



Request for Proposal (RFP) GUIDELINES

Aged Care - Virtual Care Demonstrator Grants

Due: 5pm, 10th February 2025



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1. Introduction

COORDINARE - South Eastern NSW Primary Health Network (SENSW PHN) invites grant applications from partners in primary care to identify and address specific challenges that Residential Aged Care Homes (RACH) face in accessing primary and specialist care. The purpose of the Aged Care Virtual Care Grants program is to leverage technology and virtual care infrastructure to improve the integration and connectivity of RACH with their external care providers, including General Practitioners (GPs) and specialists.

2. Eligibility (who can apply)

To be eligible to receive funding under this initiative applicants must be an organisation or individual with established legal status (e.g. under Corporations Law, Health Services Act, Trustee Act), and may include:

- Residential Aged Care Homes, Multi-Purpose Facilities, General Practices, Specialists, Allied Health or other healthcare providers working with Residential Aged Care Homes
- Organisations with a strong presence in their community and who work directly with priority populations.

Applicants must be able to demonstrate a service relationship with aged care providers such as a Commonwealth funded Residential Aged Care Facility; National Aboriginal and Torres Strait Islander Flexible Aged Care Program (NATISFACP) provider; or Multi-Purpose Services (MPS) and must also be located in one or more of the following South Eastern NSW local government areas:

Bega Valley	Shellharbour
Eurobodalla	Shoalhaven
Goulburn Mulwaree	Snowy Monaro
Kiama	Upper Lachlan Shire
Queanbeyan-Palerang	Wollongong
Yass Valley	

NOTE: Previous funding recipients are eligible and encouraged to apply for this program. Returning applicants should outline how they will leverage existing infrastructure or resources developed through the initial funding, demonstrating enhancements, efficiencies, or expanded impact. Consortium applications, such as partnerships between RACFs and General Practice, will be highly regarded.

Providers will agree to:

- Provide financial reporting on expended grant funds;
- Submit a conclusive performance report that demonstrates outcomes and learning;
- Support staff participation in telehealth/virtual care training provided by COORDINARE.



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Funding amounts

A total budget of up to **\$100,000 (ex GST)** is available for distribution across eligible providers in the South Eastern NSW region. It is envisioned that **1-3 successful applicants** will be awarded a grant, with individual grant amounts dependent on the scope and complexity of the projects proposed.

Important Note: This funding is **not recurrent**. Providers will be expected to achieve the following milestones:

- Purchase relevant equipment and infrastructure by no later than 30 June 2025.
- The contract end date for all awarded grants will be 30 June 2026.

Completing the grant application template (Attachment 1 & 2)

Complete all sections of the Grant Application template (Attachment 1 & 2) and include all relevant documentation. All submissions will be reviewed by a selection panel.

Grant applications close 5:00pm (AEST) on Monday 10 February 2025. Late submissions after cut-off date and time may not be considered.

3. Background

COORDINARE, as the South Eastern NSW Primary Health Network, 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. Commissioning is central to COORDINARE's ability to achieve these objectives and address local and national priorities. As a commissioning organisation, COORDINARE is involved in a continual cycle of developing and implementing health services and related initiatives based on a planning, procurement, review and evaluation cycle involving providers, communities and consumers. **More information about COORDINARE – SENSW PHN can be found on our [website](#).**

Issue Background

COORDINARE is supporting the Australian Government's response to the Royal Commission into Aged Care Quality and Safety Report (2021). The Royal Commission examined the complex issues faced by senior Australians at the junction of the primary and aged health care systems, in particular the lack of access to general practitioners in Residential Aged Care Facilities (RACFs), difficulties accessing after-hours care, and inappropriate transfer of residents to hospital. All these issues are implicated in poor health outcomes for senior Australians, and places increased pressure on RACFs and more widely, the health care system.

The use of telehealth has become widespread as a result of the COVID-19 pandemic and the Australian Government's expansion of telehealth services to reduce community transmission of the virus. Telehealth will continue to provide benefits in aged care beyond the COVID-19 pandemic. The Commission noted that telehealth is "a means of avoiding the potential harm and distress caused by travel for frail older people."

Increasing availability and use of virtual care for aged care residents is a critical component to developing integrated models of care and subsequently improving their health and wellbeing outcomes. Promoting



interoperability and/or accessibility for healthcare providers to interact with aged care facilities, such as general practices, pharmacies, Local Health Districts and specialists; and integrating key national digital health infrastructure such as the My Health Record, electronic National Residential Medication Charts, electronic shared care planning, Secure Messaging technologies and Provider Connect Australia into models of care, will facilitate greater innovation in the sector and a better coordinated health system for older people. Health care will be provided to older people more efficiently, addressing health concerns early and potentially avoiding preventable hospital admissions.

