



# **POPULATION HEALTH - GENERAL POPULATION**

	Priority	Possible options
Mothe	ers, Babies and Children	
P1	Improve pre and post-natal care Reduce smoking in pregnancy Decrease complications from lack of antenatal care Decrease poor outcomes related to age and experience of mothers Decrease poor outcomes for children due to mothers low educational attainment Increase early intervention and education services for mothers	<ul> <li>Mothers and Babies Strategy targeting</li> <li>smoking in pregnancy</li> <li>antenatal attendance</li> <li>support and education for young mothers</li> <li>support for mothers with low educational attainment</li> </ul>
P2	Decrease rates of childhood obesity in specified LGAs, in particular children from single parent families where affordability of service is critical	Develop and implement a childhood lifestyle program that concentrates on the issue of childhood obesity
P3a	Increase access and awareness of maternal and child health services	Improve communication of availability of services
P4	Reproductive Issues	Continue to support CPD relating to women's health
P4a	Provide support to maternal and child health care practitioners	Ensure continuous professional development and upskilling for maternal and child health care professionals
Youth		
P5	Increase health literacy of at risk young people not engaged in schooling	Headspace, provider upskilling, guide for providers
P6	Decrease risk of youth homelessness	Investigate with FACS
P7	Ensure youth friendly services Review and increase youth friendly services	Headspace, Connect 4 kids
Older	Persons	
P8	Improved access to services for older people Ensure older persons services are affordable for pensioners and seniors health care card holders in specific LGAs	Increase awareness of free or subsidised access to health care providers for specific issues in older persons and ensure that older persons are aware of where and how to access services, Allied health commissioned services target older populations in specific local government areas. Work with local councils to explore options for local support groups.
P9	Increased awareness of older person services Prepare and plan for future ageing population in specific LGAs	Aged Care Strategy



#### **POPULATION HEALTH - GENERAL POPULATION**

	Priority	Possible options
Gener	al Population	
P10	Reduce Potentially Preventable Hospitalisations Reduce total admissions including acute and chronic PPH admissions	Integrated Care Co-ordination, Quality Improvement general practice, Allied health commissioned services.
P11	Reduce burden of disease related to Cancer  Reduce cancer deaths, hospital admissions and incidence by early detection through screening, particularly for All cancers, Lung, Lymphoma, Melanoma, Pancreas, Breast,, Colorectal in specific LGAs  Increase cancer screening in particular for breast cancer	Promote cancer screening activities, general practice Quality Improvement, Healthpathways Promote cancer screening with general practice for cervical, breast and bowel cancer and other allied health services in the community
P12	Reduce burden of disease related to Cardiovascular disease  Reduce CVD deaths, PPH and prevalence by early identification of those at risk in general practice in specific LGAs	General practice support to ensure that CVD risk identification occurs, support of initiatives to manage/address risk factors for CVD, general practice QI, HealthPathways, Allied health commissioned services
P13	Reduce burden of disease related to Respiratory disorders  Reduce Respiratory deaths, PPHs and prevalence by early identification of those at risk in general practice in specific LGAs (and increase general practice cycle of care for Asthma	General practice support to ensure that respiratory identification and management occurs, general practice Quality Improvement, HealthPathways, Allied health commissioned services
P14	Maintain diabetes care Improve diabetes care	General practice support, general practice QI, Healthpathways, Allied health commissioned services
P15	Reduce prevalence of risk factors for chronic disease Reduce prevalence of chronic disease risk factors in males and females specifically;  obesity  smoking rates in males in specific LGAs  prevalence of low or no exercise	Lifestyle programs in community concentrating on obesity management, smoking cessation and increased physical activity
P16	Reduce general practice type presentations to Emergency Departments  Reduce presentations to Emergency Departments by category 4 and 5 presentations	After Hours program, Frequent Flyers program

Develop framework, implement provider training

through support from provider engagement

team

P17

Increase health literacy

attainment in specific LGAs

Increase health literacy in those with lower educational  $% \left( x\right) =\left( x\right) +\left( x\right)$ 



