

Endometriosis and Pelvic Pain Clinic Request for Information (RFI)

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PART A – Overview

1. About North Western Melbourne Primary Health Network

Melbourne Primary Care Network (MPCN) trading as North Western Melbourne Primary Health Network (NWMPHN) is an independent, locally governed and run, not for profit organisation dedicated to improving primary healthcare in local communities. NWMPHN is one of 31 Primary Health Networks (PHNs) across Australia, in operation since 1 July 2015.

PHNs were 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.

PHNs 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 CBD, north and western suburbs and adjacent rural areas, encompassing 13 Local Government Areas.

NWMPHN works to improve health outcomes for communities by fostering innovation, leveraging, and coordinating existing community and organisational assets, and driving value for money.

2. Purpose

NWMPHN invites **accredited general practices** in the NWMPHN region to respond to this RFI regarding the establishment of an Endometriosis and Pelvic Pain Clinic (EPPC). This RFI process is part of a national initiative funded by the Australian Government Department of Health, Disability and Ageing (DHDA). EPPCs work to improve the provision of diagnosis, treatment and management of endometriosis and pelvic pain, and the treatment and management of perimenopause and menopause symptoms.

The information gathered through this RFI will assist NWMPHN in identifying and nominating a maximum of two eligible practices for further consideration by the DHDA who make the final decision. The RFI process is designed to be fair, transparent, and comprehensive, supporting potential direct negotiations with selected providers.

Participation in this RFI does not constitute an offer or commitment to purchase or contract. NWMPHN's assessment process is intended to identify and recommend the most suitable clinics for further consideration under this program; this process is solely for information-gathering to inform future planning and procurement activities and does not constitute a binding selection or contract award by NWMPHN.

3. Background

Request for Information - Endometriosis and Pelvic Pain GP Clinics



There are currently no EPPCs in the NWMPHN region. On 9 February 2025, the Australian Government announced an expansion of the EPPC program over three years (2025-26 to 2027-28). The expansion will include funding for 11 new clinics, including one in the NWMPHN region, bringing the total number of clinics nationally to 33.

The intention of the EPPCs is to maximise the role of GP/nurse led multidisciplinary care teams to embed the management of endometriosis and pelvic pain, and treatment of perimenopause and menopause symptoms as a core part of the care pathway for these conditions, optimising primary care.

The objectives of EPCCs include:

- Improve access for patients to diagnostic, treatment, management and referral services for endometriosis and pelvic pain
- Improve access for patients to diagnostic, treatment, management for perimenopause and menopause
- Increase access to allied health and support services
- Increase access to healthcare for patients from priority populations, particularly those in underserved communities
- Provide access to new information, care pathway and networks
- Provide an appropriate trained workforce with expertise in endometriosis, pelvic pain, perimenopause and menopause

NWMPHN is responsible for identifying and nominating two suitable practices to the DHDA. Final decisions regarding clinic selection will be made by the DHDA. PHNs are not responsible for decisions on final EPPC locations, funding amounts or assessment activities. The successful clinic will receive up to \$265,667 (ex. GST) annually for three years. Funding may be used for a wide range of services including but not limited to, advanced training qualifications, additional practice staff (e.g allied health nurse navigators), enhanced referral pathways with local providers, equipment purchase, education resources and activities for patients, their families and carers.

4. Objectives

This RFI seeks to:

- Identify general practices with proven experience and capability in women's health including endometriosis, pelvic pain, and perimenopause and menopause symptoms.
- Assess the capacity of practices to deliver enhanced services of an EPPC.
- Collect comprehensive information to support a robust and justifiable selection process, including potential direct negotiations.



PART B – Application submission guidelines

1. Key dates

The table below summarises the key stages and indicative dates related to the Endometriosis and Pelvic Pain Clinic RFI.

Stage	Date
RFI release to the market	11 July 2025
RFI clarification period closing date and time	17 July 2025 12pm AEST
RFI closing date and time	18 July 2025 5pm AEST
RFI assessment*	21-25 July 2025
Notification of preferred/shortlisted applicant(s)*	1 August 2025

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

2. Communication and enquiries

All communications and enquiries in relation to this RFI must be directed to tenders@nwmphn.org.au by **12pm AEST, Thursday, 17 July 2025**.

3. Submission method

- Applications must be submitted via the RFI Application Form (attachment 1) to tenders@nwmphn.org.au by 5pm AEST, Friday, 18 July 2025.
- All required attachments must be included.
- Submissions must be completed before the closing time. Late applications will not be accepted.

