

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

CESPHN INTERNAL INFORMATION ONLY

Contract Name	Palliative Care General Practice Education and Quality Improvement 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.

“The Program”.

- c. This MOA sets out agreement between the Party and CESPHN for the Party to participate in the Palliative Care General Practice Education and Quality Improvement Program.
- d. The aim of the Palliative care General Practice Education and Quality Improvement (QI) Program is to enhance and support general practices to build capacity to provide effective care for palliative patients, their families and carers.
- e. This program is a comprehensive, incentivised initiative to support general practices to complete in-practice education and quality improvement activities related to palliative care.
- f. To successfully complete the palliative care general practice education and QI program, participating practices must:
 1. Complete **BOTH** of the following QI activities:
 - Palliative care and end of life care [toolkit](#).
 - Advanced care planning [toolkit](#).
 2. Report deidentified data from the QI activities.
 3. Ensure relevant staff attend practice specific training session.
 4. Ensure all participating staff complete a program evaluation survey.

This grant opportunity is available to general practices who:

- Have a minimum of 4 practice staff (including a minimum of 3 GPs) willing to participate*
- Are located within the CESPHN region.
- Have access to and are able to use the data extraction tool POLAR or CAT4 to complete quality improvement activities. **

*This can include small practices collaborating together to meet 3 GP minimum, though payment of grant will only be made to one practice entity. The practice receiving the grant will be responsible to share the grant money with other participating practice with whom they joint together to complete the program. The applicant will identify who will be leading the program and once CESPHN have paid to

the primary practice they will be at their sole discretion to determine a percent of payment to other collaborated GPs

*Practices are welcome to involve with their whole practice teams including General practitioners, practice nurse, and practice manager in grant activities

**CESPHN will provide a temporary licence for practices that do not have POLAR. There is no cost to the practice for the licence.

It is Agreed as follows:

2. CESPHN's Obligations and Funding

2.1. CESPHN will:

- (a) Fund the Program. The funding provided under the agreement is for the Party and its Personnel (as defined in clause 8) to complete the quality improvement activities, attend the assigned education and training, reporting and program evaluation under **Annexure 1** and a duly completed Order Form' in **Annexure 2**.
- (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 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 the Commencement Date stated in **Item 5** of the Schedule to determine how the Program delivery is progressing as agreed under this agreement.

2.4. CESPHN will support practices with completion of QI activities at the location specified by the Party as required, as per **Annexure 2** – Order Form or online via Teams. Upon completion, specialist palliative care team members 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. CESPHN palliative care project officer will support the Party in completing the QI activities. Participating practices must use the data extraction tool POLAR or CAT4 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. Provide practices with templates to document and report deidentified data from the Palliative care and end of life care toolkit and Advanced care planning toolkit.
- 2.5.3. Support training and education that will be delivered by Sydney local health district (SLHD) and South Eastern Sydney Local health district (SESLHD) palliative care specialist teams who will be completing the training 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 and** the signed **Order Form-Annexure 2**.
- 3.1.2. Complete all program deliverables as described in **Item 4** of the Schedule, Table 1.
- 3.1.3. Complete **all** QI toolkits and provide the de-identified data relating to QI activities as per Annexure 2.
- 3.1.4. Complete Palliative Care General Practice Education session and QI Program activities , as per 'Order Form' in **Annexure 2**. All Party's Personnel (as defined in clause 8) must participate in education, training sessions and QI activities.
- 3.1.5. Ensure all staff attending training complete the online post-training survey.
- 3.1.6. Ensure all staff involved in the program submit the online program evaluation survey 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:

- i. Only collect and use data for the purposes of:
 - Carrying out the Activities;
 - Complying with requirements under this agreement; and
 - Any other purpose contemplated by this agreement and agreed between the Party and CESPHN.
- ii. 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.
- iii. Collect data of high quality (i.e. complete, accurate, timely, consistent).
- iv. Seek and record informed consent from clients to collect their personal information.
- v. Seek and record informed consent from clients for CESPHN to use their deidentified information for the purposes specified in Annexure 1-QI toolkit reporting requirements.
- vi. Not use, 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:

Details of spend and cost of each telehealth facilities and equipment purchased by the Party and details of the Party Name

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 CESP HN 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 CESP HN, or if the Commonwealth Funding Agreement is terminated. CESP HN 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** 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 CESP HN in accordance with Clause 6.

