



## **Request for Proposal:**

**RFP-2526-02 - Multicultural Women's Health Access and Navigation**

**Submission Deadline: 10:00 am AEST, 09 September 2025**

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## 1. About COORDINARE

COORDINARE was established in July 2015. It is one of 31 PHNs (Primary Health Networks) established across Australia and one of 10 PHNs in NSW. Our role is to improve the health and wellbeing of our community which is one of the largest rural and regional populations in NSW, with more than 648,000 people. We also use our knowledge and commissioning expertise to attract new funding partners to expand our impact. Our region stretches from Helensburgh in the north to the Victoria border in the south and inland to Cooma/Monaro, Queanbeyan, Yass and Goulburn.

More information about COORDINARE can be found on our [website](#) and specifically .

## 2. Request for Proposal (RFP)

### a. Invitation

COORDINARE - SENSW PHN invites proposals from eligible and suitable organisations to design and deliver a culturally responsive women's health education initiative. This initiative aims to improve health literacy, access to primary health care, service navigation or care coordination, and engagement among women from multicultural communities across the Illawarra, Shoalhaven, and Southern NSW regions. The program will address key health priorities including family planning, sexual health, women's health screening, and preventative care, while considering the unique needs of diverse migrant populations.

A total budget of approximately **\$154,000 (GST exclusive)** is available for this initiative. The funded service will be delivered up to **30 June 2026**.

### b. Background

Culturally and Linguistically Diverse (CALD) communities in the SENSW region face significant barriers to accessing healthcare, including language differences, health literacy challenges, and cultural insensitivity within the healthcare system. These challenges can lead to poorer health outcomes, underutilisation of services, and increased health disparities<sup>1,2</sup>.

This funding is to support primary health care access for multicultural communities. This includes identification and navigation of support services for people from CALD backgrounds. The funding may also support and promote coordination between services at a local level service providers in having the skills and systems to provide effective care that will improve service integration.

### c. Local snapshot

The SENSW PHN CALD Primary Healthcare Access Needs Assessment and consultation with key stakeholders has identified needs and specific gaps in primary healthcare access for CALD, multicultural, migrant and refugee communities<sup>1</sup>.

Women's health emerged as a consistent priority across the Illawarra, Shoalhaven, and Southern NSW, specifically family planning, sexual health, and preventative health screening such as cancer and cervical screening. Migrant women's demographics vary by region, with newly arrived refugees, international students, and older migrants concentrated in the Illawarra, while partner visa holders and skilled migrants are more common in Shoalhaven and Southern NSW.

Despite some service availability, barriers persist to access these services. These barriers include lack of Medicare for some groups (e.g., asylum seekers, international students), limited cultural competency among providers, absence of targeted programs, stigma, cultural beliefs, and health literacy gaps. Additionally, knowledge gaps exist for some multicultural, migrant and refugee women around their health needs

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<sup>1</sup> Primary Health Care CALD needs Assessment SENSW PHN. Access via link [SENSW PHN Needs Assessment / Primary Healthcare CALD access](#)

<sup>2</sup> PHN Multicultural Health Framework Working Group and the National PHN Cultural Diversity Community of Practice. (2024). PHN Multicultural Health Framework. [2024 PHN MulticulturalHealthFramework.pdf](#)

including reproductive and sexual health, health screening services, perimenopausal/menopause health needs, endometriosis, pelvic pain and other chronic conditions. There is a significant gap in terms of culturally safe health education, health promotion and training, and currently no services in the SNSW region provide culturally responsive women's health education tailored to these communities.

#### d. Funding purpose and objectives

This project seeks to improve access to culturally responsive women's health education and services for multicultural communities in SNSW.

##### Objectives:

- Enhance health literacy and awareness among women from multicultural backgrounds.
- Improve access to culturally appropriate health education and services.
- Increase engagement with primary health care and preventative health services; create a culturally safe space for women to access health education activities.
- Address barriers such as language, cultural beliefs, and health system navigation.
- Increase awareness and uptake of pre-existing preventive health services.
- Build capacity of primary care providers to deliver culturally competent care.

#### e. Scope and specifications

##### Location

All funded activities must occur within and support the residents of the SNSW PHN catchment area.

