**Grant Guidelines**

**Interprofessional Education and Collaborative Practice**

 **Due: 3.00pm AEST, Wednesday 21st May 2025**

Table of Contents

[Table of Contents 2](#_Toc195622524)

[1. Introduction 3](#_Toc195622525)

[2. Who can apply? 3](#_Toc195622526)

[3. About the Grant 3](#_Toc195622527)

[Background 3](#_Toc195622528)

[Funding purpose 3](#_Toc195622529)

[Project objectives 3](#_Toc195622530)

[Scope and specifications 4](#_Toc195622531)

[Activities not considered in scope 4](#_Toc195622532)

[Performance indicators 4](#_Toc195622533)

[4. Timeline 4](#_Toc195622534)

[5. Developing and submitting your application 5](#_Toc195622535)

[6. Assessment Criteria 5](#_Toc195622536)

[7. How to contact us 6](#_Toc195622537)

[8. Funding 6](#_Toc195622538)

[9. Evaluation of submissions 6](#_Toc195622539)

[10. Contract arrangements 6](#_Toc195622540)

[11. Compliance 6](#_Toc195622541)

[12. Conditions of this Grant 7](#_Toc195622542)

[13. Interpretation 8](#_Toc195622543)

[Definition of key terms 8](#_Toc195622544)

[Acronyms used in this document. 8](#_Toc195622545)

## Introduction

COORDINARE, as the South Eastern NSW Primary Health Network, is dedicated to fostering healthier communities. We focus our efforts on those who face the biggest inequities. To do this, we collaborate with the community, general practices and other stakeholders to design solutions that make it easier for people to get the health care they need. **More information about COORDINARE – SENSW PHN can be found on our** [**website**](http://www.coordinare.org.au/)**.**

COORDINARE – South Eastern NSW Primary Health Network (SENSW PHN) invites applications from general practices and Aboriginal Medical Services participating in the Workforce Incentive Program – Practice Stream to develop a program for multidisciplinary team based learning in their practice.

Multidisciplinary learning within primary care promotes development of the skills and knowledge required to deliver high quality patient care. This funding opportunity will support general practice and Aboriginal Medical Services to enhance existing models of care through interprofessional education and capacity building at the practice level.

There is funding of **up to $6,000** ex GST per practice, **available for 15 practices**, commencing **from June 2025 to 30 November 2025.**

## Who can apply?

Eligible practices are those practices within the SENSW PHN catchment who are **registered** and **participating** in the Department of Health and Aged Care’s Workforce Incentive Program (WIP) – Practice Stream (PS) incentive.

## About the Grant

### Background

Most general practices are aware of the Department of Health and Aged Care's Workforce Incentive Program (WIP) – Practice Stream, which supports team-based, multidisciplinary care. This incentive is paid directly to practices to help cover the costs of employing nurses, midwives, Aboriginal and Torres Strait Islander health workers, and eligible allied health professionals.

The recent Strengthening Medicare Taskforce Report highlighted opportunities for strengthened education and training programs at both a vocational and intra-practice level to enhance the person-centred team care approach[[1]](#footnote-2). COORDINARE is funding this project to utilize the diverse skills of GPs and other health professionals supported by the WIP – PS program.

### Funding purpose

This funding aims to enhance collaboration in general practice and support coordinated, team-based models of care through the implementation of interprofessional learning approaches that reinforce teamwork, communication, continuous learning, and reflection.

### Project objectives

1. Support general practice to embed collaborative approaches through team building and improved communication.
2. Support general practice to foster collaborative environments that encourage mutual respect and enhance understanding of roles.
3. Facilitate access to tools and resources to support effective teamwork, improve health outcomes, enhance current care models and make collaboration standard practice.

These objectives will be achieved by implementing an interprofessional education plan that delivers a minimum of two multidisciplinary learning activities.

### Scope and specifications

Practices will work with COORDINARE’s Workforce Planning and Prioritisation Project Manager and local Health Coordination Consultant to develop and implement an interprofessional learning plan. Learning activities will encourage supportive management practices, identify and support interprofessional education (IPE) champions and enhance existing multidisciplinary models of care.

Practices must commit **minimum** resources to this project of 1 General Practitioner, 1 Practice Nurse and / or 1 WIP – PS eligible health professional and 1 administrative staff member.

