

# **Imprest Medication Management Grants for Residential Aged Care Homes**

North Western Melbourne Primary Health Network (NWMPHN) and the North and West Metropolitan Region Palliative Care Consortium (NWMRPCC) invite expressions of interest from Residential Aged Care Homes (RACH) to implement an imprest medication management system.

Applications close 5pm AEDT on 10 January 2025.

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## PART A: THE ACTIVITY

#### 1. Background

As part of its capability-building work, NWMPHN is providing RACHs with the opportunity to apply for grants of \$4,000 (excluding GST) to support the establishment of an imprest system. An imprest system allows appropriately registered health practitioners to access medications for urgent and end-of-life use. Examples include antibiotics and Schedule 8 pain relief medicines.

Imprest medications are supplied to RACHs as 'ward stock,' not yet prescribed to a specific resident. The system allows qualified practitioners, such as GPs and nurse practitioners, to prescribe medications for clinical staff to administer to residents. This is especially important during the afterhours period, such as during the weekend and overnight, when pharmacies are unable to process urgent scripts.

The purpose of providing this medication imprest grant funding is for RACHs to be able to effectively manage patient deterioration, provide timely access to medication for residents and reduce the number of unnecessary hospital presentations from RACHs, particularly for palliative residents.

The first round of the NWMPHN imprest project began in early 2024. For a summary of results and usage, <u>please see this assessment</u>.

This document includes:

- an overview of the opportunity to participate
- eligibility requirements
- details about the expression of interest and grant processes.

#### 2. Grant purpose and term

We are seeking to engage a limited number of RACHs to participate in the imprest system project. It will run from November 2024 until June 2025.

Funding of \$4,000 (excluding GST) per RACH will be provided. This will support:

- the purchase of the imprest system including
  - required health service permit
  - o imprest safe and installation
  - o initial medication stock
  - Provide dedicated staff allocation for developing procedural information and training across the RACH
- to set up the imprest system, RACH staff to participate in monthly check-ins, either in person or via phone with the project team, such as the:
  - o development of required policies and procedures



- o establishment of a medication advisory committee
- o communication to staff and providers of the system and how it is best used
- o education for staff on using the imprest
- o including it into RACH after-hours plans
- completing evaluation data with the project officers to assist with identifying outcomes from implementation of medication imprest
- participation in 3 communities of practice, including with each RACH supply pharmacy, with a focus on education and sharing lessons across RACHs.

#### What activities are required to be undertaken by the RACH?

RACHs will be required to:

- nominate an operational lead and executive sponsor
- notify NWMPHN in the event of a change of management, with enough notice to allow the project team to arrange a clear handover prior to the change
- complete the required permits within 4 weeks of commencing the project
- if one is not already present, purchase and install a safe compliant with the Drugs Poisons and Controlled Substances Regulations 2017 within 2 months of receiving the grant
- purchase imprest medications within 2 weeks of safe installation
- participate in monthly check-ins with NWMPHN and NWMRPCC to support the implementation of the imprest system
- complete an after-hours plan which incorporates the imprest system
- complete evaluation documentation, including the pre- and post- checklist (provided by NWMPHN) and data on imprest usage
- complete a sustainability plan (with the assistance of NWMPHN and NWMRPCC)
- ensure at least one staff member can attend the 3 communities of practice, approximately 1 hour in length

The applicant agrees to undertake all the activities including evaluation listed above. These serve as the terms of this agreement.

#### Who is eligible to register for the grant?

To be eligible, RACH applicants must confirm they meet the following mandatory criteria:

- be located within the <u>NWMPHN region</u>
- currently not have an imprest system using schedule 8 medications
- apply for a Health Service Permit that encompasses Schedule 4 and Schedule 8 medications
- have a registered nurse on shift 24 hours per day 7 days per week as per guidelines
- have a medication advisory committee or executive commitment to establish one
- have communicated your intention to install an imprest medication system to GPs, practices, locums, and other staff in the facility





- have an established relationship with a pharmacy, or executive commitment to establish one, for imprest medication supply
  - have staff allocated to participate in program activities including:
    - o attendance at monthly check-ins with NWMPHN & NWMRPCC
    - attendance at the community of practice sessions, including commitment from the supply pharmacist to attend
    - o develop policies and procedures to support imprest implementation
    - o complete staff training across all staff utilizing a medication imprest

□ The RACH applicant confirms they meet the mandatory criteria for this grant.

## **PART B: HOW TO APPLY**

#### 1. Application submission

Applicants must complete and return the application form (Part D) and email it with supporting documentation to <a href="mailto:agedcaresupport@nwmphn.org.au">agedcaresupport@nwmphn.org.au</a> Applications close at 5pm AEDT on 10 January 2025.

Please direct all queries to <u>agedcaresupport@nwmphn.org.au.</u>

Please note that NWPHN office is closed from 23 December 2024 and will re-open on 2 January 2025.

