



Request for Proposal:

Enhancing Community Based Exercise Programs

Submission Deadline: 6pm, Monday 30, April 2025

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1. Introduction

COORDINARE, as the South Eastern NSW Primary Health Network (PHN), is dedicated to fostering healthier communities.

We focus our efforts on those who face the biggest inequities. To do this, we collaborate with the community, general practices and other stakeholders to design solutions that make it easier for people to get the health care they need.

We also use our knowledge and commissioning expertise to attract new funding partners to expand our impact.

We are engaging the market to expand existing physical activity programmes that enhance strength, balance, and wellbeing to increase accessibility for older adults.

Through this funding, COORDINARE seeks to address key barriers for older people to participate in physical activity including costs, geography, and cultural appropriateness. Through increased participation, this initiative will support the health and wellbeing of older adults and address risk factors contributing to the development of chronic conditions.

2. Who can apply?

Organisations eligible to receive funding under this initiative must be 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.

Organisations/individuals must be accredited to, and are currently delivering, exercise programs to support wellbeing and improved mobility for older people in the South Eastern NSW region. This may include:

- Allied health services
- Individuals/sole traders
- Non-government organisations, including charities and not for profit organisations
- Community health providers
- Aged care providers
- State funded health services
- Local councils

For any proposal of \$75,000.00 or more, the applicant needs to have an ABN and be GST-registered.

Consortiums may be considered; non-eligible organisations can apply within a consortium where the lead agency is an eligible organisation.

Funding amounts

A total of up to \$180,000 ex GST will be dispersed through this initiative, with individual funded projects between \$30,000 up to \$180,000 ex GST to be considered. Funded projects will run for 12 months from date of execution. All projects will be subject to an evaluation.

Completing the RFP electronic form on TenderLink

Complete all sections of the RFP electronic form on TenderLink and include all relevant documentation. All proposals will be reviewed by a selection panel.

Request for proposal proposals close 5:00pm (AEST) 30 April 2025.

Please submit via the Tenderlink: https://www.tenderlink.com/COORDINARE/

3. Background

COORDINARE – South Eastern NSW PHN

COORDINARE was established in July 2015. It is one of 31 PHNs 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.

Our region stretches from Helensburgh in the north to the Victoria border in the south and inland to Cooma/Monaro, Queanbeyan, Yass and Goulburn.

Our priorities

Our three objectives and key priorities are:

- 1. Accessible care by improving access to services such as mental health, alcohol and other drugs, chronic conditions, after hours and urgent care, especially for priority groups.
- 2. **Systemised care** by strengthening linkages between primary care and the broader health system. We support general practice and commission coordination and navigation services that guide individuals through their health care journey.
- 3. An activated community by fostering health across the lifespan, addressing the social determinants of health, increasing prevention activities, and improving community resilience and social connectedness.

More information about COORDINARE can be found on our <u>website</u> and specifically <u>COORDINARE-Strategic-Directions-2024-2027</u>.

Issue background

Investing in preventative care for the ageing population can significantly improve health outcomes and reduce the strain on healthcare systems. Regular physical activity not only reduces health risk factors but also improves mood, increases or maintains strength and mobility, improves pain management and provides the opportunity for social interactions, all factors that can support an individual to continue living safely and independently in the community.

Local snapshot

The South Eastern NSW catchment has an estimated 141,880 people (21.6%) aged 65 and above, and 165,781 people (25.6%) aged between 45-64. Some parts of the region have a much higher older adult population including Eurobodalla (33%), Bega (29.8%), Kiama (28.4%) and Shoalhaven (28.1%). In addition, people aged 65 plus accounted for 46% of potentially preventable hospitalisations and 62.2% of the total bed days spent. There is a high prevalence of risk factors for chronic lifestyle diseases, including dementia, diabetes and cardiovascular disease, across the catchment. This translates to a high service burden in primary care, overwhelmed publicly funded services, high rates of death and premature mortality, and high numbers of potentially preventable hospitalisations.

Across the catchment there is a low level of confidence in adopting healthy lifestyle habits as well as perceived gaps in healthcare services targeted at early management and prevention of chronic conditions. These gaps include a lack of affordable (particularly no cost) and timely services for primary care clinicians to refer to, and a need for a greater allied health workforce to improve population health literacy, provide education and contribute to chronic disease management. Underinvestment in prevention and wellness can be seen with loneliness, social isolation, housing stress, and poverty negatively impacting older adults' health and well-being.

4. Purpose and Objectives

COORDINARE is looking to commission a provider(s) to expand established physical activity based healthy ageing programs that support chronic disease prevention, falls prevention and social connection for older adults. This initiative aims to improve health outcomes for older adults to reduce the risk of premature entry into residential aged care. This strategy focuses on expanding the delivery of high-quality services and programs within the funding period without needing to design program models or requiring long

establishment periods. The aim is to enhance opportunities for older people across the region to participate in evidence based physical activity programs and:

- Improve equity of service access by focusing on those most at risk of poor outcomes and underserved communities
- Support prevention and manage chronic diseases,
- Improve strength and balance, reducing fall risks, and
- Foster social connections

5. Scope and specifications

Location

All activities funded must occur within and support the residents of the **South Eastern NSW region**. Activities may occur within a small or large area within the region where rationale for target groups/areas is outlined in the submission.

