



Request for Proposal (RFP)

Healthy Ageing Early Intervention (PAC095)

Contents

Introduction

Part A - Reference Schedule

Part B - Statement of Requirements

Part C – Assessment Criteria

Part D – Additional Requirements, Assurance and Compliance Considerations

Part E - Conditions of the RFP Process

Introduction

Capital Health Network (CHN) is the Primary Health Network (PHN) for the ACT. PHNs have been established by the Australian Government with the key objectives of:

- increasing the efficiency and effectiveness of health 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.

Some older Australians are entering aged care earlier than they may otherwise need to due to a lack of support for healthy ageing or ability to manage their chronic conditions in the community. CHN has received funding from the Department of Health and Aged Care (DoHAC) to commission early intervention initiatives to support healthy ageing and the management of chronic conditions. The funding is focused on older people residing in the community, aged 65 and over or Aboriginal and Torres Strait Islander people aged 50 and over.

This funding is to help older Australians maintain their quality of life in the community for longer and avoid preventable hospitalisations. This funding also supports the empowering of GPs and other





primary health care workers through training, tools and resources which contribute to improved health and care outcomes for older people.

This funding is not an ongoing funding source, therefore, consideration of sustainability and/or impact on activities beyond the funding period need to be considered and included within the application.

The scope of activities being sought via this Request for Proposal include:

- co-design and implementation of targeted interventions to prevent, identify and reduce chronic disease and health issues, avoid inappropriate hospital admissions and improve health outcomes for the elderly and/or;
- supporting collaborative approaches between multidisciplinary teams and primary care providers and/or;
- expanding existing healthy ageing programs where relevant and/or;
- educating primary health care providers on how to connect senior Australians with necessary psychosocial, health, social and welfare supports and/or;
- educating family members or carers on how to manage an older person's health.





Part A: Reference Schedule

Information in this Reference Schedule must be read in conjunction with **Part E** of this RFP.

Item 1	RFP Reference	PAC095
Item 2	Key contact during RFP	Name: Hope McMahon
	process	
		Email: tenders@chnact.org.au
Item 3	Timetable*	
	RFP issued	Monday 4 th March 2024
	End of period for	5.00 pm Friday, 22 nd March 2024
	questions or requests for	Questions or requests for information must be submitted via
	information	<u>tenders@chnact.org.au</u> using the subject heading PAC095 –
		Questions
	Closing time and date	5.00 pm Tuesday 2 nd April 2024
Item 4	Lodgement	
	Lodgement instructions	Responses must be submitted on Request for Proposal
		template provided.
		Responses to be emailed as <u>PDF</u> to <u>tenders@chnact.org.au</u>
		Email subject line to include: PAC095 RFP [respondent
		name or organisation].
		All responses must respond to the Statement of
		Requirements (Part B) in consideration of the assessment
		criteria (Part C), compliance and assurance requirements
		(Part D) and the standard Conditions of the RFP Process
		(Part E).
Item 5	Additional materials and	• NSW Government - Developing and Using Program Logic:
	information	<u>A Guide</u>
		 Working with consumers - NSW Government Agency for
		Clinical Innovation
		Additional materials and information should be considered by the
		reader alongside this Request for Proposal.
Item 6	Additional Rules	Any words exceeding the word limit provided in each
		section will not be considered.
		No weblinks, attachments, screen shots or images will be
		considered as part of the RFP.

^{*} May be changed by CHN in accordance with the Conditions of the RFP Process set out in Part E of this RFP.





Part B: Statement of Requirements

Overview of Program

CHN will fund early intervention activity/activities to support older people to live at home for longer (including those not currently receiving aged care services). The proposed activity/activities should aim to promote healthy ageing, slow decline, and support the ongoing management of chronic conditions.

