

EIS Health Limited trading as Central and Eastern Sydney PHN ABN: 68 603 815 818

CESPHN INTERNAL INFORMATION ONLY

| Contract Name | Intellectual Disability Primary Care Inclusion Program |
|-------------------|--|
| Service Providers | The Party: |

Memorandum of Agreement

This Agreement is made on the date stated in **Item 1** of the Schedule.

Between

EIS Health Limited ("CESPHN") of Level 5, 201 Coward St Mascot NSW 2020

And

The [Enter Party Name] ("The Party") described in Item 2 of the Schedule.

1. Recitals

- **a.** The relationship of The Parties is one of co-operation and is not intended to imply any arrangement of partnership, or other legally binding relationship other than that explicitly stated in this agreement.
- **b.** This agreement does not imply any other relationship in respect of employer and employee, principal and agent, or contractors between the party other than that explicitly stated in this agreement.
- **c.** This MOA sets out agreement between the Party and CESPHN for the Party to participate in the Intellectual Disability Primary Care Inclusion Program.

"The Program".

- **d.** The Intellectual Disability Primary Care Inclusion Program aims to enhance, support, and build capacity of primary care providers to effectively care for patients with intellectual disability and assist their families and carers.
- **e.** This program is a comprehensive, incentivised initiative to support general practices to complete Quality Improvement (QI) activities and undertake in-practice training QI related to intellectual disability. Funding will be distributed in two payments as outlined in the agreement below.
- **f.** To successfully complete the Intellectual Disability Primary Care Inclusion Program, participating practices must:
 - Complete the following two QI activities:
 - Data cleanse and code patients with intellectual disability in clinical software.
 - Annual Health Assessment (AHA) audit and development of a recall and reminder process for patients with intellectual disability that have not had an AHA in the last 12 months.
 - 2. Report deidentified data from the QI activities.
 - 3. Ensure all relevant staff attend the following two training sessions:
 - Intellectual Disability Health Care
 - Annual Health Assessments and Reasonable Adjustments
 - 4. Ensure all participating staff complete a program evaluation survey.
- g. Eligibility criteria: Participating general practices must be located within the CESPHN region and must have or be willing to install the data extraction tool POLAR to complete the QI activities. CESPHN will provide a temporary licence for practices that do not have POLAR at no cost to the Party.
 - Practices who have not participated in this program before will be given priority. If funding permits those practices who participated previously will be considered.

It is Agreed as follows:

2. CESPHN's Obligations and Funding

2.1 CESPHN will:

- (a) Fund the Program. The funding provided under this agreement supports the Party and its staff to complete the QI activities, attend the assigned training, and fulfil reporting and program evaluation as outlined in **Annexure 1**.
- (b) Pay the Party on issuance of a tax invoice per Clause 3.3. This remuneration as outlined in Item 3 of the Schedule consists of two payments payable to the Party according to Item 4 Table 1 Deliverables and Timelines and Payment of Remuneration. It is a fixed sum for the duration of the agreement.
- 2.2 The funds must be utilised and spent during the 12 months from signing this agreement.
- 2.3 CESPHN will review this agreement within three (3) weeks from signing the agreement. This is to ensure that the Party who has signed the contract will complete the activities as per Annexure 3 Order Form after the Commencement Date stated in Item 5 of the Schedule.
- 2.4 CESPHN will support completion of QI activities at the location specified by the Party as per **Annexure 3** Order Form or online via Teams. Upon completion, CESPHN will conduct face-to-face training at the same location.
- 2.5 To assist the Party to achieve the program deliverables, CESPHN will be responsible for the following:
 - 2.5.1 Provide support from a CESPHN Intellectual Disability Service Navigator and/or Digital Health Officer to complete the QI activities. Participating practices must use the data extraction tool POLAR to complete the QI activities. CESPHN will provide a temporary licence for practices that do not have POLAR and arrange for installation of the software at the practice.
 - 2.5.2 Assist practices to complete reporting template **Annexure 2** to report on QI activities
 - 2.5.3 Deliver training and provide a resource pack to all participants to support the learning outcomes for each session.
 - 2.5.4 Send participants an online post-training survey to complete at the end of the training session.
 - 2.5.5 Send all participating staff an online evaluation form, which must be submitted at the end of the program.