4. Submission requirements

Accuracy of Information

Applicants must ensure that all information provided is accurate, complete, and current at the time of submission. Any changes to submitted information must be communicated in writing to NWMPHN as soon as practicable.

Format

Please follow the response structure outlined in Attachment 1 - RFI Application Form, answering all questions directly. Accepted file formats include Word, Excel, PowerPoint, and PDF.

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Validity period

All information provided in response to this RFI will remain valid and open for acceptance by NWMPHN for a period of 120 days from the submission deadline, unless otherwise agreed in writing. Applicants are requested to ensure that all information and commitments contained within their response remain accurate and binding for this period. NWMPHN may use the information provided within this validity period to inform further procurement approaches or award decisions. Should there be any changes to the information provided during this period, applicants must notify NWMPHN in writing as soon as practicable.

5. Assessment process

Assessment

NWMPHN will assess responses based on the assessment criteria described in Attachment 1 - RFI Application Form.

Responses will be assessed against the following assessment criteria. NWMPHN will use a consistent framework to review and compare the information provided across the following assessment areas:

Proposed assessment criteria	Type of information sought
Practice details	General details about the GP practice, focus on women's health, existing infrastructure, estimated patient catchment area of the identified location (including outreach and patient demographics, e.g. cultural and linguistic diversity, Aboriginal and Torres Strait Islander status, gender, age range), socioeconomic (SEIFA) status of the area, Modified Monash Model (MMM), the number of requesting practitioners available and other key available medical services.
	Demonstrated capacity and willingness to accept new patients evidenced by a GP-led multidisciplinary team with expertise in the management of endometriosis and pelvic pain, and perimenopause and menopause symptoms.
	Processes for triaging patients referred from other GP practices should be evidenced, including continuity of care records to primary GP.
	Demonstration of scalability of the GP practice to meet potential increase in demand.

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Practice capability The capability of the GP practice to accommodate and demonstrate: • Geographical reach • Patient volumes to warrant specific investment in the clinic • Women-led care, acknowledging that many women prefer to see a female practitioner • Cultural competency and support for priority populations – e.g. First Nations people, culturally and linguistically diverse (CALD) communities, people from low socioeconomic backgrounds and people with diverse sexual orientation, gender identity or sex characteristics. • The provision of affordable patient support services via varying means including by bulk billing. Core services provided Demonstrate capability to provide endometriosis and pelvic pain diagnosis, treatment, management, referral and support. Demonstrate capability to provide care, treatment, management, referral and support for primenopause and menopause symptoms. At a minimum, GP practices must be able to demonstrate access, or ability to gain access, to some or all the following services and resources, as needed for each patient: • GPs specialising in women's health and pain management, including contraceptive advice and onsite insertion of Long-Acting Reversible Contraception (LARC) if required. • Practice nurses / nurse practitioners who specialise in women's health • At a minimum, Gelten in the clinic or linked to the clinic) • Fractice nurses / nurse practitioners who specialise in women's health		An Australian Gove
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Educators and self-management resources		physiotherapists, social workers, psychologists (either in the clinic or linked to
		• Educators and self-management resources

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Community support groups or networks,

	including peer support or bicultural health workers where appropriate
	• Staff to support culturally competent practice or CALD appropriate practice including First Nations health care workers and onsite translation services if required
	• Capacity and capability to support training and continuing professional development for GPs, nurses and allied health practitioners.
Additional services – to support local community need (not mandatory)	Demonstrate capability to provide advice, diagnosis, treatment and management, and support services in the following areas:
	• Broader sexual and reproductive health services to complement endometriosis and pelvic pain care including management of STIs and preconception advice.
	Infertility support and referral
	Support for patients who have experienced trauma or sexual violence
Referral pathways	GP practices must demonstrate established active referral pathways to local and other primary and tertiary care services including Aboriginal Community Controlled Health Services and dedicated women's health services. This may include but is not limited to specialist gynaecological, radiological, surgical, gastroenterological, endocrinological, paediatric, multidisciplinary pain management, fertility, mentor support (e.g. 1800 ASK QENDO) and psychological support services. This may include use of telehealth, where appropriate.
Education and training	GP practices must demonstrate a commitment to staff education, training and professional development in women's health, particularly endometriosis, pelvic pain, perimenopause and menopause. For example, the Endometriosis and

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Pelvic Pain course through the Australian College of Nursing or the Endometriosis Online Learning Resource developed by RANZCOG; Menopause



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	education program training offered by Jean Hailes for Women's Health; or accredited Menopause Essentials training offered by the Australasian Menopause Society. GP practices must demonstrate a commitment to support the implementation of 'train the trainer' educational programs. This is to include training for the GP, nursing and allied health workforces who are part of the multidisciplinary care team. Engagement with relevant professional and practitioner support networks will be considered favourably.
Equipment details	 GP practices must demonstrate they have: Integrated up-to-date IT and data linkage systems Ability to support My Health Record upload Ability to offer telehealth to support those in rural and remote locations Availability of in-clinic ultrasound, gynaecological examination bed, sufficient multidisciplinary clinic space.

