





# WA Primary Health Alliance PHN Urgent Care Clinics Program Perth South 2024/25 - 2027/28 Activity Summary View

Approved by the Australian Government Department of Health, Disability and Ageing, November 2025





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# Contents

UCC-MUCC 1000 - Urgent Care Clinics - Rockingham	3
UCC-MUCC 1010 Medicare urgent Care Clinics - Beeliar	
UCC-MUCC 1020 - Medicare Urgent Care Clinics - Gosnells	13
UCC-MUCC - 1070 - Medicare urgent Care Clinics - Bateman	18
UCC -CSS - 1010 - Capital, signage and specialist funding	23
UCC-PSF 1000 - PHN Support Funding	24
UCC-SE 1000 - Specialist Equipment	25





# UCC-MUCC 1000 - Urgent Care Clinics - Rockingham



#### **Applicable Schedule**

Urgent Care Clinics Program - Perth South

#### **Activity Prefix**

**UCC-MUCC** 

#### **Activity Number**

1000

#### **Activity Title**

UCC-MUCC 1000 - Urgent Care Clinics - Rockingham

#### **Existing, Modified or New Activity**

**Existing** 



#### **Activity Priorities and Description**

#### **Program Key Priority Area**

Population Health

#### **Aim of Activity**

Strengthening primary health care and ensuring all Australians have access to affordable primary care services is a priority for the Australian Government Department of Health, Disability and Ageing. In total, eight Medicare UCC have been allocated to Western Australia, with seven established by 31 December 2023, and the eighth within the 2024-25 financial year. Identified locations for the MUCC services are Perth City, Clarkson, Rockingham, Morley, Midland, Bunbury, Broome and Gosnells.

The Medicare UCC policy was developed by the Australian Government to ease the pressure on hospital emergency departments and give Australian families more options to see a suitably qualified and skilled healthcare professional when they have an urgent but not life-threatening need for care. All Medicare UCCs are required to provide bulk-billed services, be open during extended business hours and accept walk-in patients for specified urgent care presentations.

#### The Medicare UCCs will be:

- Based in existing general practitioner (GP) clinics or Aboriginal Controlled Community Health Service (ACCHS).
- Operate extended business hours and accept walk-in patients.
- Bulk-billed resulting in no out-of-pocket costs to the patient.
- Flexible and diverse, responding to the needs of the local community.
- High quality, safe and effective.
- Treat conditions that do not require a hospital admission (i.e., broken bones, wounds, and minor burns).



Medicare UCCs will support people to connect to pathways of care with the broader health system, including ensuring referrals back to a patient's regular GP or care provider to ensure that the patient receives continuity of care. All referral pathways into and out of the Medicare UCC should be driven by local need and co-designed with relevant stakeholders to ensure connectivity to existing community health services, GPs, non-government sector, state and territory funded services, hospital and ambulatory services and other support services.

The intended outcomes of this activity are to:

- Improve access to urgent care in a non-hospital setting particularly for vulnerable groups. This includes the aim of changing consumer behaviour about options for appropriate care for urgent conditions that are not immediately life-threatening.
- Reduce the pressure on emergency department (ED) presentations in partner hospitals by providing patients with short term, episodic care for urgent conditions that are not immediately life-threatening.
- Support integration with existing local health services and complement general practice.

#### **Description of Activity**

Activity 1.1: Rockingham Medicare Urgent Care Clinic

Background

The Department of Health, Disability and Ageing and Western Australian governments have entered into a bilateral agreement, with the WA Primary Health Alliance (WAPHA) as designated commissioner, to deliver Medicare Urgent Care Clinics in eight designated WA locations; focused on specified actions that are intended to reduce pressure on emergency departments (ED).

In February 2023, WAPHA undertook an Expression of Interest (EOI) process to identify eligible providers in the Rockingham SA3 including general practices and Aboriginal Community Controlled Health Services that are suitable to operate a Medicare UCC. The tender for Rockingham MUCC was awarded to Rockingham Medical and Dental Centre, 18 Civic Boulevard, Rockingham, WA 6168 operating under the For Health corporate group. Located 4km from Rockingham ED, the Medicare UCC is open 365 days per year to provide Urgent Care services to the local community. Hours vary per location based on local need, trends in ED demand and other considerations such as workforce. WAPHA works with providers to review hours at regular intervals. Roles and Responsibilities

WA Primary Health Alliance's Primary Care Portfolio, which works across the three WA PHNs, is responsible for delivering the PSPHN Rockingham MUCC activity. An executive sub-committee oversees all PSPHN MUCC activities to ensure it aligns with funding requirements and guidance, and WAPHA's Strategic Plan 2023-2026. WAPHA has an ongoing role in administering and managing the contract with the selected provider, working closely with South Metro Health Service and Fiona Stanley Hospital, and working with the Department of Health, Disability and Ageing to monitor and support Medicare UCC operations, including compliance and contractual requirements.

