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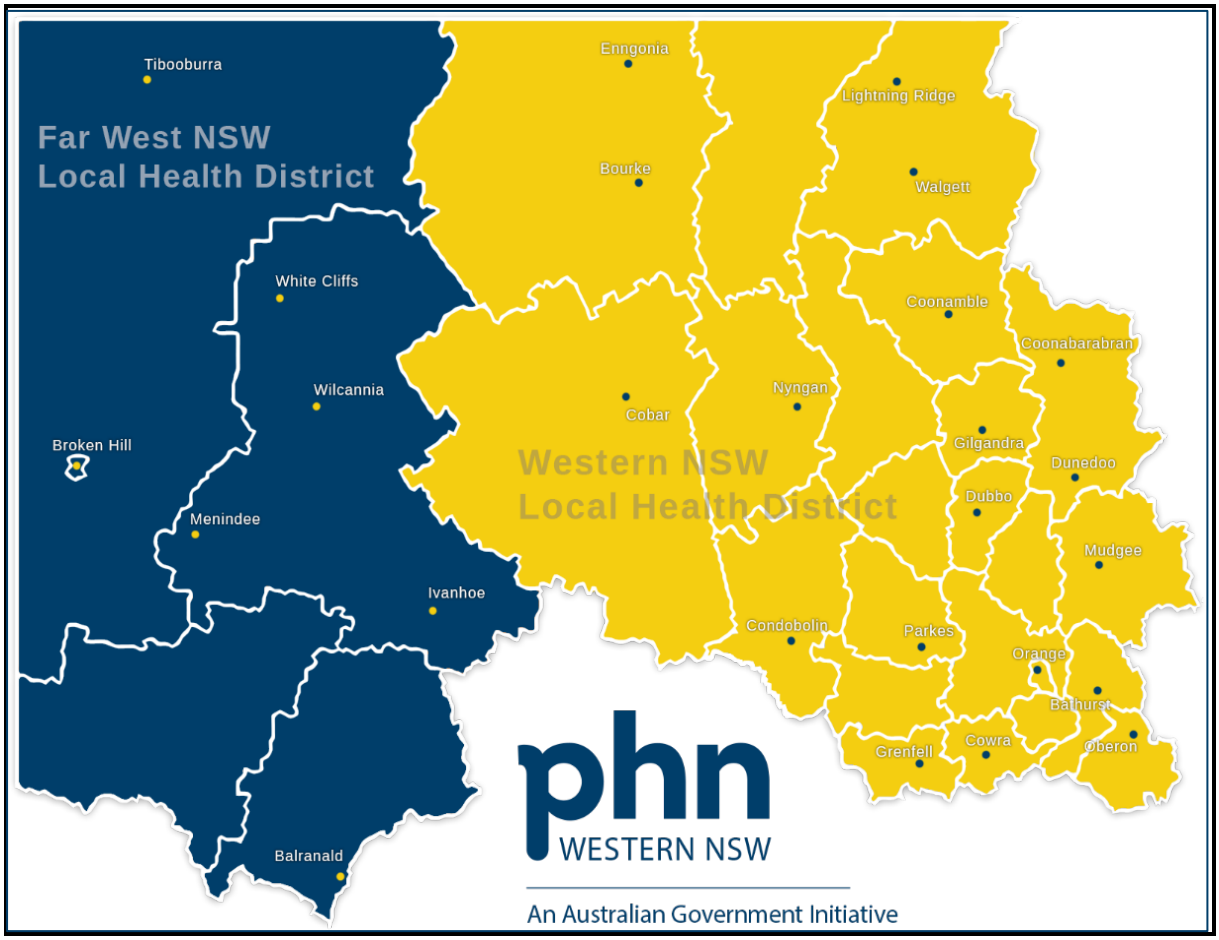
WESTERN NSW
An Australian Government Initiative

Request for Proposal

Residential Aged Care Virtual Mental Health Service



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1. Background

Primary Health Networks

On 1 July 2015, the Australian Government established 31 PHNs as part of its commitment to delivering an efficient and effective primary health care system. Evidence indicates that health systems with strong integrated primary health care at their core are both effective in improving people's outcomes and experiences and efficient at delivering appropriate services where they are needed most. As such, the key objectives of the PHNs are to:

- Improve the efficiency and effectiveness of health services, particularly for those at risk of poor health outcomes; and
- Improve the coordination of services to ensure people receive the right care in the right place and at the right time.

PHNs achieve these objectives by researching local mental and physical health needs and risk factors, consulting with community members and stakeholders, working with general practitioners, local health districts and other primary health care providers. They also utilise this knowledge and partnerships to ensure the best possible translation of national policies, frameworks and funding streams into the diverse range of service systems and communities across their catchment.