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

#### 2. Assessment process

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

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 to make changes or submit new material.

All applicants will be notified via email. Unsuccessful applicants may apply for feedback in writing or verbally via email to <a href="mailto:agedcaresupport@nwmphn.org.au">agedcaresupport@nwmphn.org.au</a>





This table summarises the key stages and indicative dates related to this EOI.

EOI Key Stages	*Estimated Date
Release to the market (email)	19/11/2024
Application closing date (email)	10/01/2025
Evaluation	As applications are received
Interviews with shortlisted applicants	Only if required
Notification of successful and unsuccessful applications	Week beginning 13/01/2025

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

#### 3. Terms of agreement

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
- ensure that all medication storage and administration is performed in accordance with relevant guidelines, licences and laws
- comply with relevant legislation.

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.

#### 4. No contract or warranty

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

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

NWMPHN has taken reasonable steps to ensure that all information presented in this grant application is accurate at the time of issue. However, it 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 NWMPHN is an independent, locally governed and run, not-for-profit organisation dedicated to improving primary healthcare in local communities. MPCN was successful in its bid to operate one of 31 primary health networks (PHNs) formally established across Australia from 1 July 2015.

PHNs have been 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.

They also 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 central business district, northern and western suburbs and adjacent rural areas, encompassing 13 Local Government Areas.

A core task is to improve health outcomes for communities by fostering innovation, leveraging and coordinating existing community and organisational assets, and driving value for money.

NWMPHN has 4 key strategic goals:

- **Transform primary health care** by supporting the delivery of high-quality, integrated and person-centred services in its catchment area.
- Undertake strategic, evidence-based and targeted commissioning that improves health outcomes for priority populations, through the delivery of high-quality, equitable and accessible care.
- Activate community and partnerships by contributing to the development of an interconnected health care system in its catchment through community and stakeholder engagement, research activities and partnerships.
- Strive for excellence in our culture and organisational capability to deliver impact.

# ABOUT NORTH AND WEST METROPOLITAN REGION PALLIATIVE CARE CONSORTIUM

The North and West Metropolitan Region Palliative Care Consortium is one of 8 palliative care consortia funded by the <u>Victorian Government Department of Health</u>. It is an alliance of services which provide palliative care for people living in the north and west metropolitan region of Melbourne. It works collaboratively to develop and deliver palliative care services that:

- raise awareness of palliative care among health care providers, ancillary services, community groups and organisations including residential facilities
- foster collaboration among service providers to maximise designated palliative care resources, reduce duplication of effort and promote consistency of practice
- promote end-of-life and palliative care education and training.





The consortium's Aged Care Strategy considers palliative care to be core business in aged care.

It promotes and implements improved communication and capacity-building initiatives in aged care homes that support high-quality end-of-life care in its catchment. A key initiative is improving access to imprest medications, allowing residents to have timely access to emergency support as indicated.





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## **PART D: APPLICATION FORM**

Applicant name:

Trading name of Residential Aged Care Home:

ABN/ACN:

Address of registered RACH:

**RACH-ID Number:** 

Applicant details name:	Phone:	Email:
RACH manager name:	Phone:	Email:
Registered nurse name:	Phone:	Email:
	Number of residents:	Numbers of registered nurses on staff:
	Name of local pharmacy that will be used to supply medication:	Name of pharmacist:

## **ASSESSMENT CRITERIA**

**SCORED EVALUATION CRITERIA** 

WEIGHTING



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	What would be the impact of having an imprest system on the care of residents in the after-hours period? Dicant response:	30%	
2.	How will you ensure that staff have time to participate in, and undertake, the activities required in the program?	30%	
	What systems and processes do you currently have in place, or would you put in place, to support the implementation of an imprest system? This might include licences, permits, policies and procedures. plicant response:	20%	
4. Apj	How do you plan to communicate the availability of imprest medication to GPs, practices, locums, and other staff in the facility? plicant response:	20%	
CONFLICT OF INTEREST DECLARATION			

Are you aware of any perceived, potential or actual conflict of interest to declare which may have an impact to your ability to deliver the proposed services? For example, do you or any of your organisation's personnel have a person or business relationship with any of NWMPHN staff?

In the event of any such conflict NWMPHN at its absolute discretion shall decide the appropriate course of action. Any perceived, potential or actual conflict of interest must be disclosed at NWMPHN as soon as it becomes apparent.

If you answered Yes to the question above, please provide a detailed response addressing:

- a) the particulars of any conflicts; and
- b) details of the process and procedures used to manage or resolve them.

Applicant response (max 250 words):

ADDITIONAL QUESTIONS	NON-WEIGHTED
Do you currently have a medication administration committee? If yes, please attach the terms of reference and any relevant	





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information about the committee.

If no, please outline how you plan to set one up (with project support)

**Applicant response:** 

Please provide any additional information to support your application.

**Applicant response:**