

Expression of Interest

Medicare Urgent Care Clinic – Randwick LGA

The purpose of this Expression of Interest (EOI) is to seek interest from general practices, community health centres or Aboriginal Community Controlled Health Services (ACCHS) that may be willing and able to operate a Medicare Urgent Care Clinic (UCC).

Closing Date:

Expressions of interest are due to the Central and Eastern Sydney PHN by Wednesday 12 April 2023 by 5pm and should be submitted via email to EOIMedicareUrgentCareClinic@cesphn.com.au

Process:

The purpose of this EOI is to identify interested operators of one Medicare UCC within the Central and Eastern Sydney PHN region. Applications will be assessed by CESP HN through the use of an EOI tender review panel.

Following assessment of applications, the PHN will undertake a commissioning process with a provider to deliver and operate a Medicare Urgent Care Centre in the CESP HN region.

All applications that are able to meet the minimum requirements (as outlined in the *Operational Guidance for Medicare UCCs* – Attachment B) will be considered. Applicants should demonstrate capability and readiness to operate a Medicare UCC.

To be eligible, providers must be located within the Central and Eastern Sydney PHN region and be able to deliver a Medicare Urgent Care Clinic in Randwick LGA.

Contact Details:

For further information please email EOIMedicareUrgentCareClinic@cesphn.com.au

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Overview

Background

The Australian Government announced the commitment to establish 50 Medicare Urgent Care Clinics (UCCs) across Australia in the October 2022-23 Budget. Medicare UCCs will ease pressure on hospitals and give Australian families more options to see a healthcare professional when they have an urgent, but not life-threatening, need for care and are unable to access their usual GP or other care provider.

Medicare UCCs will aim to improve access to urgent care in a non-hospital setting, particularly for vulnerable groups, and reduce the pressure on emergency department (ED) presentations by providing patients with acute, episodic care for urgent conditions that are not immediately life-threatening.

Medicare UCCs will support people to connect to pathways of care within the broader health system, including ensuring referrals back to a patient's regular GP or other care provider to ensure patients receive continuity of care. All referral pathways into and out of the Medicare UCC should be driven by local need and developed in consultation with relevant stakeholders to ensure connectivity to existing community health services, GPs, non-government sector, state and territory funded services, hospital and ambulatory services and other support services.

Expression of Interest

The purpose of this EOI is to seek interest from general practices or Aboriginal Community Controlled Health Services (ACCHS) that may have the capacity and capability to operate a Medicare UCC in line with the requirements outlined below.

Locations

Expressions of interest will be considered from practices interested in operating a Medicare UCC in the following areas:

- Randwick LGA

Funding

The Australian Government has committed \$135 million nationally over four years to commence the establishment of Medicare UCCs.

All eligible patients attending Medicare UCCs are to be bulk-billed under the Medicare Benefits Schedule (MBS), with no out-of-pocket expenses to be charged by the operator for any services provided by the Medicare UCC service.

Providers operating a Medicare UCC will receive:

- an upfront grant depending on the size of the clinic, to cover initial clinic equipment costs.
- yearly operating grants to cover basic staffing (GP, nurse, administrator) sufficient to meet expected demand on the clinic.
- Access to the Medicare Benefits Schedule (MBS) to claim relevant items in the Medicare UCC.

The yearly operating grant covers labour and non-labour costs for the extended operating hours of the Medicare UCCs, 365 days a year. Non labour costs include items such as patient travel, pharmacy, consumables, and depreciation.

Medicare UCC operators will be eligible for an exemption from subsection 19(2) of the *Health Insurance Act 1973*, which prohibits the payment of Medicare benefits where other government funding is provided for that service.

The subsection 19(2) exemption will enable the Medicare UCC provider to receive Commonwealth Government grant funding in addition to MBS payments, provided the clinic meets the eligibility criteria outlined below under *Essential Requirements*.

Attachments

A: Design Principles for Medicare UCCs

B: Operational Guidance for Medicare UCCs

Statement of Requirements

Essential Requirements

Medicare UCC operators will be expected to engage collaboratively with the Commonwealth, the relevant state and territory government, and the relevant PHN throughout the Medicare UCC program including during establishment, operation and evaluation of Medicare UCC services.

Eligibility criteria for a subsection 19(2) exemption

To meet the Commonwealth definition of a Medicare UCC for the purposes of the ss19(2) Direction, the clinic must:

- Adhere to the *Medicare UCC Design Principles* (Attachment A)
- Adhere to the *Medicare UCC Operational Guidance* (Attachment B)
- Adhere to data reporting requirements
- Agree to provide all Medicare UCC services at no charge to patients
- Have an escalation pathway agreed in writing with the nearest public emergency department and ambulance providers, where locally appropriate. PHNs can assist with developing these with the successful provider.

Design principles

The Commonwealth has worked with state and territory governments to develop a set of common design principles to provide clear and consistent requirements for Medicare UCCs throughout Australia. All Medicare UCCs will be required to adhere by the national principles which are intentionally broad enough to allow for flexibility, noting each Medicare UCC will operate differently to respond to the needs of their local communities.