Funding purpose and Objectives

The program's specific objectives are to:

- Develop and implement innovative models of care that utilise virtual tools to enhance access, efficiency, quality, and the overall care experience for residents in aged care facilities.
- Leverage digital health enablers—such as My Health Record, the Australian Immunisation Register (AIR), National Residential Medication Charts, Shared Care Planning Tools, and Secure Messaging—to facilitate better communication and coordination across healthcare providers.
- The primary focus of the program is on demonstrator projects that showcase solutions that can overcome the technical, operational, and logistical barriers to implementing virtual care in aged care settings.

4. Scope and Specifications

Location

All funded activities must occur within the South Eastern NSW Catchment.

Scope and Specifications

COORDINARE welcomes proposals that:

- Address specific healthcare needs of residents in Residential Aged Care Homes (RACH), particularly in areas such as improved access to General Practitioners (GPs), specialists, or other healthcare providers.
- Leverage virtual care technology to enhance the quality, efficiency, and timeliness of healthcare delivery, ensuring residents receive appropriate care without unnecessary hospital transfers or travel.
- Demonstrate innovation through new or enhanced care models that incorporate telehealth or other virtual care processes to bridge existing gaps in healthcare services for residents. Proposals may include novel methods of care delivery, integration of virtual care with other health services, or technology that improves care quality and continuity.
- Improve access to care by introducing solutions that make it easier for residents to connect with healthcare providers for routine and acute needs.
- Overcome key barriers to implementation, focusing on specific technical, operational, or logistical challenges that have previously hindered the adoption of virtual care in aged care settings.



- Collaborate with external providers, forming consortia between RACH, GPs, specialists, and other healthcare providers to deliver comprehensive, resident-centered care.

Additional Considerations (Optional but encouraged):

- Utilise digital health enablers, such as My Health Record, electronic National Residential Medication Charts (eNRMC), the Australian Immunisation Register (AIR), Shared Care Planning Tools, and Secure Messaging, to improve care coordination and communication between RACH and healthcare providers.
- Incorporate COORDINARE's [Palliative Care Framework](#), where relevant, to support the delivery of high-quality end-of-life care through virtual means.
- Demonstrate potential for sustainable improvements, ensuring that the proposed model of care can continue to deliver benefits beyond the duration of the grant period, even if scalability is not the primary focus
- These proposals should aim to create a more efficient, integrated, and resident-centred care system, ultimately improving health outcomes and quality of life for aged care residents.

Multiple facility applications

Where an organisation operates multiple facilities eligible for this grant, proposals may be submitted per facility or as a single multi-facility application. When a consortium of organisations applies for a grant, a detailed explanation of each participant's role and engagement in the project should be provided.

This grant can be used to purchase or contribute to the following:

- Equipment necessary to undertake high quality virtual consultations.
- Infrastructure necessary for equipment outlined above to operate effectively.
- Training that is necessary to use the equipment or infrastructure purchased through these grants.
- Administrative costs to support the development and implementation of model of care.
- All equipment, infrastructure, or training purchased must adhere to all appropriate Australian legal requirements for patient information safety and security and, where appropriate, the Australian College of Rural and Remote Medicine's (ACRRM) Telehealth Framework and Guidelines.

The following activities are ineligible for funding under this project:

- Services which are remunerable through Medicare such as GP services.
- Infrastructure, equipment or services intended to solely support services for family members or carers who are not residents.
- Infrastructure or equipment intended solely to service social or recreational services.
- Disability support services.

Note: Funding is not intended for routine staff duties, including general welfare or pastoral care services within participating organisations. The purpose of this grant is to support virtual care services and equipment to improve or expand access to care for residents directly served by the organisation.



Performance Indicators-Outputs and Outcomes

Providers will be required to implement a suite of appropriate performance indicators that enable the tracking of program activity and outcomes.

5. Timeline

An indicative timeline is outlined below. COORDINARE reserves the right to modify these timeframes. Registered providers will be notified of key changes via COORDINARE’s website and/or via Commissioning mailbox: commissioning@coordinare.org.au .

Activity	Date
Grant opportunity released	15 January 2025
RVSP for Industry Briefing*	4pm, 24 January 2025
Deadline for questions from potential respondents via Commissioning mailbox commissioning@coordinare.org.au	4pm, 24 January 2025
Industry Briefing inc. Q&A via Teams	6pm, 28 January 2025
Closing date and time for applications	5pm, 10 February 2025
Shortlisting of successful RFP submissions	February 2025
Clarification / negotiation with shortlisted providers	March 2025
Funding awarded	March 2025
Contracts commence	March 2025

**Please send a request to attend the Industry Briefing and Q&A session to COORDINARE’s Business Team via commissioning@coordinare.org.au*

6. Developing and submitting your submission

Responses to this Grant Opportunity should be submitted via commissioning@coordinare.org.au by 5:00pm (AEST) on 10 February 2025.