Western NSW PHN

The Western Health Alliance Ltd trades as Western New South Wales Primary Health Network. The PHN covers a region of more than 430,000 km^2 or around 53% of the state. The total population is estimated to be nearly 310,000 and approximately 11% identify as Aboriginal. The main centres of population and health services are Dubbo, Orange, Bathurst and Broken Hill. These are separated by vast distances and each serves numerous smaller communities that are themselves widely dispersed.

The PHN's vision is "Supporting, strengthening and shaping a world class person-centred primary health care system in Western NSW." The organisation has identified the following priorities:

- Aboriginal Health
- Chronic and Complex Care
- Older Person Care
- Maternal and Child Health
- Mental Health and Substance Abuse
- Risk Factors/Prevention
- Workforce
- Access to Services
- Coordination, Integration, Collaboration

2. Description of Goods and/or Services required

Mental health services are not routinely available to older people living in residential aged care facilities (RACFs) and are not within scope of the personal care or accommodation services RACFs provide. On the other hand, there is evidence that RACF residents have very high rates of common mental illness. It is estimated that approximately 39 per cent of all permanent aged care residents are living with mild to moderate depression. Experience with other initiatives such as Better Access suggests that up to half of this group of older people with mild to moderate depression may wish to receive mental health services if they were available to them. The funding provided to PHNs is intended to address this service gap.

The Western NSW region has 74 residential aged care facilities and multipurpose facilities, covering 3,098 aged care beds. Residential aged care facility access to primary health care, allied health and medication management, as well as ageing population living well into the future have been identified as significant areas of need in the region. Between 2014 to 2017, the number of MBS funded GP attendances to RACF increased by 15% (38,158 in 2014-15 to 44,042 in 2016-17). However, it has been reported that the incentives were inadequate for GPs and pharmacists to provide primary health care in RACFs. Lack of allied health services, particularly physiotherapy, was also identified as an issue for RACFs.

Primary Health Networks (PHNs) are required to commission psychological treatment services targeting the mental health needs of people living in residential aged care facilities (RACFs). These services are intended to enable residents of these facilities with mental illness to access mental health services like those available in the community through the Better Access to Psychologists, Psychiatrists and General Practice through the MBS Initiative (Better Access).

Unlike other services which PHNs commission, these services may be the only source of psychological services for some RACF residents. Therefore, services must be distributed fairly, well-targeted and provided through sustainable, cost-effective models.

Services are expected to primarily target residents with mild to moderate symptoms of common mental illness. However, residents with severe mental illness who are not more appropriately managed by a State or Territory Government Older Persons Mental Health Service, and who would benefit from psychological therapy are not excluded.

This activity will provide online mental health services to all RACFs across the WNSWPHN region ensuring a highly accessible, convenient, and cost-effective solution to service provision. Services to be provided to the RACFs by the commissioned provider will include:

- Provide an easy to use platform for booking and delivering psychology sessions.
- Enable RACF residents to gain access to up to 10 psychology sessions per episode.
- Mental health professionals will be available for telehealth appointments with residents both inside and outside of regular working hours.
- The telehealth provider will ensure that there is seamless correspondence between the resident's GP and the mental health professional, removing some of the administrative burden to RACF staff.
- Residents will be able to choose a mental health clinician of their choice or be matched with a suitable clinician.

- Appointments with a mental health clinician will be flexible to suit the routine, lifestyle and needs of the resident.
- Session summaries will be provided to residents to be utilised by the resident and/or RACF staff to apply the mental health clinician's advice between sessions.

The service provider will work with WNSW PHN to:

- Develop and implement a place-based approach to support the long-term health and wellbeing needs of RACF residents.
- Work with WNSWPHN to co-design appropriate services.
- Engage with RACFs and GPs across the region.
- Provide quarterly reporting on the progress of service delivery.
- Provide an annual report that includes the culmination of data collected over the course of the program to provide valuable insights to WNSWPHN.
- Gather data that supports research initiatives, public health campaigns and service delivery modelling for telehealth services for RACF.

3. Contract Deliverables and Output Measures

The Supplier must report against all deliverables in their Performance reports.

KPI No	KPI Type	KPI Description	KPI Measure
1.	DOH Process	Collection of service data into Primary Mental Health Care Minimum Data Set (PMHC-MDS)	PMHC-MDS data submitted by the 15th of the month
2.	DOH Process	Collection of Suicide Referral Flag in the Primary Mental Health Care Minimum Data Set (PMHC-MDS)	100% of clients with suicidal thoughts or behaviour referred to your organisation (including self-referral) must receive a service contact within 7 days of their referral date
3.	DOH Process	Collection of Kessler Psychological Distress Scale (K10+ and K5) or Strengths and Difficulties Questionnaire (SDQ) into Primary Mental Health Care Minimum Data Set (PMHC-MDS)	Collection of outcome measure (K10+, K5 or SDS) at each client service contact.
4.	DOH Process	Formalised Partnerships with Regional Service Providers	Documented evidence of formalised health care pathways in line with the stepped care model. Reporting of individuals referred/signposted to other health care providers in line with the stepped care model.