Activities include:

* Completion of a practice staff survey (survey provided by COORDINARE) to identify learning needs
* Development AND implementation of an interprofessional education plan that demonstrates enhanced coordination and shared learning.
* Demonstration of the establishment of systems and processes within the practice that reduce barriers to collaborative practice.
* Completion of a practice staff post activity survey (survey provided by COORDINARE).

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

### Activities not considered in scope

The following activities are **considered out of scope** for funding:

* funding activity that duplicates existing services.
* activities that are likely to create a long-term dependency on funding e.g. implementing a clinic that is not financially sustainable without additional funding.

The following activities are ineligible for funding under this project:

* Leasing or purchase of vehicles.
* Depreciation of expenses.
* Activities already undertaken or expenses already incurred.
* Items not directly related to patient outcomes.
* Payments for professional services (i.e., where payment is made for a medical service item listed in the Medicare Benefit Schedule).
* Conference attendances.
* Clinical trials.
* Board fees.

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

### Performance indicators

Practices must adhere to output and outcomes measurement as outline in **Attachment 2 – Outputs and Outcomes measurement template.**

Practices will be required to provide a short final report at the end of the project. Reporting templates will be provided by COORDINARE.

## Timeline

An indicative timeline is outlined below. COORDINARE reserves the right to modify these timeframes. Any changes to this Grant will be notified via email or on our website at [Funding opportunities](https://www.coordinare.org.au/commissioning/funding-opportunities-list).

|  |  |
| --- | --- |
| Grant opens | 29 April 2025 |
| Industry briefing - RVSP [here](https://events.teams.microsoft.com/event/15f68518-bd23-47ec-a58d-a7f2c7a82d5f%40a4173a8f-e1ac-4499-a647-6d8ea5351f29). | 7 May 2025 |
| Questions close from respondent to COORDINARE  | 5.00 pm 14 May 2025 |
| Deadline for COORDINARE to respond to questions  | 5.00 pm 15 May 2025 |
| Last day for proposal to be received: late applications will not be accepted | 3.00 pm 21 May 2025  |
| Evaluation of Grant proposal  | May / June 2025 |
| Clarification/negotiation with providers | May / June 2025 |
| Contracts awarded | June 2025 |
| Contracts commence | June/July 2025 |

Please note that any de-identified questions, answers, and points of clarification will be shared with all other providers participating in the Grant.

## Developing and submitting your application

Email the Application Form (Attachment 1), compliance document(s), and all other supporting documents to commissioning@coordinare.org.au by 3:00 pm 21 May 2025.

Guidance regarding writing your submission can be found on our website [Commissioning | COORDINARE - South Eastern NSW PHN](https://www.coordinare.org.au/commissioning) – scroll down to “Tender and submission writing for general practice.”

## Assessment Criteria

Successful respondents will be selected through a competitive process. An evaluation panel will consider each submission against the mandatory requirements as well as the information identified in this Grant, and the assessment criteria outlined in ***Table 1: Assessment Criteria.***

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.

Table 1: Assessment Criteria

| **Required Response** | **Weightings** |
| --- | --- |
| 1. **Multidisciplinary models of care** *(max word count approx 500 words)*
 |  |
| Please provide details of the multidisciplinary models of care supported by the WIP-PS within your practice that address community need. Include key factors that:* Enable or inhibit these models
* The range of activities undertaken by the multidisciplinary team to improve patient outcomes E.g. Patient appointments, referrals, practice administration, case coordination.
 | 25% |
| 1. **Interprofessional education approach** *(max word count approx 500 words)*
 |  |
| Please provide details of your practice’s interprofessional education including: * Describe any interprofessional education your practice currently does e.g. clinical in-services, case management reviews, clinic audits
* Outline what enhancements or additions to your current education program you could implement to enhance your interprofessional education and capacity building.
* You may want to consider submitting an example of a plan if you have one
 | 25% |
| 1. **Sustainability** *(max word count approx 500 words)*
 |  |
| Explain how your practice will identify and embed interprofessional educational activities resulting in collaborative practice over the long term, including the following key components:* What systems, policies and / or procedures do your practice have in place that:
	+ supports continual learning and development as part of the organisational culture.
	+ Identify learning opportunities, facilitate learning and evaluate progress.
* What strategies will be put in place to ensure the IPE activities are purposeful, meaningful to the clinical setting and the delivery of quality patient care.
 | 25% |
| 1. **Roles and responsibilities** *(word count approx 500 words)*
 |  |
| Practices must commit minimum resources to this project of 1 General Practitioner, 1 Practice Nurse and / or WIP – PS eligible health professional and 1 administrative staff member.Outline the practice staff that will be involved in the project including: * Details of which staff will be responsible for the activities outlined in the scope and specifications and championing IPE within the practice.
 | 25% |