Further information is provided in the attached *Medicare UCC Design Principles* ([Attachment A](#)).

Operational guidance

The Commonwealth and state and territory governments have developed an *Operational Guidance for Urgent Care Clinics* (the Guidance), which will apply to all Medicare UCCs across Australia. The Guidance specifies the minimum standard for activity, infrastructure and staffing of a Medicare UCC, while acknowledging that the specific operating model of clinics will vary across locations and is dependent on local conditions including workforce availability.

Full details are provided in the attached *Operational Guidance for Urgent Care Clinics* ([Attachment B](#)).

Data collection and sharing arrangements

Data collection from Medicare UCCs is essential to monitor implementation, report on impacts to stakeholders and the public, and to inform the evaluation of the Medicare UCC program. Each Medicare UCC will be required to enter into a data sharing agreement with the Australian Government Department of Health and Aged Care ahead of opening and agree to participate in the Medicare UCC program evaluation. These arrangements will not interfere with any existing data sharing arrangements in place at the practice.

De-identified data will be collected on a specified basis from existing patient management systems. Data elements to be collected will include a subset of existing patient fields (e.g., age, gender) and several new fields specific to the Medicare UCC program. If you require further information in relation to data collection, please contact your local PHN.

Medicare UCCs will be required to seek patient consent for the collection and use of data for each patient episode. Insights from data collected will be regularly provided back to Medicare UCCs and to contract managers to guide continuous improvement of the program and better target necessary support for clinics and their staff.

Assessment process

Mandatory Criteria

All applicants must demonstrate as part of their application that they have:

- Professional Indemnity Insurance Certificate of Currency minimum \$10,000,000
- Public Liability Insurance Certificate of Currency minimum \$20,000,000
- Workers Compensation Insurance Certificate of Currency
- Statutory declaration listing Working with Children check information
- Statutory declaration listing Police check information.
- Evidence of Digital Health and Cybersecurity policies
- Copy of RACGP Accreditation
- Suitable Systems and IT Infrastructure

Assessment Criteria

Responses will also be assessed against the following criteria:

1. Value for money

A detailed budget for each of the next 3 financial years commencing 23/24FY should be provided. These annual budgets should include:

- Expected minimum number of clients and total service delivery costs
- Salaries and wages, administration costs, rent and utilities and other overheads
- Set up/non recurring costs

2. Service delivery

In your answer address:

- Scope of conditions/ presentation
- Triage and patient flows, including how 'walk-ins' will be managed alongside regular appointments/ bookings
- Accessibility, particularly to facilitate ambulance access (include your proposed opening hours)
- Patient follow-up and communication with usual primary health care providers
- Referral pathways and integration with other health services
- Proposed use of multidisciplinary team and the model of care to support this
- Facilities, infrastructure and equipment including on-site access to, or the proximity of radiology (including ultrasound and CT), pathology and pharmacy services
- Monitoring activity and reporting, and clinical safety/ governance
- Infection prevention and control
- Organisational experience at providing urgent care services

3. Partnerships and service linkages

In your answer outline your proposed strategy to establish and/or maintain a strong relationship with the Emergency Departments, ancillary services (radiology, pathology and/or pharmacy), local General Practices and other health service organisations to ensure urgent care patients have timely access to health care services. Include any existing relationships that are in place and any formal arrangements.

4. Service Inclusivity

Demonstrate how the proposed service would deliver inclusive services to vulnerable and disadvantaged populations, including but not limited to members of Culturally and Linguistically Diverse (CALD) communities, people that identify as members of the LGBTQIA+ community, or people living with a disability.

5. Workforce

Outline the staffing profile of the proposed service, including expected FTE and their experience delivering similar services. Please indicate if the proposed staffing profile are existing staff or if staff will need to be recruited or sub-contracted.

6. Risks

Identify any major risks in the development and implementation of the service and how these risks will be managed.

Urgent Care Clinics

Expression of Interest Application

The Commonwealth Government's commitment to establish Medicare Urgent Care Clinics (UCCs) will improve access to urgent care in a non-hospital setting and reduce the pressure on emergency department (ED) presentations by providing patients with acute, episodic care for urgent conditions that are not immediately life-threatening.

The Medicare UCCs will:

- Be based in existing general practice clinics, community health centres or ACCHS;
- Operate extended business hours and accept walk-in patients;
- Provide bulk-billed services resulting in no out-of-pocket costs to the patient;
- Be flexible and responsive to the needs of the local community;
- Treat conditions that do not require a hospital admission (i.e., fractures, wounds, minor burns, and other illnesses); and
- Provide high quality, safe and effective care.

The Medicare UCC model builds on the successes and shared learnings from state-based experiences of urgent care services.

Expressing interest in operating an Urgent Care Clinic

The Commonwealth, in partnership with state and territory governments and PHNs, is seeking interest from providers that may be willing and able to become a Medicare UCC. All existing general practices, or ACCHS in the Central and Eastern Sydney region are invited to apply through this EOI application process. The application process, including assessment of applications, will be managed by Central and Eastern Sydney PHN.

