

Sector brief, 20 May 2025

Care finder program

Request for Proposal

Hope McMahon, Program Manager Older Persons Health

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Acknowledgement of Country



We wish to acknowledge the Ngunnawal people, the traditional custodians of the land on which we're meeting today, as well as other people and families with connections to the lands of the ACT and surrounding region.

We acknowledge and thank our First Nations communities for their ongoing contributions to the vibrant life and culture of Canberra, and pay our respects to their Elders past, present, and emerging. We also extend that respect to the traditional custodians of other lands that you may be attending this meeting from, as well as all Aboriginal and Torres Strait Islander people here today.

Finally, we recognise that sovereignty was never ceded- this always was and always will be Aboriginal land.

“Sunrise to Sunset” artwork by Sarah Richards was created to reflect CHN’s cultural journey to date and their Cultural Competency Framework (CCF). See our [website](#) for more information.

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Lived Experience

We acknowledge the individual and collective experience of those with lived or living experience of mental ill-health and suicide, and the experience of their carers, families, and supporters.

We value and respect the generous and vital contributions of those who share their unique perspectives to guide us to shape an effective and connected primary healthcare system that supports better outcomes for all.



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Anais le Gall

General Manager, Health System Improvement

Mamta Porwal

Senior Manager, Health System Integration

Rachael Baker

Service Relationship Manager

Jessica Hewson

Service Relationship Coordinator

Hope McMahon

Program Manager, Older Persons Health

Sharon Storen

Contracts Coordinator

Kunal Mohite

Education Lead

Session Overview

1. Briefing session **introduction**, overview, process, & housekeeping
2. Introduction to **Capital Health Network** (CHN)
3. **Request For Proposal** - PAC092 Care Finder Program
 - Overview
 - Documents to assist your application
 - Procurement & establishment timeline
4. **Questions**

Capital Health Network

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**.

CHN seeks to meet these aims across nine **priority areas**:

- Care across the continuum
- Digital health
- First Nations health
- Mental health
- Alcohol and other drugs
- Chronic conditions
- At-risk populations
- Older adults' health
- Workforce

Request For Proposal – care finder program

This Request For Proposal (RFP) seeks proposals from community and support organisations, and other health care providers, to work collaboratively with CHN in the delivery of the care finder program in the ACT region.

- CHN will establish and maintain a network of care finders to provide specialist and intensive assistance to help people within the care finder target population to understand and access aged care and connect with other relevant supports in the community.
- The care finder program will ensure provision of services that support engagement of older Australians within the aged care system, assist them with aged care service navigation, access and connection with other relevant community support so that their needs are more holistically met.

The care finder network will:

- address the specific local needs of the region in relation to care finder support
- be an integrated part of the local aged care system
- collect data and information to support an evaluation of the care finder program
- support and promote continuous improvement of the care finder program
- support improved integration between the health, aged care and other systems at the local level within the context of the care finder program.

Program Outcomes



[Care finder policy guidance](#)

Important information within the RFP document

Target group – page 4

Funding and budget information – page 7

Services required – page 8

Reporting requirements – page 9

Training and Supervision Requirements

- All care finders, their managers and triage staff will be required to complete mandatory online induction training regardless of prior training or experience. The induction training package developed by the Department of Health, Disability and Ageing will cover key foundational information for the care finder role and competencies.
- Client-facing staff will also be required to have completed training in cultural safety and trauma-informed care.
- Provision of support to care finder staff i.e. via clinical supervision or counselling to support wellbeing and reduce the risk of burnout is required.

Lessons Learned

- The care finder role is complex. Staff burnout is a risk that must have appropriate controls in place. Regular supervision, both internal and external (clinical supervision) is essential.
- Having more than one care finder on a team allows for more options when managing risks such as those related to home visits.
- Care finders report high value in working as part of a team of care finders in terms of sharing expertise, debriefing, leave coverage. At an organisational level, a care finder team with multiple staff allows for improved continuity planning.

Lessons Learned

- Care finders often bring varied expertise to the role. Clients should be connected with the most appropriate care finder, with consent. Processes should be established between care finder providers to enable this.
- Waitlists create a barrier to access the service for the target group.

Lessons Learned

- Skill sharing and information exchange between care finder providers support continuous improvement and capability building.
- Care finder providers working together to share real-time capacity and staffing profile can improve access to the program for the target group.

Lessons Learned

- Care finder providers working together on assertive outreach strategies improves awareness of the program and increases referrals for clients within the target group.
- Data integrity is improved when providers use software that allows for the data set to be recorded and collated within.

Assessment criteria

Section	Key objective	Weighting	Word count
1. Local service delivery model	Provide a detailed description of your proposed service delivery model that addresses the below. Include examples from services your organisation currently delivers.	30%	1500
2. Experience	Describe your organisations experience, expertise and capability to deliver this service.	20%	600
3. Care finder qualities and attributes	Demonstrate your organisations qualities and attributes to deliver a service as described.	20%	500
4. Organisational capacity	Demonstrate your organisations' capacity to mobilise and operate the service.	20%	1000
5. Budget and value for money	Provide a detailed budget ensuring it adequately reflects resourcing required	10%	n/a
6. Value for money	Explain how your proposal demonstrates value for money.	n/a	200

Assurance and Compliance requirements, Risk management & respective mitigation strategies also apply, please see the **PAC092 Care Finder Program RFP** for details.

