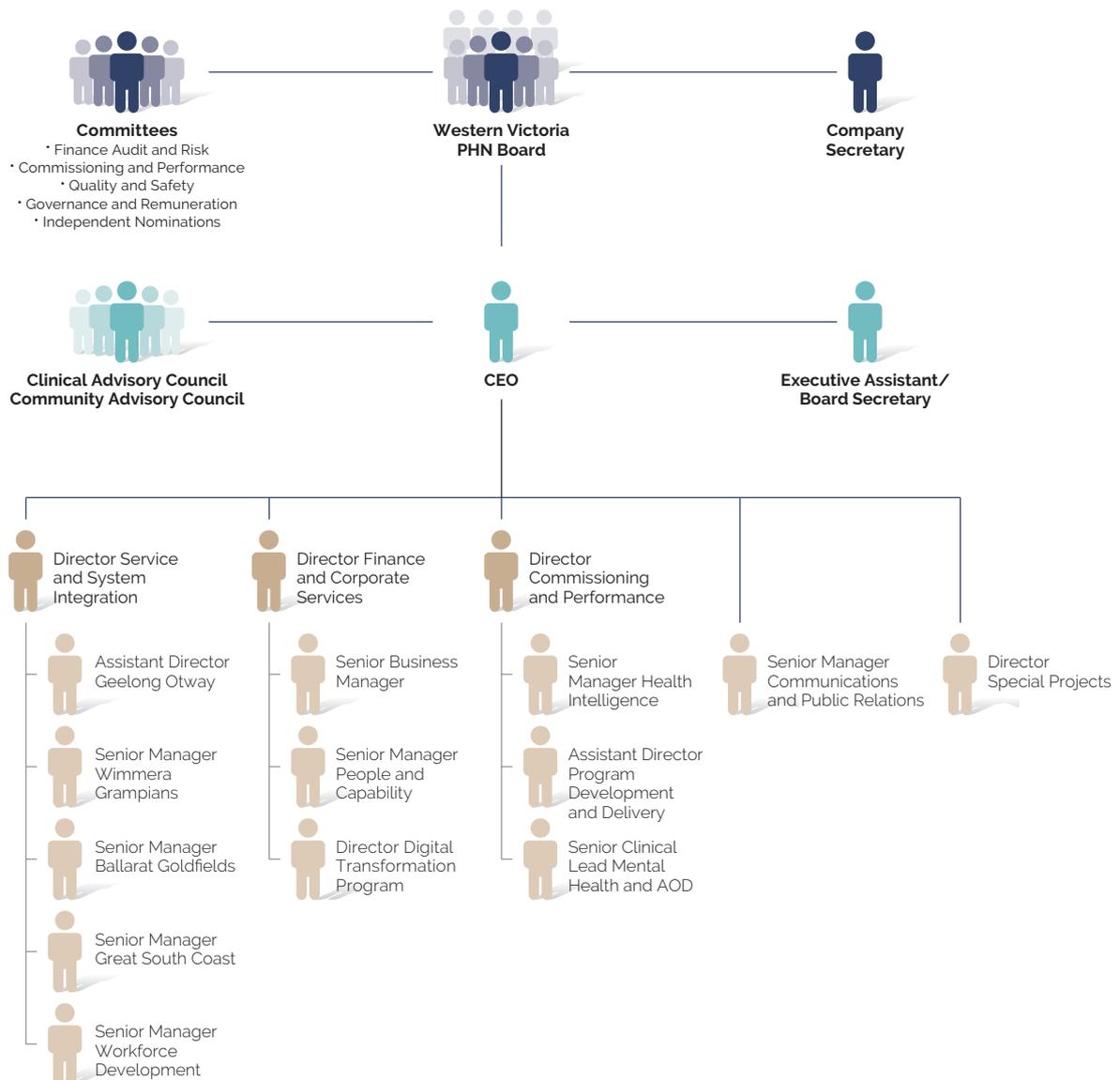


Tony Ficca
Director Finance and Corporate Services

Tony has previously

held a number of executive positions in the health care industry, including Director of Finance at St John of God Geelong Hospital and consulting on strategic development at Defence Health Insurance. He was also the Executive Director Finance and Company Secretary at GMHBA.

Organisation Chart



Clinical and Community Advisory Councils

WVPHN has two dedicated Advisory Councils – a clinical and a community advisory council – each with representatives from the four sub regions of Ballarat Goldfields, Wimmera Grampians, Geelong Otway and Great South Coast.

Purpose of the Advisory Councils:

- To advise WVPHN Board and CEO of the unique health care needs of their respective communities, including in rural and remote areas.
- To assist WVPHN to develop local strategies to improve the operation of the health care system for patients across the region

The Advisory Councils will do this by:

- Reporting to and informing WVPHN on opportunities to improve health care services through strategic, cost-effective investment and innovation. This includes providing WVPHN with advice on regional opportunities, issues, risks and interests.
- Acting as regional champions to improve patient care and provide advice on ways to improve health outcomes. This includes pathways between hospital and general practice that influences the follow up treatment of patients.

Clinical Advisory Council Members

Member	Representing Region
Dr Kate Graham – Chair	Wimmera Grampians
Caroline Gibson	Ballarat Goldfields
Emma Thurling	Ballarat Goldfields
Dr Nic Brayshaw	Geelong Otway
Sian Pritchard	Geelong Otway
Inger Neylon	Geelong Otway
Prof. Richard Harvey	Geelong Otway
Dr Eldon Lyon	Great South Coast
Nicholas Place	Great South Coast
Rebecca Van Wollingen	Great South Coast

Community Advisory Council Members

Member	Representing Region
Adele Kenneally - Chair	Great South Coast
Rebecca Alvarez	Ballarat Goldfields
Maureen MacPhail	Ballarat Goldfields
Amanda McCartney	Ballarat Goldfields
Marilyn Dolling	Geelong Otway
Daryl Starkey	Geelong Otway
Traci Williams	Geelong Otway
David McIntyre	Great South Coast
Barry Watson	Great South Coast
Rosalind Byass	Wimmera Grampians
Tina Healy	Wimmera Grampians
Robyn Lardner	Wimmera Grampians

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Ballarat 3350
Tel: 03 5331 6303

Geelong

131 Myers Street, Geelong 3220
Tel: 03 5222 0800

Horsham

81 Hamilton Street, Horsham 3400
Tel: 03 5381 1756

Warrnambool

Bayside City Plaza, 24-36 Fairy Street,
Warrnambool 3280
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