Priority areas for older people residing in community include but are not limited to:

- Nutrition and eating habits
- Chronic pain management
- Mental health
- Psychosocial support for complex life circumstances
- Dementia support
- Loneliness and social isolation
- Care coordination
- Physical activities, especially with considerations for specific comorbidities (e.g. Parkinson's, Dementia)
- Falls prevention
- Medication review and management
- Patient education and self-management support

The funding will also support activity/activities to upskill health professionals in the primary care space to cover the identified needs, including:

- Advance care planning
- Medication review, management and supports
- Behavioral and dementia screening and supports post diagnosis
- Allied health needs of older people for reablement and rehabilitation
- Falls and frailty screening and prevention
- Mental health/ loneliness and social isolation support

We are looking at a range of activities to assist people across a range of domains of care: Some examples of prospective projects can be found here. For further information on local needs and our priority areas please refer to the CHN Needs Assessment 2021-2024

In-scope activity/activities

- Co-design and implementation of targeted interventions to prevent, identify and reduce chronic disease and health issues, avoid inappropriate hospital admissions and improve health outcomes for the elderly.
- Supporting collaborative approaches between multidisciplinary teams and primary care providers.
- Expanding existing healthy ageing programs where relevant including (current CHN commissioned providers).
- Educating primary health care providers on how to connect senior Australians with necessary psychosocial, health, social and welfare supports.
- Educating family members or carers on how to manage an older person's health.





Out-scope activity/activities

- Activity/activities which are remunerable through Medicare such as GP services.
- Social support or recreational activity/activities that are provided by other providers in the ACT
- Disability support services covered under the National Disability Insurance Scheme

Requirements

CHN is seeking an RFP from individuals or organisations who wish to be considered for the provision of the healthy ageing tender until <u>30/06/2025</u>. The following standards apply to potential future suppliers.

Professional Standards

- a Non-Government Organisation (NGO) with experience working to improve the health and wellbeing of older people; and/or
- a training provider or professional body with experience in training/ coaching health care professionals and/or carers to care for older people; and/or
- an incorporated entity with experience working with older people (e.g., pharmacy, allied health cooperatives).
- A current registered Australian Business Number (ABN).

Eligible organisations are encouraged to partner with other organisations with specific capabilities to achieve the activity/activities' objectives. Applications that demonstrate a multi-disciplinary approach to patients' care needs will be highly regarded.

Existing Healthy Ageing, Early Intervention Providers are welcome to apply.

Activities based in the primary care and community spaces will be prioritised.

Accreditation and Quality Standards

Where applicable, Supplier must adhere to relevant national service, safety and quality health standards and guidelines, including but not limited to:

- Cultural Respect Framework 2016–2026 for Aboriginal and Torres Strait Islander Health.
- Aged Care Quality Standard: Quality Standards | Aged Care Quality and Safety Commission
- RACGP standards for general practice 5th edition
- Commonwealth Child Safe Framework

Additional Information required:

- Clear aims, evidence, activity description, implementation plan and workflow
- Clear strategies for client recruitment, engagement, and retention
- Achievable and measurable outcomes with practical data collection approach
- Outcomes measures directly relevant to the population needs.
- Clear demonstration of the resources and experiences you have to implement the proposed activity/activities before 30 June 2025
- Clear strategies for collaboration with other services to reduce the barriers to accessing the program and/or adding value





- Clear added value to current services that are operating in the ACT. Please be aware that your proposed activity/activities should not be duplicative of any services that are operating in the ACT
- An appropriate proposed budget in comparison to the proposed activity/activities
- Detailed responses to all questions in the application form

Additional Resources

NSW Government - Developing and Using Program Logic: A Guide
Working with consumers - NSW Government Agency for Clinical Innovation

Anticipated timeframes

This procurement activity will be undertaken in accordance with the below timeframes:

Stage 1 - Request for Proposals:

- Procurement to commence by 4 March 2024
- End of period for questions or requests for information 5.00 pm, Friday 22 March 2024
- Proposals closes 5.00pm, Tuesday 2nd April 2024