##### Scope and Service specifications

The successful provider will be required to:

- Co-design the service or program (Multicultural Women's Health Access and Navigation) with multicultural women, community leaders, and health providers to inform program development and identify priority health topics\*
- The program priority area may be defined by the community and could include, but is not limited to, reproductive health, screening, cancer screening, menopause, maternal health, endometriosis and pelvic pain. The program or service must include a component of coordination of care and/or service navigation for consumers.
- Pilot the co-designed program up to 30 June 2026.

Activities in scope as part of the program or service may include, but are not limited to:

- Development of multilingual and culturally appropriate health education resources.
- Promotion of interpreter use to support effective communication in healthcare settings.
- Community outreach through health promotion sessions in accessible locations, supported by peer educators or bicultural workers.
- Care coordination and/or service navigation for consumers.
- Coordination with local service providers to strengthen referral pathways and improve access to care.
- Collection of feedback and evaluation of outcomes such as service access, health literacy, and engagement with preventative health services.

*\*Note: As part of this contract, your organisation will be supported to engage with a co-design mentor. Participation in co-design mentoring will be a contractual requirement, and all engagement will be tailored to your organisation, current skills, capacity and resourcing. Mentoring activities may include a capability assessment, customised training, team coaching and project mentoring specific to the program co-design.*

*This approach to commissioning co-design will focus on empowering the successful organisation to correctly apply co-design principles to the planning of this initiative, as well as increase provider capability with knowledge and skills for future service planning and implementation.*

## f. Who can apply?

### *Eligible applicants*

Entities with a registered ABN or ACN are eligible to submit a response to this RFP. Proposals submitted in partnership with another provider or as a collective of providers/consortia will be considered.

Organisations that are encouraged to apply may include:

- Non-government organisations, including charities and not for profit organisations, community health organisations,
- State government agencies with established multicultural services,
- Individual providers and/or organisations working in consortia or partnerships, with one lead agency nominated as the legal entity
- General practices and other primary care providers.

Proposals will only be accepted by registered organisations who can demonstrate:

- Experience in health promotion or community engagement,
- Cultural competence and experience in working effectively (achieving desired outcomes) with multicultural communities,
- Established relationships with local health services and multicultural community groups,
- Capacity to deliver services across the Illawarra, Shoalhaven, and Southern NSW regions.
- Capacity to start the project from October 2025.

Multicultural organisations are strongly encouraged to apply for this funding opportunity. Organisations who do not currently provide multicultural services may be required to partner with another organisation to meet the criteria listed above.

Eligible organisations must have and provide evidence of compliance as outlined under [Section 6 Assessment Criteria](#).

### *Exclusion Criteria*

*Applications may be deemed ineligible and excluded from assessment if they meet any of the following conditions. These criteria are intended to ensure transparency, avoid duplication of funding, and maintain the integrity of the procurement process.*

Exclusion Area	Guidance
1. Duplicate Funding	<i>Initiatives that have already received funding from another source for the same or substantially similar activities will not be considered. Respondents must disclose all current and pending funding sources. Further information for ineligible funding is as <a href="#">section g. Ineligible for funding</a></i>
2. Conflict of Interest	<i>Applications that present a real or perceived conflict of interest, which cannot be appropriately managed or mitigated, may be excluded from consideration.</i>
3. Non-compliance with Eligibility	<i>Any application that fails to meet the minimum eligibility requirements outlined in this guidance will be excluded from assessment. See further information under <a href="#">section 5. Developing and submitting your proposal</a> and <a href="#">6. Assessment criteria</a></i>
4. Incomplete or Misleading Submissions	<i>Applications that are incomplete, contain false or misleading information, or fail to provide required documentation may be disqualified.</i>

5. <i>Non-adherence to Submission Guidelines</i>	<i>Submissions that do not comply with formatting, deadline, or procedural requirements may be excluded from the process.</i>
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#### g. Ineligible for funding

The following activities are **ineligible** for funding under this project:

- Activities which duplicate those funded programs that are primarily the responsibility of state and territory governments, or more appropriately funded through other programs.
- Purchasing of vehicles.
- Depreciation of expenses.
- Activities already undertaken or expenses already incurred.
- Research costs.
- Items of capital equipment valued greater than \$5,000.
- Items of capital equipment not directly related to consumer outcomes.
- Payments for professional services listed on the Medicare Benefits Schedule (MBS).
- Conference attendance.
- Board fees.

The above list is indicative and is not intended to be exhaustive.

