# Embedding eye health preventative care - quality improvement project for general practice

North Western Melbourne Primary Health Network is seeking to recruit 10 general practices to help improve patient eye health through increasing engagement with local optometrists and ophthalmologists.

$7,000 (exc GST) is available for each participating practice.

Expressions of interest close on Tuesday, 20 December 2022 at 3pm

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## PART A: The Activity

### Background

Many eye conditions are preventable if detected or treated early. Regular eye examinations are an effective measure for identifying common problems.

The COVID-19 pandemic caused optometry closures, leading people to defer eye health checks, resulting in an increase in preventable problems. The pandemic also disproportionately impacted vulnerable patients with, or at risk of, chronic conditions.

Primary health networks across Victoria are recruiting general practices to participate in a quality improvement (QI) program to boost the eye health of their populations. Using a whole-of-practice approach, participants will focus on increasing engagement with local optometrists and ophthalmologists.

NWMPHN is providing grant funding for 10 general practices in its catchment area.

Funding of $7,000 (exc GST) will be available to accredited practices that complete all aspects of the QI program, including reporting and evaluation.

Target groups for eye-health screening are patients with any of these risk factors:

* diabetes
* smoking
* hypertension
* Aboriginal and Torres Strait Islander heritage
* aged at least 40
* culturally and linguistically diverse (CALD) background

### Activity purpose and term

The project will run from February to December 2023. Participants will be supported by a NWMPHN program officer.

The project will provide a comprehensive approach to eye health prevention, including education and general practice support. Assistance will be provided to identify at-risk patients. There will be an emphasis on embedding referral pathways to strengthen clinical relationships with eye health professionals.

The project aims to:

* strengthen capacity to embed eye health preventative care into primary care
* strengthen general practice capability to use their database audit tools to identify patients at risk, or with, diabetes
* strengthen general practice capability to identify and refer eligible patients to an optometrist or ophthalmologist
* strengthen relationships and clinical feedback loop following such referrals
* embed quality improvement activities to drive sustainable systems changes to provide ongoing early eye health checks

Practices will be contracted to participate. The contract term will be for 11 months and will include at least 10 months of QI activities and evaluation. The agreed dates for participation will be noted in the [Short Form Services Agreement Template](https://app.prompt.org.au/download/186337?code=e72902a2-2e06-4a6f-af68-f6113cac183b).

### What’s required

General practices will be supported to:

1. Complete online clinical education and training modules, requiring approximately 2 hours for GPs and one hour for Practice Nurses.
2. Ensure participating GPs, Practice Nurses and Practice Managers complete Plan, Do, Study, Act (PDSA) cycles and activities, agreed with NWMPHN in advance.
3. Provide protected time in which to undertake activities.
4. Share lessons, skills and knowledge developed within the project with the broader clinical and practice team.
5. Submit data and provide feedback and evaluation throughout for further improvement of the pilot and referral pathways.

### Data sharing

To facilitate the impact of these quality improvement activities, participating practices will be required to share de-identified data with an evaluator to be engaged by the Victorian Department of Health.

As part of the submitting of this EOI and signing the agreement you acknowledge and agree that the use of the de-identified health information at that point is not subject to the protections available to individuals contained in relevant privacy laws.

Here are the indicative key program deliverables:

|  |  |  |  |
| --- | --- | --- | --- |
| **No.** | **Phase** | **Description** | **Indicative delivery date** |
|  | Induction | 1. Induction meeting February 2023. 2. Collect baseline data and complete pre-pilot survey | February – 15 March 2023 |
|  | Training and education | 1. GPs and PNs involved in the project to complete online training in eye health relevant to each staff member’s profession. Training is provided free by Vision 2020 Australia. | 28 April 2023 |
|  | Quality Improvement | 1. Develop and complete 4 PDSA cycle QI activities to embed practices and systems to ensure at-risk patients are identified, screened, and referred for eye health assessment. 2. Collect and submit QI and referral data at end of each month. 3. Attend QI support meetings with NWMPHN program officer, monthly, or as required. | March – October 2023 |
|  | Program completion and evaluation | 1. Complete post-program survey and evaluation meeting. | November 2023 |

**Schedule of payments**

|  |  |  |  |
| --- | --- | --- | --- |
| **No.** | **Indicative description** | **Amount** | **Indicative date** |
|  | Completion of induction phase, including pre-pilot survey, collection of baseline data and development of a quality improvement plan.  Completion of relevant practice staff training in eye health. | $3,000 | 28 April 2023 |
|  | Completion of quality and system improvement activities, and collection and submission of monthly data from March to October 2023 | $3,000 | 31 October 2023 |
|  | Completion of post-pilot survey and identification of case studies for evaluation | $1,000 | 30 November 2023 |
|  | **Total** | **$7,000 exc GST** |  |

1. Eligibility requirements

To be eligible, general practices must:

* be RACGP accredited
* have clinical audit tool Pen CAT installed, or agree to have it installed, before starting the program
* have a nominated project team comprising at least 3 staff, including a GP, Practice Nurse and Practice Manager to implement the project and QI activities
* complete online training and education relevant to each staff member’s profession
* acknowledge that NWMPHN will share de-identified practice and patient level aggregated data with an evaluator (to be engaged by the Victorian Department of Health) for the purposes of evaluation of the project.