Stage 2 - Review of Submissions:

- Review of proposals by 30 April 2024
- Preferred Supplier identified

Stage 3 - Contract Negotiation:

Contract negotiation finalised by 17 May 2024

Stage 4 - Establishment:

• Establishment from 1 July 2024

Stage 5 - Services Commence:

Services to commence 1 July 2024

Service Delivery

Activity / Activities must meet the following requirements:

- be delivered in the ACT.
- be intended for older persons residing in community, with a focus on better management of chronic conditions, early intervention, healthy ageing in place, slow decline, hospital avoidance and/or better quality of life in community.
- should benefit a number of older people in the ACT.
- suppliers should refer to relevant sections of <u>Capital Health Network 2021-2024 Needs</u>
 <u>Assessment</u> to design a program to:
 - support identified gaps and/or priority populations
 - o minimise the potential barriers to access
- demonstrate its capability to meet KPIs as indicated in <u>International Consortium for Health</u>
 Outcomes Measurement (ICHOM) older person standard assessment.
- have a clear strategy for client recruitment, engagement and retention, with proposed measurable outcomes (incl. target participation rate, duration for retention and communication/ marketing plan)





- collaborate with other service providers to reduce the barriers to access the program and/or add value
- create sustainable impacts on the health and wellbeing of older people.





Service Agreements and Deliverable/Reporting Requirements

Services Orders will commence on execution of the agreement and continue until 30 June 2025. Indicative deliverable requirements are detailed below. These will be finalised during contract negotiation.

Deliverable	Timeframe
Initial kick off meeting	Within first four weeks
Status meetings	Monthly during implementation then quarterly.
Unaudited Financial Acquittal (1 Jul 2024 – 31 Dec 2024)	31 January 2025
Performance Report (1 Jul 2024 – 31 Dec 2024)	31 January 2025
Unaudited Financial Acquittal (1 Jan 2025 – 30 Jun 2025)	31 July 2025
Performance Report (1 Jan 2025 – 30 Jun 2025)	31 July 2025
Audited Financial Acquittal 2024/2025	31 October 2025

Anticipated Service Budget

CHN will fund multiple providers following the execution of a relevant services order (contract) until 30 June 2025. Approximately \$503,737.23 (GST-exclusive) is expected to be funding two - three service providers who will be contracted via this procurement (RFP) process for the period 1 July 2024 - 30 June 2025.

Using the above-mentioned funding amount as a guide, the RFP respondent must provide a budget that aligns with their proposal. This funding will be in accordance with the following splits:

- Service Delivery 85.5%
- Administration Costs 14.5%





Part C: Assessment Criteria

The following criteria will be used to assess proposals.

Asses	sment Criteria	Weighting
1.	Relevant Experience and Capabilities	
1.1 De	scribe the activity/activities you intend to conduct under the Healthy Ageing, Early	15%
	ention Program. Please include information on:	15/6
	description of the proposed activity/activities with defined scope and eligibility criteria for participants;	
2.	detail the number of participants/sessions/resources to be supported/developed in this program;	
3	the evidence to support the effectiveness of the proposed activity/activities;	
	the long-term change that the activity/activities aim to create/ the aim of the proposed activity/activities (e.g. changes in behaviours, knowledge, awareness, attitudes, beliefs, perceptions, skills);	
5.	outcomes of the proposed activity/activities. These outcomes should be measurable.	
1.2 Te	Il us more about the local needs for your proposed activity/activities that relate to the	20%
	of this funding:	20/0
1.	the size of ACT population with identified needs in the ACT, demographics, relevant	
	specific conditions and acuity level;	
2.	other needs/ gaps that the proposed activity/activities are going to address (refer to	
_	relevant sections of the Capital Health Network 2021-2024 Needs Assessment;	
3.	how the proposed activity/activities add value to the current services in the ACT.	
	The proposed activity/activities should NOT duplicate any existing services that are	
	operating in the ACT. If you are a current provider under this program, please	
	include detail of the benefit of the extended activity.	
1.3 Ple	ease discuss measures for tracking progress, success and evaluation here:	5%
1.	What ICHOM patient outcome measures are being utilised for the proposed	370
	activity/activities? (further ICHOM Measures information)	
2.	What other measures will be used to monitor outcomes of the proposed activity/activities?	
3	How will you collect the data for these outcome measures? And how often they will	
Э.	be collected?	
1.4 Ple	ease discuss further implementation aspects of the proposed activity/activities here:	100/
1.		10%
2.		
3.		
	current relationship with them? In what capacity will you collaborate?	
	Il us about your organisation's capacity to deliver the proposed activity/activities,	20%
includ		
1.		
2.	Telehealth (if applicable)	