Further detail on information to be included in proposals, and evaluation criteria, can be found in sections [5. \*Developing and submitting your proposal\*](#) and [6. \*Assessment Criteria\*](#).

#### h. Evaluation and monitoring

The successful service provider/providers will be required to work with COORDINARE to establish and agree on a data collection and reporting protocol commensurate with contract funding. This allows COORDINARE to assess the performance of the service against agreed measures in the following domains:

- improved health outcomes;
- better consumer experience;
- enhanced provider satisfaction; and
- increased value for money.

**This may require the upload of raw data (deidentified unit record data) to a secure site held by COORDINARE.**

The successful provider will be required to adhere to 100% compliance with all data submission and reporting requirements to COORDINARE at an agreed frequency and will participate in regular service monitoring, review and evaluation activities. In addition to quantitative data, the successful provider will have a contractual obligation to complete 6-monthly service reports detailing program/service outcomes in narrative format including the sharing of positive patient stories. Further, the successful provider must provide all assistance necessary or convenient to facilitate COORDINARE's compliance with its reporting obligations to Funding Bodies in connection with the service.

#### *Key performance indicators*

Key performance indicators (KPIs) will be included in the contract with the successful provider to enable performance monitoring against outputs and outcomes. All KPIs are underpinned by the Quintuple Aim and allow the service to be monitored against performance in the domains of access, efficiency, appropriateness and effectiveness. Final KPIs will be negotiated and agreed upon during the contracting phase with the successful provider, however **indicative** KPIs for this service or program are listed below:

No.	Performance Domain	Performance indicator
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1	Access	Number of clients registered
2	Access	Number of occasions of service delivered
3	Access	Geographic distribution of clients
4	Access	Number of languages/cultural groups registered or number of clients from diverse community groups
5	Effectiveness	Outcome measures including rate of completion and percentage showing improvements
6	Appropriateness	Client experience and satisfaction with service (at or after discharge/episode completion)
7	Efficiency	Cost effectiveness based on overall figures – for example cost per program, cost per participant

### 3. Timeline

An indicative timeline is outlined below. COORDINARE reserves the right to modify these timeframes. Registered providers will be notified of key changes via TenderLink.

Activity	Date
Request for proposal released	21 August 2025
Industry briefing – for RSVP information – refer to <a href="#">section 4. Obtaining further information.</a>	11:30 am – 12:00 pm 28 August 2025
<b>Closing date and time for RFP proposals (late applications will not be accepted)</b>	<b>10 am 09 September 2025</b>
Shortlisting of successful RFP proposals	Mid September 2025
Clarification / negotiation with shortlisted providers	Late September 2025
Funding awarded	Early October 2025
Contracts commence	October 2025
Service commences	15 October 2025
Co-design of service/program	October 2025 – January 2026
Activity implementation	January 2026 – June 2026

### 4. Obtaining further information

After you have registered on the Tenderlink portal, you can also submit any questions anonymously via the online forum. Please note that any questions, answers, and points of clarification will be shared with all other providers participating in the RFP. Any identifying information about the organisation submitting the question will be removed.

#### *Industry briefing*

An information session will be held on date and time below. This session will focus on the RFP process and guidelines. Session details:

<b>Date:</b>	28 August 2025
<b>Time:</b>	11:30 am – 12:00 pm
<b>RSVP:</b>	To register for the webinar please <b>RSVP</b> directly at <a href="#">Industry Briefing: Multicultural Women's Health Access and Education Initiative</a> <i>A meeting invite will be sent to you automatically after registration is completed.</i>
<b>Mode:</b>	Webinar (Online via MS Teams)

<b>Note</b>	<p>After registering, you will receive a confirmation email containing information about joining the webinar.</p> <p>A recording of information session will be published on Tenderlink.</p> <p>A copy of the slides and any questions and answers will be posted on the TenderLink portal after the webinar.</p>
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#### *Respondent questions*

All questions about the RFP process or content can be submitted anonymously via the online forum following registration on TenderLink at <https://www.tenderlink.com/COORDINARE/>. Please note that any questions, answers and points of clarification will be shared with all other providers participating in the RFP. Any identifying information about the organisation submitting the question will be removed.

## 5. Developing and submitting your proposal

Request for proposal closes at **10am 9 September 2025**. Responses to this RFP should be submitted via <https://www.tenderlink.com/COORDINARE/>. You will need to register on the site before you can access the proposal portal. **Registration is free**. You will receive a time and date stamped confirmation after successful proposal submission.

