

NSW Urgent Care Services

Expressions of Interest (EOI)

Purpose:

The purpose of this EOI is to elicit interest from General Practices in the Nowra area who may be willing and able to provide Urgent Care Services and to assess their capability and readiness to do so.

Closing Date:

EOI are being sought over a three-week period. EOI must be submitted to South Eastern NSW Primary Health Network (Coordinare) by 12pm 27 May 2024.

Process:

EOI are being sought from General Practice through Coordinare . Your submission of the attached application form will be assessed by Coordinare. Applications will be prioritised using data analysis and local intelligence to ensure they meet the needs of the local community in delivering urgent care and provided to the Ministry of Health for further assessment.

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Overview

Background

Over the past decade, emergency department (ED) presentations across Australia have continued to increase. This, coupled with the pandemic impact on workforce and reduced access to primary and specialty care, has resulted in significant challenges for the NSW health system. To ease pressures on EDs and improve access to urgent care options for the community, The Commonwealth Government has committed to delivering 58 Medicare Urgent Care Clinics (UCC), 14 of which will be in NSW.

In addition, the NSW Government is has committed \$124million to deliver 25 Urgent Care Services (UCS)

There is a common objective of these announcements to improve health outcomes while providing urgent care in settings other than EDs where clinically appropriate. NSW Health recognises that UCS are delivered in a range of settings in the community that are not limited to UCCs alone. The purpose of this document is to allow General Practice to put forward an EOI for suitable services to be considered as part of the broader NSW approach to UCS.

The purpose of this EOI is to seek interest and models from General Practices who may have the capacity and capability to provide suitable urgent care services in line with these announcements; contributing to the development of an Urgent Care System in NSW

The NSW approach of focusing on UCSs, rather than just Urgent Care Clinics allows flexibility in service delivery that is suited to the local context. These UCSs become part of a defined Urgent Care System so that there is differentiation between the primary care, hospital and urgent care systems in NSW.

NSW sees the Urgent Care System encompassing the following five UCS areas:

- Urgent care triage lines can provide an entry point to the urgent care system through assisted healthcare navigation and prevent confusion for patients, carers and families. Walk-in patients who attend clinics outside this process will not be turned away.
- Urgent care clinics provide episodic clinical care for patients with urgent but not life-threatening conditions that are low acuity/low to moderate complexity
- Rapid response hospital teams providing specialist outreach urgent care from the hospital system to the community, usually at the patient's location
- Services delivered in a patient's home or current location may include crisis care such as mental health or drug and alcohol crisis care delivered in the community
- Virtual care safely connecting patients with health professionals to deliver care when and where it is needed via telephone, video conference, remote monitoring or store and forward (storing clinical information and forwarding electronically for assessment and management by someone else)

Governing Principles & Objectives

NSW Health aims to provide a sustainable health system that delivers outcomes that matter most to patients and the community, is personalised, invests in wellness and is digitally enabled. This EOI, and the delivery of Urgent Care Services in NSW, contributes to this vision as well as to achieving the strategic outcomes of the Future Health Strategy.

This project will enable NSW Health to provide a bridge between EDs and Primary Care by providing UCS that integrate to existing providers more effectively

These services will address the current service gap represented by difficulties in accessing primary care appointments at short notice, which is driving a significant proportion of urgent care ED presentations. Monitoring and evaluation of UCS will provide insights into services provided, access times, ED presentations avoided and human experience. This project will ensure the necessary planning and partnerships are in place to support the successful rollout of UCS across NSW in line with NSW and Commonwealth Government-specified commitments and timeframes.

Urgent Care Services in NSW will aim to:

1. **Reduce the volume of low acuity non-admitted presentations to ED** that require episodic urgent care and improve timely access to urgent care services for patients, families, and carers.
2. **Ensure that services remain episodic** by connecting the patient back to their GP for their care where appropriate or for follow up once care has been delivered in the Urgent Care Service.
3. **Provide complete care for the episode** with little need to refer a patient elsewhere. This will include ensuring on-site access to diagnostics such as radiology and pathology. 'On-site' refers to services that do not disadvantage or make it difficult for the patient to access (including proximity and opening hours).
4. **Provide models of care that are flexible, multidisciplinary, and tailored** to the local context to allow the right care for the patient, in the right place, at the right time.
5. **Provide services that are designed in partnership** with LHDs, Specialty Health Networks (SHNs), NSW Ambulance, PHNs, GPs, patients, families, kin, carers, the local community, and other partners.
6. **Avoid duplication of models of care** in hospitals and primary care and where leverage existing models of care for a seamless transition between hospital care, urgent care, and primary care.
7. **Invest in models that are human-centred** and underpinned by kindness, compassion and empathy for patients, families, carers and staff.
8. **Maintain or improve outcomes for patients** e.g., no significant increase in representations (noting some will be expected but rate should not shift), no increase in rate of hospitalisation or mortality rates,
9. **Provide excellent experiences for patients and staff** for example, increase in overall experience and engagement of staff, patients, families and carers, improve access to non-emergency care and utilise health system resources efficiently.
10. **Provide cost effective care at no cost to the patient under models that are sustainable and financially viable** for LHDs, SHNs, PHNs and GPs