# POPULATION HEALTH - GENERAL POPULATION

	Priority	Possible options
General Population		
P18	Reduce exposure to domestic and sexual violence	CAC Project, After hours DV
P19	Monitor and respond to emerging and existent general practice shortages	Continue providing workforce support through practice engagement team, partnership with RDN, MLHD, RTP and Universities
P20	Increase quality of general practice	General practice support, general practice QI
P21	Consider delivery of early intervention/prevention training for service deliverers	Workforce CPD with emphasis on vulnerable populations, LGBQTI and cultural competencies
P22	Maintain and increase allied health service provision in specific LGAs	Develop new model, co-design with communities, Allied health commissioned services
P23	Improve communication and coordination between service providers	Integrated Chronic Care
P24	Reduce prevalence of and hospital admissions for musculoskeletal disease in specific LGAs	Allied health commissioned services
P25	Utilise telehealth to deliver services	Encourage use of telehealth services for general practice and specialists where deficits in services exist
P26	Consider refugee health needs	Continue to work with Multicultural Council to identify refugee needs and culturally appropriate responses to those needs



# PRIMARY MENTAL HEALTH CARE (INCLUDING SUICIDE PREVENTION)

	Priority	Possible options
МНР1	Reduce hospitalisation for mental health issues by early intervention in community to reduce service burden for all conditions  Anxiety and stress  Bipolar and mood disorders  Dementia  Depressive episodes  Intentional self-harm in specific LGAs  Schizophrenia and delusional disorders	Commission Mental Health intervention services across a range of intensity
MHP2	Reduce suicide deaths in specific LGAs	Continue to implement Lifespan program, develop suicide prevention strategy, bereavement service including suicide specific service, Implement postvention suicide plans
MHP3	Ensure mental health services for youth and older persons are available	Funding for youth and older persons specific mental health services
MHP4	Increase awareness of and access to mental health support services	Campaign targeting increased awareness of support and services
MHP5	Provide training and support to mental health workforce	Workforce CPD, GP liaison support position
МНР6	Tackle Homelessness	Identify organisation's providing services to people without homes and look for opportunities to work with them to improve health
МНР7	Ensure access to services for those impacted by drought and economic downturn affecting income and livelihood	Ensure that services are directed to those who are affected by economic downturn, ie loss of employment, in particular in LGAs affected by drought
MHP8	Explore options for grief and bereavement counselling	Explore organisation's capacity and capability to provide grief and loss counselling



### ALCOHOL AND OTHER DRUG TREATMENT NEEDS

	Priority	Possible options
AODP1	Reduce high rates of alcohol and other drug use in specific LGAs to reduce offences in the community and decrease issues of poor health associated with excessive AOD intake	Commission Alcohol and Other Drug interventions to support recovery such as Hello Sunday Morning program
AODP2	Increase AOD services	Commission Alcohol and Other Drug interventions to support recovery
AODP3	Provide training and support to alcohol and other drugs workforce	Workforce CPD, GP liaison support position



### INDIGENOUS HEALTH (INCLUDING INDIGENOUS CHRONIC DISEASE)

	Priority	Possible options
AH1	Reduce hospital admissions and deaths in Aboriginal and Torres Strait Islander people Reduce hospital admissions and deaths for chronic disease by early intervention in community in specific LGAs to reduce service burden  Respiratory disease - all ages Injury, poisoning and other external causes- all ages Mental health issues Circulatory disease Digestive disease Reduce gap in life expectancy and chronic diseases	Integrated Team Care, Integrated Care Coordination
AH2	Improve pre and post antenatal care in Aboriginal and Torres Strait Islander women  Reduce risk of physical health issues by early intervention with children in the community  Reduce health risks in children by decreasing smoking rates in pregnant women	Develop Aboriginal specific Mothers, Babies and Children strategy with Murrumbidgee Aboriginal Health Consortium
АН3	Increase breast screening rates in specific LGAs	Encourage cancer screening
AH4	Increase access to culturally appropriate services	Develop framework for non-Aboriginal services with Murrumbidgee Aboriginal Health Consortium
AH5	Reduce risk of exposure to vaccine preventable disease by increasing rates of fully immunised two year olds	Increase support to providers of immunisation