

An Australian Government Initiative

Tender Briefing

Social Connectedness Trials

7 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 Briefing

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

2

About North Western Melbourne PHN

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



3

Background and context for tender

Social Connection - Definitions

Social connectedness is the experience of connection that people have with their community (as defined by them).

It has been identified that three factors determine the extent which an individual is socially connected:

- 1. connections to others via the existence of relationships and their roles;
- 2. a sense of connection that results from actual or perceived support or inclusion; and
- 3. the sense of connection to others that is based on positive and negative qualities.

Loneliness is a **subjective concept** that is about how a person feels about their connections with others. It has been defined as "a feeling of distress people experience when their social relations are not the way they would like."

Social isolation is an **objective term** that can be measured by markers such as social contacts and living alone.

Background

The recent Australian Loneliness Report has identified that:

- One in four Australian adults are lonely
- Nearly 55% of the population feel they lack companionship at least sometimes
- Lonely Australians have significantly worse health status (both physical and mental) than connected Australians
- Loneliness increases the likelihood of experiencing depression by 15.2%
- Loneliness increases the likelihood of experiencing social interaction anxiety by 13.1%
- Loneliness and social isolation have been found to **pose a risk for mortality** comparable to wellestablished risk factors such as smoking and obesity.
- It has also been identified that "individuals with adequate social relationships have a 50% greater likelihood of survival compared to those with poor or insufficient social relationships".

About the program -Social Connectedness

Social Connectedness Trials

About the program

 NWMPHN is seeking to commission innovative approaches to improve social connectedness for people experiencing poor health outcomes.

NWMPHN is seeking to address the following key objectives:

- the delivery of innovative approaches to improve social connectedness for people experiencing poor health outcomes;
- the delivery of appropriate supports that are responsive to the needs of identified populations;
- the establishment and strengthening of linkages between local services, supports and stakeholders that may include formal collaborations.

Funding

A total funding pool of **\$1 million is available for two years** from across two program areas of:

- Core Flexible Funding Stream
- Low intensity mental health stream from the Primary Mental Health Care Funding Stream*

\$500,000 (GST Exc.) has been allocated to responses for both the **Hume and Wyndham LGAs** to provide integrated and locally relevant responses

*Monitoring will therefore reflect the requirements of those funding streams. As such there will be a requirement to undertake monitoring of a minimum data set. This will be discussed during the contract negotiation period.

Key Elements

NWMPHN is seeking a program that includes the following key elements:

- 1. A model that effectively identifies individuals, understands their needs, and connects them with appropriate services and supports.
- 2. Includes direct interventions that help to reduce loneliness and social isolation among target populations. A range of approaches may be appropriate including group-based interest activities, one-to-one services, targeted interventions.
- 3. Accounts for required infrastructure such as transport or internet.
- If required, provides individuals with access to appropriate pathways to mental health support including from NWMPHN CAREinMIND[™] commissioned mental health services.

Target population

Responses must demonstrate how applicants will work to identify and support people experiencing poor health outcomes.

The populations that NWMPHN has identified as experiencing loneliness and social isolation in the regions covered by these tenders include but are not limited to:

- People living with chronic conditions
- People experiencing mental illness
- Older adults
- Young people
- Geographically isolated people
- Aboriginal and Torres Strait Islander people
- CALD communities
- LGBTIQ
- Refugees and asylum seekers
- Carers
- Vulnerable parents/caregivers and families



Providers are expected to contract an independent evaluation (upon approval of NWMPHN) of the trial using the allocated budget.

Key evaluation activities performed by the independent evaluator will include:

- Development and implementation of a process evaluation and a limited outcome evaluation of the social connectedness trial.
- Supporting the monitoring, collection, review and assessment of data over the period of the trials.
- Delivery of a final evaluation report at the conclusion of the trials.

As part of the tender, we are asking for responses to deliver a preliminary evaluation framework (program logic) which should include:

- Evaluation objectives
- Key questions the evaluation will seek to answer
- Data sources and data collection methods

NOTE: It is expected that 10-15% of the budget will be allocated for the purposes of monitoring and evaluation.

Additional requirements

Community participation

• It is important that responses demonstrate how they will involve target population/s in the development, design, implementation and evaluation of the proposed services.

Local service engagement

• It is required that program delivery will involve engagement with the local service system in [Hume / Wyndham] to improve pathways for people experiencing loneliness and social isolation.

Partnerships

• NWMPHN will accept responses from providers with formalised partnerships in place to deliver the Program Objectives.

Sharing information and learning

It is required that successful providers across both trial sites work together to share information and learning. This will be facilitated by the NWMPHN through a governance mechanism established once the two tenders (local government areas of Hume and Wyndham) have been awarded.

Evaluation Criteria

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Questions to date

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

Questions received to date:

- **1.** We would like to register participants for the industry briefing on 7th February, and would be grateful if you could please advise time and location details, and the process by which we register.
- A: The industry briefing will be held on 7th February at 2pm. Location
 North Western Melbourne PHN - Yarra Room
 Level 5, 369 Royal Parade
 PARKVILLE VIC 3052
 Australia

Please register via this link: https://nwmphn.org.au/event-detail/tender-briefing-socialconnectedness-trials/a084H00003SRTdzQAH/

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: <u>https://www.tenderlink.com/mpcn/</u>

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

Remember:

The tender closing date is 25 February 2019 at 5pm. No late submissions will be accepted.



Networking