## How to contact us

Questions can be submitted to our Business Commissioning mailbox at commissioning@coordinare.org.au by 5:00 pm 14 May 2025.

## Funding

A total budget of up to approximately $6,000 (ex GST) to be contracted for up to 6 months from contract commencement to 30 November 2025. Funding can be used to cover staff time to participate in project activities, as well as to support the implementation of the learning plan.

## Evaluation of submissions

Respondents are assessed via a competitive process. An evaluation panel will consider each submission against the Assessment Criteria. The evaluation panel will select a shortlist from the respondents for consideration by COORDINARE. COORDINARE will select from the shortlist based on the panel’s evaluation and other relevant information available to COORDINARE.

COORDINARE may request additional information from respondents. COORDINARE may also work with shortlisted respondents to clarify submissions, including requesting revised proposals, prior to awarding a contract.

Please refer to Conditions of the Grant for more information.

##  Contract arrangements

Successful practices will be required to enter into a Grant Agreement with COORDINARE. The final agreement and schedule, however, will be subject to negotiation between the practice and COORDINARE. The practice will be required to provide progress reports on agreed milestones. The format and framework for progress reports may take account of the size, costs, complexity, and relative risks of the project being undertaken.

##  Compliance

Attached to your response, please include the following compliance documents:

* Current practice accreditation certificate

## Conditions of this Grant

|  |  |
| --- | --- |
| 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.  |
| Acceptance  | A non-complying submission may be rejected. COORDINARE may not accept any proposal.  |
| Explanations  | Verbal explanations or instructions given prior to a contract being executed do 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. COORDINARE is entitled to consider all information known to COORDINARE in relation to a respondent and their submissions when assessing submissions.  |
| 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 Grant 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  | COORDINARE reserves the right to request additional information from respondents. If additional information to that requested in this document is required required by COORDINARE when proposals are being considered, written information and/or interviews may be requested to obtain such information. Respondents are required to provide additional 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 Grant 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 Grant closing time and allow any of 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 Grant 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 Business Team at commissioning@coordinare.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 Grant should be construed to give rise to any contractual obligations or rights, express or implied, by the issue of this Grant 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. |

## Interpretation

### Definition of key terms

|  |  |
| --- | --- |
| **Term**  | **Meaning**  |
| COORDINARE  | the South Eastern New South Wales Primary Health Network and the organisation responsible for the Grant and the Grant process  |
| Closing Time  | the time specified by which Grant responses must be received  |
| Response(s) to Grant  | a document/s lodged by a Respondent in response to this Grant containing a response to provide Goods or Services sought through this Grant process  |
| Respondent  | A business that submits a response to this Grant |
| Grant Process  | the process commenced by the issuing of this Grant and concluding upon formal announcement by COORDINARE of the selection of a preferred respondent or upon the earlier termination of the Grant process  |
| Grant  | this document and any other documents designated by COORDINARE  |

### Acronyms used in this document.

|  |  |
| --- | --- |
| **Acronym**  | **Full form**  |
| ABN  | Australian Business Number  |
| GP(s) | General Practice(s) |
| PHN  | Primary Health Network |
| NSW  | New South Wales  |
| SE NSW  | South Eastern NSW  |
| IPE | Interprofessional Education  |
| WIP | Department of Health and Aged Care’s Workforce Incentive Program  |
| PS | Practice Stream |

1. Bentley, M, & Kerr, R 2024, ‘Multidisciplinary team based primary healthcare: questions for general practice training’, Health Education in Practice: Journal of Research for Professional Learning, vol. 7, no. 1 [https://doi.org/10.33966 /hepj.7.1.18524](https://doi.org/10.33966%20/hepj.7.1.18524) [↑](#footnote-ref-2)