Before completing this application form, please ensure you are familiar with the EOI process and specific requirements. The *Operational Guidance for Urgent Care Clinics* (Attachment B), will assist you to assess your capacity to operate a Medicare UCC in Randwick.

Expressions of interest are due to the Central and Eastern Sydney PHN by Wednesday 12 April 2023 by 5pm via email to EOIMedicareUrgentCareClinic@cesphn.com.au

PRACTICE CONTACT DETAILS

Practice name	
Address	
Email	
Phone	
Current operating hours and days	
Practice Manager name	
Principal GP name*	
Are you an accredited practice?	

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

EXPRESSION OF INTEREST

Please provide a one-page summary outlining why you are interested and suitable to deliver a Medicare Urgent Care Clinic. Please enclose your summary at the back of this form.

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PROPOSED URGENT CARE CLINIC

Design Principles

The Commonwealth developed a set of common design principles to provide clear and consistent requirements for Medicare UCCs in Australia ([Attachment A](#)). Please advise if you are able to meet the requirements outlined in the design principles (and provide supporting evidence where possible). Where unable to meet the requirements, please advise what actions would be required to meet the Design Principles by 15 June 2023

	Can meet requirements by 15 June 2023	If no, actions required to meet requirements or indicate when your clinic could commence.
Confirm you are able to meet the requirements outlined in the design principles	Yes / No	

PROPOSED URGENT CARE CLINIC

Operational Guidance

For each of the following 10 parts of the *Operational Guidance for Urgent Care Clinics (Attachment B)*, please advise whether you will be able to meet the requirements for the Guidance in order to commence operations by 15 June 2023. Please provide supporting evidence where possible. Where unable to meet the requirements, please advise what actions would be required to meet any parts of the Guidance you are unable to meet by 29 May 2023.

Part of Guidance	Can meet requirements by 15 June 2023	If no, actions required to meet requirements
Scope of conditions	Yes / No	
Triage and patient direction	Yes / No	
Accessibility	Yes / No	
Patient follow up and communication with usual GP	Yes / No	
Follow up diagnostic tests and referrals	Yes / No	
Referral pathways and integration with health services	Yes / No	
Staffing	Yes / No	
Monitoring activity and clinical safety	Yes / No	
Facilities, infrastructure and equipment	Yes / No	
Infection prevention and control	Yes / No	

IF SUCCESSFUL IN BECOMING A MEDICARE UCC

Are you willing to bulk-bill all Medicare UCC patients?	Yes	No
Are you willing to accept walk-in patients?	Yes	No
Are you willing to accept referrals from Healthdirect?	Yes	No
Are you willing to extend your opening hours to support operations of the Medicare UCC?	Yes	No
Are you willing to enter the Medicare UCC into a data-sharing agreement with the Department of Health and Aged Care?	Yes	No
Are you willing to extend your workforce to support operations of the Medicare UCC?	Yes	No

If yes, please elaborate on how you intend to do this.

What is your proposed timeline for operationalising the Medicare UCC?

Please elaborate.

FACILITIES		
Do you have a pharmacy on-site or in close proximity, including during the hours of Medicare UCC operation?	Yes	No
Please provide further information.		
Do you have access to X-ray, CT and ultrasound imaging on-site or in close proximity, including during the hours of Medicare UCC operation?	Yes	No
Please provide further information.		
Do you have pathology collection services on-site or in close proximity, including during the hours of Medicare UCC operation?	Yes	No
Please provide further information.		
Do you have multiple treatment rooms?	Yes	No
Please provide further information.		
Do you have the capacity to separate out your main waiting room from the Medicare UCC waiting room?	Yes	No
Do you have the capacity to have a separate entrance for Medicare UCC patients?	Yes	No
Do you have the ability to facilitate ambulance gurney access and ambulance parking?	Yes	No
Are you undertaking telehealth video conferencing consultations?	Yes	No
Do you provide e-prescriptions?	Yes	No
Do you store medicines/drugs on site?	Yes	No

DISADVANTAGED POPULATIONS

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

Yes

No

If yes, please elaborate on how you do this.

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

Yes

No

If yes, please elaborate on how you do this.

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

Yes

No

If yes, please elaborate on how you do this.

Do you have the ability to identify and address the needs of people with a disability?

Yes

No

If yes, please elaborate on how you do this.

Are you willing to undertake additional training to ensure clinical and non-clinical staff are appropriately skilled to meet the needs of Aboriginal and Torres Strait Islander, CALD, and people with a disability?

Yes

No

If yes, please elaborate on how you do this.

SYSTEMS AND IT INFRASTRUCTURE

Which clinical management information system do you use in your practice?			
Best Practice	Medical Director	ZedMed	Other
Version:	Version:	Version:	Please Specify:
Do you have an online booking system?		Yes	No
		If yes, please specify	
Are you listed in the National Health Services Directory (NHSD)?		Yes	No
Do you use Shared Care Planning Tools		Yes	No
		If yes please specify	
Do you have a mechanism to share information with a patient's usual GP?		Yes	No
		If yes please specify	
Further information on how your practice uses the systems listed above or any other IT systems (optional)			