What is the EOI process?

To ensure applications meet the needs of the local community, a two-step process applies to this EOI.

1. Local shortlisting and prioritisation

- Completed responses using the attached General Practice application form should be sent back to the relevant Coordinare Executive by **27 May 2024**. Local prioritisation will occur for all applications received.
- Please ensure all sections of the application are completed in their entirety **and provide a key contact for the Practice** as the liaison point for the application.
- Blank or empty required sections will be considered incomplete and may not proceed to the Ministry of Health for consideration.
- A response lodged wholly or partly after the closing time will be registered as a Late Response and may be excluded from evaluation

. 2. EOI submission and evaluation

- Prioritised applications will be put forward to the Ministry of Health by Coordinare for further evaluation by **12pm 05 June 2024**.
- Once a suitable applicant is determined, negotiation between the Ministry of Health and Coordinare will occur including development of an Implementation Plan
- Please note: the commencement of this negotiation is not binding on the parties until the Schedule A is agreed and executed, alongside the signed Funding Agreement. Schedule A will specify the details of funding and the detailed Provider Implementation Plan(s) will be annexed to Schedule A.

Submission Questions and Clarifications

You may contact your local PHN if you have any questions or require clarification on any topics covered in this EOI.

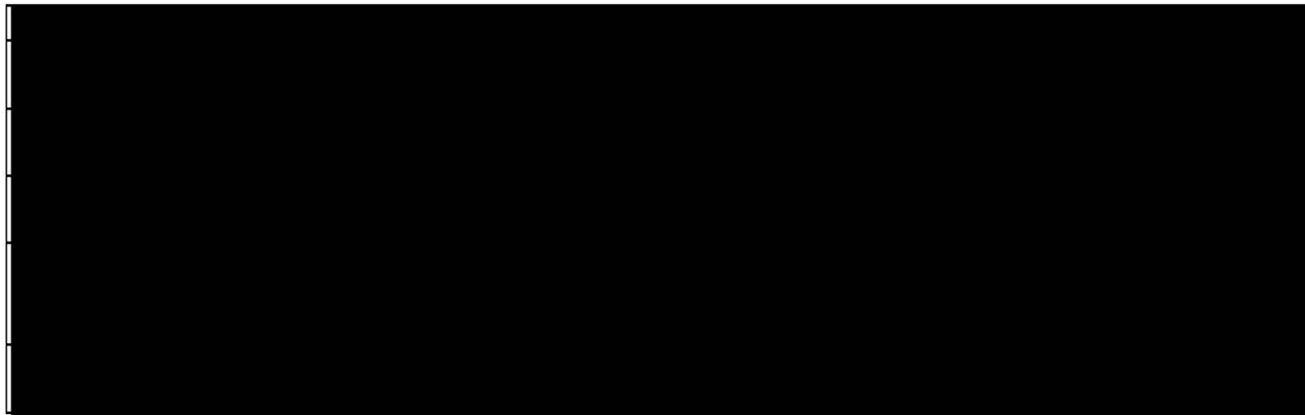
The PHN may forward you question to the Ministry of Health if required

Please note that questions and answers of broad impact or significance will be communicated to all applicants

Statement of Requirements

The following items are required to be detailed in your application:

