

An Australian Government Initiative

Tender Briefing

A Stepped Care Approach to Mental Health and Wellbeing Support of Parents in the Antenatal and Post Natal Period

15 February 2019

Agenda

- Welcome
- Probity briefing
- About North Western Melbourne PHN
- Background and context for tender
- About the program
- Service specifications
- Evaluation criteria
- Q&A

Probity in the context of PHN procurement

Probity aims to ensure that the RFT process:

- is defensible and able to withstand internal and external scrutiny
- achieves accountability and transparency
- provides for fair and equitable treatment of tenderers
- ensures best outcomes (including value for money)

PHN probity requirements

- Confidentiality and information security Subject to the requirements of the RFT, tenderer information (including confidential information and intellectual property) will be protected and not disclosed
- Privacy Subject to the requirements of the RFT, personal information will be protected and not disclosed
- Impartiality and avoiding unfairness and bias
- Procedural fairness
- Identification and management of any conflicts of interest

What's in it for tenderers?

Level playing field:

- You are provided with the same opportunity no unfair advantage
- You can have confidence that the rules will be fairly and equitably applied

Uncertainty minimised:

You can more effectively address the requirements of the RFT

Tenderer probity obligations

- Comply with the requirements of the RFT, including closing time and lodgement requirements.
 Late tenders will not be accepted.
- Do not seek or obtain improper assistance from PHN staff, including its employees and contractors
- Communications need to be directed through the Tenderlink website
- Avoid anti-competitive conduct (e.g., collusion, cartel activities), including in relation to the preparation, lodgement and evaluation of tenderers and any pre-contract negotiations
- Avoid and declare any conflicts of interest

Minimise your risk

- Join the dots do not leave any relevant things unsaid/implied be explicit
- Explicitly set out any assumptions relied upon in your tender
- Directly and squarely address the evaluation criteria
- Set out mitigations for any identified/apparent risks
- Watch for any addenda or online forum conversations
- Lodge your tender well before the closing time

North Western Melbourne PHN

As an **improver**, we strengthen access to, and the quality of, general practice and primary health care.

As a **director of funds**, we attract and aggregate resources for the region, and allocate these fairly and efficiently.

And as a **targeter of needs**, we understand and identify health needs, establish priorities, and plan, advocate and collaborate to meet them.



North Western Melbourne

Population: 1,707,000*

Land area: 317,867 ha

Local Government Areas: 13

Hospital services: 37

Medical clinics: 565

- One of the fastest growing areas in the state
- Large population of CALD, LGBTI+, low SES

Profile areas NWMPHN area Castlemaine 'Chewton Legend Muckleford South: Bushlands Sub areas angways, Fryerstown NWMPHN area Yandoit, .Werona Mount .Franklin Kilmore .Clonbinane Flowerdale meaton Daylesford Woodend. .Kerrie Lyonville North Riddells Rocklyn Kinglake Beveridge Whittlesea Strathewen. Gordon Nutfield. Dunnstown Bend of Melton Islands Elaine Beremboke WALES Meredith. Adelaide Steiglitz Maude Melbourn Sutherlands Shelford Bannockburn Compiled and presented in profile id by .id, the population experts.

*Estimates based on 2016 Census

- There has been a recent and growing focus on the antenatal and post natal period (e.g. first 1000 days)
- Significance of environments and experiences during the antenatal and post natal period
 - Impact on the development of health and wellbeing
 - Mental health
 - Social functioning
 - Cognitive development

- One in ten women experience antenatal depression and/or anxiety
- One in six experience postnatal depression and/or anxiety
- Prevalence of paternal depression between the first trimester and 1 year postpartum is one in ten
- Prevalence of paternal anxiety in the antenatal period is one in six and one in five in the postnatal period

- Current Services
 - Public and private Mother Baby Units
 - Area mental health teams
 - Community based services
 - MBS
- The NWMPHN HNA, 2018 suggested that referral rates to psychological services may not align with actual need
 - Uptake of those referrals is also likely to be low

- Investment in mental health services for parents in the ante natal and post natal period is a gap that NWMPHN recognises
- An opportunity to positively influence the experience of parenthood and child development

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About the program

Objective

The aim of this program is to improve access to mental health services for new parents in the community to improve mental health and wellbeing outcomes

Funding

A total funding pool of \$750k is available from across the program areas of: Targeted Psychological Services, and Children and Families until 30 June 2020

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Key features

- Provide evidence-based, time-limited psychological therapies
- Stepped care framework
- To establish and strengthen linkages between local services, supports and stakeholders that may include formal collaborations
- A service model that improves access
- Recognising that multiple stakeholders are involved in providing care, submissions that include
 a collaborative or consortium based approach will be highly regarded.

Service Specifications

Principles of care:

- Consumer focused
- Recovery focused
- Flexible and accessible
- Collaborative and integrated
- Workforce capability
- Safety and quality
- Culturally appropriate
- Outcomes focused
- Innovative
- An opportunity to positively influence the experience of parenthood and child development

Service Specifications

Consumer characteristics and eligibility:

- Parents during pregnancy
- 12 months after birth
- Reside in catchment
 - Experiencing or at risk of mild to moderate mental health

Workforce:

Suitably qualified, multi-disciplinary team

Service Specifications

Intake and Referral

- Provider agency(cies) takes responsibility for intake and waitlists
- Consumer experiences of services are collected/reported and responsiveness prioritised
- Strategic co-location of staff

Evaluation Criteria

No.	Criteria category	Weight in %
1	Proposed methodology and approach to delivering the services	25%
2	Experience and capability for service delivery	25%
3	Local service collaboration	25%
4	Establishment plan	25%
5	Price	Not weighted
6	Commercial and financial viability	Not weighted
Total		100%

Communications & Enquiries

All communications and enquiries in relation to the Request for Tender must only be directed in writing via our Tenderlink Portal and the email address specified below:

Website: https://www.tenderlink.com/mpcn/

Email: <u>tenders@nwmphn.org.au</u>

Remember:

The tender closing date is 7 March 2019 at 5pm. No late submissions will be accepted.

Questions

All questions and answers will be posted on the Tenderlink forum.

Closing