3. The Party's Obligations

3.1. The Party will:

- 3.1.1. Complete all program activities listed in Annexure 1.
- 3.1.2. Complete all program deliverables as listed in **Item 4** of the Schedule, Table
- 3.1.3. Complete the QI activity reporting requirements (**Annexure 2**) and provide the following de-identified data:
 - Total number of patients identified with 'intellectual disability' as a diagnosis before and after QI activity.
 - Demographics, including the number of patients with intellectual disability who identify as Aboriginal or Torres Strait Islander or are from multicultural backgrounds.

- Number of patients identified with intellectual disability who have completed an Annual Health Assessment (AHA) within the last 12 months.
- Number of patients with intellectual disability to be recalled for an intellectual disability AHA.
- 3.1.4. Book training for Intellectual Disability Primary Care Inclusion Program
 Training sessions, as per 'Order Form' in **Annexure 3.** The Party will allocate appropriate staff to participate in the training sessions, including GPs identified in QI activity 1 that support patients with Intellectual disability.
- 3.1.5. Ensure all staff attending training complete the post-training survey.
- 3.1.6. Ensure all staff involved in the program submit the online program evaluation form to provide feedback and reflect on their learnings.
- 3.2. Notwithstanding the obligations on the Party set out in substantive clauses 8 Confidentiality and 9 Intellectual Property, the Party must:
 - 1. Only collect and use data for the purposes of:
 - Carrying out the activities.
 - Complying with requirements under this agreement.
 - Any other purpose contemplated by this agreement and agreed upon by the Party and CESPHN.
 - 2. Maintain the security, integrity and confidentiality of data, including ensuring that any employees, contractors, or consultants who create, access or handle data comply with [Confidentiality clause] and [privacy legislation] to prevent any misuse, unauthorised access or disclosure of the data.
 - 3. Collect data of high quality (i.e. complete, accurate, timely, consistent).
 - 4. Seek and record informed consent from clients to collect their personal information.
 - 5. Seek and record informed consent from clients for CESPHN to use their deidentified information for the purposes specified in [Service Evaluation Clause]
 - 6. Not release or publish data owned by CESPHN to any third party without the prior written approval of CESPHN.
- 3.3 The Party will issue a valid tax invoice to CESPHN detailing the following:

Party Entity Name:

ABN:

Address:

Contact:

Email:

Invoice in favour of the Party:

Invoice Amount:

Invoice Number:

Invoice Date

GST Amount:

- 3.4 For the avoidance of doubt,
 - 3.4.1 The Party agrees to refund any monies on occurrence of any of the following event:
 - a. The Party is unable to complete the deliverables as per **Item 4** of the Schedule and the agreement is terminated.
 - b. The Party cancelling the order form and terminating this agreement.
 - 3.4.2 CESPHN will not be required to pay any Funding to the Party if the relevant grant (or part thereof) from the Commonwealth is withdrawn, cancelled, reduced or otherwise not received by CESPHN, or if the Commonwealth Funding Agreement is terminated. CESPHN will immediately notify the Party of any such occurrence and the parties

will negotiate in good faith the reduction of the deliverable as per **Item 4** of the Schedule or termination of this Agreement according to Clause 7 Termination.

3.5 The funds paid must be utilised during the term of this agreement unless an extension of time is agreed with CESPHN in accordance with Clause 6.

4. Term

CESPHN and the Party (The Parties) agree to the following terms in relation to Term:

4.1 Term between the Party and CESPHN:

This agreement shall commence on the Commencement Date stated in **Item 5** of the Schedule and is for a duration of four (4) months unless terminated earlier in accordance with Clause 7 in this agreement or extended under Clause 6. The expected completion date is by the End Date as per **Item 6** of the Schedule.

4.1.1 This Agreement can be extended by CESPHN and the Party and any extension will be for a period of three [3] months from the End Date and a request for extension will be applied per Clause 6. The Party and CESPHN will complete and sign an extension of time form.