Service specifications

Proposals should outline the existing exercise program and how this can be expanded to facilitate increased access by priority populations, with consideration to the following areas:

- Service delivery requirements
 - $\circ \quad \text{venue hire} \quad$
 - o equipment
 - o staffing
- Barriers to service access
 - increase the reach of existing services to communities that have no access or limited access to preventative and early intervention physical activity programs
 - o increase program capacity to reduce program wait lists
 - o offer no cost programs
 - o transport
- Wellbeing
 - o falls prevention
 - \circ strength
 - o mobility
 - \circ socialisation
 - o health promotion /health literacy
- Priority groups people aged 65 years and over (or 50 years and over from Aboriginal communities) with consideration to:
 - those newly diagnosed with lifestyle-related diseases such as cardiovascular disease and diabetes, and those at risk of functional decline and frailty
 - o rural and remote communities
 - \circ $\$ people with Australian Government Low Income Health Care Card
 - $\circ \quad \text{people from culturally diverse backgrounds}$
 - o under serviced communities/individuals
- Sustainability
 - Complement and integrate with other relevant services, promoting sustainable community models.

As part of the project, you must demonstrate willingness to:

- engage consumers, their families and carers in design and/or implementation and evaluation
- co-design the approach with South Eastern NSW PHN as appropriate

- share results, information and resources
- increase utilisation of the My Health Record where relevant and appropriate

Preference will be given to proposals which demonstrate:

- clear alignment between the proposed activities to an identified area of unmet need
- strong partnership approaches to achieve optimal outcomes
- consideration for the scalability and sustainability of proposed activities.

Activities that are not considered to be in scope

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

- subsidise participation of existing clients/members
- programs for residents of aged care facilities
- activities which duplicate those funded under other government initiatives
- purchase 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 (ie. where a payment is made for a medical service item listed in the Medicare Benefit Schedule)
- conference attendances
- 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 8. *Developing and submitting your proposal* and 10. Assessment Criteria.

6. Funding

A total Budget of approximately \$180,000 is available for this initiative. Funded programs will be delivered over the 12-month period of 1 July 2025 to 30 June 2026.

Proposal of varying size and scale are being sought through this process, with individual projects between \$30,000 and \$180,000 ex GST to be considered. Proposals for a substantial proportion/full amount of the available funding should demonstrate how the initiative will reach multiple target groups across the region.

7. 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	4 April 2025
Industry Briefing	11-11:30 am 10 April 2025
* Please sign up to attend by submitting your request through link Industry Briefing	
Registration.	
Deadline for questions from potential respondents via TenderLink online forum	6 pm 17 April 2025
Deadline for COORDINARE/SENSW PHN to respond to applicants' questions on	22 April 2025
online forum	
Closing date and time for RFP proposals (late applications will not be accepted)	6 pm, 30 April 2025
Shortlisting of successful RFP proposals	May 2025
Clarification / negotiation with shortlisted providers	May 2025

Aged Care Early intervention RFP Guidelines Enhancing Community Based Exercise Programs

Funding awarded	June 2025
Contracts commence	1 July 2025

8. Developing and submitting your proposal

Responses to this RFP should be submitted via <u>https://www.tenderlink.com/COORDINARE/.</u> You will need to register on the site before you can access the proposal portal. <u>Registration is free</u>. You will receive a time and date stamped confirmation after successful proposal.

Respondents should outline a proposed approach aligned to the scope and specifications and address all of the assessment criteria outlined in this document.

Please ensure you read each assessment criterion carefully and answer each component and section of the proposal form by considering all information provided.

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.

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.

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

Please see the TenderLink guide provided for more information (Appendix 2).

Proposals from groups planning to work with a specific focus on identified priority populations, including, but not limited to, Aboriginal and Torres Strait Islander peoples, and people from culturally and linguistically diverse communities are encouraged to apply.

9. Respondent Questions

All questions about the RFP process or content can be submitted anonymously via the online forum following registration on TenderLink at <u>https://www.tenderlink.com/COORDINARE/</u>. 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.

