



Virtual Care in Residential Aged Care – Innovation Grants Industry Briefing and Q&A

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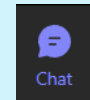
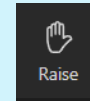
COORDINARE – South Eastern NSW Primary Health Network

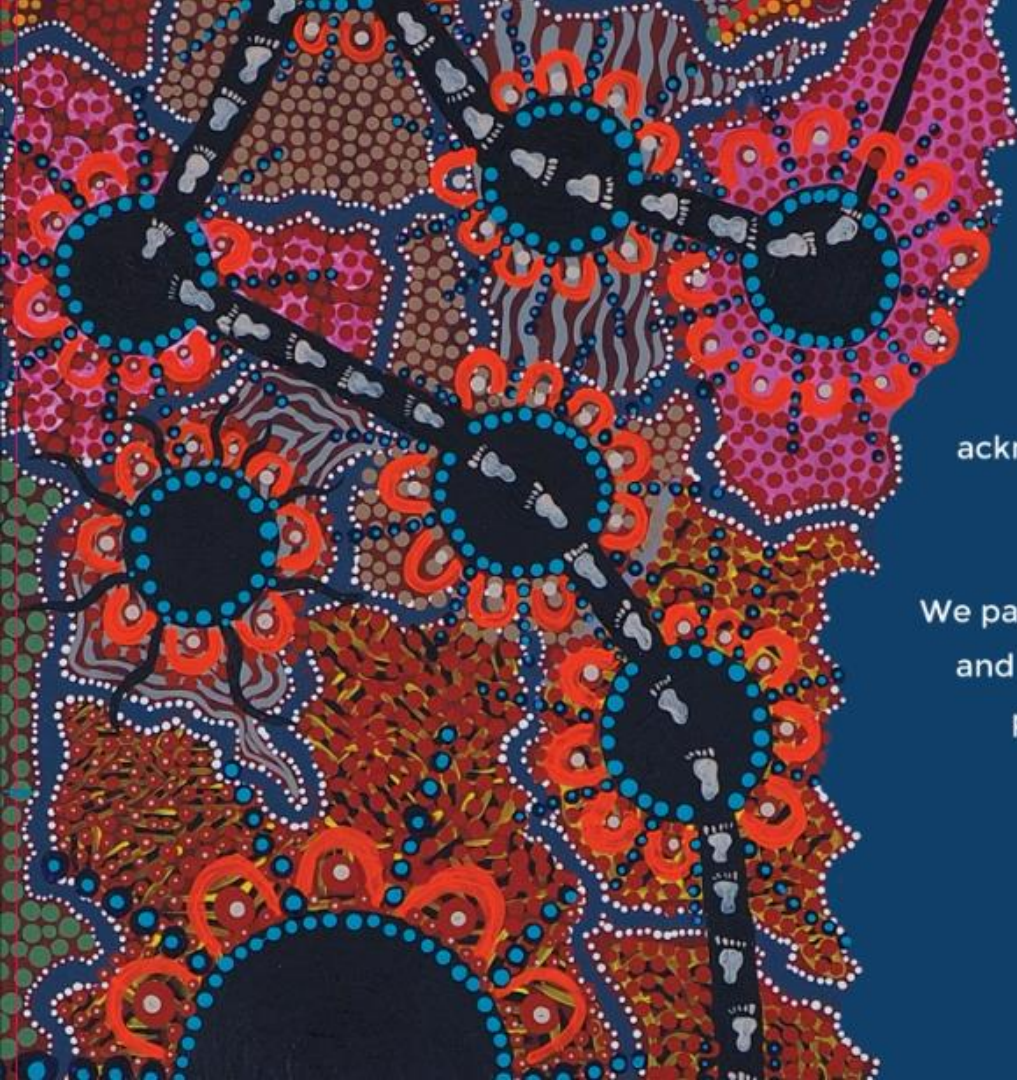
Thursday, January 30, 2025

Housekeeping



- Questions – There will be time at the end for questions, however, please feel free to either raise your hand or ask a question in the chat and we will address them when we can.
 - To raise your hand, click this button at the top of the screen:
 - To join the chat, click this button at the top of the screen
- Please stay on mute unless you are speaking.
- Please note we will be recording today's briefing to be shared on the Tenderlink page for those who were unable to participate in the live session.





COORDINARE - South Eastern NSW PHN
acknowledges the Traditional Owners and Custodians
of the lands across which we live and work.

We pay our respects to Elders past, present and emerging,
and acknowledge Aboriginal and Torres Strait Islander
peoples' continuing connection - both physical
and spiritual - to land, sea and sky.



phn
SOUTH EASTERN NSW
An Australian Government Initiative

Who are we and who do we work with?