5. Remuneration

- 5.1 The Party must submit to CESPHN an Invoice in respect to the deliverables completed as per **Item 4** of the Schedule:
 - as soon as practicable after the completion of the relevant deliverable;
 or
 - b. as otherwise agreed to by the parties.
- 5.2 Subject to Clause 5.3, CESPHN must pay the amount of the Invoice within 30 days of receipt, into the bank account nominated by the Party for that purpose.
- 5.3 If CESPHN disputes the Invoice issued by the Party, then:
 - CESPHN must serve notice on the Party setting out the nature of the dispute and the amount which CESPHN asserts should be the amount of the relevant invoice;
 - b. If the Party has not replied to CESPHN's notice within 5 business days of the date on which the notice is issued, then the Party is deemed to have accepted the variation of the amount owed to it and must issue a further invoice to CESPHN for the varied amount:
 - c. If the Party does not accept the amount nominated by CESPHN in the notice served by CESPHN pursuant to Clause 5.3, then the Party must, within 5 business days of issue of CESPHN's notice of dispute, inform CESPHN that a meeting is to be convened between a representative of CESPHN and the Nominated Person of the Party within a further period of 7 business days to discuss and, if possible, resolve the dispute; and
 - d. If the dispute is not resolved at the meeting between CESPHN and the Party, then the dispute must be referred to an expert nominated by the President of the Institute of Arbitrators and Mediators who must determine the dispute as an expert, who must make a determination as to which party is required to pay the costs of the expert determination and whose decision will be final and binding on

CESPHN and the Party.

6. Extension of Time

- 6.1 The Party can seek an extension of time to deliver the agreed deliverables set out in Item 6 of the Schedule and any extension must be in writing given to CESPHN prior to end of the 12 months of this contract and this notice is to be issued one [1] month in advance. The extension of time shall include date of deliverables in Item 4 of the Schedule-Table 1, and
- 6.2 For the avoidance of doubt, the extension of time does not include a request to increase the funding under this agreement.

7. Termination

- 7.1 Each party may terminate this Agreement in writing by giving five (5) business days' notice to the other on occurring of the following:
 - a. If the party elects to cease the agreement without any cause and reason (no fault event).
 - If the party defaults in the performance of any written material term of this Agreement where the party fails to remedy such default within seven (7) days of notice specifying the failure and requiring it to be remedied.
 - 7.2 CESPHN may terminate this Agreement immediately by notice to the Party and the Party if:
 - a. the Commonwealth Funding Agreement is terminated or reduced in scope by the Commonwealth or the Commonwealth otherwise withdraws or reduces the relevant grant; or
 - b. CESPHN is satisfied on reasonable grounds that the Party or the Party is unable or unwilling to satisfy the terms of this Agreement.
 - 7.3 CESPHN may terminate this Agreement by written notice if an insolvency event occurs in relation to the Party:
 - a. The party ceases to, or is unable to, pay its creditors (or any class of them) in the ordinary course of business, or announces its intention to do so:
 - b. A Receiver, Receiver and Manager, Administrator, Liquidator, Trustee in Bankruptcy, or similar officer is appointed to take over and manage the Party assets:
 - c. The party enters, or resolves to enter, a scheme of the arrangement, compromise, or composition with any class of creditors;
 - A resolution is passed, or an application to a Court is taken for the winding up, dissolution, official management, or administration of the Party; or
 - e. Anything having a substantial or similar effect to any of the events specified above happens under the law applicable to this Agreement.

7.3 Subject to Clause 7 any payment made by CESPHN pursuant to Clause 2 shall be reimbursed by the Party on issuance of a credit note. CESPHN will provide a written notice in relation to any repayment/refund under this Clause.

8. Confidentiality

- 8.1 Parties to this agreement undertake to observe all privacy requirements when engaging in activities under this Agreement in accordance with the Privacy Act 1988 (Cth) (Privacy Act), Australian Privacy Principles 2019; the Health Records and Information Privacy Act 2002 (NSW) (HRIP Act), Health Privacy Principles 2021; the Privacy and Personal Information Act 1998 (NSW) and the Privacy Amendment (Enhancing Privacy Protection) Act 2012 (Cth). The terms "personal information" and "health information" have the same meaning as is given to them in the Privacy Act and the HRIP Act.
- 8.2 The Party undertakes to inform CESPHN immediately on becoming aware that any breach of privacy or security relating to information under its control has occurred.
- 8.3 Notwithstanding any other Clause in this Agreement, the Party expressly consents to the disclosure of its identity to the Commonwealth Department of Health with such consent extending to allowing the Commonwealth to publish information about the Provider, including its identity and the existence and nature of the Services under this Agreement.