Complete all sections of the RFP electronic form on TenderLink and include all relevant documentation.

Respondents should outline a proposed approach aligned to the scope and specifications and address all the assessment criteria outlined in this document at [Section 6. Assessment Criteria](#). Please ensure you read each assessment criterion carefully and answer each component and section of the proposal form by considering all information provided. Respondents should also refer to the conditions and assessment criteria described in this RFP.

Documents can be attached which are directly relevant to your response. Please avoid attaching large documents as only the first five (5) pages will be read by the Evaluation Panel. If the documents are large, please specify the relevant page number(s)/section(s) to your response. The attachment area is only reserved for diagrams or additional resources that may add to your overall submission. The attachment areas are not to be used to upload your submission in a word document.

**If you do not wish to upload a file in a mandatory section**, please upload a blank letterhead document with 'NA' typed to indicate you do not wish to provide a response (or it is not relevant to you). This will ensure that you can continue moving through the application. There is an upload limit of 2GB per attachment and/or 5 pages per attachment.

File formats accepted: word, excel, pdf and jpg files are all acceptable formats.

Please see the TenderLink guide provided for more information ([Attachment 2](#)).

#### **Proposals will be accepted that:**

- Are received on or before **10 am 9 September 2025**.
- Are submitted through COORDINARE's [TenderLink portal](#).
- Meet the conditions as outlined in this RFP.
- Provide all compliance requirements as outlined in [Section 6. Assessment criteria](#):
  - Minimum of two (2) professional referees (if required);
  - Copies of compliance documents;
  - Risk management plan for the establishment of the service;
  - Most recent audited financial statements;
  - Declare any known conflicts of interest.



## 6. Assessment criteria

All items listed in the table below must be addressed as part of the Application.

Required Response	Weightings
<b>Note:</b> Please adhere to the word limits specified for each item. If you wish to provide additional information, you may include supporting documents with your application and refer to them in your responses where relevant.	
<b>1. Program/service model overview (up to 1500 words)</b>	50%
<p>Outline the proposed program/service components and how the program relates to the funding objectives and specifications outlined in this RFP document, including:</p> <ul style="list-style-type: none"> <li>• Resourcing, including staffing profile</li> <li>• Confirmation of willingness and capacity to participate in co-design training and/or mentoring</li> <li>• What primary care services the program will improve access to, and how the service will address barriers to access (including through coordination of care or service navigation)</li> <li>• How the program will ensure access to culturally responsive care</li> <li>• Approach to consumer-focused care, including how consumers will be involved in the continuous improvement of the program or service following the initial co-design</li> <li>• Geographical reach of the service/program and estimated capacity</li> <li>• Proposed engagement with key stakeholders to ensure coordinated, integrated care and development of referral pathways (where relevant), including with GPs, local government services, allied health and other health services</li> <li>• Timelines to implement the activity (noting initial co-design to take place between October 2025 – January 2026)</li> <li>• If the model will be delivered as a consortium or partnership, who the partners are, and their roles (if applicable)</li> <li>• Approach to program sustainability.</li> </ul>	
<b>2. Governance and organisational capacity (up to 1000 words)</b>	20%
<p>Outline the proposed governance (including clinical governance) and leadership structure for the service, including:</p> <ul style="list-style-type: none"> <li>• How your organisation meets the eligibility criteria in <a href="#">section f</a>.</li> <li>• An overview of your organisation's existing operational and clinical management functions and how they will relate to this project.</li> <li>• Details of existing clinical governance arrangements including relevant policies and procedures</li> <li>• Outline the existing skills and expertise within your organisation that will ensure the delivery of the proposed service model</li> <li>• Outline existing networks that support engagement with priority groups.</li> </ul>	
<b>3. Monitoring and evaluation (up to 500 words)</b>	20%
<p>Provide an overview of how you intend to monitor and evaluate the service, including:</p> <ul style="list-style-type: none"> <li>• Approach to collecting consumer and referrer feedback (if relevant)</li> </ul>	