3.	Staffing, skills and experience. How can your organisation deliver this service successfully?	
4.		
1.6 . Pl	ease indicate your proposed budget. Please note that:	10%
1.	Itemised budget is cost effective, within funding available and provides Value for Money.	1070
2.		
3.	Administrative costs are capped at a maximum of 14.5% of proposed budget.	
4.	All amounts included in the proposed budget must be GST-exclusive.	
2.	Assurances and Compliance	
_	onflict of Interest	N/A
Provid conflic or may	onflict of Interest le details of any interests, relationships or clients which may or do give rise to a set of interest and the area of expertise in which that conflict or potential conflict does by arise, plus details of any strategies for preventing and/or managing conflicts of set (actual or perceived).	N/A
Provid conflictor may interest	le details of any interests, relationships or clients which may or do give rise to a cit of interest and the area of expertise in which that conflict or potential conflict does by arise, plus details of any strategies for preventing and/or managing conflicts of st (actual or perceived). isk management and mitigation strategies le details of all risk management strategies and practices of the Applicant that would blicable or relevant in the context of the supply of goods and/or services. Consider the ing:	N/A 20%
Provid conflictor may interest	le details of any interests, relationships or clients which may or do give rise to a cit of interest and the area of expertise in which that conflict or potential conflict does by arise, plus details of any strategies for preventing and/or managing conflicts of st (actual or perceived). isk management and mitigation strategies le details of all risk management strategies and practices of the Applicant that would blicable or relevant in the context of the supply of goods and/or services. Consider the ing: What are the potential barriers for older people to access your activity/activities?	
Provid conflictor may interest	le details of any interests, relationships or clients which may or do give rise to a cit of interest and the area of expertise in which that conflict or potential conflict does y arise, plus details of any strategies for preventing and/or managing conflicts of st (actual or perceived). isk management and mitigation strategies e details of all risk management strategies and practices of the Applicant that would blicable or relevant in the context of the supply of goods and/or services. Consider the ing: What are the potential barriers for older people to access your activity/activities? What are the proposed mitigation strategies for the identified barrier(s)?	
Provid conflictor may interest	le details of any interests, relationships or clients which may or do give rise to a cit of interest and the area of expertise in which that conflict or potential conflict does y arise, plus details of any strategies for preventing and/or managing conflicts of st (actual or perceived). isk management and mitigation strategies le details of all risk management strategies and practices of the Applicant that would plicable or relevant in the context of the supply of goods and/or services. Consider the ing: What are the potential barriers for older people to access your activity/activities? What are the proposed mitigation strategies for the identified barrier(s)?	
Provid conflictor may interest 2.2 R Provid be app follow 1. 2. 3.	le details of any interests, relationships or clients which may or do give rise to a cit of interest and the area of expertise in which that conflict or potential conflict does by arise, plus details of any strategies for preventing and/or managing conflicts of st (actual or perceived). isk management and mitigation strategies le details of all risk management strategies and practices of the Applicant that would plicable or relevant in the context of the supply of goods and/or services. Consider the ing: What are the potential barriers for older people to access your activity/activities? What are the proposed mitigation strategies for the identified barrier(s)? Are there any potential risks for older people when participating in your	
Provid conflictor may interest 2.2 R Provid be app follow 1. 2. 3.	le details of any interests, relationships or clients which may or do give rise to a cit of interest and the area of expertise in which that conflict or potential conflict does y arise, plus details of any strategies for preventing and/or managing conflicts of st (actual or perceived). isk management and mitigation strategies le details of all risk management strategies and practices of the Applicant that would plicable or relevant in the context of the supply of goods and/or services. Consider the ing: What are the potential barriers for older people to access your activity/activities? What are the proposed mitigation strategies for the identified barrier(s)? Are there any potential risks for older people when participating in your activity/activities? If yes, what are they?	

