

Service Name: Healthy Ageing

| | Question | Answer |
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| 1 | Can our organisation partner with the University of Canberra? | <p>The Request for Proposal (RFP) has no restriction on the type of organisation that you can partner with, as long as all providers involved in service provision meet the following criteria:</p> <ul style="list-style-type: none"> - have relevant skills and experience in supporting older persons in the area of their proposed activities - have a registered Australian Business Number (ABN) - adhere to relevant national service, safety and quality health standards and guidelines - where applicable, health professionals must have full and unconditional Ahpra registration and corresponding National Board or membership with a relevant association. <p>Eligible organisations are encouraged to partner with other organisations with specific capabilities to achieve the activities objectives. Applications that demonstrate a multi-disciplinary approach to patient's care needs will be highly regarded.</p> |
| 2 | Can our organisation partner with Canberra Health Services? | Same response to Q1 |
| 3 | Can our organisation partner with a GP and/or another organisation with insurance/indemnity etc to hire the clinical/allied health staff to deliver a program? | Same response to Q1 |
| 4 | Is the University of Canberra eligible to receive funding and then subcontract Canberra Health Services to deliver the program? | <p>Applicant can collaborate with, or subcontract any third party, as long as they meet:</p> <ul style="list-style-type: none"> • the professional and quality standards (as outlined in the response to Question 1) • the budget criteria outlined in the tender document. That is: <ul style="list-style-type: none"> - administration cost is capped at 14.5% of the proposed budget - 85.5% of the proposed budget is allocated for service delivery - all items are quoted GST-exclusive |

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| 5 | Can we allocate 20% of funding to collecting outcome data and analysing data to assess impact? | Data analysis and reporting on outcome data is considered part of administrative cost, which is capped at 14.5% of the total proposed budget. |
| 6 | What would be the ideal number of participants for the program? | <p>Assessment on the participant number will be based on needs identified, and to what extent the proposed activities can help address the identified needs.</p> <p>In the response form, we have a section for applicants to provide the:</p> <ul style="list-style-type: none"> - size of the population with the identified needs that their activities are aimed at, and - estimate proportion/number of the identified population that the proposed activities can support. |
| 7 | How many people has CHN identified as being in this cohort? | <p>This funding is aimed to support older persons living in community. the tender documentation outlines the inclusion criteria listed below:</p> <ol style="list-style-type: none"> 1. people aged 65 and over 2. Aboriginal and Torres Strait Islander people aged 50 and over. <p>According to the 2021 Census, there were 62,171 people aged 65 and over living in the ACT, with around 3,200 older persons residing in residential aged care facilities. These two figures can assist in estimating the population size of older persons in the ACT.</p> <p>For further information on local needs and our priority areas, please refer to the CHN Needs Assessment 2021-2024, particularly pages 12-14; 18-20; 34-39; 44-45; 62; 73; 74; 76-78; 79. Link: https://www.chnact.org.au/wp-content/uploads/2022/03/Capital-Health-Network-ACT-PHN-2021-24-Needs-Assessment.pdf</p> |
| 8 | Are we able to put in an application for specific sub-sections of the ageing community? e.g. marginalised, homeless, with ATOD issues? | Yes, as long as the target group meets the age requirements and are residing in community. |
| 9 | Is there a preference for projects that cover regional areas? | This funding only covers areas that are within the ACT border. |
| 10 | Can I put in a combined application between 3 existing businesses (independent of each other) - I assume there should be one primary application and list the other interested parties? | We encourage joint applications that can enhance the quality and experience of care through a multi-disciplinary approach. In the case of a joint application, please submit only one application and provide details on the collaboration in a dedicated section in our response form (Section 1.4). |

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| 11 | I understand that there are strict word limits for RFP applications, and I also wanted to confirm whether organisations are able to submit any additional supporting documents with our applications? | Documents may not be attached. The assessment will be based on the criteria set out in the application form. Words over the limit will not be taken into consideration for the proposal. We encourage applicants to invest in writing and reviewing the application to make it succinct and informative. This process will help applicants be clear on what they can deliver and assist us to better understand your proposal. |
| 12 | In these marginalised communities, as per Aboriginal and Torres Strait Islanders, ageing happens earlier in life. For example, ATOD ageing happens earlier. Is the 65-age limit strict? Or can we put in evidence that it is needed for people above the age of 50? | We can provide some flexibility in age restrictions for marginalised groups with early onset of ageing. Please provide evidence to support the proposal as needed. |
| 13 | Can you give a bit more detail on the upskilling of health professionals and expectations. | <p>Please refer to our tender documents and CHN Needs Assessment 2021-2024 page 12-14; 18-20; 34-39; 44-45; 62; 73; 74; 75; 76-78; 79. Link: https://www.chnact.org.au/wp-content/uploads/2022/03/Capital-Health-Network-ACT-PHN-2021-24-Needs-Assessment.pdf</p> <p>Examples of successful upskilling activity outcomes:</p> <ul style="list-style-type: none"> • Health professionals can be more confident and capable of providing the support for identified needs after the upskilling activity. • There is an increase in the number of occasions that primary health professionals provide support for the identified needs. |
| 14 | Are Universities eligible to receive funding? | Yes, Universities are eligible. |
| 15 | Are we able to provide a risk management plan excel document or is it best to provide a text only answer within the template? | Please include a consolidated plan in the response form Applicants can create a table in the response field to help organise their responses. |
| 16 | Is the total funding for each successful providers or is it split across the providers? | The total funding is to be split across the successful providers. |
| 17 | If we are answering or addressing only a subset of the suggested priority area, how will we define it in the RFP? | Applicants can provide details on the subset of the suggested priority areas in Section 1.2 of the Response Form. There is no expectation that the activities need to address all priority areas. Please only provide details on the priority areas that are most relevant to your proposed activities. |
| 18 | In regard to the total funding, would there be consideration for one provider covering six priority areas? | Providers can propose activities that cover as many priority areas as it matches their capacity and capability to deliver. CHN does not have any restrictions on the number of priority areas that the proposed activities can cover. |

