



Connect Well Outreach Healthcare for Victim-Survivors of Family, Domestic & Sexual Violence: GP Clinics Industry Briefing

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COORDINARE - South Eastern NSW PHN

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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.



What is COORDINARE and who do we work with?



- We are one of 31 Primary Health Networks (PHNs) 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, alcohol and other drugs, mental health and suicide prevention, chronic disease, after-hours services, healthy ageing and end of life care.
- Commissioning services is central to COORDINARE's ability to achieve these objectives and address local and national priorities.

South Eastern NSW PHN region



Our region stretches from Helensburgh in the north to the Victorian border in the south and inland to Cooma / Snowy Monaro, Queanbeyan, Yass and Goulburn.

We are a large and diverse region stretching across 11 local government areas and one territory. This includes approximately 680 towns, villages and localities spanning over 50,000km².

Our reach and connections help us improve the health, care and wellbeing of **one of NSW's largest rural and regional populations.**

Background



- **October 2024:** COORDINARE applied for a grant for the Australian Government's *Supporting Outreach Healthcare for Victim-Survivors of Family Domestic and Sexual Violence (FDSV) Pilot* to trial outreach health care for women and their children in crisis accommodation. We were one of six PHNs to win this grant in March 2025.
- The model **builds on a successful pilot on the NSW central coast**, where a team consisting of a GP, Child and Family Health Nurse, Practice Nurse, Speech Pathologist and Integration Coordinator worked across three refuges delivering in-house primary care to victim-survivors.
- In order to localise our model, in late 2024 we undertook consultations in the regions where domestic violence assault reported crime rates per 100,000 population are highest – **Goulburn-Mulwaree, Eurobodalla and Shoalhaven** local government areas.

Target cohort



Connect Well is targeted at victim-survivors fleeing FDSV and accessing crisis or emergency accommodation or services, including those from **population groups at disproportionately higher risk of FDSV** including, but not limited to, the following communities:

- First Nations
- people with a disability
- culturally and linguistically diverse, migrant and refugee backgrounds
- pregnant women and girls
- LGBTIQ+
- rural and remote areas

Rationale



Aims to create a sustainable, well-connected healthcare environment that not only addresses immediate health needs but also supports ongoing wellness, empowerment and recovery for victim-survivors.



In Eurobodalla and Goulburn, domestic violence assault reported crime rates per 100,000 population are significantly higher than the NSW state average, with rates in the Shoalhaven also high.



The program will support long term health engagement, including enrolling victim-survivors in MyMedicare and My Health Record, enhancing the integration of healthcare information and services.

Program logic



Key elements of the model



- Fortnightly 4 hours GP clinic in each site.
- With a Health Linker also specific to each site.
- Alternative weeks: Nurse also attends.
- Nurse full-time works across sites as part of multi-disciplinary team, managing brokerage fund across 3 sites



Other elements



- Team works closely with the local health district services
- Referral pathways established with local PHN-commissioned services and any other relevant health and support services
- Flexible brokerage fund for specialist and allied health appointments required outside GP clinic.
- Mobile dental clinic for oral health care at no cost.
- Steering Group to oversee the implementation of the model and support the establishment of appropriate referral pathways.

Who can apply?

General practices

- operate within Shoalhaven, Eurobodalla or Goulburn LGA.
- accredited against the RACGP Standards for general practices.
- nominate a female GP who has obtained Fellowship of RACGP and/or ACRRM.



What will nominated GPs do?

- complete training in trauma-informed care with the Practice Nurse and Health Linker.
- provide a four-hour fortnightly GP clinic until June 2027.
- identify and support referral pathways for patients to access ongoing comprehensive health care.
- participate in monitoring and evaluation activities, including participating in a national evaluation of the 6-PHN pilot.

Available funding



- An **establishment payment of \$3000** (ex-GST) for work undertaken to support the establishment of the GP clinic, including liaison with the service, site visits, planning to commence the clinic, establishment of clinic systems and processes.
- **GP Clinic payment of \$1,200** (ex-GST) per four-hour fortnightly clinic to cover non-billable work associated with delivering the program. This payment is not intended to co-fund or duplicate Medicare billing arrangements.
- **GPs may bill Medicare** for the delivery of patient care in accordance with the MBS.
 - examples of MBS item numbers: 23, 91891, 75870, 2717, 739, 10987, 44, 10990, 124, 2712, 24, 47, 2715, 36, 723, 735, 10997, 715, 2713, 721 and 37.

EOI responses



- Complete all sections for the Grant Application template (Attachment 1).
- There are three assessment criteria, with a weighting for each.
- An Evaluation Panel will consider each response.
- Word limits apply to your responses and are outlined in the Guidelines.
- Respondents should not wait until the nominated closing time to lodge their response(s). You may submit your response any time before 16 June.

Responses must be lodged **before 5pm 16 June 2025** through
COORDINARE's Commissioning mailbox: commissioning@coodinare.org.au

Assessment Criteria



Practice Information 35%

Location of practice
GP's interests and experience in relation to the target cohort
Capacity to deliver model of care



Consumer-focused design and delivery 35%

Experience working in MDTs
Understanding of the complex needs of families who have experienced family, domestic and/or sexual violence and who are in crisis accommodation



Working with vulnerable communities 30%

Willingness to undertake training in trauma informed care
Experience in working with vulnerable patients
Experience in working with Aboriginal and Torres Strait Islander patients, and processes you follow for cultural safety

Timelines



Milestone	Date
Expression of Interest (EOI) released	20 May 2025
Information session (webinar) - this session*	28 May
Last day for questions about the EOI (via email to commissioning@coordinare.org.au)	5 June
Last day for COORDINARE to respond to questions	10 June
Last day for responses to be received – late applications will not be accepted (via email to commissioning@coordinare.org.au)	5pm, 16 June
Evaluation and negotiations	July
Inform successful providers and finalise contracts	July
Contracts commences	July

Questions?



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