- We are one of the 31 Primary Health Network (PHNs) established throughout Australia.
- We work directly with GPs, other primary care providers, secondary care providers, and hospitals to bring improved outcomes for patients.
- We aim to address local health needs, as well as national health priorities, particularly in Aboriginal health, aged care, alcohol and other drugs, mental health and suicide prevention, chronic diseases, after-hours services, healthy ageing and end of life care.
- Commissioning is central to COORDINARE's ability to achieve these objectives and address local and national priorities.

COORDINARE – South Eastern NSW Primary Health Network (SENSW PHN)



Population

648,806 total population 21.5% aged over 65 years

> 33,180 (5.2%) people identify as Aboriginal and Torres Strait Islander

Our region is home to 3.4% of Australia's Aboriginal population, and 9.8% of the total Aboriginal population in NSW

62,349 (9.7%) culturally and linguistically diverse people

Top 3 non-English speaking countries of birth
1. India
2. North Macedonia
3. Italy



10.4% non-English speaking at home

Top 3 non-English languages spoken at home
1. Macedonian
2. Italian
3. Arabic

12.3% projected population growth between 2020-2030

Local government areas (LGAs and territories)	Population
1 Wollongong	216,431
2 Shellharbour	78,332
3 Kiama	22,964
4 Shoalhaven	109,611
5 Jervis Bay	311
6 Eurobodalla	40,755
7 Bega Valley	35,988
8 Snowy Monaro	21,823
9 Queanbeyan-Palerang	64,233
10 Cootburn Mulwaree	32,428
11 Yass Valley	17,379
12 Upper Lachlan Shire	8,551

Health and related services

769 GPs
406 practice nurses

2 Local Health Districts (LHDs)

199 general practices

80 residential aged care facilities

22 public hospitals
16 emergency departments
30 community health centres



Background



- COORDINARE is supporting the Australian Government’s response to the Royal Commission into Aged Care Quality and Safety Report (2021). The Royal Commission examined the complex issues faced by senior Australians at the junction of the primary and aged health care systems, in particular:
 - the lack of access to general practitioners in Residential Aged Care Homes (RACHs),
 - difficulties accessing after-hours care,
 - and inappropriate transfer of residents to hospital.

All these issues are implicated in poor health outcomes for senior Australians, and places increased pressure on RACHs and more widely, the health care system.

- The use of telehealth and virtual care systems has become widespread as a result of the COVID-19 pandemic and the Australian Government’s expansion of telehealth services to reduce community transmission of the virus. Virtual care will continue to provide benefits in aged care beyond the COVID-19 pandemic. The Commission noted that telehealth is *“a means of avoiding the potential harm and distress caused by travel for frail older people.”*
- Increasing availability and use of virtual care for aged care residents is a critical component to developing integrated models of care and subsequently improving their health and wellbeing outcomes.

Purpose



The specific objectives are to:

- Develop and implement innovative models of care that utilise virtual tools to enhance access, efficiency, quality, and the overall care experience for residents in aged care homes.
- Leverage digital health enablers—such as My Health Record, the Australian Immunisation Register (AIR), National Residential Medication Charts, Shared Care Planning Tools, and Secure Messaging—to facilitate better communication and coordination across healthcare providers.
- The primary focus of the program is on demonstrator projects that showcase solutions that can overcome the technical, operational, and logistical barriers to implementing virtual care in aged care settings.



Eligibility and Funding



Eligibility Criteria

- Organisations with an Australian Business Number (ABN) and registered for GST
- Operating within South Eastern NSW with a strong presence in the community and who work directly with priority populations
- Residential Aged Care Homes, Multi-Purpose Facilities, General Practices, Specialists, Allied Health or other healthcare providers working with Residential Aged Care H
 - provide financial reporting on expended grant funds;
 - submit a conclusive performance report that demonstrates outcomes and learning
 - support staff participation in telehealth/virtual care training provided by COORDINARE.

Funding

- A total budget of \$100,000 (ex GST) is available for this activity
- Funding will be distributed across eligible providers in the South Eastern NSW region.
- It is envisioned that 1-3 successful applicants will be awarded a grant, with individual grant amounts dependent on the scope and complexity of the projects proposed.
- Purchase relevant equipment and infrastructure by no later than 30 June 2025.
- Funding is not recurrent and awarded grants will end on 30 June 2026.

What is **in** scope?



COORDINARE welcomes proposals that:

- Address specific healthcare needs of residents in Residential Aged Care Homes (RACH), particularly in areas such as improved access to General Practitioners (GPs), specialists, or other healthcare providers.
- Leverage virtual care technology to enhance the quality, efficiency, and timeliness of healthcare delivery, ensuring residents receive appropriate care without unnecessary hospital transfers or travel.
- Demonstrate innovation through new or enhanced care models that incorporate telehealth or other virtual care processes to bridge existing gaps in healthcare services for residents. Proposals may include novel methods of care delivery, integration of virtual care with other health services, or technology that improves care quality and continuity.
- Improve access to care by introducing solutions that make it easier for residents to connect with healthcare providers for routine and acute needs.
- Overcome key barriers to implementation, focusing on specific technical, operational, or logistical challenges that have previously hindered the adoption of virtual care in aged care settings.
- Collaborate with external providers, forming consortia between RACH, GPs, specialists, and other healthcare providers to deliver comprehensive, resident-centered care.