1. Draft contract

Please see this [Short Form Services Agreement Template](https://app.prompt.org.au/download/186337?code=e72902a2-2e06-4a6f-af68-f6113cac183b) as an example of a draft contract.

## PART B: How to Apply

### Application submission

Applicants must complete and return the Application Form (Part D) and email it with supporting documentation to the NWMPHN Primary Care Team, [primarycare@nwmphn.org.au](mailto:primarycare@nwmphn.org.au). Applications close at 3pm (AEDT) on Tuesday 20 December 2022.

Please direct all queries to [primarycare@nwmphn.org.au](mailto:primarycare@nwmphn.org.au).

NWMPHN is not obliged to accept any proposal received after the submission deadline. Where an applicant provides evidence of exceptional circumstances affecting on-time submission, NWMPHN may decide to accept an application received after the submission deadline but is not obliged to do so.

### Assessment process

All compliant applications received by NWMPHN will be evaluated in accordance with the assessment criteria in Part D.

NWMPHN may also consider other factors relevant to the applicant’s suitability, including conflicts of interest, financial viability, current insurance and any other information that is publicly available.

NWMPHN will contact referees (if sought) and use their responses for the evaluation.

NWMPHN may contact the applicant if it considers that an application contains an ambiguity, unintentional error or minor omission which requires clarification. It will not do so where this would unfairly disadvantage other applicants.

NWMPHN may conduct interviews with some or all applicants to assist in making a final decision. Interviews are an opportunity to ask questions to better understand a submission, not an opportunity to make changes or submit new material.

Applicants must clearly specify and justify all proposed departures from the draft contract in their EOI response, using the form provided in Attachment 3. Applicants will be disqualified if departures are not submitted with the EOI application but are sought at later stages of the process. NWMPHN is not obligated to accept proposed draft contract departures at any stage.

Applicants will be notified of the outcome of their submission. Unsuccessful applicants may apply for written or verbal feedback at [primarycare@nwmphn.org.au](mailto:primarycare@nwmphn.org.au).

This table summarises the key stages and indicative dates related to the EOI for *embedding eye health preventative care - quality improvement project for general practice*

|  |  |
| --- | --- |
| **EOI Key Stages** | **\*Estimated Date** |
| Release to the market | 5 December 2022 |
| Application closing date | 20 December 2022 |
| Evaluation & shortlist applicants | by 22 December 2022 |
| Notification of successful and unsuccessful applications | by 30 January 2023 |

*\*These dates are indicative only and subject to change without notice at NWMPHN’s discretion to meet the necessary process requirements.*

### Contractual arrangements

NWMPHN receives funding from the Australian Government, the Victorian Government, and other government and non-government sources. Each funding source may have particular requirements regarding consultancies and sub-contractors. Successful applicants must comply with these.

A successful applicant will be expected to:

* enter into an agreement in a form specified by NWMPHN
* sign a confidentiality and non-disclosure agreement
* provide due diligence information such as a statement of solvency
* provide certificates of currency for relevant insurances:
  + Workcover or similar
  + Public liability to $20 million any one claim
  + Professional indemnity to $10 million any one claim
* undertake a financial audit for services exceeding $100,000.00 in the aggregate per financial year
* consider itself a “Commonwealth service provider” for the purposes of the [*Ombudsman Act 1976*](https://www.legislation.gov.au/Series/C2004A01611)
* ensure that personnel, including sub-contractors, who may come into contact with vulnerable people as part of the work, have undertaken a national police check, a Working with Children check and if relevant have developed a risk assessment and management plan
* comply with relevant legislation as specified from time to time
* comply with NWMPHN credentialing policy requirements

Applicants must disclose any actual, perceived or potential conflicts of interest. A conflict of interest arises where a person makes a decision or exercises power in any way that may, or may be perceived to be, influence by either professional, commercial or personal interests or associations. NWMPHN maintains a *Register of Conflicts of Interest and Related Entities* and reports its contents back to our funding bodies as required.

NWMPHN may seek formal government approval and will disclose contract details including legal and trading name of successful applicant, the nature and duration of the work to be undertaken, and the procurement process. Approval is granted at the discretion of the government department. Relevant departments may require additional information at any time which NWMPHN is obliged to provide. Relevant departments may list this information on their websites from time-to-time.

Please note that the Australian or Victorian Government reserves the right to terminate NWMPHN funding at its convenience. This requirement is passed through to the successful Applicant. Expenses incurred and committed up to and including the termination date will be paid.

### No contract or warranty

No legal relationship is created by the issue of this Expression of Interest, or the submission of any application in response to it.

NWMPHN is under no obligation to award a contract to any applicant as a result of this process.