<ul style="list-style-type: none"> <li>• Approach to measuring consumer outcomes, including the proposed outcome measure tool/s (if relevant)</li> <li>• Evidence of capacity and proposed mechanisms to collect and provide to COORDINARE de-identified data as specified in <a href="#">section h</a></li> <li>• Proposed approach to continuous quality improvement of the service.</li> </ul>	
<b>4. Budget and Risk Management - 500 words</b>	10%
<p>The amount of funding available for service is <b>\$154,000.00</b> ex GST for co-design and service delivery up to 30 June 2026. Access to co-design mentor will be funded separately by COORDINARE.</p> <ul style="list-style-type: none"> <li>• Please provide an indicative budget (on the budget template – <a href="#">Attachment 1</a>) for the financial year [2025-26] that includes an estimated cost of the service and represents value for investment. The budget must include allocation for the two stages of the project; (1) <i>co-design and program development</i>; (2) <i>program implementation (approximately 6 months)</i>). The budget and administration costs must be reasonable and reflect market norms.</li> <li>• Please provide a risk assessment of the initiative with details on how your organisation will mitigate any identified risk. The risk management plan should include both organisational-level and service-level risks.</li> </ul> <p><i>Value for Money</i>  <i>Price is not the sole determining factor in assessing Value for Money. A comparative analysis of relevant financial and non-financial costs and benefits of alternative solutions throughout the procurement will inform a Value for Money assessment. Factors to consider include, but are not limited to:</i></p> <ul style="list-style-type: none"> <li><i>a. fitness for purpose;</i></li> <li><i>b. potential supplier's experience and performance history;</i></li> <li><i>c. flexibility, including innovation and adaptability; and</i></li> <li><i>d. whole of life costs.</i></li> </ul> <p>Please attach the following document in your answer:</p> <ul style="list-style-type: none"> <li>- Complete budget.</li> <li>- Provide a detailed risk management plan for the establishment/execution/implementation of the service including mitigation strategies.</li> </ul>	
<b>Total scored criteria</b>	<b>100%</b>

<b>Compliance requirements</b>	
<p>1. Provide copies of your current accreditation certificate(s) from your professional body or willingness to obtain (if applicable).</p> <p>The accreditation certificate must demonstrate the respondent's eligibility to work in their chosen field. Additionally, respondents should address whether the Request for Proposal (RFP) subject matter requires specific accreditation to work with the intended target population or type of program.</p>	Compliance

If accreditation certificate(s) is not available, please specify reasons.	
2. Provide copies of required insurance <ul style="list-style-type: none"> <li>Public liability insurance \$20 million per claim and in the aggregate of all claims</li> <li>Professional indemnity insurance \$10 million per claim and in the aggregate of all claims</li> <li>Copy of your workers compensation insurance policy</li> <li>Cyber Security insurance - not less than \$1 million in the aggregate of all claims (optional).</li> </ul>	Compliance
3. Provide the most recent financial audited statement/s or profit and loss statements (financial year 2023–24 or financial year 2024-25)	Compliance
4. Include at a minimum two (2) professional referees, <i>if the respondent has not received funding from COORDINARE previously</i> . Letters of support are highly encouraged to include in your application.	Compliance
5. Aboriginal and Torres Strait Islander Impact Statement, Aboriginal and Torres Strait Islander Health Strategy or a Reconciliation Action Plan	Optional

## 7. Evaluation of proposals

Respondents are assessed via a competitive process. An evaluation panel will consider each eligible submission against the Assessment Criteria and other relevant information available to COORDINARE. COORDINARE may request additional information from respondents. COORDINARE may also work with shortlisted respondents to clarify submissions, including to request revised proposals, prior to awarding a contract.

Where multiple proposals are deemed suitable for funding, consideration for maximising service reach across the region will form part of the evaluation process.

Please refer to Conditions of the Request for proposal for more information.

## 8. Contracting arrangements

The successful respondent will be required to enter a Contract for Services and Schedule of service with COORDINARE for the period from **October 2025 to 30 June 2026** for operation of the service. The final terms of the service agreement and associated schedule are subject to negotiation.

Contracted respondent will be required to provide progress reports on agreed milestones. The format and framework for progress reports may take account of the size, costs, complexity and relative risks of the project being undertaken.

