



EXPRESSION OF INTEREST

Supporting Chronic Pain and Smoking Management in General Practice through Shared Medical Appointment Grants (SMA grant)

Due: 5.00pm AEST, 14 April 2024

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1. Introduction

COORDINARE is approaching General Practices to participate in the implementation of Shared Medical Appointments (SMA's) within their practices. There are two pre-existing programmed Shared Medical Appointments available; *Chronic Pain Self-Management (CPSM)* and *Smoking Management*. The aim of implementing these programs into general practice is to contribute to better health outcomes for people living with chronic pain or for people who smoke in the South Eastern NSW (SENSW) region, through innovative approaches to chronic disease management

Applicants must be willing to identify and recruit patients to participate in a *Chronic Pain Self-Management* SMA program or *Smoking Management* SMA program, provide input and feedback on the program resources utilised during these sessions and provide recommendations for future delivery of the programs.

There is funding of up to \$15,000 ex GST per practice available for 12 months from contract commencement.

2. COORDINARE – South Eastern NSW PHN

COORDINARE – (South Eastern NSW PHN) is one of 31 Primary Health Networks (PHNs) established throughout Australia with the key objectives of improving the efficiency and effectiveness of health 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.

COORDINARE works directly with general practitioners, other primary health care providers, secondary care providers and hospitals to bring about improved outcomes for patients. Our focus is on local health needs as well as national health priorities and funded programs, particularly in the areas of chronic disease (and potentially preventable hospitalisations), mental health, Alcohol and Other Drugs, Aboriginal health, after-hours services, and healthy ageing.

Commissioning is central to COORDINARE's ability to achieve these objectives and address local and national priorities. As a commissioning organisation, COORDINARE is involved in a continual cycle of developing and implementing health services and related initiatives based on planning, procurement, review and evaluation cycles involving providers, communities and consumers. More information about SE NSW PHN can be found on our [website](#).

3. Expression of Interest

Background

The South Eastern NSW PHN catchment has higher than NSW state and Australian national figures for the prevalence of several risk factors for chronic conditions. Subsequently, COORDINARE is invested in supporting general practice to implement programs that contribute to lowering the burden of chronic disease within the SENSW catchment.

There are currently two Shared Medical Appointment programs available for implementation that target two areas of chronic disease – chronic pain and smoking. Chronic pain is pain that lasts beyond the normal healing time after injury or illness. Chronic pain can affect a person's use of healthcare, ability to work, exercise and socialise¹. People with chronic pain are also more likely to experience mental health conditions, including depression, anxiety, sleep disturbances and fatigue. In Southern NSW, 30% of the adult population is estimated to experience chronic pain – with the federal electorate of Gilmore having the second highest prevalence rate for chronic pain in Australia in 2018 and expected to be the highest by 2050.

Smoking is a significant risk factor for chronic disease and causes harm to almost every organ in the body, increasing the risk for cardiovascular disease and cardiovascular events, diabetes mellitus, cancer, and early mortality². In the SENSW catchment, the prevalence of 'current smoking' as a behavioural risk factor is higher than the NSW state average. Additionally, there is a low level of confidence in healthy lifestyle habits, particularly avoiding smoking and engaging in regular exercise, in some areas of the catchment.

¹ [AIHW Chronic pain in Australia 2020](#)

² [Tobacco in Australia – Health Effects](#)

Shared Medical Appointments (SMAs)

SMAs (or group consultations) are *individual clinical consultations* delivered in a supportive peer group setting. This type of consultation works for people with a similar condition or set of clinical problems. There are numerous advantages of SMAs for both patients and clinicians including³:

For patients

- Improved access to care
- Extra time with health practitioner
- More relaxed approach to care
- Multidisciplinary care from a range of providers
- Greater insight into their conditions (from the experiences of other participants)
- Increased education
- Peer support and learning from others

For clinicians

- Less need for repetition of lifestyle advice
- Better uptake of advice when agreed to by peers
- Opportunity to better educate patients
- Relaxed atmosphere and ability to focus on patients (if documenter or facilitator is completing notes)
- Better manage patient wait times.
- Variation in work routine (instead of individual visits)

The *Chronic Pain Self-Management* and *Managing Smoking* SMA programs are a series of 7- and 5-week, respectively, **Shared Medical Appointments** (SMAs) in a 'programmed' format. The programs are designed to help people with chronic pain to live happier healthier lives with less pain, or to help people manage and/or quit smoking. Sessions normally run for 90 minutes (approximately) with a 20-30 minute education session followed by sequential GP consultations with each patient in the group (ideally 8-10 participants). Please note, the Shared Medical Appointments have already been developed, and so practices are not required to contribute to the design or establishment of program content, this grant is focused on implementation only. For more information on SMAs visit the Australasian Society of Lifestyle Medicine [website](#).