- All items in the response section of the relevant attachment must be completed.
- Collaborative delivery of services by General Practice, PHN and LHD/SHN is encouraged wherever possible. There is also opportunity for specific statewide services to be managed by NSW Health where there is an identification of common services across multiple submissions.
- Your application should detail the expansion of an existing UCS or establishment of a new UCS that is part of the NSW five stated areas of the Urgent Care System.
- The specific UCS described in the application must meet the ten governing principles stated in this document.
- If not already participating in the NSW Health Lumos program, applicants must be prepared to participate in data sharing arrangements through the Lumos program. An additional data collection module will also need to be installed and data collected for every UCS patient for monitoring and evaluation purposes.
- Patients must not be excluded from the UCS based on being an existing patient of the practice alone. This extends to both paediatric and adult patient cohorts. The service must be willing to accept patients not currently on the practice's books where appropriate.
- Practices are expected to see **patients of all ages**
- Practices will be expected to utilise one of two booking platforms Hotdoc or Automed to allow direct bookings through Healthdirect
- The UCS must be delivered over extended hours; business hours only applications will not be considered. Hours should cover (but not be limited to) 8am-8pm Monday-Sunday and public holidays.
- Each UCS will be expected to participate in the evaluation and monitoring process



Evaluation

Evaluation of prioritised General Practice applications will be based on:

- Meeting the *Statement of Requirements*
- Alignment with UCS governing principles and approach
- Readiness and capability of service to expand or establish a new service
 - Timeline for operationalisation
 - Diversity, inclusion and belonging capability
- Value of offering
 - Resourcing required – existing or enhancement, staffing or goods and services, inclusion of reallocation or offset opportunities
 - Benefits and outcomes for patients, caregivers and the organisation
- Human-centred approach to delivery of the service

NSW Urgent Care Services

General Practice Application

An Urgent Care Service (UCS) provides community-based and human-centred care to eligible patients with urgent non-life-threatening illnesses and injuries who would have otherwise attended an emergency department (ED) to seek treatment. These patients are usually ED non-admitted triage category 3, 4 & 5

NSW is focused on the development of an Urgent Care System which encompasses five keys areas of UCS:

- Urgent Care Triage lines can provide an entry point to the urgent care system through assisted healthcare navigation and prevent confusion for patients, carers and families. Walk-in patients who attend clinics outside this process will not be turned away
- Urgent Care Clinics (UCCs) provide episodic clinical care for patients with urgent but not life threatening conditions that are low acuity/low to moderate complexity.
- Rapid response hospital teams providing specialist outreach urgent care from the hospital system to the community, usually at the patient's location
- Services delivered in patient's home or current location may include crisis care such as mental health or drug and alcohol crisis care delivered in the community
- Virtual care safely connecting patients with health professionals to deliver care when and where it is needed via telephone, video conference, remote monitoring or store and forward (storing clinical information and forwarding electronically for assessment and management by someone else)

UCS' uniquely distinguish their services from usual care in general practices as they provide short term, episodic care for non-life-threatening urgent conditions requiring same day assessment or treatment. Once a patient has been treated by an UCS, they will be discharged, and ongoing management and clinical care will be handed over to the patient's usual GP, even if the patient is referred to another service for higher level clinical care.

UCS have extended hours of operation, appropriately trained clinical staff, access to a network of resources and can streamline referrals to other healthcare providers where required.

Expressing interest in becoming a NSW Urgent Care Service

This application process seeks to scope interest and capacity among General Practice to expand their existing UCS or establish a new UCS; we appreciate your interest in this exciting opportunity.

Before completing this UCS EOI form please review the **NSW Urgent Care Service** Expression of Interest document to ensure you are familiar with the EOI process and specific requirements.

Please note there is no capital funding available for this EOI - funding will be for expansion of existing services or establishment of a new UCS.

Please return this applications to your relevant PHN executive

PRACTICE CONTACT DETAILS

Practice name	
Address	
Email	
Phone	
Current operating hours and days	
Practice Manager name	
Principal GP name*	

* Note: This EOI form should be completed by the Principal GP/GPs or person nominated by the Principal GP/GPs.

WHY ARE YOU EXPRESSING INTEREST IN NSW URGENT CARE SERVICE?

Please share with us what has inspired you to be involved in NSW Urgent Care Services?