**Key Activities** 

WAPHA will work with the Rockingham MUCC team to understand, establish, maintain and improve compliance with:

- Operational requirements, including the scope of urgent conditions treated, triage system and escalation pathways, accessibility including extended hours of operation and minimum physical facilities access requirements, patient follow up and communication with usual GP, follow up of diagnostic tests and referrals, referral pathways and integration with local hospital, staffing requirements, infection prevention and control as well as monitoring activity and clinical safety.
- Facilities, infrastructure and equipment, including appropriate treatment areas and equipment, medications and appropriate poisons permit to store and administer, pathology as well as an x-ray facility and access to other radiology services.
- MUCC design principles. Ensuring that the MUCC is patient-focused, improving access across extended hours to episodic urgent medical care without a fee, support people to connect to pathways of care through local integration with the broader health system and operate a robust governance framework.
- Data onboarding and collection. The Department of Health, Disability and Ageing has identified key measures of success to inform the evaluation of MUCC's impact on emergency department presentations, assessing patient and provider experience and how MUCC's can be better integrated into the health system.

  Priorities for the year ahead
- Work with the MUCC to improve public awareness about when it is appropriate to seek medical assistance via a UCC, and when assistance should be sought from an emergency department.



- Support the MUCC to strengthen integration and referral pathways between the UCC and hospital care, including investigation of direct referral via the WA Virtual Emergency Department (WAVED), and ongoing engagement with the WA Health System Improvement Unit.
- Ongoing strengthening of the WA MUCC Collaborative group, which meets quarterly and is a forum for MUCC employee networking and discussion, troubleshooting, ongoing education and collaboration.
- Implementation of new contract management processes including monthly reporting and detailed reporting templates
- Work with MUCC's to provide a culturally safe, inclusive and welcoming environment for Aboriginal and Torres Strait Islander people.

#### Governance

The WA Medicare UCC Steering Committee has been established and meets regularly with representatives from WA Department of Health and WAPHA to provide governance and monitor implementation and activity. A bimonthly bi-lateral meeting is also in place with representatives from WAPHA, the WA Department of Health and the Department of Health, Disability and Ageing, Urgent Care Branch to provide operational updates and escalation of any issues from the WA Medicare UCC Steering Committee.

A Memorandum of Understanding has been executed between South Metro Health Service, WA Department of Health and WAPHA, with all parties participating in a regular integration working groups to develop streamlined pathways and communication channels to further enhance access to urgent care for the community.

#### **Needs Assessment Priorities**

#### **Needs Assessment**

WAPHA Needs Assessment 2025-2027

#### **Priorities**

Priority	Page reference
Support primary health care providers in managing complex care cases for patients with mental and physical comorbidities (Metro)	10
Enable access to alternative services, including after-hours primary health care (Metro).	10
Enable access to culturally appropriate alternative options to Emergency Departments for Aboriginal people (Metro).	44



#### **Activity Demographics**

#### **Target Population Cohort**

The Rockingham SA3 community, as well as visitors to the region, with urgent care needs.

#### **Indigenous Specific**

No

#### Coverage

#### **Whole Region**

No

SA3 Name	SA3 Code
Rockingham	50705





#### **Activity Consultation and Collaboration**

#### Consultation

The PHN consulted with and continues to consult with a variety of stakeholders including:

- · Hospital emergency department teams
- WA Health management
- WA GP Urgent Care network
- National Health Service Directory
- Health Direct
- Department of Health, Disability and Ageing
- Other Australian PHNs commissioning UCCs

#### Collaboration

The PHN collaborated with the following stakeholders for design and implementation:

- Emergency Department teams for the development and implementation of pathways of care
- WA Health management for strategic oversight of the UCC activity
- Department of Health, Disability and Ageing as funder and for policy and communications resource
- Perth South HSPs for development of specific UCC models in designated regions
- Department of Premier and Cabinet for strategic oversight of UCC activity
- · Local health care providers including Radiology and Pathology for design of patient pathways
- General Practitioners for design, delivery, monitoring and evaluation of UCCs (includes non UCC GPs in local area)
- Practice teams (clinical and administrative) for design, delivery, monitoring and evaluation of UCC stakeholders directly involved in design/implementation, including roles.



#### **Activity Milestone Details/Duration**

#### **Activity Start Date**

31/08/2025

#### **Activity End Date**

29/06/2028

#### **Service Delivery Start Date**

30/06/2023

#### **Service Delivery End Date**

30/06/2026

#### **Other Relevant Milestones**

Activity Work Plan Due: 30/04/25, 30/04/26, 30/4/27, 30/4/28 Annual Needs Assessment Due: 15/11/25, 15/11/26, 15/11/27

12-month Performance Report Due: 30/9/25, 30/9/26, 30/9/27, 30/9/28

Final Performance Report Due: 30/9/28

Page 6 of 25





## **Activity Commissioning**

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No

**Continuing Service Provider / Contract Extension:** No

**Direct Engagement:** Yes **Open Tender:** No

Expression Of Interest (EOI): No

Other Approach (please provide details): No



Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Medicare Urgent Care Clinics	\$2,676,853.00	\$1,844,127.14	\$1,875,477.30	\$0.00	\$0.00	\$6,396,457.44
Total	\$2,676,853.00	\$1,844,127.14	\$1,875,477.30	\$0.00	\$0.00	\$6,396,457.44