The SMA programs are designed to be delivered face to face, online via Zoom, or alternate suitable platforms. The program can also be delivered in a hybrid format, with some of the group meeting face to face and some online at the same time. The delivery of the *Chronic Pain Self Management* and *Smoking Management* SMA programs in general practice will be supported through access to several resources, including:

- Training programs
 - Generic SMA training
 - Chronic pain self-management facilitator training course
 - Smoking management facilitator training course
- Education videos to guide each of the sessions
- Chronic pain self-management facilitator guide
- Smoking management facilitator guide
- Chronic pain self-management participant handbook
- Smoking management participant handbook
- Online platform for access to resources and training (for both participants and facilitator).

Funding purpose

COORDINARE is proposing to commission general practices to embed SMA programs into their practice workflow. Lessons learned through embedding the SMA programs will be used to develop practice workflows

³ Australians Society of Lifestyle Medicine – SMA training program

and recommendations which will inform and may support a broader rollout of the program into primary care across the SE NSW PHN catchment.

Eligibility

General Practices in the SENSW catchment who have an interest in chronic pain management or smoking management are welcome to apply for this project. Practices must have the capacity to interrogate their data to identify eligible patients and be willing to prioritise and implement project activities over a 12-month project period until July 2025.

If your practice has previously SUCCESSFULLY applied for a SMA grant you will **not be eligible** to apply for this opportunity. If a previous application was unsuccessful, your practice is **eligible** to make a new application.

Scope and specifications

Expressions of interest should focus on describing key elements including:

- Capacity to implement the programmed Shared Medical Appointments into practice workflows, including establishing roles and responsibilities for program delivery
- Appropriate systems to identify patient cohorts suitable to participate in the program
- How staff will be supported to complete relevant training (generic SMA training and specific module facilitator training), if not already completed
- Capacity to support staff training in new workflow processes and upskill in chronic pain and/or smoking management as deemed appropriate
- Cultural safety and responsiveness.

The above list is indicative and is not intended to be exhaustive.

If the submission is successful, practices will have the opportunity to develop their workflow model(s) with relevant COORDINARE staff. Successful practices will be contracted to:

- Facilitate staff participation in training on Share Medical appointments (generic SMA training – access to training provided by COORDINARE)
- Facilitate staff participation in training on *Chronic Pain Self Management* and/or *Smoking Management* SMAs, depending on which program/s the practice chooses to run
- Deliver a minimum of 2 (two) SMA programs (minimum 5 – 7 weeks each)
- Submit a project plan and budget
- Participate in program level staff survey developed by COORDINARE
- Collect patient feedback on the *Chronic Pain Self-Management SMA program*
- Provide regular reporting including a short final report on templates provided by COORDINARE
- Participate in a collaborative forum with all participating practices following program completion to share learnings
- Develop and document workflows and recommendations for embedding the SMA program into practice.

The above list is indicative and is not intended to be exhaustive.

Activities not considered in scope

The following activities are **ineligible** for funding under this project:

- Activities already undertaken or expenses already incurred
- Depreciation of expenses
- Research costs
- Conference attendances
- Board fees

- Items of capital greater than \$5000

The above list is indicative and is not intended to be exhaustive.

Performance indicators

Practices will be required to comply with program data reporting. Reporting templates will be provided by COORDINARE (Appendix 1). Practices will have the option to collect their own additional indicators.

Program output and output indicators

- Number of staff trained in general Shared Medical Appointment facilitation
- Number of staff completing Chronic Pain Self-Management and Smoking Management facilitator training
- Number of SMA programs completed
- Number of patients attending SMA programs
- Establishment of new general practice workflow models incorporating SMAs
- Staff confidence/satisfaction with SMA program resources and new workflows
- Patient satisfaction with SMA programs and resources
- Staff participation in evaluation interviews including recommendations for broader roll out across the region.