8.4 The Party must:

- ensure that all Confidential Information is kept confidential and is not copied, published, disclosed or discussed with any person other than its Personnel who have a need to know and its authorised representatives;
- b. not use any Confidential Information except as required for the purpose of this Agreement and providing the Services;
- c. not disclose any Confidential Information except as required by law;
- d. if required by CESPHN ensure the Party's personnel enter into a deed of confidentiality with CESPHN in a form prescribed by CESPHN.

In this agreement, the meaning of the words Confidential Information, and Personnel means as follows:

Confidential Information means information pertaining to this agreement disclosed to the party by CESPHN; and information pertaining to this agreement disclosed by the Party to CESPHN. Information disclosed by the parties to this agreement to each and other are either Confidential Information or information relating to Intellectual Property Rights.

Personnel means contractors, subcontractors, consultants, suppliers, employees, agents and other persons engaged by the Contractor.

9. Intellectual Property Rights

9.1. Each party acknowledges that the ownership of and all rights in relation to Intellectual Property of either party or any third party that pre-exist this Agreement are and remain the property of that party and that there is no change to any right, title or interest in such Intellectual Property by virtue of this Agreement.

- 9.2. The ownership of any Intellectual Property in the Activity Materials and Materials shared, produced as a result of this Agreement vests solely in the CESPHN on its creation.
 - a. **Activity Material** means, in respect of the Program, any Material (including any Intellectual Property rights in that Material):
 - i. created for the purpose of the Program including the materials outlining the Program in this agreement;
 - ii. provided, or required to be provided, to CESPHN in respect of the Program (including Material that is required by **Item 4** of the Schedule and the attachments in the Schedule to be provided to CESPHN in respect of the Program); or
 - iii. derived at any time from the Material referred to in paragraphs (i) or (ii) of this definition;
 - b. **Material** means all CESPHN Program materials in this agreement, CESPHN training materials (Film, Webinar), documents, discussion papers, sketches, research reports, survey results, diagrams, and other material prepared by CESPHN during this agreement excluding any materials created by the Party, including any internal business operational policies, procedures, guidelines, or manuals for their organisation use.

Intellectual Property Rights means all industrial and intellectual property rights both in Australia and throughout the world, whether registered or not and whether now or devised in the future, and for the duration of the rights including any:

- Patents, copyright, registered or unregistered marks or service marks, trademarks, trade names, brand names, indications of source, or appellation of origin, registered designs and commercial names and designations, circuit layouts and database rights;
- Ideas, processes, inventions, discoveries, trade secrets, know-how, computer software (both source code and object code), confidential information and scientific, technical and product information; and
- iii. Right to apply for or renew the registration of any rights.

10. Insurances

- 10.1 The Party must maintain at its own cost insurance policies with a reputable insurer to cover such risks and amounts as set out below and as per Item 7 of the Schedule or as nominated by CESPHN from time to time and any and all liability of the Party respectively to CESPHN pursuant to this Agreement:
 - i. General Public and Products Liability insurance covering legal liability to pay for personal injury and property damage arising out of or in connection with the performance of the services by the Party under this Agreement, with a limit of cover not less than the amount stated in **Item 7** of the Schedule;
 - ii. Workers Compensation insurance in accordance with the requirements of, and for an amount of not less than the

- maximum amount specified in, relevant laws in respect of the Party's liability for any loss or claim by any person employed or otherwise engaged by it in or about the performance of the Services:
- iii. Professional indemnity insurance covering liability for any act, error or omission arising out of or in connection with the professional business practice of the Party with a minimum of coverage of the amount stated in **Item 7** of the Schedule;
- iv. Such other insurances necessary to cover the Party's obligations and risk in relation to the services, including adequate insurance to cover volunteers as per organisation requirement.
- 10.2 Entity insurances must cover all locations stated in the Agreement.
- 10.3 The Party must retain the insurances during the term of this agreement and upon request from CESPHN furnish a current certificate of insurance per Clause 10.1 (i, ii, iii, and iv).
- 10.4 The Party must maintain the insurance cover set out in Clause (10.1.) for a period of 7 years after termination of this Agreement in relation to insurance policies which are on a "claims made" basis.
- 10.5 CESPHN acknowledge the NSW Government's Treasury Managed Fund arrangements as sufficient for compliance with the insurance obligations of this Agreement.