4. Term

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

4.1. Term between the Party and CESP HN:

This agreement shall commence on the Commencement Date stated in **Item 5** of the Schedule and is for a duration of 12 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 CESP HN 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 CESP HN will complete and sign an extension of time form.

5. Remuneration

5.1. The Party must submit to CESP HN an Invoice in respect to the deliverables completed as per **Item 4** of the Schedule:

- a. 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, CESP HN 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 CESP HN disputes the Invoice issued by the Party, then:

- a. CESP HN must serve notice on the Party setting out the nature of the dispute and the amount which CESP HN 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

6.1.1 extension of the End Date.

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).
- b. 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;
- d. 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.

7.4. 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:

- a. 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 CESP HN; and information pertaining to this agreement disclosed by the Party to CESP HN. 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 CESP HN 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 including the Intellectual Property Rights pertaining to Quality improvement Toolkit for Advance Care Planning and Quality improvement Toolkit for Palliative and End-of-Life Care;
- ii. provided, or required to be provided, to CESP HN 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 CESP HN 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 CESP HN Program materials in this agreement, CESP HN training materials (Film, Webinar), documents, discussion papers, sketches, research reports, survey results, diagrams, and other material prepared by CESP HN 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:

- i. 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;
- ii. 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.

- 9.3 For the avoidance of doubt, ownership rights in the Palliative Care General Practice education and training materials owned by Sydney local health district (SLHD) and South Eastern Sydney Local health district (SESLHD) are reserved and retained for these organisations. Any further use or use in future beyond the period of this agreement is not permitted unless the party wishes to use those materials in their practice seeks permission from the respective owners of the Intellectual Property.

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 CESP HN from time to time and any and all liability of the Party respectively to CESP HN 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 CESP HN 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. CESP HN 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:
 - i. 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

- 14.1. This Agreement and the transactions contemplated by this Agreement are governed by the law enforced by New South Wales.
- 14.2. 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

Signed for and on the behalf of EIS Health Limited

ABN 68 603 815 818 by its authorised representative:

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)

Position Held

Schedule

Item 1	Date of Agreement	The	day of	2025
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Item	The Party
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2 Name of the Party:

ABN:

Address:

Contact:

Email:

[illegible]

3

The Palliative Care General Practice Education and QI Program offers financial support to the value of **\$5000.00** (Excludes GST) for general practices to complete Quality Improvement activities, undertake in-practice training and fulfil reporting and 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
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4

CESPHN will offer funding to support the Palliative Care General Practice Education and QI 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

Activity	Deliverables	Responsibility	Payment	Date due
1. Execution of MOA	Sign, date, and return to CESPHN signed MOA with Order Form Submit invoice for 50% payment.	The Party	\$2, 500	Enter Date
2. Quality improvement activities and reporting	Complete QI activities as per Annexure 1 and Order Form Annexure 2 prior to face-to-face education and training session in practice.	The Party		Enter Date

3. Face-to-face education and training.	Completion of training and education session, and post-training surveys as per Annexure 1 and Order Form Annexure 2	Party and CESP HN		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 assed by the Party insurance company

Other than cyber liability, all other insurances stated above must be evidenced through the provision of a valid . 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 capped 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 CESP HN's Contact details for legal notices:

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 contact details and address for legal notices:

Name	
Position	
Phone	
Email	
Postal Address	

I.3 CESP HN's contact details for operational, services and contract management queries:

Name	
Position	
Phone	
Email	

I.4 The Party's contact details and address for operational, services and contract management queries (Nominated Person):

Name	
Position	
Phone	
Email	
Postal Address	

I.5 CESP HN's contact details for invoicing purposes:

Entity Name	EIS Health Limited
ABN	68 603 815 818
Email	"upload via Folio"

I.6 Provider contact details for Folio checklists (Nominated Person):

Name	
Position	
Phone	
Email	

Annexure 1

Program activities

Practices will complete the following key activities in the below order.