Clarification

NWMPHN may seek clarification or additional information from applicants at any stage of the process.

6. Post-submission process and next steps

Following the review of all applications, NWMPHN will:

- Use submitted information to support a fair and transparent selection process, including potential direct negotiations.
- Contact shortlisted practices for any required clarification.
- Nominate up to two practices to the Australian Government Department of Health, Disability and Ageing.
- Inform all applicants of the outcome of the RFI process. Unsuccessful applicants may apply for feedback in writing via email to <u>tenders@nwmphn.org.au</u>.



- Participation in this RFI does not guarantee selection for further discussions or future procurement processes.
- The purpose of this assessment is to identify and recommend the most suitable clinics for further consideration under this program. Any subsequent progression, including contract award, will be determined in accordance with relevant program requirements and governance arrangements. Participation in this RFI does not guarantee selection for further discussions or future procurement processes.

PART C – Terms and conditions

This section outlines the terms and conditions that apply to this RFI process. All applicants must review and adhere to these conditions when preparing and submitting their responses.

1. Non-binding process

This RFI is an information-gathering and assessment process only. NWMPHN will not make any binding selection or contract award as a result of this process. Any progression beyond this stage will be subject to relevant program requirements and governance arrangements.

2. No obligation to award

NWMPHN is under no obligation to select any applicant or to proceed with further procurement as a result of this RFI.

3. Right to amend or cancel

NWMPHN reserves the right to amend, suspend, or cancel this RFI at any time, for any reason, without liability to applicants.

4. Use of information

Information provided in response to this RFI must only be used for the purpose of participating in this process and not for any other purpose unless expressly permitted by NWMPHN.

5. Validity of submission

All submissions must remain valid and open for acceptance by NWMPHN for a period of 120 days from the submission deadline, unless otherwise agreed in writing.

6. Cooperation and clarification

Participants must cooperate fully with NWMPHN in responding to any requests for clarification or additional information during the assessment process.

7. Costs

All costs incurred in the preparation and submission of a response to this RFI are the sole responsibility of the applicant. NWMPHN will not reimburse any expenses.



8. Confidentiality

All information submitted will be treated as confidential and used solely for the purposes outlined in this RFI.

9. Data security and breach notification

Participants must take reasonable steps to protect any personal or sensitive information provided as part of their submission from misuse, loss, unauthorised access, modification, or disclosure. Any actual or suspected data breach involving information provided to NWMPHN must be reported immediately, with full cooperation in any subsequent investigation.

10. No misleading conduct

Participants must not engage in misleading or deceptive conduct in the preparation or submission of their response.

11. Privacy

Legal compliance

Applicants must comply with all relevant Commonwealth and Victorian privacy laws, including the *Privacy Act 1988* and Australian Privacy Principles.

Use of personal information

Information must be collected lawfully and used only for its intended purpose, unless consent is given or required by law.

Purpose of collection

NWMPHN collects personal data to assess applications, verify credentials, manage enquiries, and meet legal obligations. It may also be used for planning and statistical analysis.

Disclosure

Information may be shared with affiliated entities and regulators. NWMPHN does not typically disclose data overseas.

Data security

Applicants must protect personal data from unauthorised access, loss, or misuse, and restrict access to authorised personnel only.

Breach notification

Any suspected or actual privacy breach must be reported to NWMPHN immediately, with full cooperation in any investigation.

12. 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. Applicants must:

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- Warrant that, no actual, perceived, or potential conflict of interest exists in relation to their participation in the RFI process or the performance of any resulting activities.
- Immediately notify NWMPHN in writing if a conflict of interest arises.
- Complete the conflict-of-interest section in Attachment 1 RFI Application Form.

We acknowledge the peoples of the Kulin nation as the Traditional Custodians of the land on which our work in the community takes place. We pay our respects to their Elders past and present.

North Western Melbourne Primary Health Network

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