4. Timeline

An indicative timeline is outlined below. COORDINARE reserves the right to modify these timeframes. Any changes to this EOI will be notified via email.

Expression of Interest released	22 March 2024
Questions close from respondent to COORDINARE (Please also refer to the available Appendix 4- Frequently Ask Questions)	31 March 2024
Deadline for COORDINARE to respond to questions	05 April 2024
Last day for proposal to be received – late applications will not be accepted	5.00 pm 14 April 2024
Evaluation of proposal	April/May 2024
Clarification/negotiation with the provider	April/May 2024
Contracts awarded	April/May 2024
Contracts commence	From May 2024

Please note that any questions, answers, and points of clarification will be shared with all other providers participating in the EOI (your practice will be deidentified). An updated and de-identified version for 'Frequently Asked Questions' will be made public on our website at [Shared Medical Appointment – Funding Opportunities](#) on **05 April 2024**.

5. How to apply?

Please complete the following:

- EOI application form (via Microsoft Word document)
- All compliance documents required in the Application Form
- Budget

Email completed documents to commissioning@coordinare.org.au by **5:00pm AEDT 14 April 2024**.

6. How to contact us

Questions can be submitted to commissioning@coordinare.org.au by **6:00pm (AEDT) on 31 March 2024**. All questions and answers will be emailed to practices by **5:00pm (AEDT) on 05 April 2024** or will be available

via the 'Frequently Asked Questions' on our website at [Shared Medical Appointment – Funding Opportunities](#).

7. Funding

This is a one-off grant of approximately \$15,000 per practice over a 12-month period. The grant can be used to cover staff time to participate in project activities. Please provide an indicative budget using the budget template provided (Appendix 3).

8. Contract arrangements

Practices will be required to enter into a contract with COORDINARE. The term of the contract awarded will be 12 months from the date of execution. It is a requirement to provide progress updates on agreed milestones. The format and framework for progress updates may take account of the size, costs, complexity and relative risks of the project being undertaken.

9. Evaluation of submission

An evaluation panel will consider the submission against the scope and specifications as well as the assessment criteria outlined below.

If additional information to that requested in this document is required by COORDINARE when proposals are being considered, written information and/or interviews may be requested to obtain such information at no cost to COORDINARE.

10. Assessment criteria

Note: The evaluation panel may include both internal and external members and no assumption should be made about familiarisation with your practice demographic, capability, or suitability. Kindly provide as many details as necessary to assist the panel in their assessment of your application.

Required Response	Weighting
1. Workflow model (700 words max)	35%
<i>Provide a brief description of your proposed workflow model including the following key components:</i> <ul style="list-style-type: none">• How you will incorporate SMAs into your current workflow.• Suitable location identified to run group sessions.• Practice improvement opportunities identified.• Capacity to support staff training in SMAs and new workflow processes.• Previous experience implementing practice change initiatives.	
2. Identify patient cohorts (500 words max)	25%
<i>Provide a brief outline of your systems to identify patient cohorts in line with eligibility criteria noted in the scope and specifications including:</i> <ul style="list-style-type: none">• How you will identify and engage patients suitable for the <i>Chronic Pain Self-Management</i> and/or <i>Smoking Management</i> SMA program/s .• Estimated number of patients in the practice who would be suitable for the <i>Chronic Pain Self-Management</i> SMA program or <i>Smoking Management</i> SMA program.	
3. Roles and responsibilities (500 words max)	25%

<p><i>Provide an overview of the proposed roles and responsibilities for the initiative, including:</i></p> <ul style="list-style-type: none"> • Details of which staff will be responsible (i.e. GP/s responsible for SMA consultations, staff responsible for group facilitation, other staff involved). • Details of existing clinical governance and incident management arrangements including relevant policies and procedures. 	
4. Aboriginal cultural safety (500 words max)	15%
<p><i>Provide a brief outline of:</i></p> <ul style="list-style-type: none"> • What steps you are taking to ensure your practice is safe and appropriate for Aboriginal and Torres Strait Islander people. 	