Part D: Additional Requirements, Assurance and Compliance Considerations

Considerations Additional Requirements

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N/A

Assurances and Compliance

The following information should be included in your response to the RFP (space provided):

- a. Conflict of Interest
- b. Insurances
- c. Accreditation/Registration certification (as appropriate)
- d. Referees to support application





Part E: Conditions of the RFP Process

1. Application of these rules

Participation in the RFP Process is subject to compliance with the rules contained in this **Part E**.

All persons (whether or not they submit an RFP) having obtained or received this RFP may only use it, and the information contained in it, in compliance with the rules set out in this **Part E**.

All Respondents are deemed to accept the rules contained in this **Part E**.

The rules contained in this **Part E** of the RFP apply to:

- a. the RFP and any other information given, received or made available in connection with the RFP including any additional materials specified in **Reference Schedule (Part A)** and any revisions or addenda,
- b. the RFP Process, and
- c. any communications (including any Briefings, presentations, meetings or negotiations) relating to the RFP or Process.

2. Structure of Request for Proposal

This RFP consists of the following parts:

Introduction – contains an overview of the opportunity presented in, and the objectives of, this RFP.

Part A – Reference Schedule

Part B - Statement of Requirements describes the Goods and/or Services in respect of which CHN invites proposals from invited suppliers.

Part C - Assessment Criteria

Part D – Additional Requirements, Assurance and Compliance Considerations

Part E - Conditions of the RFP Process sets out the rules applying to the RFP documents and to the Process. These rules are deemed to be accepted by all Respondents and by all persons having received or obtained the RFP.

3. Request for Proposal

3.1 Status of RFP

This RFP is not an offer. It is an invitation for potential Suppliers to submit a proposal for the provision of the Goods and/or Services set out in the Statement of Requirements contained in Part B of this RFP.

Nothing in this RFP is to be construed as creating any binding contract for the supply of the Goods and/or Services (express or implied) between CHN and any Respondent until CHN and a Respondent enter into a final, binding contract.





3.2 Accuracy of RFP

While all due care has been taken in connection with the preparation of this RFP, CHN does not warrant the accuracy of the content of the RFP and CHN will not be liable for any omission from the RFP.

3.3 Additions and amendments

CHN reserves the right to change any information in or to issue addenda to this RFP.

3.4 Representations

No representation made by or on behalf of CHN in relation to the RFP (or its subject matter) will be binding on CHN unless that representation is expressly incorporated into any contract(s) ultimately entered into between CHN and a Respondent.

3.5 Licence to use and Intellectual Property Rights

Suppliers obtaining or receiving this RFP and any other documents issued in relation to this RFP may use the RFP and such documents only for the purpose of preparing a proposal.

Such Intellectual Property Rights as may exist in the RFP and any other documents provided to Respondents by or on behalf of CHN in connection with the Process are owned by (and will remain the property of) CHN except to the extent expressly provided otherwise.

3.6 Availability of additional materials

Additional materials (if any) may be accessed in the manner set out in the **Reference Schedule** (Part A).

4. Communications during the RFP Process

4.1 Key contact

All communications relating to the RFP and the Process must be directed to the Key Contact by email to tenders@chnact.org.au

4.2 Requests for clarification or further information

Any communication by a Respondent to CHN will be effective upon receipt by the Key Contact (provided such communication is in the required format).