Additional information to assist your application

- All responses are expected to be within the stated word limit and words beyond that limit will not be assessed.
- No more than a total of three A4 pages will be reviewed in addition to responses in this form, inclusive of budget, any models/structures etc.

Additional information to assist your application

- Questions or requests for information **must** be submitted via tenders@chnact.org.au using the subject heading **PAC092 RFP – Questions**.
- If questions are submitted via the method above, a “Q & A” document will be available on the CHN website, Care finder program RFP page. The document will be updated with new questions and answers by 4pm every Tuesday and Thursday.
- The end of the period for questions or requests for information is **5.00pm Wednesday, 28 May 2025**.

Additional information to assist your application

[Care finder policy guidance](#)

[First report on the implementation of the care finder program](#)

[Aged Care Quality and Safety | Royal Commissions](#)

[Resources for Care Finders - COTA Australia](#)

Dates to remember

End of period for questions or
requests for information

5.00pm, Wednesday 28/05/25

Submissions close

5.00pm, Tuesday 10/06/25

*See RFP for additional submission
requirements.*



Procurement and Establishment timeline

Contract period: 1 September 2025 – 30 June 2029

Contract negotiation expected 23 July – 30 July 2025

Commencement date 1 September 2025

Client handovers from 1st October 2025

Full-service delivery by 31 October 2025

Procurement and Establishment timeline

Providers must ensure service continuity to clients and a seamless transition for the community and sector.

Continuing care finder providers should have no interruption to service delivery.

Questions

Any questions?

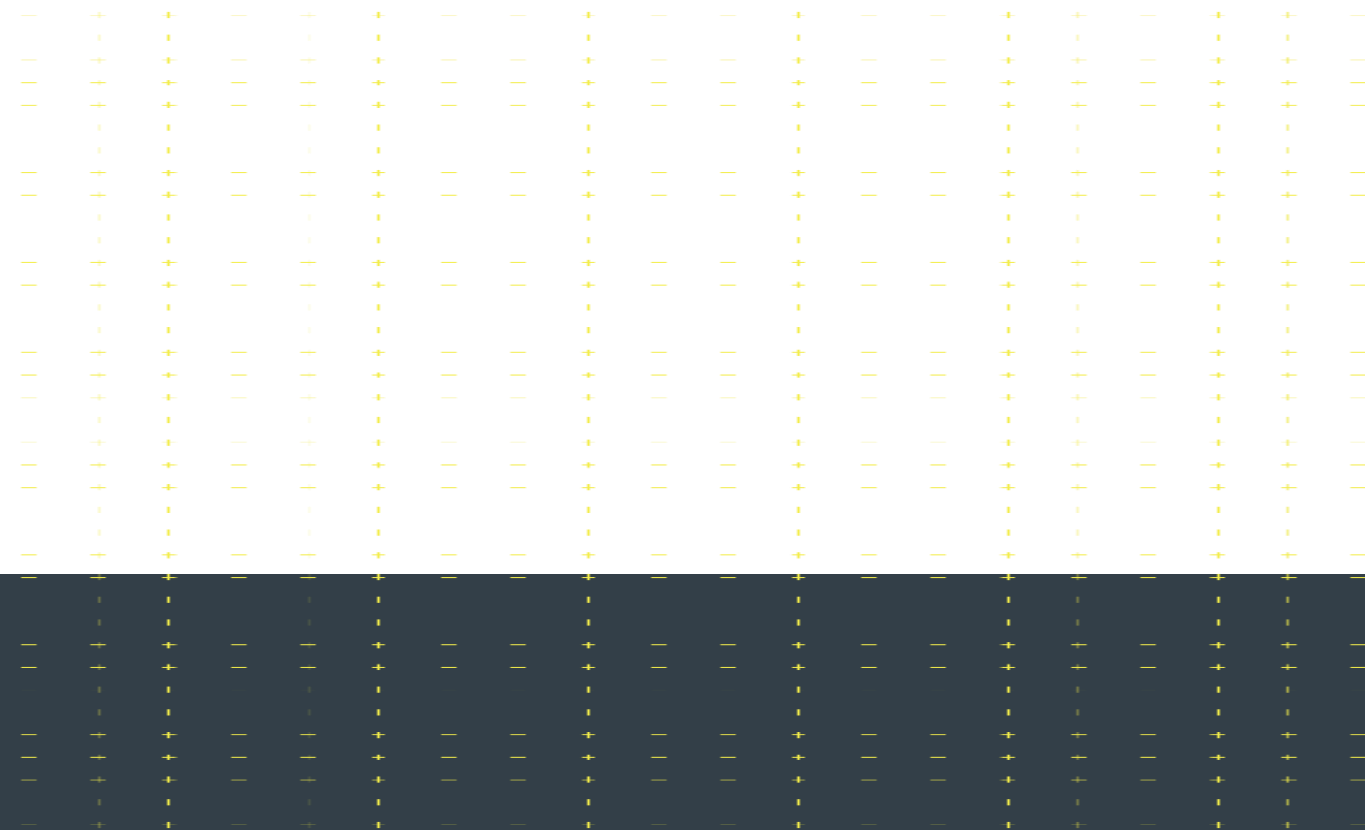
If we need to take questions on notice the answers will be provided in the Q & A document on the CHN website care finder RFP page.

*Questions or requests for information **must** be submitted via tenders@chnact.org.au using the subject heading **PAC092 RFP – Questions**.*

*The end of the period for questions or requests for information is **5.00pm Wednesday, 28 May 2025**.*

Thank you!

www.chnact.org.au



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