## 9. Interpretation

Definition of key terms:

Term	Meaning
<b>COORDINARE</b>	The South Eastern New South Wales Primary Health Network and the organisation responsible for the RFP and the RFP process

<b>Closing time</b>	The time specified by which RFP responses must be received
<b>Proposal / RFP response/s</b>	A document/s lodged by a Respondent in response to this RFP containing a response to provide Goods or Services sought through this RFP process. Response to this RFP must be made via Tenderlink unless approved in writing by COORDINARE
<b>Respondent</b>	An entity that submits a response to this RFP
<b>RFP Process</b>	The process commenced by the issuing of this RFP and concluding upon formal announcement by SENSW PHN of the selection of a preferred respondent(s) or upon the earlier termination of the RFP process
<b>Request for proposal (RFP)</b>	This document and any other documents designated by SENSW PHN

#### Acronyms used in this document.

Acronym	Full form
ABN	Australian Business Number
CALD	Culturally and Linguistically Diverse *for the purpose of this document CALD includes multicultural communities, migrant communities, refugee communities. <a href="https://www.aihw.gov.au/reports-data/population-groups/cald-australians/glossary">https://www.aihw.gov.au/reports-data/population-groups/cald-australians/glossary</a>
PHN	Primary Health Network
NSW	New South Wales
SE NSW	South Eastern NSW
KPIs	Key performance indicators

## 10. Conditions of this Request for Proposal

ABN/Taxation requirements	COORDINARE will only deal with Respondents who have an Australian Business Number (ABN).
Acceptance	Non complying proposals may be rejected. COORDINARE may not accept the lowest priced proposal and may not accept any proposal.
Additional information	COORDINARE reserves the right to request additional information from respondents. If additional information is required by COORDINARE when, written information and/or interviews may be requested to obtain such information. Respondents are required to provide additional information at no cost to COORDINARE. COORDINARE may also provide additional information or clarification.
Assessment	COORDINARE reserves the right to engage a third party to carry out assessments of a Respondent's financial, technical, planning and other resource capability. COORDINARE is entitled to consider all information known to COORDINARE in relation to a respondent and their submissions when assessing submissions.
Conflicts of interest	Respondents must declare to COORDINARE any matter or issue which is or may be perceived to be or may lead to a conflict of interest regarding their proposal or participation in the RFP process, or in the event their proposal is successful.
Expenses	All expenses and costs incurred by a Respondent in connection with this RFP including (without limitation) preparing and lodging a proposal, providing COORDINARE with further information, attending interviews and participating in any subsequent negotiations, are the sole responsibility of the Respondent.
Explanations	Verbal explanations or instructions given prior to a contract being executed do not bind COORDINARE.

General	Respondents should familiarise themselves with this document and the separate online Proposal 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.
Legal entity	COORDINARE 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.
Lobbying	Any attempt by any Respondent to exert influence on the outcome of the assessment process by lobbying COORDINARE staff, directly or indirectly, will be grounds for disqualification of the proposal from further consideration.
Ownership	All proposals become the property of COORDINARE once lodged. COORDINARE may copy, or otherwise deal with all or any part of a proposal for the purpose of conducting evaluation of proposals.
Negotiation	COORDINARE reserves the right to negotiate with short-listed Respondents after the RFP closing time and allow any Respondent to alter its proposal. Contract negotiations are strictly confidential and not to be disclosed to third parties.
No contract	Nothing in this RFP should be construed to give rise to any contractual obligations or rights, express or implied, by the issue of this RFP or the lodgement of a proposal in response to it. No contract will be created unless and until a formal written contract is executed between COORDINARE and a Respondent. Respondents will not be considered approved until a final service agreement is in place.
Notification of Probity Breach	Should any supplier feel that it has been unfairly excluded from responding or unfairly disadvantaged by the process, the supplier is invited to write to the Director of Commissioning at <a href="mailto:commissioning@coordinare.org.au">commissioning@coordinare.org.au</a>
Part applications	COORDINARE 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.
Process	COORDINARE reserves the right to withdraw from, or alter, the RFP process described in this document for whatever reason, prior to the signing of any agreement/contract with any party.
Relevant information	COORDINARE reserves the right to consider any information in its possession which it consider may be relevant to a decision to enter into a contract with a successful provider.

## 11. References / Important documents

### List of documents

RFP Guideline – Multicultural Women’s Health Access and Navigation	
Attachment 1	<a href="#">Budget template</a>
Attachment 2	<a href="#">COORDINARE Tenderlink User Guide for Supplier Responses</a>
Attachment 3	<a href="#">COORDINARE Population Health Profile SENSW (June 2025)</a>
Attachment 4	Industry Briefing recording and Q&As – To be published as RFP Addendum on COORDINARE <a href="#">Tenderlink</a> and <a href="#">COORDINARE website</a> .