

## EXPRESSION OF INTEREST Primary Care Innovation Grants 2026 – General Practice

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## Contents

<b>1. Overview .....</b>	<b>3</b>
<b>2. Information about Central and Eastern Sydney PHN .....</b>	<b>3</b>
<b>What are primary health networks? .....</b>	<b>3</b>
<b>Our vision .....</b>	<b>3</b>
<b>Our region, our community .....</b>	<b>3</b>
<b>3. Eligibility .....</b>	<b>4</b>
<b>4. Program details .....</b>	<b>4</b>
<b>4.1 Program activities .....</b>	<b>4</b>
<b>4.2 Reporting .....</b>	<b>5</b>
<b>4.3 Evaluation .....</b>	<b>6</b>
<b>4.4 Connection to LUMOS .....</b>	<b>6</b>
<b>4.5 Connection to PCA .....</b>	<b>6</b>
<b>5. Contract term .....</b>	<b>6</b>
<b>6. Funding .....</b>	<b>7</b>
<b>7. Submitting your application .....</b>	<b>7</b>
<b>8. Contact us .....</b>	<b>7</b>

## 1. Overview

Australia's healthcare system is facing significant challenges due to an aging population, increasing healthcare demands, and evolving healthcare needs. Innovation is key to enabling primary care providers to develop new approaches to meet community-specific needs.

In recognition of the importance of innovation in enhancing health outcomes, Central and Eastern Sydney Primary Health Network (CESPHN) invite general practices to apply for the **Primary Care Innovation Grants 2026 - General Practices** to the value of \$15,000 each. Funding will be awarded to up to 20 General Practices.

The grant aims to support general practices in developing innovative approaches and solutions that improve efficiency, effectiveness and coordination of locally based primary health care services.

Funding will be allocated to selected general practices who can demonstrate an innovative service, approach, model, process or product that aligns with one or more of the following focus areas:

- Increasing access and reach to vulnerable population groups
- Preventative health initiatives, with priority areas in immunisation and diabetes management and support
- Improve system integration and business viability

## 2. Information about Central and Eastern Sydney PHN

What are primary health networks?

Primary health networks (PHNs) have been established with the key objectives of increasing the efficiency and effectiveness of medical services for individuals, particularly those at risk of poor health outcomes. They also aim to improve coordination of care to ensure people receive the right care in the right place at the right time. PHNs are not for profit, regionally based organisations which aim to strengthen primary care by redirecting frontline health services to improve health outcomes of the community.

Our vision

Our vision is to achieve healthy and thriving communities and we do this by enabling high quality accessible health care. Our goals are to address community health and wellbeing needs, facilitate connected and quality care and partner to address regional challenges.

Our region, our community

The Central and Eastern Sydney catchment spans 587 square kilometres. Our region stretches from Strathfield to Sutherland, as far east as Bondi, and includes Lord Howe Island. We are the second largest of the 31 primary health networks across Australia by population, with over 1.5 million individuals residing in our region.

Our catchment population is characterised by cultural diversity, with an estimated 16,225 (1.05 per cent of total population) identifying as Aboriginal and/or Torres Strait Islander and forty percent of our community born outside Australia, and high population growth. Our boundaries

align with those of South Eastern Sydney Local Health District and Sydney Local Health District. Refer to this template list of postcodes within the CESPHN catchment area here: [CESPHN Catchment Area By Postcode](#)

For more information about our region visit the 'About CESPHN' page on our website at <https://www.cesphn.org.au/>

## 3. Eligibility

The general practice must meet these criteria:

- Be located within the CESPHN region.
- Are a General Practice in accordance with the definition of a general practice by the [RACGP](#)
- Be connected to LUMOS or willing to connect to the LUMOS program.
- Be registered with Provider Connect Australia (PCA) or willing to connect to PCA.
- Have an active Australian Business Number (ABN) or Australian Company Number (ACN).
- Have and maintain adequate insurance coverage.

Priority will be given to general practices that have not had been awarded an innovation grant previously from CESPHN.

## 4. Program details

### 4.1 Program activities

To successfully complete the Primary Care Innovation Grants 2026 – General Practice program, general practices must demonstrate an innovative idea, service, approach, model, process or product that aligns with one or more of these focus areas:

#### **a. Increase access and reach to vulnerable population groups**

Projects that aim to improve access, equity and outcomes for vulnerable or underserved population groups are strongly encouraged. This may include initiatives designed to better meet the needs of people with priority groups such as people with intellectual disability or people who identify as LGBTQIA+.

Activities may focus on improving accessibility, enhancing culturally safe and inclusive practice, strengthening care coordination, or tailoring service delivery to support improved health and wellbeing outcomes for these groups.

#### **b. Preventive Health Initiatives**

General Practices are invited to propose innovative models that strengthen preventive health care. Priority areas include:

- **Immunisation activities:** increase immunisation uptake in children and older adults, including targeted health promotion campaigns such as shingles vaccination awareness.
- **Diabetes Management and Support:** improving the identification, monitoring, and management of diabetes. This may include initiatives that enhance self-management support, embed care pathways, improve multidisciplinary team-based care and/or strengthen coordination between general practice and community-based

services.