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YOUR PRACTICE (please tick all that apply)

Billing	<input type="checkbox"/> Private	<input type="checkbox"/> Bulk-Billing	<input type="checkbox"/> Mixed
Appointments	<input type="checkbox"/> Walk in	<input type="checkbox"/> Appointment only	<input type="checkbox"/> Mixed
Do you have the capacity to:			
• Accept new patients	<input type="checkbox"/> Yes		<input type="checkbox"/> No
• Accommodate walk in patients	<input type="checkbox"/> Yes		<input type="checkbox"/> No
What is your usual wait time for next available appointments?			
Are you registered for PIPQI?	<input type="checkbox"/> Yes		<input type="checkbox"/> No

Are you an accredited practice?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	If yes, what was the date of accreditation?	
Are you participating in Lumos	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If no, are you prepared to participate in Lumos?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

WORKFORCE - YOUR PRACTICE TEAM

Administrative staff	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> FTE:
Medical Practice Assistant	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> FTE:
Practice Manager	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> FTE:
Practice Nurse	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> FTE:
General Practice Pharmacist	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> FTE:
General Practitioners - Owners/Partners			<input type="checkbox"/> FTE:
General Practitioners - Employed/Contracted			<input type="checkbox"/> FTE:
General Practitioners - Registrars			<input type="checkbox"/> FTE:
Do you have access to both male and female GPs that could work within the UCS?	<input type="checkbox"/> Yes		<input type="checkbox"/> No
How many of your health professionals have ED experience?			
Do you have co-located allied health providers?	<input type="checkbox"/> Yes		<input type="checkbox"/> No
If yes, please list (i.e., psychologist, dietician etc.)			
Do you have a co-located Pharmacy?	<input type="checkbox"/> Yes		<input type="checkbox"/> No
Do you have co-located diagnostic imaging services such as X-ray, CT and/or ultrasound?	<input type="checkbox"/> Yes		<input type="checkbox"/> No
Do you have co-located pathology services?	<input type="checkbox"/> Yes		<input type="checkbox"/> No
Do you have any other co-located health service providers? (Please list)			
Do you hold regular practice team/clinical meetings?	<input type="checkbox"/> Yes		<input type="checkbox"/> No
If yes, what is the frequency of your team/clinical meetings?			

YOUR PRACTICE (please tick all that apply)

Do you have cultural competency policies, practices and training in place for staff?

Yes

No

If yes, please provide supporting examples and documents.

Do you have the ability to identify and address the needs of the Aboriginal and Torres Strait Islander community?

Yes

No

If yes, please elaborate on how you do this.

Do you have the ability to identify and address the needs of the culturally and linguistically diverse (CALD) community?

Yes

No

If yes, please elaborate on how you do this.

PRACTICE FACILITIES

Do you have a treatment room?

Yes

No

If so, how many? Please provide information around number of beds and size of rooms.

How many waiting rooms do you have?

Do you have the capacity to separate out your usual waiting room from the Urgent Care Service waiting room?

Yes

No

Do you have the capacity to have a separate entrance for Urgent Care Service patients?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Can this separate entrance facilitate ambulance and gurney access?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
What are your current after-hours processes?		
Are you undertaking telehealth video conferencing consultations?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you provide e-prescriptions?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you store medicines/drugs on site?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Please specify? (e.g., S4/S8 drugs)		
Do you have a vaccine accredited refrigerator?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you currently have consumables/ equipment that can be used for treating urgent care conditions?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Please specify which consumables/equipment you have (e.g., ECG machine, defibrillator, shock, IV lines, slings, moon boots etc).		

SYSTEMS AND IT INFRASTRUCTURE

Which clinical management system do you use in your practice?

<input type="checkbox"/> Best Practice Version:	<input type="checkbox"/> Medical Director Version:	<input type="checkbox"/> ZedMed Version:	<input type="checkbox"/> Other Please Specify:
Do you have an online booking system?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	If yes, please specify		
Are you listed in the National Health Service Directory (NHSD)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
PenCAT	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
TopBar	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Electronic Shared Care Planning	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

	If yes, please specify	
Risk Stratification	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Data Visualisation i.e., QLIK Sense	<input type="checkbox"/> Yes	<input type="checkbox"/> No
GoShare	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Patient Reported Experience Measures/ Survey/Focus Groups	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Patient Reported Outcome Measures	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Patient Activation Measure Tool	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Other (please specify)		

Proposed Urgent Care Service

How does the proposed service align with the NSW Urgent Care Services approach?

What resources are required to expand or establish the Urgent Care Service? Please include annual estimates of any funding required from NSW Health and an outline of services already funded under MBS. At this stage funding estimates will be suitable as it is acknowledged that precise amounts may not be available.

What would be the timeline for operationalising the proposed Urgent Care Service expansion or establishment?

What urgent care specific clinical conditions will be treated in the expanded or established service and what are the expected Urgent Care Service outcomes? Please include access, activity, outcome and experience data (from an existing service if available) that provides justification for expansion or establishment of the Urgent Care Service

Who are your partners and how will you collaborate to deliver the service?