# UCC-MUCC 1010 Medicare urgent Care Clinics - Beeliar



#### **Applicable Schedule**

Urgent Care Clinics Program - Perth South

#### **Activity Prefix**

**UCC-MUCC** 

#### **Activity Number**

1010

#### **Activity Title**

UCC-MUCC 1010 Medicare urgent Care Clinics - Beeliar

#### **Existing, Modified or New Activity**

Existing



#### **Activity Priorities and Description**

#### **Program Key Priority Area**

**Population Health** 

#### **Aim of Activity**

Strengthening primary health care and ensuring all Australians have access to affordable primary care services is a priority for the Australian Government Department of Health, Disability and Ageing. In total, eight Medicare UCC have been allocated to Western Australia, with seven established by 31 December 2023, and the eighth within the 2024-25 financial year. Identified locations for the MUCC services are Perth City, Clarkson, Rockingham, Morley, Midland, Bunbury, Broome and Gosnells.

The Medicare UCC policy was developed by the Australian Government to ease the pressure on hospital emergency departments and give Australian families more options to see a suitably qualified and skilled healthcare professional when they have an urgent but not life-threatening need for care. All Medicare UCCs are required to provide bulk-billed services, be open during extended business hours and accept walk-in patients for specified urgent care presentations.

#### The Medicare UCCs will be:

- Based in existing general practitioner (GP) clinics or Aboriginal Controlled Community Health Service (ACCHS).
- Open extended business hours and accept walk-in patients.
- Bulk-billed resulting in no out-of-pocket costs to the patient.
- Flexible and diverse, responding to the needs of the local community.
- High quality, safe and effective.
- Treat conditions that do not require a hospital admission (i.e., broken bones, wounds, and minor burns).



Medicare UCCs will support people to connect to pathways of care with the broader health system, including ensuring referrals back to a patient's regular GP or care provider to ensure that the patient receives continuity of care. All referral pathways into and out of the Medicare UCC should be driven by local need and co-designed with relevant stakeholders to ensure connectivity to existing community health services, GPs, non-government sector, state and territory funded services, hospital and ambulatory services and other support services.

The intended outcomes of this activity are to:

- Improve access to urgent care in a non-hospital setting particularly for vulnerable groups. This includes the aim of changing consumer behaviour about options for appropriate care for urgent conditions that are not immediately life-threatening.
- Reduce the pressure on emergency department (ED) presentations in partner hospitals by providing patients with short term, episodic care for urgent conditions that are not immediately life-threatening.
- Support integration with existing local health services and complement general practice.

#### **Description of Activity**

Activity 1.2: Beeliar Medicare Urgent Care Clinic

#### Background

The Department of Health, Disability and Ageing and Western Australian governments have entered into a bilateral agreement, with the WA Primary Health Alliance (WAPHA) as designated commissioner, to deliver Medicare Urgent Care Clinics in eight designated WA locations; focused on specified actions that are intended to reduce pressure on emergency departments (ED).

In May 2023, WAPHA undertook an Expression of Interest (EOI) process to identify eligible providers in the Beeliar SA2 including general practices and Aboriginal Community Controlled Health Services (ACCHS) that are suitable to operate a Medicare UCC.

The tender for Beeliar MUCC was awarded to Lagoon Medical Centre, 1/283 Beeliar Drive, Yangebup, WA 6164. The clinic is owner operated with a team of Directors involved in the delivery of the Urgent Care clinic.

Located 12km from Fiona Stanley Hospital ED, the Medicare UCC is open 365 days per year to provide Urgent Care services to the local community. Hours vary per location based on local need, trends in ED demand and other considerations such as workforce. WAPHA works with providers to review hours at regular intervals.

#### Roles and responsibilities

WA Primary Health Alliance's (WAPHA's) Primary Care Portfolio, which works across the three WA PHNs, is responsible for delivering the PSPHN Beeliar MUCC activity. An executive sub-committee oversees all PSPHN MUCC activities to ensure it aligns with funding requirements and guidance, and WAPHA's Strategic Plan 2023-2026.

WAPHA has an ongoing role in administering and managing the contract with the selected provider, working closely with South Metro Health Service and Fiona Stanley Hospital, and working with the Department of Health, Disability and Ageing to monitor and support Medicare UCC operations, including compliance and contractual requirements.

#### **Key Activities**

WAPHA will work with the Beeliar MUCC team to understand, establish and maintain compliance with:

• Operational requirements, including the scope of urgent conditions treated, triage system and escalation pathways, accessibility including extended hours of operation and minimum physical facilities access requirements, patient follow up and communication with usual GP, follow up of diagnostic tests and referrals, referral pathways and integration with local hospital, staffing requirements, infection prevention and control as well as monitoring activity and clinical safety.