CHN may restrict the period during which it will accept questions or requests for further information or for clarification and reserves the right not to respond to any question or request, irrespective of when such question or request is received.

Except where CHN is of the opinion that issues raised apply only to an individual Respondent, questions submitted and answers provided will be made available to all potential Suppliers via email from tenders@chnact.org.au at the same time without identifying the person or organisation having submitted the question.

A Respondent may, by notifying the Key Contact in writing, withdraw a question submitted in accordance with this **section 4.2**, and only if the question remains unanswered at the time of the request.





4.3 Improper assistance

Respondents must not seek or obtain the assistance of Directors, employees, agents, contractors or service providers (with respect to this RFP) of CHN in the preparation of their proposal. In addition to any other remedies available to it under law or contract, CHN may, in its absolute discretion, immediately disqualify a Respondent that it believes has sought or obtained such assistance.

4.4 Anti-competitive conduct

Respondents and their respective officers, employees, agents and advisers must not engage in any collusion, anti-competitive conduct or any other similar conduct with any other Respondent or any other person in relation to the preparation, content or lodgement of their proposal. In addition to any other remedies available to it under law or contract, CHN may, in its absolute discretion, immediately disqualify a Respondent that it believes has engaged in such collusive or anti-competitive conduct.

4.5 Complaints about the RFP Process

Any complaint about the RFP Process must be submitted to the Key Contact in email to tenders@chnact.org.au immediately upon the cause of the complaint arising or becoming known to the Respondent. The written complaint statement must set out:

- a. the basis for the complaint (specifying the issues involved)
- b. how the subject of the complaint (and the specific issues) affect the person or organisation making the complaint
- c. any relevant background information, and
- d. the outcome desired by the person or organisation making the complaint.

5. Submission of Proposals

5.1 Lodgement

Respondent proposals must be lodged only by the means set out in the **Reference Schedule** (Part A).

5.2 Late proposals

Proposals must be lodged by the Closing Time set out in the **Reference Schedule (Part A)**. The closing time may be extended by CHN in its absolute discretion.

Proposals lodged after the closing time or lodged at a location or in a manner that is contrary to that specified in this RFP will be disqualified from the Process and will be ineligible for consideration, except where the Respondent can clearly demonstrate (to the reasonable satisfaction of CHN) that late lodgement of the proposal:

- a. resulted from the mishandling of the Respondent proposal by CHN; or
- b. was hindered by a major incident and the integrity of the Process will not be compromised by accepting a proposal after the closing time.





The determination of CHN as to the actual time that a proposal is lodged is final. Subject to **Section (a) and (b)** above, all proposals lodged after the closing time will be recorded by CHN, and will only be processed for the purposes of identifying a business name and address of the Respondent. CHN will inform a Respondent whose proposal was lodged after the closing time of its ineligibility for consideration.

6. RFP documents

6.1 Format and contents

Respondents must ensure that:

- a. their proposal is presented on the required template, and
- b. all the information fields in the RFP template are completed and contain the information requested
- c. links to websites or online documents must not be included in the proposal as they will not be reviewed by CHN.

CHN may in its absolute discretion reject a proposal that does not include the information requested or is not in the format required.

Unnecessarily elaborate proposals beyond what is sufficient to present a complete and effective RFP are not desired or required.

Word limits where specified should be observed and CHN reserves the right to disregard any parts of the proposal exceeding the specified word limit.

Respondents should fully inform themselves in relation to all matters arising from the RFP, including all matters regarding CHN's requirements for the provision of the Goods and/or Services.

6.2 Illegible content, alteration and erasures

Incomplete proposals may be disqualified or evaluated solely on the information contained in its proposal.

CHN may disregard any content in a proposal that is illegible and will be under no obligation whatsoever to seek clarification from the Respondent.