11 Variation and waiver

- a. Unless this Agreement expressly states otherwise, this Agreement may only be amended in writing signed by all the parties.
- b. A provision of this Agreement may only be waived in writing signed by the person who has the benefit of the provision and who is therefore to be bound by the waiver.
- c. A waiver by one party under any Clause of this Agreement does not prejudice its rights in respect of any subsequent breach of this Agreement by the other party.
- d. A party does not waive its right under this Agreement because it grants an extension or forbearance to the other party.

12 Relationship between the Parties

- 12.1 The Party's relationship with CESPHN is that of an independent contractor.
- 12.2 Neither the Party nor CESPHN shall have and shall not represent that it has any power, right or authority to bind the other, or to assume or create any obligation or responsibility, whether express or implied, on behalf of the other or in the other's name.
- 12.3 Nothing in this Agreement shall be construed as constituting the Party and CESPHN as partners, or as creating the relationship of employer and employee, master and servant or principal and agent between the parties.

13 Service of notice

Unless this Agreement expressly states otherwise, any notice:

- a. must be in writing, directed for the attention of the relevant party; and
- b. must be:
 - delivered;
 - ii. sent by pre-paid mail;
 - iii. emailed:

to the recipient's address, email address set out in this Agreement – Schedule -**Item I**, or to the address, email address last notified by the recipient in writing.

13.1 Receipt of notice

A notice given in accordance with Clause 13 is treated as having been received:

- a. if delivered before 5:00pm (in the place it was delivered to) on a business day, on that day, otherwise on the next business day;
- b. if sent by mail, on the third business day (in the place it was sent from) after posting;
- c. if sent by email when the email is relayed by outlook; and

and the notice takes effect from the time it is received (or treated as received) unless a later time is specified in it.

14 Governing law and jurisdiction

- 14.2 This Agreement and the transactions contemplated by this Agreement are governed by the law enforced by New South Wales.
- 14.3 Each of the parties irrevocably submits to the jurisdiction of the Courts of New South Wales and all Courts called to hear appeals from the Courts of New South Wales in respect of this Agreement or its subject matter.

Executed as an Agreement

Position Held

Signature of Authorised Officer Name of Authorised Officer (please print) Position Held Signed for and on the behalf of The Party (ABN XXX) by its authorised representative: Signature of Authorised Officer Name of Authorised Officer (please print)

Signed for and on the behalf of EIS Health Limited

ABN 68 603 815 818 by its authorised representative:

Schedule

Item Date of Agreement The day of 202X

1

Item The Party

2 Name of the Party:

ABN: Address: Contact: Email:

Item Funding

3

The Intellectual Disability Primary Care Inclusion Program offers financial support to the value of \$5000 (ex GST) for general practices to complete Quality Improvement activities, undertake in-practice training, and fulfil reporting and program evaluation requirements. The funding of five thousand dollars (\$5000) is fixed under this agreement.

The payment of this funding is subject to completion of deliverables in **Item 4- Table 1: Deliverables and Timelines and Payment of Remuneration** and the Party will issue a tax invoice as per Clause 3.3.

Item Outcome

4

CESPHN will offer funding to support Intellectual Disability Primary Care Inclusion Program.

CESPHN and The Party will support this program as per their respective obligations in this agreement and complete the deliverables outlined in Table 1 Deliverables and Timelines and Payment of Remuneration which are to be completed in expected timeframe.