- Facilities, infrastructure and equipment, including appropriate treatment areas and equipment, medications and appropriate poisons permit to store and administer, pathology as well as an x-ray facility and access to other radiology services.
- MUCC design principles. Ensuring that the MUCC is patient-focused, improving access across extended hours to episodic urgent medical care without a fee, support people to connect to pathways of care through local integration with the broader health system and operate a robust governance framework.
- Data onboarding and collection. The Department has identified key measures of success to inform the evaluation of MUCC's impact on emergency department presentations, assessing patient and provider experience and how MUCC's can be better integrated into the health system.

#### Priorities for the year ahead

- Work with the MUCC to improve public awareness about when it is appropriate to seek medical assistance via a UCC, and when assistance should be sought from an emergency department.
- Support the MUCC to strengthen integration and referral pathways between the UCC and hospital care, including investigation of direct referral via the WA Virtual Emergency Department (WAVED), and ongoing engagement with the WA Health System Improvement Unit.
- Ongoing strengthening of the WA MUCC Collaborative group, which meets quarterly and is a forum for MUCC employee networking and discussion, troubleshooting, ongoing education and collaboration.
- Implementation of new contract management processes including monthly reporting and detailed reporting templates.
- Work with MUCC's to provide a culturally safe, inclusive and welcoming environment for Aboriginal and Torres Strait Islander people.

#### Governance

The WA Medicare UCC steering committee has been established and meets regularly with representatives from the WA Department of Health and WAPHA to provide governance and monitor implementation and activity. A bimonthly bi-lateral meeting is also in place with representatives from WAPHA, the WA Department of Health and the Department of Health, Disability and Ageing, Urgent Care Branch to provide operational updates and escalation of any issues from the WA Medicare UCC Steering Committee.

A Memorandum of Understanding has been executed between South Metro Health Service, the WA Department of Health and WAPHA, with all parties participating in a regular integration working groups to develop streamlined pathways and communication channels to further enhance access to urgent care for the community.

#### **Needs Assessment Priorities**

#### **Needs Assessment**

WAPHA Needs Assessment 2025-2027

#### **Priorities**

Priority	Page reference
Support primary health care providers in managing complex care cases for patients with mental and physical comorbidities (Metro)	10
Enable access to alternative services, including after-hours primary health care (Metro).	10
Enable access to culturally appropriate alternative options to Emergency Departments for Aboriginal people (Metro).	44





#### **Activity Demographics**

#### **Target Population Cohort**

The Cockburn SA3 community, as well as visitors to the region, with urgent care needs.

#### **Indigenous Specific**

No

#### Coverage

#### **Whole Region**

No

SA3 Name	SA3 Code
Cockburn	50701



#### **Activity Consultation and Collaboration**

#### Consultation

The PHN consulted with and continues to consult with a variety of stakeholders including:

- · Hospital emergency department teams
- WA Health management
- WA GP Urgent Care network
- National Health Service Directory
- Health Direct
- Department of Health, Disability and Ageing
- Other Australian PHNs commissioning UCCs

#### Collaboration

The PHN collaborated with the following stakeholders for design and implementation:

- Emergency Department teams for the development and implementation of pathways of care
- WA Health management for strategic oversight of the UCC activity
- Department of Health, Disability and Ageing as funder and for policy and communications resource
- Perth South HSPs for development of specific UCC models in designated regions
- Department of Premier and Cabinet for strategic oversight of UCC activity
- · Local health care providers including Radiology and Pathology for design of patient pathways
- General Practitioners for design, delivery, monitoring and evaluation of UCCs (includes non UCC GPs in local area)
- Practice teams (clinical and administrative) for design, delivery, monitoring and evaluation of UCC stakeholders directly involved in design/implementation, including roles.





#### **Activity Milestone Details/Duration**

#### **Activity Start Date**

31/08/2025

#### **Activity End Date**

29/06/2028

#### **Service Delivery Start Date**

30/06/2023

#### **Service Delivery End Date**

30/06/2026

#### **Other Relevant Milestones**

Activity Work Plan Due: 30/04/25, 30/04/26, 30/4/27, 30/4/28 Annual Needs Assessment Due: 15/11/25, 15/11/26, 15/11/27

12-month Performance Report Due: 30/09/25, 30/09/26, 30/9/27, 30/9/28

Final Performance Report Due: 30/09/26



#### **Activity Commissioning**

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No

Continuing Service Provider / Contract Extension: No

**Direct Engagement:** Yes **Open Tender:** No

Expression Of Interest (EOI): No

Other Approach (please provide details): No



Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Medicare Urgent Care Clinics	\$2,883,876.00	\$2,318,550.12	\$2,357,965.46	\$0.00	\$0.00	\$7,560,391.58
Total	\$2,883,876.00	\$2,318,550.12	\$2,357,965.46	\$0.00	\$0.00	\$7,560,391.58



# UCC-MUCC 1020 - Medicare Urgent Care Clinics - Gosnells



#### **Applicable Schedule**

Urgent Care Clinics Program - Perth South

**Activity Prefix** 

**UCC-MUCC** 

**Activity Number** 

1020

**Activity Title** 

UCC-MUCC 1020 - Medicare Urgent Care Clinics - Gosnells

**Existing, Modified or New Activity** 

Existing



#### **Activity Priorities and Description**

#### **Program Key Priority Area**

**Population Health** 

#### Aim of Activity

Strengthening primary health care and ensuring all Australians have access to affordable primary care services is a priority for the Australian Government Department of Health, Disability and Ageing. In total, eight Medicare UCC have been allocated to Western Australia, with seven established by 31 December 2023, and the eighth within the 2024-25 financial year. Identified locations for the MUCC services are Perth City, Clarkson, Rockingham, Morley, Midland, Bunbury, Broome and Gosnells.

The Medicare UCC policy was developed by the Australian Government to ease the pressure on hospital emergency departments and give Australian families more options to see a suitably qualified and skilled healthcare professional when they have an urgent but not life-threatening need for care. All Medicare UCCs are required to provide bulk-billed services, be open during extended business hours and accept walk-in patients for specified urgent care presentations.

#### The Medicare UCCs will be:

- Based in existing general practitioner (GP) clinics or Aboriginal Controlled Community Health Service (ACCHS).
- Operate extended business hours and accept walk-in patients.
- Bulk-billed resulting in no out-of-pocket costs to the patient.
- Flexible and diverse, responding to the needs of the local community.
- High quality, safe and effective.
- Treat conditions that do not require a hospital admission (i.e., broken bones, wounds, and minor burns).



Medicare UCCs will support people to connect to pathways of care with the broader health system, including ensuring referrals back to a patient's regular GP or care provider to ensure that the patient receives continuity of care. All referral pathways into and out of the Medicare UCC should be driven by local need and co-designed with relevant stakeholders to ensure connectivity to existing community health services, GPs, non-government sector, state and territory funded services, hospital and ambulatory services and other support services.

The intended outcomes of this activity are to:

- Improve access to urgent care in a non-hospital setting particularly for vulnerable groups. This includes the aim of changing consumer behaviour about options for appropriate care for urgent conditions that are not immediately life-threatening.
- Reduce the pressure on emergency department (ED) presentations in partner hospitals by providing patients with short term, episodic care for urgent conditions that are not immediately life-threatening.
- Support integration with existing local health services and complement general practice.

#### **Description of Activity**

Activity 1.3: Gosnells Medicare Urgent Care Clinic Background

The Department of Health, Disability and Ageing and Western Australian governments have entered into a bilateral agreement, with the WA Primary Health Alliance (WAPHA) as designated commissioner, to deliver Medicare Urgent Care Clinics in eight designated WA locations; focused on specified actions that are intended to reduce pressure on emergency departments (ED).

In May 2024, WAPHA undertook a formal Expression of Interest (EOI) process to identify eligible providers in the Armadale/Gosnells SA3 including general practices and Aboriginal Community Controlled Health Services (ACCHS) that are suitable to operate a Medicare UCC. A suitable provider was not identified in the initial EOI process.

The contract for Gosnells MUCC was awarded to Arche Health, 1/2227 Albany Highway, Gosnells, WA 6110 following detailed discussions with the Department of Health, Disability and Ageing, and a sole source procurement process.

Located 8km from Armadale Hospital ED, the Medicare UCC is open 365 days per year to provide Urgent Care services to the local community. Hours vary per location based on local need, trends in ED demand and other considerations such as workforce. WAPHA works with providers to review hours at regular intervals. Roles and responsibilities

WA Primary Health Alliance's Primary Care Portfolio, which works across the three WA PHNs, is responsible for delivering the PSPHN Gosnells MUCC activity. An executive sub-committee oversees all PSPHN MUCC activities to ensure it aligns with funding requirements and guidance, and WAPHA's Strategic Plan 2023-2026. WAPHA has an ongoing role in administering and managing the contract with the selected provider, working closely with South Metro Health Service and Armadale Hospital, and working with the department to monitor

**Key Activities** 

WAPHA will work with the Gosnells MUCC team to understand, establish and maintain compliance with:

and support Medicare UCC operations, including compliance and contractual requirements.

- Operational requirements, including the scope of urgent conditions treated, triage system and escalation pathways, accessibility including extended hours of operation and minimum physical facilities access requirements, patient follow up and communication with usual GP, follow up of diagnostic tests and referrals, referral pathways and integration with local hospital, staffing requirements, infection prevention and control as well as monitoring activity and clinical safety.
- Facilities, infrastructure and equipment, including appropriate treatment areas and equipment, medications and appropriate poisons permit to store and administer, pathology as well as an x-ray facility and other radiology services.
- MUCC design principles. Ensuring that the MUCC is patient-focused, improving access across extended hours to episodic urgent medical care without a fee, support people to connect to pathways of care through local integration with the broader health system and operate a robust governance framework.
- Data onboarding and collection. The Department has identified key measures of success to inform the evaluation of MUCC's impact on emergency department presentations, assessing patient and provider experience and how MUCC's can be better integrated into the health system. Priorities for the year ahead.