### **c. Improves system integration and business viability**

General Practices are invited to propose innovative models that strengthen system integration and business viability, including:

- Improvements to increase business viability by optimising workflows, reducing administrative burden, and enabling the practice to deliver services more efficiently.
- Expanding structured, team-based models of care and improving service coordination, to strengthen financial sustainability while meeting rising patient demand.
- Implementing digital solutions that streamline service delivery and reduce duplication that improves the practice's capacity to operate sustainably.

## 4.2 Reporting

General Practices will be required to submit a short progress report at 2 months since the implementation of the project via an online form that outlines the following:

- Progress against timeline - Is the contracted activity being delivered in accordance with the agreed timeframes outlined in the contract?
- Risks and issues management - Have any unforeseen challenges, risks, or constraints arisen that may impact delivery of the contracted activity? If yes, please describe the nature of these risks and the mitigation strategies currently in place.
- Stakeholder satisfaction - Are key internal and external stakeholders satisfied with the progress, quality, and direction of the contracted activity to date?
- Support requirements - Does the practice require any additional support, from CESP HN at this time, to ensure successful delivery of the contracted activities? If so, please reach out to CESP HN at [practicesupport@cesphn.com.au](mailto:practicesupport@cesphn.com.au) and let us know what support is needed.

An additional final report is required to be submitted via an online form at the end of the activity that outlines the following:

- Project summary – a brief description of the project, its goals and objectives
- Innovation description – explanation of the innovation, including unique features and benefits
- Development process – outline the development process, methodologies used and any challenges faced.
- Team and roles – information about the team, their roles and contributions
- Risk management – identification of risks and strategies implemented to mitigate them
- Outcomes and impact – identify key achievements, including any measurable impact or success metrics
- Future plans – next steps, any future goals and any planned improvements post this project experience
- Exceptional reporting declaration – a declaration must be signed to declare that all grant funds have been expended strictly in accordance with the terms, conditions, and approved purposes set out in the grant Memorandum of Agreement (MOA). All expenditure has been accurately recorded, is fully auditable, and complies with the financial, operational, and reporting obligations required under the agreement.

## 4.3 Evaluation

Key staff involved in the project will be required to complete a short online evaluation survey on completion of the program. The evaluation will seek feedback on the program and ask participants to reflect on their learnings and experience.

## 4.4 Connection to LUMOS

### What is LUMOS?

Lumos is a new partnership initiative between CESP HN and the NSW Ministry of Health (MoH) to assist practices gain a stronger understanding of their patients' journey across the health system. This is an ethically approved program that securely links data across primary, ambulatory and acute care and has launched in February 2020 within the CESP HN region.

If the general practice is not currently connected to LUMOS, CESP HN will co-ordinate with the practice to be connected to LUMOS. This is a free licence connection for the practice.

Note: if your practice is not already sharing de-identified data with CESP HN via POLAR you will need to complete a Data Sharing Agreement to be connected to POLAR.

## 4.5 Connection to PCA

### What is PCA?

Provider Connect Australia (PCA) have partnered with CESP HN to help transform data accuracy and increase digital health interoperability across the Australian healthcare ecosystem.

PCA is an initiative of the Australian Digital Health Agency to help healthcare provider organisations update their business information in a single source. This improves the accuracy of healthcare service and practitioner information, while reducing duplication and streamlining notifications.

If the general practice is not currently connected to PCA, CESP HN will co-ordinate with the practice to be connected to PCA. It is free for the practice to connect to the PCA service.

## 5. Contract term

Participating general practices will enter into a Memorandum of Agreement (MOA) with CESP HN. The term of the contract is twelve (12) months from the date of the MOA execution.

Please read the draft MOA and familiarise with the terms of conditions.

The MOA will form a legally binding agreement on signing by the parties. The general practice must retain all insurances outlined in the agreement.

## 6. Funding

A total sum of \$15,000 (excluding GST) will be provided as financial support for undertaking the program activities. Entities with more than one general practice within the CESP HN region may submit an application for each eligible practice. A Memorandum of Agreement (MOA) will be signed for each general practice.

Funding will be distributed in two payments with the first payment of \$12,000 made upon executing a Memorandum of Agreement (MOA) and commencement of the program. The balance of grant sum will be paid upon program completion.

## 7. Submitting your application

Please read this EOI guidance and the Memorandum of Agreement prior to applying to participate in the Primary Care Innovation Grants 2026 – General Practice. Applications can be submitted through the CESP HN online application form using the CESP HN online application form:

- [Expression of Interest Application: Primary Care Innovation Grants 2026 - General Practice](#)
- [DRAFT Memorandum of Agreement \(MOA\) – Primary Care Innovation Grants 2026 – General Practice](#)

**Applications will close 29 April 2026.**

## 8. Contact us

All questions related to this EOI are to be directed to [innovationgrants@cesphn.com.au](mailto:innovationgrants@cesphn.com.au)