What is **in** scope? (Continued)



This grant can be used to purchase or contribute to the following:

- **Equipment** necessary to undertake high quality virtual consultations.
- **Infrastructure** necessary for equipment outlined above to operate effectively.
- **Training** that is necessary to use the equipment or infrastructure purchased through these grants.
- **Administrative costs** to support the development and implementation of model of care.
- All equipment, infrastructure, or training purchased must adhere to all appropriate Australian legal requirements for patient information safety and security and, where appropriate, the Australian College of Rural and Remote Medicine's (ACRRM) Telehealth Framework and Guidelines.

What is **out** of scope?

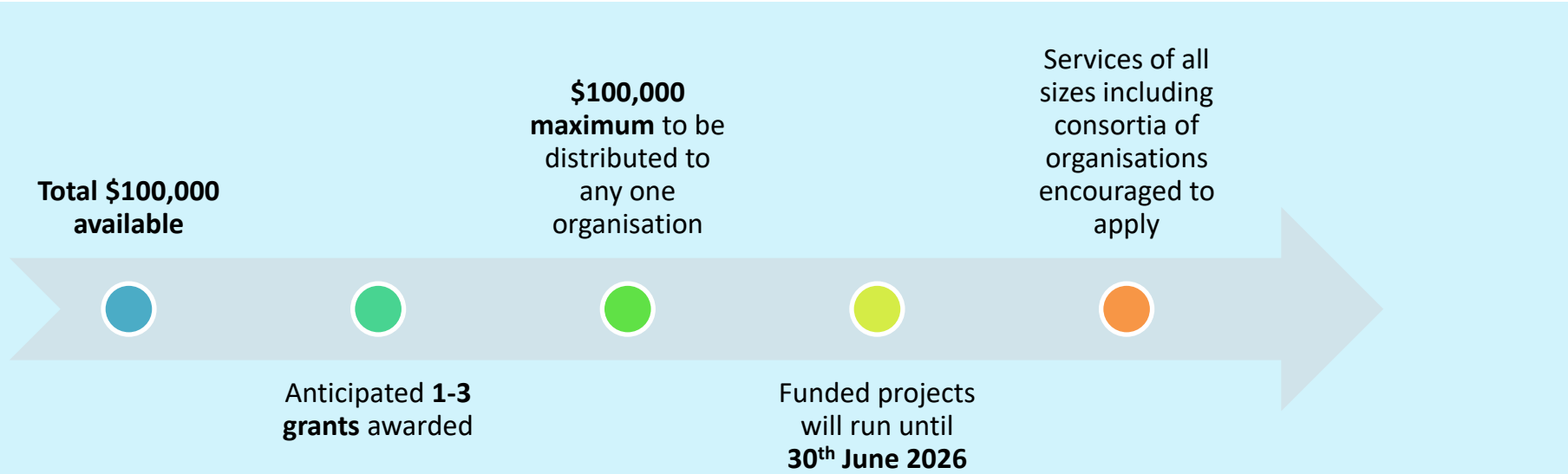


The following activities are ineligible for funding under this project:

- Services which are remunerable through Medicare such as GP services.
- Infrastructure, equipment or services intended to solely support services for family members or carers who are not residents.
- Infrastructure or equipment intended solely to service social or recreational services.
- Disability support services.

Note: Funding is not intended for routine staff duties, including general welfare or pastoral care services within participating organisations. The purpose of this grant is to support virtual care services and equipment to improve or expand access to care for residents directly served by the organisation.

Available Funding



Evaluation Criteria



Identifies relevant aged care resident health care need 20%

Priority population supported

Where it will operate

Activity timelines



Proposed model of care 40%

How it will address needs

Virtual platforms used

Implementation and outcome measurement

COORDINARE's Palliative Care Framework



Capacity for project delivery 20%

Co-design experience and/or plan

Team to support this

Organisational experience with priority groups



Value for investment 20%

Impact evaluation

Budget template

Risk identification and mitigation plan

Sustainability beyond funding

Long term impact & scalability

Timeline



How to apply



To apply for COORDINARE's Residential Aged Care Homes virtual care grants please visit the COORDINARE website and complete the required documents:

<https://www.coordinare.org.au/commissioning/funding-opportunities-list/virtual-care-grant-request-for-proposal>

Proposals must be lodged by **5pm Monday 10th February 2025**
via COORDINARE's Commissioning mailbox: commissioning@coordinare.org.au

Questions regarding the grants process or content can be submitted to COORDINARE:
commissioning@coordinare.org.au

Questions



QUESTIONS?