10. Assessment Criteria

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

Required Response	Weightings
1. Service model overview – limit 800 words	
 Provide a brief overview of the current exercise program and how it supports health and wellbeing of older people in the community including the following key components: Program outline including delivery schedule, eligibility, referral pathways, funding sources (private fee, MBS billing, other grant funds etc) and reference to the evidence base or framework on which the program is based Screening and risk management to ensure participant safety Current reach of the program, location attendance transport options. Outline the qualifications of staff that will support the implementation for the program 	35%
2. Improving access and service reach – limit 800 words	

 Outline how you plan to expand your current services including: Evidence of need in the target area Access barriers you will address (i.e. transport, cost, geography, cultural appropriateness etc.) How you will engage and support priority populations to participate in physical activity Indicate if you plan to modify your service delivery to support implementation Resource requirements to expand services Detail if any additional funding sources will be used to deliver the proposed service 	35%
3. Data capture & activity reporting – limit 500 words	
Outline your organization(s) capacity to capture and report on service activity including	10%
 Indicative KPIs listed in Section 12. Contract arrangement/ Key performance indicator at page 9. 	
 Consumer feedback and recommendations for future programs to meet local needs. 	
4. Governance and Leadership – limit 500 words	
Outline the proposed governance (including clinical governance) and leadership structure for the service, including:	10%
 An overview of your organisation's existing operational and clinical management functions and how they will relate to this project Details of existing clinical governance arrangements including relevant policies and procedures. 	

Required Response	Weightings
5. Budget – complete an itemised estimate on the template provided	
The total pool of funding available for all projects is approximately \$180,000. Please provide an estimate of the anticipated budget for your proposed activity. Please ensure that you have completed and included the budget template provided (<u>Appendix 1</u>) with your application.	10%
Total scored criteria	100%
Provide copies of your current accreditation certificate(s) from your professional body.	Compliance
 7. Provide copies of required insurances Public liability insurance \$20 million per claim and in the aggregate of all claims Professional indemnity insurance \$10 million per claim and in the aggregate of all claims Copy of your workers compensation insurance policy (not applicable for 'exempt employer' or individuals/sole traders) Cyber Security insurance - not less than \$1 million in the aggregate of all claims (optional) 	Compliance
 Provide most recent financial audited statements, <u>if</u> <u>applications for more than \$100.000.</u> 	Compliance
 9. Include at a minimum two (2) professional referees <i>Required if:</i> Applicants have not received funding from COORDINARE previously; OR 	Compliance

 Application for more than \$100,000, where organisations have previously received less than \$50,000 funding from COORDINARE (currently or previously). 	
10. Aboriginal and Torres Strait Islander Impact Statement, Aboriginal and Torres Strait Islander Health Strategy or a Reconciliation Action Plan (optional)	Compliance

11. Evaluation of proposals

Respondents are assessed via a competitive process. An evaluation panel will consider each submission against the Assessment Criteria. The evaluation panel will select a shortlist from the respondents for consideration by COORDINARE. COORDINARE will select from the shortlist based on the panel's evaluation 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.

12. Contracting arrangements

Successful respondents are required to enter into a Service Agreement with COORDINARE. The final terms of the Service agreement and associated schedule are subject to negotiation. Contracted respondents 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.

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 <u>indicative</u> KPIs for this service or program are listed below:

No.	Performance Domain	Performance indicator
1	Access	Outputs – Number of clients serviced through grant funds
2	Access	Geographic distribution of participants across the SENSWPHN catchment
3	Effectiveness	Outcome readiness – Completion rates for outcome measures in completed episodes
4	Effectiveness	Proportion of completed episodes of care showing improvement in outcomes.
5	Appropriateness	Net Promoter Score
6	Efficiency	Cost effective program based on overall figures of cost per participant

Service monitoring and evaluation

Successful providers will be required to work with COORDINARE to establish and agree on a data collection and reporting protocol commensurate with the contact funding. **This may require the upload of raw data (deidentified unit record data) to a secure site held by COORDINARE**. The programs funded under this initiative may require outcome measurement using the Standard Set of Patient Centred Outcome Measures for Older Persons as per the <u>International Consortium for Health Outcome Measurement (ICHOM)</u>.

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.

13. Interpretation

Definition of key terms

Term	Meaning
COORDINARE	The South Eastern New South Wales Primary Health Network and the
	organisation responsible for the RFP and the RFP process
Closing time	The time specified by which RFP responses must be received
Proposal / RFP response/s	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
Respondent	An entity that submits a response to this RFP
RFP Process	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
Request for proposal (RFP)	This document and any other documents designated by SENSW PHN

14. Conditions of this Request for Proposal

ABN/Taxation	COORDINARE will only deal with Respondents who have an Australian Business Number
requirements	(ABN).
Acceptance	Non complying proposals may be rejected. COORDINARE may not accept the lowest
	priced proposal and may not accept any proposal.
	Entities applying with a proposal of \$75,000 or more must be GST-registered.
Additional	COORDINARE reserves the right to request additional information from respondents. If
information	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	Respondents must declare to COORDINARE any matter or issue which is or may be
interest	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

Legal entity	and satisfied themselves that they are not participating in any anti-competitive, collusive, deceptive or misleading practices in structuring and submitting the proposal. 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 disgualification 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	Should any supplier feel that it has been unfairly excluded from responding or unfairly
Probity Breach	disadvantaged by the process, the supplier is invited to write to the Director of Commissioning at commissioning@coordinare.org.au
Part	COORDINARE reserves the right to accept applications in relation to some and not all of
applications	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.