Applications should be aligned to the scope and specifications and address all the assessment criteria outlined in this document.

Please ensure you read each assessment criterion carefully and answer each component and section of the proposal template by considering all information provided. Documents can be attached which are directly relevant to your response.

If the documents are large, please specify the relevant page number(s)/section(s) to your response.

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



7. Respondent Questions

All questions about the Grant Opportunity process or content can be submitted to the Business Team via commissioning@coordinare.org.au by 4pm, 24 January 2025.

Please note that any questions, answers and points of clarification will be shared with all other providers participating in the Grant Opportunity. Any identifying information about the organisation submitting the question will be removed.



8. Assessment Criteria

An evaluation panel will consider each proposal against the mandatory requirements as well as the assessment criteria outlined below. If additional information to that requested in this document is required by COORDINARE when proposals are being considered, written information and/or interviews may be requested to obtain such information at no cost to COORDINARE.

Required Response	Weight
1. Identifies relevant aged care resident health care need	20%
Please refer to Section 4 Scope and Specifications or specify another evidence-based healthcare access issue that the proposed investment will address.	
2. Proposed model of care	40%
Describe the model of care and how the proposed investment will address aged care residents' health needs or the identified problem; include details of virtual care platforms or technology to be utilised. If relevant, describe how it will implement COORDINARE's Palliative Care Framework. The proposal should explain how the model will be embedded in the RACH and the expected impact.	
3. Capacity for project delivery	20%
Outline how your organisation will manage the development and implementation of the project, including securing agreement and participation of responding organisations. Include any prior experience with similar telehealth or virtual care projects.	
4. Value for investment	20%
Please provide an indicative budget using the provided template and a response demonstrating value for investment in service delivery. The price of goods and/or services is not the sole determinant of value for money and can be assessed through a comparative analysis of financial and non-financial costs and benefits of alternative solutions. Consider the following factors: <ul style="list-style-type: none"> • scalability and future growth potential • fitness for purpose and quality of service • predicted outcomes and impact of the investment • flexibility (including innovation and adaptability over the service agreement lifecycle) • whole of life costs • added value (value gained over and above the specified service objectives and requirements). 	

Compliance documents

Provide copies of your current accreditation certificate(s) from your professional body (if applicable).	Compliance
Provide copies of required insurances <ul style="list-style-type: none"> • 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 for NSW. 	Compliance



<ul style="list-style-type: none"> Cyber Security insurance - not less than \$1 million in the aggregate of all claims (Optional) 	
Aboriginal and Torres Strait Islander Impact Statement, Aboriginal and Torres Strait Islander Health Strategy or a Reconciliation Action Plan (Optional)	Compliance

COORDINARE reserves the right to work with shortlisted bidders, to clarify and finetune submissions, and in some cases request revised proposals, prior to a contract being awarded. Please refer to section 11. *Evaluation of submissions* for more information on COORDINARE’s approach to evaluating proposals.

9. Contracting Arrangements

Successful applicants will be required to enter a contract with COORDINARE. The term of the contract awarded will be from the date of execution until June 2026. It is a requirement to provide progress reports on agreed milestones, and outcomes-based deliverables will be negotiated with successful applicants. Acquittals detailing how funds have been used in accordance with the grant requirements and signed by an authorised officer, is a requirement. The format and framework for progress reports may take account of the size, costs, complexity and relative risks of the work being undertaken.

10. Evaluation of submissions

Successful respondents will be selected through a competitive process. An evaluation panel will consider each submission against the mandatory requirements as well as the selection criteria outlined in section 9.

If additional information to that requested in this document is required by COORDINARE when proposals are being considered, written information and/or interviews may be requested to obtain such information at no cost to COORDINARE.

Issues or complaints

The Respondent may, in good faith, raise any issue or complaint about the RFP or RFP process, at any time. Please contact the Business Team via commissioning@coordinare.org.au

11. 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



Response(s) to RFP	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
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

12. RFP General Terms and Conditions

ABN/Taxation requirements	COORDINARE will only deal with Respondents who have an Australian Business Number (ABN).
Acceptance	Non complying submissions may be rejected. COORDINARE may not accept the lowest priced proposal and may not accept any proposal.
Additional information	If additional information to that requested in this document is required by COORDINARE when proposals are being considered, written information and/or interviews may be requested to obtain such 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.
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 submission 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 submission, 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 acceptance of a proposal shall not bind COORDINARE.
General	Respondents should familiarise themselves with this document and the separate online Submission 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 submissions become the property of COORDINARE once lodged. COORDINARE may copy, or otherwise deal with all or any part of a submission for the purpose of conducting evaluation of submissions.
Negotiation	COORDINARE reserves the right to negotiate with short-listed Respondents after the RFP closing time and allow any Respondent to alter its submission. 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 submission 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 Business Team at commissioning@coordinare.org.au .
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.