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| 19 | Can we arrange a one-on-one meeting with you? | To keep the process fair and transparent, CHN cannot arrange one-on-one meetings with any applicant. We encourage applicants to send their questions to our tender mailbox (tenders@chnact.org.au) on or before close of business 22 March 2024. The more details you provide, the better we can support you. CHN has procedures in place to protect applicant's privacy through this process. |
| 20 | Will all question responses be available for everyone on the CHN website? | Yes, responses to all questions emailed to tenders@chnact.org.au will be added to this Q+A document and updated regularly during the Q+A period. We employ measures to de-identify all questions and answers, but still make it useful for other applicants to a certain extent. For questions and answers that cannot be de-identified, CHN will not publish it on our website. |
| 21 | When would we be notified of whether our application had been successful? You did mention that contract negotiations would occur by 30th June with services commencing July 2023, but I just wanted to know from a marketing perspective to potential clients (i.e., would we know of success to start marketing 2 months out from a July program)? | CHN will notify successful applicants from 17 May 2024. |
| 22 | In the risk section of the tender application are you looking for information on the physical access/facilities of the program or safety measures of the program (i.e., first aid protocols, incident reporting protocol)? | Yes. CHN looks for the mentioned information to ensure that the program has appropriate safety measures in place for participants. |
| 23 | Is there a preference on how you would like auditing data (i.e., excel spreadsheet)? | We will provide reporting templates and spreadsheets to be filled. These will be communicated to the successful applicants. |
| 24 | Can some of the project funds be paid to Canberra Health Services or ACT Health to deliver intervention/activity in community? | Please see question 1 response. |
| 25 | We often refer to ACT & surrounding regions when we are working under certain grants. Can you please define what you meant by 'within the ACT'. Does it mean any areas that has ACT Postcode? PHNs have a map showing members covered by each PHN, if you have a map for CHN, that will be helpful. | Please refer here for information on CHN's catchment area: Australian Capital Territory Primary Health Network (PHN) resource collection Australian Government Department of Health and Aged Care |

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| 26 | Is the response required to be submitted on the RFP Response Form provided, or can we redesign whilst still following the same format and word limit requirements. | For applications to be compliant they must be submitted on the RFP Response Form provided on the CHN website. The form cannot be re-designed. |
| 27 | Would it be possible to extend the submission deadline? | Unfortunately, we will not be able to extend the submission deadline. |
| 28 | Is there a specified template for the budget that CHN would like us to submit? | Applicants can create a table in the response field to help organise their responses. There is no word count for the budget section. |
| 29 | What Administration activities can be included in the 14.5% other than previously mentioned 'evaluation and general admin'? | Due to the variety in the model of care proposed for this funding, it would be difficult to identify a fix list of administration activities. We decide what is administrative costs or not based on the model of care of each proposal. The principle that we adhere to is that administration refers to costs other than those directly contribute to service delivery. |
| 30 | Will there be an RFP briefing session? If so, could I get the details? | Due to the tight timeframe, we will not be holding a briefing session. We suggest reading through this Q&A and general overview that has been uploaded onto our website tenders page under the heading 'Additional Information'. Please send through any questions to tenders@chnact.org.au . Questions and request for information close 5pm, Friday 22 March 2024. |
| 31 | Does CHN expect the activity/activities to be delivered in a specific location type (e.g. in a clinic or community centre, in-home, remote delivery (phone, video call)) or is the CHN flexible to consider all types? | There is no requirement regarding location of the activity as long as it can be easily accessed by the elderly people in the community. |
| 32 | Just wanted to confirm whether CHN allows for attachments to be made to the tender response? (e.g. If we wanted to attach a copy of one of our policies, would that be allowed?) | Capital Health Network will accept additional supporting documentation (for example, a risk management plan) in response to the RFP assessment items. These will be considered in addition to the maximum word count identified for each question. However, additional documentation will not be eligible for consideration if utilised to extend the word count. Any supporting items should only supplement and/or provide relevant insight into your written response. |