Quality Improvement

Target Audiences include: GP's, Practice Manager, Practice nurse

Activities

Practices must complete all activities from predeveloped quality improvement toolkits in the:

1. Palliative care and end of life care [toolkit](#).
2. Advanced care planning [toolkit](#).

Upon completing these toolkits, GPs can self-report the time spent on this activity with their relevant professional development body.

Completion of these activities is expected to take the practices approximately 4-6 hours in total, and requires practices to extract data using POLAR or CAT4 data extraction tools. CESPHN will provide Practices that do not have POLAR, a temporary POLAR licence.

QI toolkit reporting requirements

Participating practices will share deidentified data and evidence of completed quality improvement activities prior to onsite practice education discussions. Practices will submit this information via a built-in data capture and reporting templates within the Palliative care and end of life car toolkit.

Onsite practice education session

Training sessions will be delivered face-to-face by LHD specialist palliative care team members at the general practice location and will take approximately 1.5 hours, which will be delivered via a lunch and learn format.

The practice has selected one or more of the below trainings and has committed to complete the training as per the Order Form – Annexure 2.

- ☐ Anticipatory prescribing
- ☐ Pain and symptom management
- ☐ When, where and how to refer patients to specialist palliative care services
- ☐ Supporting a patient wishing to die at home
- ☐ Use of MBS items in the care for palliative patients
- ☐ Serious illness communication and processes in general practice
- ☐ Psychosocial and bereavement support
- ☐ Collaboration and consultation approaches which improve patient coordination and continuity of care.

All participants will be sent an online post-training survey to complete at the end of the training session.

Program evaluation

All practice staff participating in the Palliative Care General Practice Education 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.

CESPHN will provide an online evaluation form to the practice to complete evaluation.

Annexure 2

Order form for Palliative care specialist Program – Quality Improvement activities and Training Sessions

Name of the Practice	
Address of the Practice	
Principle General Practitioner	
Number of General Practitioners in the practice	
Location address where the activities and training will be completed	
Personnel (3 GPs identified to complete QI activities (Palliative care and end of life care toolkit, and Advanced care planning toolkit)) Name: Position: Name: Position: Name: Position:	
Bank Details of Practice Account name Financial Institution BSB Account Number	
Name of project contact person (this person will be responsible to lead the project and maintain contact with CESPHN)	
Activities Quality improvement Practices must complete all activities from predeveloped quality improvement toolkits in the: <ol style="list-style-type: none"> 1. Palliative care and end of life care 2. Advanced care planning <p>Upon completing these toolkits, GPs can self-report the time spent on this activity with their relevant professional development body.</p> <p>Completion of these activities is expected to take the practices approximately 4-6 hours in total, and requires practices to extract data using POLAR or CAT4 data extraction tools. CESPHN will provide Practices that do not have POLAR, a temporary POLAR licence.</p> <p>QI toolkit reporting requirements:</p> <p>Participating practices will share deidentified data and evidence of completed quality improvement activities prior to onsite practice education discussions. Practices will submit this information via a built-in data capture and reporting templates within the Palliative care and end of life care toolkit.</p>	
Education and Training session	

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

Number of Staff attending training:

Names and positions of staff attending session:

Select training session topics staff would like discussed in the session:

- ☐ Anticipatory prescribing
- ☐ Pain and symptom management
- ☐ When, where and how to refer patients to specialist palliative care services
- ☐ Supporting a patient wishing to die at home
- ☐ Use of MBS items in the care for palliative patients
- ☐ Serious illness communication and processes in general practice
- ☐ Psychosocial and bereavement support
- ☐ Collaboration and consultation approaches which improve patient coordination and continuity of care.

.....
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: