

# Endometriosis and Pelvic Pain

## Expression of Interest

### Assessment Criteria Guide

Assessment criteria	Type of information sought
<b>Practice details</b>	<p>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. CALD, Indigenous, 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.</p> <p>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.</p> <p>Processes for triaging patients referred from other GP practices should be evidenced, including continuity of care records to primary GP.</p> <p>Demonstration of scalability of the GP practice to meet potential increase in demand.</p> <p>The GP practice is an accredited practice against RACGP standards and has the relevant insurance.</p>
<b>Practice capability</b>	<p>The capability of the GP practice to accommodate and demonstrate:</p> <ul style="list-style-type: none"> <li>• Geographical reach</li> <li>• Patient volumes to warrant specific investment in the clinic</li> <li>• Women-led care, acknowledging that many women prefer to see a female practitioner</li> <li>• 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.</li> <li>• The provision of affordable patient support services via varying means including by bulk billing.</li> </ul>
<b>Core Services Provided</b>	Demonstrate capability to provide endometriosis and pelvic pain diagnosis, treatment, management, referral and support.

	<p>Demonstrate capability to provide care, treatment, management, referral and support for perimenopause and menopause symptoms.</p> <p>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:</p> <ul style="list-style-type: none"> <li>• GPs specialising in women's health and pain management, including contraceptive advice and onsite insertion of Long-Acting Reversible Contraception (LARC) if required.</li> <li>• Practice nurses / nurse practitioners who specialise in women's health</li> <li>• Allied Health – dietitians, women's health physiotherapists, social workers, psychologists (either in the clinic or linked to the clinic)</li> <li>• Educators and self-management resources</li> <li>• Community support groups or networks, including peer support or bicultural health workers where appropriate</li> <li>• Staff to support culturally competent practice or CALD appropriate practice including First Nations health care workers and onsite translation services if required</li> <li>• Capacity and capability to support training and continuing professional development for GPs, nurses and allied health practitioners.</li> </ul>
<p><b>Additional services – to support local community need (not mandatory)</b></p>	<p>Demonstrate capability to provide advice, diagnosis, treatment and management, and support services in the following areas:</p> <ul style="list-style-type: none"> <li>• Broader sexual and reproductive health services to complement endometriosis and pelvic pain care including management of STIs and preconception advice.</li> <li>• Infertility support and referral</li> <li>• Support for patients who have experienced trauma or sexual violence.</li> </ul>