Table 1: Deliverables and Timelines and Payment of Remuneration

| Ac | tivity | Deliverables | Responsibility | Payment | Date due |
|----|---|--|-------------------------|---------|---------------|
| 1. | Execution of MOA | Sign, date, and return to CESPHN signed MOA. Submit invoice for 50% payment. | The Party | \$2,500 | Enter Date |
| 2. | Quality improvement activities and reporting | Complete QI activities (see Annexure 1) and provide data (see Annexure 2). | The Party and CESPHN | | Enter Date |

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| | | GPs identified as supporting patients with Intellectual Disability strongly encouraged to attend training. | | | |
|----|-------------------------------------|--|----------------------|---------|---------------|
| 3. | Delivery and completion of training | Deliver and complete training as per Order Form (Annexure 2) and complete post-training surveys. | The Party and CESPHN | | Enter Date |
| 4. | Complete Evaluation | All participating staff complete a program evaluation survey. Submit invoice for 50% payment. | The Party | \$2,500 | Enter Date |

Item 5 Commencement Date

Item 6 End Date: (unless extended per Clause 6 by the Party)

Item 7 Insurances

Public Liability - \$20 million Professional Indemnity - \$5 million

Cyber liability insurance- to be assessed by the Party insurance company

Other than cyber liability, all other insurances stated above must be evidenced through the provision of a valid and current certificate of currency which notes the interest of CESPHN. The values stated above are required to be the value of a single incidence. It is preferred that there is no limit to the aggregate value of claims on the policy, but if there is a reference to a caped aggregate value, it must be at least double the value of the single incidence requirement listed above.

Workers Compensation - (as per legislative requirements)

Item I: Notices

I.1 CESPHN's Contact details for legal notices:

Name

Nathalie Hansen

| Name | Nathalie Hansen | | |
|--|--|--|--|
| Position | Chief Executive Officer | | |
| Phone | 1300 986 991 | | |
| Email | n.hansen@cesphn.com.au | | |
| Postal Address | Tower A, Level 5, 201 Coward St, Mascot NSW 2020 | | |
| I.2 The Party's con | tact details and address for legal notices: | | |
| Name | - | | |
| Position | | | |
| Phone | | | |
| Email | | | |
| Postal Address I.3 CESPHN's corqueries: Name | ntact details for operational, services and contract management | | |
| Position | | | |
| Phone | | | |
| Email | | | |
| | ntact details and address for operational, services and contract | | |
| | es (Nominated Person): | | |
| Name | | | |
| Position | | | |
| Phone | | | |
| Email | | | |
| Postal Address | | | |
| I.5 CESPHN's conf | act details for invoicing purposes: | | |
| Entity Name | EIS Health Limited | | |
| ABN | 68 603 815 818 | | |
| Email | "upload via Folio" | | |
| | t details for Folio checklists (Nominated Person): | | |
| Name | | | |
| Position | | | |
| Phone | | | |
| Email | | | |

Annexure 1

Program activities

To successfully complete the Intellectual Disability Primary Care Inclusion Program, participating practices must:

- 1. Complete the following two Quality Improvement activities,
- 2. Report deidentified data from the Quality Improvement activities
- 3. Ensure all relevant staff attend the two training sessions and complete post training survey.
- 4. Ensure all participating staff complete a program evaluation survey.

1. Quality Improvement Activities

CESPHN will provide templates and one-on-one support to complete the Quality Improvement (QI) activities. Practices must complete both QI Activities.

Participating practices must use the data extraction tool POLAR to complete the QI activities. CESPHN will provide a temporary licence for practices that do not have POLAR.

QI Activity Suite (GP, Practice Manager, Practice Nurse)
Delivered by: CESPHN Service Navigator and Digital Health Officer
Activities:

- Cleanse and code data for patients with intellectual disability in clinical software.
- Conduct an Annual Health Assessment (AHA) audit and develop a recall and reminder process for patients with intellectual disability that have not had an AHA in the last 12 months.

2. Reporting requirements

Participating practices will be required to provide deidentified data from the QI activities. This deidentified data from QI activities includes:

QI Activity 1:

- Total number of patients identified with 'intellectual disability' as a diagnosis prior to commencing QI activities.
- total number of patients identified with 'intellectual disability' as a diagnosis post completion of QI activities.
- Number patients identified with intellectual disability that are Aboriginal or Torres Strait Islander or from a multicultural background.