KPI No	KPI Type	KPI Description	KPI Measure
5.	DOH Process	Culturally Appropriate Service Delivery for Aboriginal and Torres Strait Islander people	Evidence of service contacts where the service provider is recorded as being of ATSI origin, or employed by an Aboriginal Community Controlled Health Service or has indicated that they have completed a training program in the delivery of culturally safe services to ATSI peoples
6.	Outcome	Improved Client Function	An improvement between Pre and Post measures for K10+, K5 or SDQ - a collective group improvement of 50% from the initial to final outcome measurement.
7.	Outcome	At discharge, all participants who participate in the program are asked to complete the PHN Your Experience of Service (YES) survey	50% of discharged clients have completed a YES PHN survey
8.	Outcome	All staff employed by the program complete a provider experience survey annually	Annual collection of provider experience surveys submitted by the 31st of March
9.	Outcome	Evaluation of service	Completed an annual report that contains an evaluation of service which includes data collected over the course of the program.

4. Contact Details

If you have any questions regarding the RFP, please respond via the forum link in Tenderlink.

5. Indicative funding

The Indicative Funding for this project is: **$1,226,311.00**
$608,798 01/07/2021 – 30/06/2022
$617,513 01/07/2022 – 30/06/2023

6. Submission Details

All applications must be submitted in full using the Request for Proposal Response Application Document along with the required mandatory information. Please note that all fields must be completed (including inserting N/A if not relevant to your proposal).

Submissions to be via Tenderlink by 5:00pm 17th June 2021.

Applications received after the RFP closing time shall not be accepted, except where the Supplier can clearly demonstrate events outside of their control were responsible for the application being received late. It is at WNSW PHN CEO's sole discretion whether a late application will be accepted.

7. Evaluation of this RFP will be based on the Evaluation Criteria Below

After the deadline for the receipt of the RFP Application, a Panel will assess the responses based on evidence provided within the document

Criteria	Description	Overall Weighting
1.	**Demonstrated Capability** a) Can clearly demonstrate ability to deliver the scope of works efficiently and effectively to achieve all target outcome. (Sub Criteria weighting 30%) b) Can clearly demonstrated ability to provide an easy-to-use platform for booking and delivering online psychology sessions. (Sub criteria weighting 20%) c) Has outlined the resources to be used, including the experience and qualifications of nominated key staff and the broader service provision workforce to ensure efficient and effective outcomes (Sub Criteria Weighting 20%) d) Can demonstrate ability to meet all required deliverables and timeframes (Sub criteria Weighting 15%) e) Can demonstrate ability to deliver culturally safe service to Aboriginal People in a health and wellbeing context. (Sub criteria weighting 15%)	30%

2.	**Demonstrated experience and successful past performance in a similar contract** a) Has clearly demonstrated appropriate experience to undertake the delivery of online psychological services. (Sub criteria weighting 50%) b) Has demonstrated recent history of successfully delivering comparable services in terms of the consumers / cohort, scale, scope, services, technology, and geography. (sub criteria weighting 50%)	40%
3.	**Methodology** a) Appropriateness of the plan for monitoring the service to ensure that it meets service deliverables on time and within budget. (Sub-criteria weighting 40%) b) Appropriateness of their methodology to implement the Residential aged Care Virtual Mental Health Service. (sub-criteria weighting 60%)	20%
4.	**Local purchasing and opportunities** a) Has demonstrated how the delivery model supports local sustainable service providers, local labour market outcomes; promotes training, new opportunities, and employment security; and sustainable activity in the local economy. (Sub criteria weighting 50%) b) Has demonstrated how the delivery model supports growing Aboriginal businesses and making viable pathways to support employment and increase the economic participation of Aboriginal people (Sub criteria weighting 50%)	10%

9. Mandatory Information

Financial - Please provide copies of the most recently audited financial statements for the lead agency for the last 2 financial years. If your organisation does not have an audit undertaken, please provide copies of the most recent unaudited financial statements (or equivalent) for the last 3 financial years.

Risk Management - The applicant must submit a risk management plan that includes identification of major risks and mitigation strategies involved with delivering the project. The plan should include ensuring compliance with requirements for working with vulnerable persons and incident reporting.

10. Budget

Practical guide to providing price information

These instructions should be read in conjunction with the remainder of the RFP.