NWMPHN has taken reasonable steps to ensure that all information presented in this Expression of Interest is accurate at the time of issue. However, NWMPHN accepts no responsibility for errors or omissions and recommends that Applicants make their own enquiries about any matter relevant to the preparation of an application.

## PART C: About North Western Melbourne Primary Health Network

Melbourne Primary Care Network (MPCN) trading as North Western Melbourne Primary Health Network (NWMPHN) is an independent, locally governed and run, not for profit organisation dedicated to improving primary healthcare in local communities. NWMPHN is one of 31 Primary Health Networks (PHNs) across Australia, in operation since 1 July 2015.

PHNs were established with the key objectives of increasing the efficiency and effectiveness of medical services for patients, particularly those at risk of poor health outcomes, and improving coordination of care to ensure patients receive the right care in the right place, at the right time.

PHNs work with the primary health care sector to improve frontline services and collaborate with local hospital networks to ensure better integration between primary and acute care services.

NWMPHN is the largest PHN in Victoria. Its region covers approximately 3,200 square kilometres across the Melbourne CBD, northern and western suburbs and adjacent rural areas, encompassing 13 Local Government Areas.

NWMPHN works to improve health outcomes for communities by fostering innovation, leveraging and coordinating existing community and organisational assets, and driving value for money.

NWMPHN has four key strategic objectives:

* **To transform primary health care** by supporting the delivery of high-quality, integrated and person-centred services in its region.
* **To undertake strategic, evidence-based and targeted commissioning** that improves health outcomes and demonstrates value for priority populations through the delivery of high quality, equitable and accessible care.
* **To activate community and partnerships** by contributing to the development of an interconnected health care system in its region through community and stakeholder engagement, research activities and partnerships.
* **To strive for excellence** in our culture and organisational capability to deliver impact.

## PART D: Application Form

|  |  |  |  |
| --- | --- | --- | --- |
| **Applicant name:** | | | |
| **Name of practice:** | | | |
| **ABN/ACN:** | | | |
| **Address:** | | | |
| **Applicant details:** | **Phone:** | **Email:** | |
| **Practice manager details:** | **Phone:** | **Email:** | |
| **Practice principal details:** | **Phone:** | **Email:** | |
| **ELGIBILITY QUESTIONS**  **Please check the boxes to confirm compliance** | | | |
| Mandatory criteria:  I, the applicant, confirm that:  the practice is accredited under the RACGP standards for general practice  the practice has Pen CAT installed or is willing to have Pen CAT installed prior to project commencement  I agree to provide protected time for project activities to be undertaken  I agree to have nominated staff (including at least one GP, Practice and Nurse) complete all online training and education modules  I agree to have nominated staff (including at least one GP, Practice Nurse and Practice Manager) complete a minimum of 4 PDSA cycles in practice  I agree to complete required surveys and submit de-identified Pen CAT data for reporting and sharing with the project evaluators  I agree that the practice will participate in the external evaluation of the program  I agree that as part of the submitting of this EOI and signing the agreement I acknowledge that the use of the aggregated de-identified health information for program evaluation at that point is no longer health information for the purposes of the protections available to individuals pursuant to relevant privacy laws. | | |
| List a minimum of 1 Optometrist and 1 Ophthalmologist that your practice regularly refers to or has an existing referral relationship with:   |  |  |  | | --- | --- | --- | | Optometrists or Ophthalmologists | Eye Health Professional practice name: | Eye Health Professional practice phone number: | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | | | | |
|  | | |
| Eligibility criteria  Where word limits are noted, applicants should not exceed them. Additional words will not be considered for evaluation. Applicants are not obliged to reach the word limit. | | **WEIGHTING** | |
| 1. **Please list the names of staff who will be participating in the program. Include at least one GP, one Practice Nurse and one Practice Manager.** | | 10% | |
| 1. **Please provide a brief outline of how you will ensure all members of the project team will have protected time to undertake activities and how the practice will support the team to complete these. (200 words)**   **Applicant response:** | | 25% | |
| 1. **By participating in this project what do you think the outcomes will be for these aspects?**  * **Improving patient health by increasing eye health screening** * **Enhancing patient experience of primary care** * **Improving clinician experience, knowledge and skills in relation to eye health prevention** * **Reducing the long-term cost of health care for the system and patients by increasing eye health screening**   **(400 words)**  **Applicant response:** | | 40% | |
| 1. **Describe your current model of care for patients with or at risk of eye health conditions. In particular:**  * **How do you identify who requires eye health screening?** * **What is your current referral process to eye health care providers such as optometrists and ophthalmologists?**   **(300 words)**  **Applicant response:** | | 25% | |
| **ADDITIONAL QUESTIONS** | | **NON-WEIGHTED** | |
| **Has your practice previously been involved with quality improvement projects? If so, give details. What sustainable improvements were made to your practice systems, processes, or patient outcomes? (300 words)**  **Applicant response:** | | - | |
| **Please provide any additional information to support your application.**  **Applicant response:** | | | |

We acknowledge the peoples of the Kulin nation as the Traditional Custodians of the land on which our work in the community takes place. We pay our respects to their Elders past and present.