QI Activity 2:

- Total number of patients identified with intellectual disability who have completed an Annual Health Assessment (AHA) within the last 12 months.
- Number of patients identified with intellectual disability who have not completed an AHA within the last 12 months and need to be recalled.

3. Training sessions

Upon completion of QI activities, relevant staff within the general practice are to attend the following two training sessions:

1. Intellectual Disability Health Care (all relevant practice staff)

CPD hours: 1-1.5 hrs

Delivered by: CESPHN ID Service Navigator/Educator

Learning outcomes:

- Identify common co-occurring health conditions experienced by people with intellectual disability.
- Identify contributing factors to health status of people with intellectual disability.
- Identify key resources to support care and treatment these conditions.
- Identify tools and/or strategies to encourage preventive health care use for people with intellectual disability.
- 2. Annual Health Assessments and Reasonable Adjustments (all relevant practice staff)

CPD hours: 1-1.5hrs

Delivered by: CESPHN ID Service Navigator/Educator

Learning outcomes:

- Demonstrate the importance of Annual Health Assessments (AHAs) for patients with intellectual disability.
- Discuss the Comprehensive Health Assessment Program (CHAP) as a tool to promote collaboration and continuity of care.
- Identify communication strategies for patients with intellectual disability.
- Identify reasonable adjustments for patients with intellectual disability.

Training sessions will be delivered face-to-face at the general practice location. Online training may be available on a case-by-case basis. All participants will be sent an online post-training survey to complete at the end of the session.

4. Program evaluation

All practice staff participating in the Intellectual Disability Primary Care Inclusion Program will be required to submit an online evaluation survey on completion of the program. The evaluation will seek feedback on the program and ask participants to reflect on their learnings.

Annexure 2

Quality Improvement (QI) Activities – Deidentified data

Participants will be required to provide the following data on completion of the QI activities

| Reporting requirement | Data |
|---|------|
| Quality Improvement Activity 1 | |
| Using POLAR, list the total number of patients identified with 'intellectual disability' as a diagnosis prior to commencing QI activities. | |
| Using POLAR, list the total number of patients identified with 'intellectual disability' as a diagnosis post completion of QI activities. | |
| Number patients identified with intellectual disability that are Aboriginal or Torres Strait Islander or from a multicultural background. | |
| Quality Improvement Activity 2 | |
| Total number of patients identified with intellectual disability who have completed an Annual Health Assessment (AHA) within the last 12 months. | |
| Number of patients identified with intellectual disability who have not completed an AHA within the last 12 months and need to be recalled. | |

Annexure 3

Order Form

Please note: this Order Form is an online booking form. A link will be provided by CESPHN to book the training sessions.

Practice location for training sessions:

Method of Training: Face-to-face at the practice location

Number of Staff attending training:

Training

Please select dates and times for the training sessions and identify staff who will attend:

1. Intellectual Disability Health Care
Target audience: All relevant practice staff

CPD hours: 1 – 1.5 hours.

Delivered by: CESPHN ID Service Navigator/Educator

Learning outcomes:

- Identify common co-occurring health conditions experienced by people with intellectual disability.
- Identify contributing factors to health status of people with intellectual disability.
- Identify key resources to support care and treatment these conditions.
- Identify tools and/or strategies to encourage preventive health care use for people with intellectual disability.
- 2. Annual Health Assessments and Reasonable Adjustments

Target audience: GPs supporting patients with intellectual disability

CPD hours: 1-1.5hr

Delivered by: CESPHN ID Service Navigator/Educator

Learning outcomes:

- Demonstrate the importance of Annual Health Assessments (AHAs) for patients with intellectual disability.
- Discuss the Comprehensive Health Assessment Program (CHAP) as a tool to promote collaboration and continuity of care.
- Identify communication strategies for patients with intellectual disability.
- Identify reasonable adjustments for patients with intellectual disability.

| Signed by the Party's authorised personnel per Item 1.6 - Item 1- Notices |
|--|
| Signed by CESPHN's authorised personnel per Item 1.4 -Item I-Notices or as authorised otherwise by authorised personnel in Item 1.4. |
| Dated: |