CHN may permit a Respondent to correct an unintentional error in its proposal where that error becomes known or apparent after the Closing Time, but in no event will any correction be permitted if CHN reasonably considers that the correction would materially alter the substance of the proposal.

6.3 Obligation to notify errors

If, after a proposal has been submitted, the Respondent becomes aware of an error in the proposal (excluding clerical errors which would have no bearing on the assessment of the proposal) the Respondent must promptly notify CHN of such error.





6.4 Preparation of proposals

CHN will not be responsible for, nor pay for, any expense or loss that may be incurred by Respondents in the preparation of their proposal.

6.5 Disclosure of Respondent contents and information

All proposals will be treated as confidential by CHN. CHN will not disclose proposal contents and information, except:

- a. as required by Law
- b. for the purpose of investigations by the Australian Competition and Consumer Commission (ACCC) or other government authorities having relevant jurisdiction
- c. to external consultants and advisers CHN engaged to assist with the Assessment Process
- d. to other government departments or agencies in connection with the subject matter of the related Commonwealth programme or Process, or
- e. general information from proposals required to be disclosed by government policy.

CHN does however, reserve the rights to benchmark costings against relevant industry standards and across other primary health network organisations.

6.6 Use of proposals

Upon submission in accordance with the requirements of **Section 5** of this **Part E** and the **Reference Schedule (Part A)**, all proposals become the property of CHN. Respondents will retain all ownership rights of intellectual property contained in the proposal. The submission of a proposal does not transfer to CHN any ownership interest in the Respondent's intellectual property rights, or give CHN any rights in relation to the proposal, except as expressly set out below.

Each Respondent, by submission of their proposal, is deemed to have licensed CHN to reproduce the whole, or any portion, of their proposal for the purposes of enabling CHN to evaluate the proposal.

6.7 Withdrawal of proposal

A Respondent who wishes to withdraw a proposal previously submitted by it must immediately notify CHN of that fact. Upon receipt of such notification, CHN will cease to consider that proposal.

7. Capacity to comply with Statement of Requirements

Part B of this RFP gives a statement of CHN requirements with regard to the Goods and/or Services the subject of this RFP. It will be assumed that each Respondent will be capable of providing all of the Goods and/or Services in full. Where Respondents believe they will not be capable of providing all the Goods and/or Services in full or will only comply with the Statement of Requirements subject to conditions, they should either not apply or set out any potential limitations in their proposal.





8. Assessment of proposals

8.1 Assessment process

Following the Closing Time, CHN intends to evaluate all proposals received.

Proposals will be evaluated against the Assessment Criteria specified in Part B of the RFP.

A proposal will not be deemed to be unsuccessful until such time as the Respondent is formally notified of that fact by CHN.

8.2 Clarification of proposal

If, in the opinion of CHN, a proposal is unclear in any respect, CHN may in its absolute discretion, seek clarification from the Respondent. Failure to supply clarification to the satisfaction of CHN may render the proposal liable to disqualification.

CHN is under no obligation to seek clarification to a proposal and CHN reserves the right to disregard any clarification that CHN considers to be unsolicited or otherwise impermissible in accordance with the rules set out in this **Part E**.

9. Next stage

9.1 Options available to CHN

After assessment of all proposals, CHN may, without limiting other options available to it, do any of the following:

- a. prepare a shortlist of Respondents and invite further response to the RFP from those Respondents,
- b. prepare a shortlist of Respondents and call for tenders for Goods and/or Services or any similar Goods and/or Services,
- c. call for tenders from the market generally for the Goods or Services or any similar or related goods or services,
- d. enter into pre-contractual negotiations with one or more Respondents without any further need to go to tender,
- e. decide not to proceed further with the RFP or any other procurement process for the Goods or Services,
- f. commence a new process for calling for proposals on a similar or different basis to that outlined in this invitation, or
- g. terminate the process at any time.