- Work with the MUCC to improve public awareness about when it is appropriate to seek medical assistance via a UCC, and when assistance should be sought from an emergency department.
- Support the MUCC to establish integration and referral pathways between the UCC and hospital care, including investigation of direct referral via the WA Virtual Emergency Department (WAVED), and ongoing engagement with the WA Health System Improvement Unit.
- Ongoing strengthening of the WA MUCC Collaborative group, which meets quarterly and is a forum for MUCC employee networking and discussion, troubleshooting, ongoing education and collaboration.
- Implementation of new contract management processes including monthly reporting and detailed reporting templates.
- Work with MUCCs to provide a culturally safe, inclusive and welcoming environment for Aboriginal and Torres Strait Islander people.

#### Governance

The WA Medicare UCC Steering Committee has been established and meets regularly with representatives from WA Department of Health and WAPHA to provide governance and monitor implementation and activity. A bimonthly bi-lateral meeting is also in place with representatives from WAPHA, WA Department of Health and Department of Health, Disability and Ageing, Urgent Care Branch to provide operational updates and escalation of any issues from the WA Medicare UCC Steering Committee.

A Memorandum of Understanding has been executed between East Metro Health Service, WA Department of Health and WAPHA, with all parties participating in a regular integration working groups to develop streamlined pathways and communication channels to further enhance access to urgent care for the community

#### **Needs Assessment Priorities**

#### **Needs Assessment**

WAPHA Needs Assessment 2025-2027

#### **Priorities**

Priority	Page reference
Support primary health care providers in managing complex care cases for patients with mental and physical comorbidities (Metro)	10
Enable access to alternative services, including after-hours primary health care (Metro).	10
Enable access to culturally appropriate alternative options to Emergency Departments for Aboriginal people (Metro).	44



#### **Activity Demographics**

#### **Target Population Cohort**

The Gosnells SA3 community, as well as visitors to the region, with urgent care needs.

#### **Indigenous Specific**

No

#### Coverage

#### **Whole Region**

No





SA3 Name	SA3 Code
Gosnells	50604



#### **Activity Consultation and Collaboration**

#### Consultation

The PHN consulted with and continues to consult with a variety of stakeholders including:

- Hospital emergency department teams
- WA Health management
- WA GP Urgent Care network
- National Health Service Directory
- Health Direct
- · Department of Health, Disability and Ageing
- Other Australian PHNs commissioning UCCs

#### Collaboration

The PHN collaborated with the following stakeholders for design and implementation:

- Emergency Department teams for the development and implementation of pathways of care
- WA Health management for strategic oversight of the UCC activity
- Department of Health, Disability and Ageing as funder and for policy and communications resource
- Perth South HSPs for development of specific UCC models in designated regions
- Department of Premier and Cabinet for strategic oversight of UCC activity
- · Local health care providers including Radiology and Pathology for design of patient pathways
- General Practitioners for design, delivery, monitoring and evaluation of UCCs (includes non UCC GPs in local area)
- Practice teams (clinical and administrative) for design, delivery, monitoring and evaluation of UCC stakeholders directly involved in design/implementation, including roles.



#### **Activity Milestone Details/Duration**

#### **Activity Start Date**

31/08/2025

#### **Activity End Date**

29/06/2028

#### **Service Delivery Start Date**

06/02/2025

#### **Service Delivery End Date**

30/06/2026

#### **Other Relevant Milestones**

Activity Work Plan Due: 30/04/25, 30/04/26, 30/4/27, 30/4/28 Annual Needs Assessment Due: 15/11/25, 15/11/26, 15/11/27

12-month Performance Report Due: 30/9/25, 30/9/26, 30/9/27, 30/9/28

Final Performance Report Due: 30/9/28



# **Activity Commissioning**

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No

**Continuing Service Provider / Contract Extension: No** 

**Direct Engagement:** Yes **Open Tender:** No

**Expression Of Interest (EOI):** Yes

Other Approach (please provide details): No



Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Medicare Urgent Care Clinics	\$0.00	\$2,993,011.01	\$2,426,237.56	\$0.00	\$0.00	\$5,419,248.57
Total	\$0.00	\$2,993,011.01	\$2,426,237.56	\$0.00	\$0.00	\$5,419,248.57



# UCC-MUCC - 1070 - Medicare urgent Care Clinics - Bateman



#### **Applicable Schedule**

Urgent Care Clinics Program - Perth South

#### **Activity Prefix**

**UCC-MUCC** 

#### **Activity Number**

1070

#### **Activity Title**

Medicare urgent Care Clinics - Bateman

#### **Existing, Modified or New Activity**

**New Activity** 



#### **Activity Priorities and Description**

#### **Program Key Priority Area**

**Population Health** 

#### Aim of Activity

Strengthening Medicare and ensuring all Australians have access to affordable, high quality primary care services, when and where they need it is a priority for the Australian Government Department of Health, Disability an Ageing. A key objective of this commitment is to expand access to bulk billing Medicare Urgent Care Clinics (MUCCs).

The Medicare UCC policy was developed by the Australian Government to ease the pressure on hospital emergency departments and give Australian families more options to see a suitably qualified and skilled healthcare professional when they have an urgent but not life-threatening need for care. All Medicare UCCs are required to provide bulk-billed services, be open during extended business hours 365 days a year and accept walk-in patients for specified urgent care presentations.