- The anticipated occasions of service per resident is 10.
- All prices should be set out as exclusive of GST.
- Prices submitted by tenderers should include all costs associated with the delivery of goods or the performance of the services.
- You should include all assumptions, exclusions and caveats in relation to your stated pricing.
- Operational costs are itemised and include all local service provision related expenditure e.g. rent, fleet, accommodation, professional development, information technology, telephone, internet, utility allowance, incidental reimbursements, maintenance of equipment and other travel.
- Admin Costs are to be no more than 10% of overall Budget and includes all organisational governance and administration, management, finance, payroll, HR, Insurances etc.
- Any travel that you anticipate will be required to undertake in the performance of the services must be charged at the actual cost incurred by you (up to the limits imposed by the prevailing ATO Determination on Reasonable Travel Allowances that apply in respect of non-SES personnel).

11. Additional Information

Responses should be contained within the RFP Application Form and should address all of the questions posed within the attached template.

Please note:

- Responding to this Request for Proposal does not constitute an agreement to a binding contract.
- Any amendments to this RFP will be provided as an addendum and will be made available to all potential suppliers via Tenderlink. Applications must acknowledge that they are aware of each addendum in their submission.
- The Draft Contract for Services will be uploaded to Tenderlink as an Addendum on Friday 28th May.

12. Conditions of this Request for Proposal

General
Respondents should familiarise themselves with this Request for Proposal document and the separate RFP Application Form and ensure that their proposals comply with the requirements set out in these documents. Respondents are deemed to have examined statutory requirements and satisfied themselves that they are not participating in any anti-competitive, collusive, deceptive or misleading practices in structuring and submitting the proposal.

Acceptance
Non-complying submissions will be rejected. WNSW PHN may not accept the lowest priced proposal and may not accept any proposal.

Explanations
Verbal explanations or instructions given prior to acceptance of a proposal shall not be binding.

Assessment
WNSW PHN reserves the right to engage a third party to carry out assessments of a Respondent's financial, technical, planning and other resource capability.

Legal entity
WNSW PHN will only enter into a contract with an organisation or individual with established legal status (e.g. under Corporations Law, Health Services Act, Trustee Act), or a natural person at least 18 years of age with mental capacity to understand the agreement.

ABN/Taxation requirements
WNSW PHN will only deal with Respondents who have an Australian Business Number (ABN).

Costs
Each Respondent will meet its own costs associated with the preparation and presentation of its proposal and any negotiations.

Additional information
If additional information to that requested in this document is required by WNSW PHN when proposals are being considered, written information and/or interviews may be requested to obtain such information at no cost to WNSW PHN. WNSW PHN may also provide additional information or clarification.

Process
WNSW PHN reserves the right to withdraw from or alter the RFP process described in the RFP document for whatever reason, prior to the signing of any agreement/contract with any party for the delivery of the Services described in this document.

Negotiation
WNSW PHN reserves the right to negotiate with short-listed Respondents after the RFP closing time and allow any Respondent to alter its submission. **Part applications**
WNSW PHN reserves the right to accept applications in relation to some and not all of the scope of activity described, or contract with one, more than one or no Respondent on the basis of the proposals received.

Conflicts of interest
Respondents must declare to WNSW PHN any matter or issue which is or may be perceived to be or may lead to a conflict of interest regarding their submission or participation in the supply of the Services described.

Ownership
All applications and any accompanying documents become the property of WNSW PHN. Ownership rights of all information, reports or data remain unchanged. The Respondent shall not, without the written approval of WNSW PHN, use WNSW PHN's information other than in the development of the proposal or the delivery of the Services. Such information, in whatever form provided by WNSW PHN or converted by the Respondent, must be destroyed in a secure fashion following advice of the outcome of the RFP process or at completion of the provision of the Services.

Notification of Probity Breach
Should any Respondent consider that the RFP process has failed to accord it fair right to be considered as a successful Respondent or that it has been prejudiced by any breach of these terms and conditions or other relevant principle affecting tender submissions or their evaluation, the Respondent must provide to WNSW PHN immediate written notice including details of the alleged failure or breach to the WNSWPHN General Manager Corporate Services and Governance .

Lobbying
Any attempt by any Respondent to exert influence on the outcome of the assessment process by lobbying WNSW PHN staff, directly or indirectly, will be grounds for disqualification of the proposal from further consideration.

Administration
WHAL will only enter into a Contract / Agreement with a Respondent who can demonstrate that the Respondent's attribution of the total administrative operational overheads and/or expenses to the Activity is reasonable and does not exceed 10% of total contract value (excl. GST).

Proposals Submitted by Joint Ventures or Consortia

Where a Respondent is comprised of more than one entity the RFP Response must include all details relevant to each entity and the structure of the joint venture or consortium submitting the Proposal, and the RFP response must be executed by each such entity;

WNSW PHN may require a copy of any joint venture agreement or other contractual arrangement relating to the Respondent's composition to be provided before considering any such Proposal.