9.2 No legally binding contract

Being shortlisted does not give rise to a contract (express or implied) between the Respondent and CHN.

No legal relationship will exist between CHN and a shortlisted Respondent relating to the supply of the Goods or Services unless and until such time as a binding contract is executed by them.





10. Additional rules

Any rules governing this Request for proposal Process in addition to those set out in this **Part E**, are set out in the **Reference Schedule (Part A)**.

11. Respondent warranties

By submitting a proposal, a Respondent warrants that:

- a. in lodging its proposal it did not rely on any express or implied statement, warranty or representation, whether oral, written, or otherwise made by or on behalf of CHN, its officers, employees, agents or advisers other than any statement, warranty or representation expressly contained in the RFP documents,
- b. it did not use the improper assistance of CHN employees or information unlawfully obtained from CHN in compiling its proposal,
- c. it has examined this RFP, and any other documents referenced or referred to herein, and any other information made available in writing by CHN to Respondents for the purposes of submitting a proposal,
- d. it has sought and examined all necessary information which is obtainable by making reasonable enquiries relevant to the risks and other circumstances affecting its proposal,
- e. it has otherwise obtained all information and advice necessary for the preparation of its proposal,
- f. it is responsible for all costs and expenses related to the preparation and lodgement of its proposal, any subsequent negotiation, and any future process connected with or relating to the RFP Process,
- g. it otherwise accepts and will comply with the rules set out in this Part E of the RFP,
- h. it will provide additional information in a timely manner as requested by CHN to clarify any matters contained in the proposal, and
- i. it is satisfied as to the correctness and sufficiency of its proposal.

12. CHN rights

Notwithstanding anything else in this RFP, and without limiting its rights at law or otherwise, CHN reserves the right, in its absolute discretion at any time, to:

- a. vary or extend any time or date specified in this RFP for all or any Respondents or other persons, or
- b. terminate the participation of any Respondent or any other person in the Process.

13. Governing law

This RFP and the Process is governed by the laws applying in the Australian Capital Territory.

Each Respondent must comply with all relevant laws in preparing and lodging its proposal and in taking part in the Process.





14. Interpretation

14.1 Definitions

Respondent means an organisation that submits a proposal.

Briefing means a meeting (the details of which are specified in the **Reference Schedule**) that may be held by or on behalf of CHN to provide information about the RFP and the Process.

Capital Health Network (CHN) means the organisation responsible for the RFP and the Process.

Closing Time means the time specified as such in the **Reference Schedule** by which proposals must be received.

Proposal(s) and/or Response(s) means a document lodged by a Respondent in response to this RFP containing a proposal to provide Goods and/or Services sought through this Process.

RFP Process means the process commenced by the issuing of RFP and concluding upon formal announcement by CHN of the selection of shortlisted Respondent(s) or upon the earlier termination of the process.

Assessment Criteria means the criteria set out in Part C of the RFP.

Goods means the goods or other products required by CHN, as specified in **Part B** of this RFP.

Intellectual Property Rights includes copyright and neighbouring rights, and all proprietary rights in relation to inventions (including patents) registered and unregistered trademarks (including service marks), registered designs, confidential information (including trade secrets and know how) and circuit layouts, and all other proprietary rights resulting from intellectual activity in the industrial, scientific, literary or artistic fields.

Request for Proposal (RFP) means this document (comprising each of the Parts A, B, C, D and E) and any other documents so designated by CHN.

Statement of Requirements means the statement of CHN requirements contained in **Part B** of this RFP.

Reference Schedule means the schedule so designated forming part of **Part A** of the RFP. **Services** means the services required by CHN, as specified in **Part B** of this RFP.

14.2 Instruction

In this RFP, unless expressly provided otherwise a reference to:

- "includes" or "including" means includes or including without limitation, and
- "\$" or "dollars" is a reference to the lawful currency of the Commonwealth of Australia, and
- if a word and/or phrase is defined its other grammatical forms have corresponding meaning.