#### The Medicare UCCs will be:

- Co-located/partnered with a general practice that is accredited to a recognised and relevant standard such as the Royal Australian College of General Practitioner Standards for General Practice .
- Co-located with, or partnered alongside, General Practices that offer full bulk billing, where local circumstances allow.
- Operate extended business hours and accept walk-in patients .
- Bulk-billed resulting in no out-of-pocket costs to the patient.
- Flexible and diverse, responding to the needs of the local community.
- High quality, safe and effective.
- Treat conditions that do not require a hospital admission (i.e., broken bones, wounds, and minor burns).



Medicare UCCs will support people to connect to pathways of care with the broader health system, including ensuring referrals back to a patient's regular GP or care provider to ensure that the patient receives continuity of care. All referral pathways into and out of the Medicare UCC should be driven by local need and codesigned with relevant stakeholders to ensure connectivity to existing community health services, GPs, nongovernment sector, state and territory funded services, hospital and ambulatory services and other support services.

The intended outcomes of this activity are to:

- Improve access to urgent care in a non-hospital setting particularly for vulnerable groups. This includes the aim of changing consumer behaviour about options for appropriate care for urgent conditions that are not immediately life-threatening.
- Reduce the pressure on emergency department (ED) presentations in partner hospitals by providing patients with short term, episodic care for urgent conditions that are not immediately life-threatening.
- Support integration with existing local health services and complement general practice.

#### **Description of Activity**

#### Bateman Medicare Urgent Care Clinic

#### Background

In 2025 the Australian Government has committed \$664.3 million to establish 50 additional Medicare Urgent Care Clinics (MUCCs) across Australia, six of which will be located in Western Australia. These new clinics will be located in or near Bateman, Ellenbrook, Mirrabooka, Yanchep, Mundaring and Geraldton. Once established there will be a total of 14 MUCCs in WA.

The Department of Health, Disability and Ageing and Western Australian governments have entered into a bilateral agreement, with the WA Primary Health Alliance (WAPHA) to commission the six new MUCCs, focussed on specified actions that are intended to reduce pressure on emergency departments (ED) and improve access to urgent care for the local communities.

In August 2025, WAPHA undertook a competitive tender process for the establishment of the Bateman MUCC, and the new clinics expected to open before 25 December 2025.

#### **Roles and Responsibilities**

WA Primary Health Alliance's (WAPHA's) Primary Care Portfolio, which works across the three WA PHNs, is responsible for delivering the PSPHN Bateman MUCC activity. An executive sub-committee oversees all PSPHN MUCC activities to ensure it aligns with funding requirements and guidance, and WAPHA's Strategic Plan 2023-2026.

WAPHA has an ongoing role in administering and managing the contract with the selected provider, working closely with South Metro Health Service and Fiona Stanley Hospital, and working with the Department of Health, Disability and Ageing to monitor and support Medicare UCC operations, including compliance and contractual requirements.

#### Key activities

WAPHA will undertake a rigorous tender evaluation process to select an accredited and capable general practice or Aboriginal Community Controlled Health Service located in or near the Bateman area. Once the successful provider is identified and commissioned, WAPHA will work with the provider to ensure understanding of, establish and maintain compliance with:

- Operational requirements, including the scope of urgent conditions treated, triage system and escalation pathways, accessibility including extended hours of operation and minimum physical facilities, access requirements, patient follow up and communication with usual GP, follow up of diagnostic tests and referrals, referral pathways and integration with local hospital, staffing requirements, infection prevention and control as well as monitoring activity and clinical safety.
- Facilities, infrastructure and equipment, including appropriate treatment areas and equipment, medications and appropriate poisons permit to store and administer, pathology as well as an x-ray facility and access to other radiology services.



- MUCC design principles. Ensuring that the MUCC is patient-focused, culturally appropriate and supports people to connect to pathways of care through local integration with the broader health system and operate a robust governance framework.
- Data onboarding and collection. Ensure utilisation of the Medicare UCC Data Module/Patient Management System and provide support to complete new fields where required. to ensure collection of activity data and inform the evaluation of MUCC's impact on emergency department presentations, assessing patient and provider experience and how MUCC's can be better integrated into the health system. Priorities for the next twelve months
- Commission an appropriate and capable provider to establish the MUCC
- Support the provider to meet all compliance and regulatory requirements of the MUCC operational guidelines
- Support the provider to commence service delivery prior to 25 December 2025
- Support the provider to engage with key stakeholders to establish referral pathways
- Ensure the provider implements all data collection and reporting requirements
- Utilise the existing Memorandum of Understanding between South Metropolitan Health Service, the WA Department of Health and WAPHA, with all parties participating in a regular integration working group to develop streamlined pathways and communication channels to further enhance access to urgent care for the community.

#### Governance

The WA Medicare UCC steering committee has been established and meets regularly with representatives from the WA Department of Health and WAPHA to provide governance and monitor implementation and activity. A bimonthly bi-lateral meeting is also in place with representatives from WAPHA, the WA Department of Health and the Department of Health, Disability and Ageing, Urgent Care Branch to provide operational updates and escalation of any issues from the WA Medicare UCC Steering Committee.