11. Additional requirements

1. Estimation of cost	Compliance
<p>The total funding available per practice is up to \$15,000 ex GST for 12 months.</p> <p>Provide an indicative budget for a 12-month period on the budget template provided (Appendix 3). Ensure the budget supports the roles and responsibilities described.</p>	
2. Provide copies of your accreditation certificate(s)	Compliance
3. Provide copies of required insurances	Compliance
<p>Include:</p> <ul style="list-style-type: none"> • Public liability insurance \$10 million per claim and in the aggregate of all claims • Professional indemnity insurance \$5 million per claim and in the aggregate of all claims • Copy of your workers compensation insurance policy • Cyber Security insurance – at least \$1 million in all aggregate (optional) 	
4. Professional referees	Compliance
<p>Include two (2) professional referees (from different organisations) for new funding recipients.</p> <p>Practices who have previously received funding are not required to provide a referee.</p>	

COORDINARE reserves the right to work with practices to clarify and finetune the proposal, and in some cases request a revised proposal, before a contract is awarded.

12. Conditions of this Expression of Interest

General	Practices should familiarise themselves with this document and the separate application form and ensure that their proposals comply with the requirements set out in these documents. Respondents are deemed to have examined statutory requirements and satisfied themselves that they are not participating in any anti-competitive, collusive, deceptive, or misleading practices in structuring and submitting the proposal.
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Acceptance	A non-complying submission may be rejected. COORDINARE may not accept any proposal.
Explanations	Verbal explanations or instructions given prior to acceptance of a proposal shall not bind COORDINARE.
Assessment	COORDINARE reserves the right to engage a third party to carry out assessments of a Respondent's financial, technical, planning, and other resource capability.
Legal entity	COORDINARE will only enter into a contract with an organisation or individual with established legal status (e.g. under Corporations Law, Health Services Act, Trustee Act), or a natural person at least 18 years of age with mental capacity to understand the agreement.
ABN/Taxation requirements	COORDINARE will only deal with Respondents who have an Australian Business Number (ABN).
Expenses	All expenses and costs incurred by the practice in connection with this EOI including (without limitation) preparing and lodging a submission, providing COORDINARE with further information, attending interviews and participating in any subsequent negotiations, are the sole responsibility of the practice.
Additional information	If additional information to that requested in this document is required by COORDINARE when proposals are being considered, written information and/or interviews may be requested to obtain such information at no cost to COORDINARE. COORDINARE may also provide additional information or clarification.
Process	COORDINARE reserves the right to withdraw from, or alter, the EOI process described in this document for whatever reason, prior to the signing of any agreement/contract with any party.
Negotiation	COORDINARE reserves the right to negotiate with each practice after the EOI closing time and allow any them to alter their submission. Contract negotiations are strictly confidential and not to be disclosed to third parties.
Part applications	COORDINARE reserves the right to accept applications in relation to some and not all of the scope of activity described
Conflicts of interest	Practices must declare to COORDINARE any matter or issue which is or may be perceived to be or may lead to a conflict of interest regarding their submission or participation in the EOI process, or in the event their proposal is successful.
Ownership	All submissions become the property of COORDINARE once lodged. COORDINARE may copy, or otherwise deal with all or any part of a submission for the purpose of conducting evaluation of submissions.
Notification of Probity Breach	Should any supplier feel that it has been unfairly excluded from responding or unfairly disadvantaged by the process, the supplier is invited to write to the Director of Commissioning at commissioning@coordinate.org.au
Lobbying	Any attempt by any Respondent to exert influence on the outcome of the assessment process by lobbying COORDINARE staff, directly or indirectly, will be grounds for disqualification of the proposal from further consideration.
No contract	Nothing in this EOI should be construed to give rise to any contractual obligations or rights, express or implied, by the issue of this EOI or the lodgement of submission in response to it. No contract will be created unless and until a formal written contract is executed between COORDINARE and a Respondent. Respondents will not be considered approved until a final service agreement is in place.

13. Issues or Complaints

The Respondent may, in good faith, raise any issue or complaint about the EOI or EOI process, at any time. Contact details are commissioning@coordinate.org.au or phone 1300 069 002.