Internal oversight of progress, risk management and monitoring of the MUCC commissioning activities and ongoing performance is provided by an executive sub-committee, the Population Health Strategic Alignment Group.

#### **Needs Assessment Priorities**

#### **Needs Assessment**

WAPHA Needs Assessment 2025-2027

#### **Priorities**

Priority	Page reference
Support primary health care providers in managing complex care cases for patients with mental and physical comorbidities (Metro)	10
Enable access to alternative services, including after-hours primary health care (Metro).	10
Enable access to culturally appropriate alternative options to Emergency Departments for Aboriginal people (Metro).	44



#### **Activity Demographics**

#### **Target Population Cohort**

People with urgent care needs that cannot be addressed in a timely manner by their usual GP, and who do not need emergency treatment



#### **Indigenous Specific**

No

#### Coverage

#### **Whole Region**

No

SA3 Name	SA3 Code
Melville	50704



#### **Activity Consultation and Collaboration**

#### Consultation

The PHN consulted with and continues to consult with a variety of stakeholders including:

- Hospital emergency department teams
- WA Health management
- National Health Service Directory
- Health Direct
- Department of Health, Disability and Ageing
- Other Australian PHNs commissioning UCCs

#### Collaboration

The PHN collaborated with the following stakeholders for design and implementation:

- Emergency Department teams for the development and implementation of pathways of care
- WA Health management for strategic oversight of the UCC activity
- Department of Health, Disability and Ageing as funder and for policy and communications resource
- Perth South HSPs for development of specific UCC models in designated regions
- Department of Premier and Cabinet for strategic oversight of UCC activity
- · Local health care providers including Radiology and Pathology for design of patient pathways
- General Practitioners for design, delivery, monitoring and evaluation of UCCs (includes non UCC GPs in local area)
- Practice teams (clinical and administrative) for design, delivery, monitoring and evaluation of UCC



#### **Activity Milestone Details/Duration**

#### **Activity Start Date**

31/08/2025

#### **Activity End Date**

29/06/2028



#### **Service Delivery Start Date**

25/12/2025

#### **Service Delivery End Date**

30/06/2028

#### **Other Relevant Milestones**

Activity Work Plan Due: Oct 2025, 30/04/2026, 30/04/2027, 30/04/2028 Annual Needs Assessment Due: 15/11/2025, 15/11/2026, 15/11/2027 12-month Performance Report Due: 30/09/2026, 30/09/2027, 30/09/2028 12-month Performance Report Due:30/09/2026, 30/09/2027, 30/09/2028

Final Performance Report Due: 30/09/2028

Financial acquittal report Due: 30/09/2026, 30/09/2027, 30/09/2028



#### **Activity Commissioning**

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No

**Continuing Service Provider / Contract Extension:** No

**Direct Engagement:** No **Open Tender:** Yes

Expression Of Interest (EOI): No

Other Approach (please provide details): No



Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Medicare Urgent Care Clinics	\$0.00	\$0.00	\$2,119,000.00	\$0.00	\$0.00	\$2,119,000.00
Total	\$0.00	\$0.00	\$2,119,000.00	\$0.00	\$0.00	\$2,119,000.00



# UCC -CSS - 1010 - Capital, signage and specialist funding



#### **Applicable Schedule**

Urgent Care Clinics Program - Perth South

**Activity Prefix** 

UCC -CSS

**Activity Number** 

1010

**Activity Title** 

Capital, signage and specialist funding

**Existing, Modified or New Activity** 

Existing



Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Capital, signage, and specialist funding	\$0.00	\$0.00	\$906,780.27	\$0.00	\$0.00	\$906,780.27
Total	\$0.00	\$0.00	\$906,780.27	\$0.00	\$0.00	\$906,780.27



# **UCC-PSF 1000 - PHN Support Funding**



#### **Applicable Schedule**

Urgent Care Clinics Program - Perth South

**Activity Prefix** 

UCC-PSF

**Activity Number** 

1000

**Activity Title** 

UCC-PSF 1000 - PHN Support Funding

**Existing, Modified or New Activity** 

Existing



Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
PHN Support Funding	\$120,218.94	\$560,640.52	\$640,123.09	\$0.00	\$0.00	\$1,320,982.55
Total	\$120,218.94	\$560,640.52	\$640,123.09	\$0.00	\$0.00	\$1,320,982.55



# **UCC-SE 1000 - Specialist Equipment**



#### **Applicable Schedule**

Urgent Care Clinics Program - Perth South

**Activity Prefix** 

UCC-SE

**Activity Number** 

1000

**Activity Title** 

UCC-SE 1000 - Specialist Equipment

**Existing, Modified or New Activity** 

Existing



Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Specialist Equipment	\$547,959.90	\$887,381.90	\$0.00	\$0.00	\$0.00	\$1,435,341.80
Total	\$547,959.90	\$887,381.90	\$0.00	\$0.00	\$0.00	\$1,435,341.80