

# *Market briefing*

Prospective tender: Culturally responsive, family-centred AOD model of care

22 March 2019



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# *Purpose of market briefing*

- About North Western Melbourne PHN
- Background and context for tender
- Procurement
- Q and A
- Facilitate networking



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*About North Western  
Melbourne PHN*

# North Western Melbourne PHN

We strive to strengthen access to, and the quality of, general practice and primary health care.

As a commissioner, we attract and aggregate resources for the region, and allocate these fairly and efficiently.

We understand and identify health needs, establish priorities, and plan, advocate and collaborate to meet them.





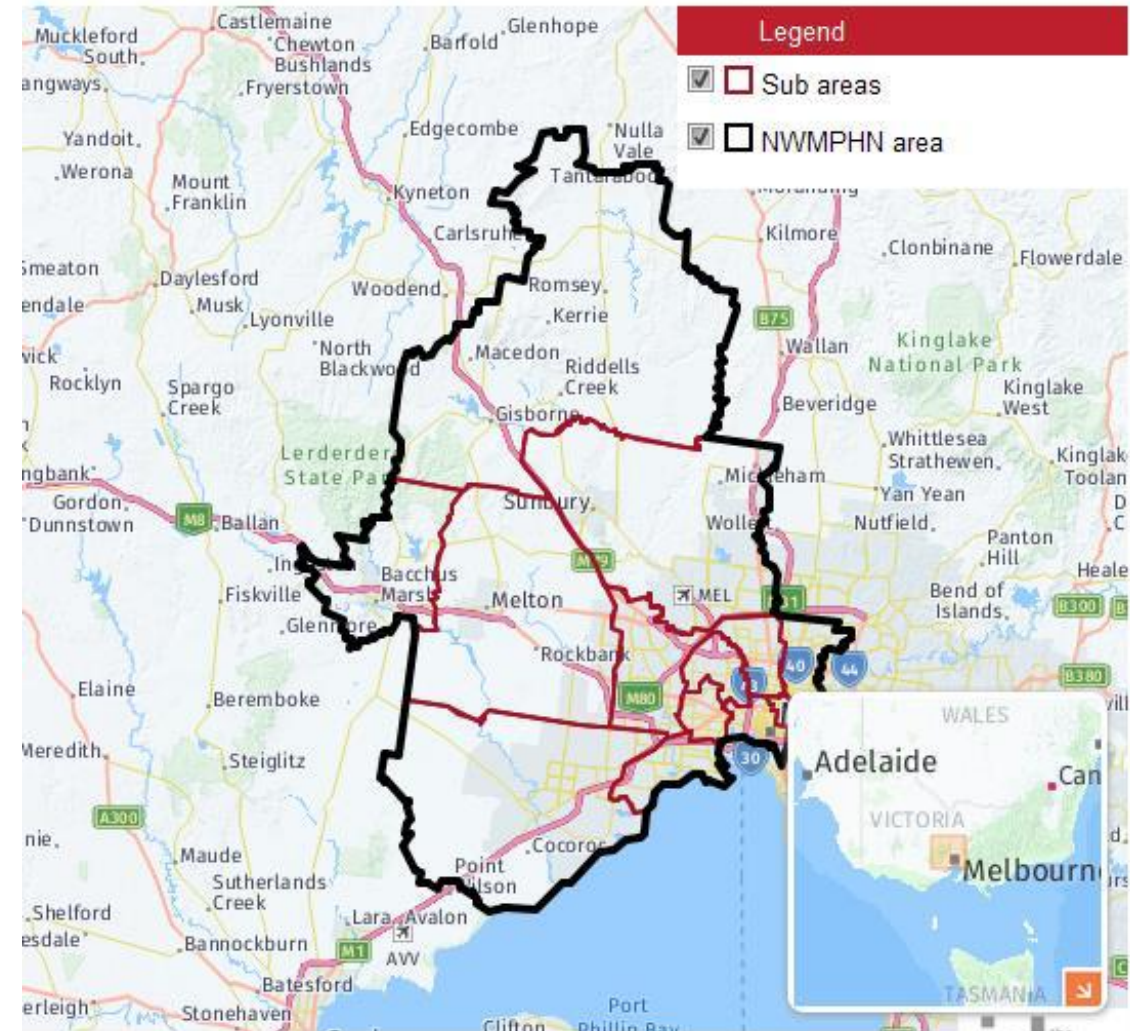
# North Western Melbourne

<b>Population:</b>	1,707,000*
<b>Land area:</b>	317,867 ha
<b>Local Government Areas:</b>	13
<b>Hospital services:</b>	37
<b>Medical clinics:</b>	565

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

## Profile areas

NWMPHN area



Compiled and presented in profile.id by .id, the population experts.

.id  
the population experts



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*Background and context for  
the upcoming tender*

# *NWMPHN Health Needs Assessment - 2018*

- Alcohol misuse continues to create the greatest health and social harms across region
- Cannabis and methamphetamine use contributes to significant concerns to health providers and local communities
- Recognised that alcohol and other drug use is potentially quite high in some CALD population groups but this is often under-represented in available data

## Recommendations

- Youth specific services to address rates of adolescent smoking, drinking and other drugs
- Health literacy for vulnerable groups



# VAADA CALD Report (2016)

- CALD communities are significantly under-represented in the AOD treatment system
- Range of service barriers and socio-cultural norms making it difficult for individuals and families to access treatment (not necessarily due to low need)
- Improving the capacity of mainstream agencies to provide culturally responsive services should not be done in isolation, with the emphasis merely on the professional development needs of frontline staff

## Recommendations

- That AOD agencies be supported to establish interagency partnerships and protocols with CALD organisations, thus ensuring more accessible, holistic and culturally safe services for individuals and family members impacted by harmful AOD use
- That agencies be supported to develop culturally appropriate service delivery models in partnership with local CALD communities

## *NWMPHN commissioning response*

*Commission a single service response that supports CALD young people to address the harms associated with AOD use*

*Fundamental that the model is underpinned by culturally responsive, family-centred practice*

## *Key outcomes*

- Increased capacity of AOD and family services to work in a culturally responsive way through the delivery of tailored programs
- Increased community awareness and understanding of available support options
- Increased capacity of ethno-specific organisations and local communities to access AOD treatment programs, information and additional supports e.g. counselling, case management, community-based supports etc.  
Including; in the afterhours period e.g. through coordination with general practice, community-based services, hospitals etc.
- Enhanced coordination of primary health care responses in the afterhours period.

# Key elements for the model to consider

- Have strong community engagement practices that involve the community in the development, implementation and evaluation of the model
- Be family-centred (e.g. working with parents and families as required, providing education to parents and families about alcohol and drugs, the service system more broadly and supporting any other concerns raised e.g. mental health concerns, homelessness, family violence, housing, employment etc.)
- Consider family disconnection as an important risk factor for the development of AOD issues (e.g. focus on building stronger family networks/intergenerational communication as a primary prevention initiative)<sup>[1]</sup>
- Include meaningful partnerships so that there is an exchange in knowledge about the health service system as a whole<sup>[2]</sup>
- Demonstrate understanding of the afterhours needs of the target cohort and reflect how these needs will be responded to in a planned and coordinated manner.
- Support capacity building to enable culturally responsive practice and considerate of the specific needs of young people and their families.

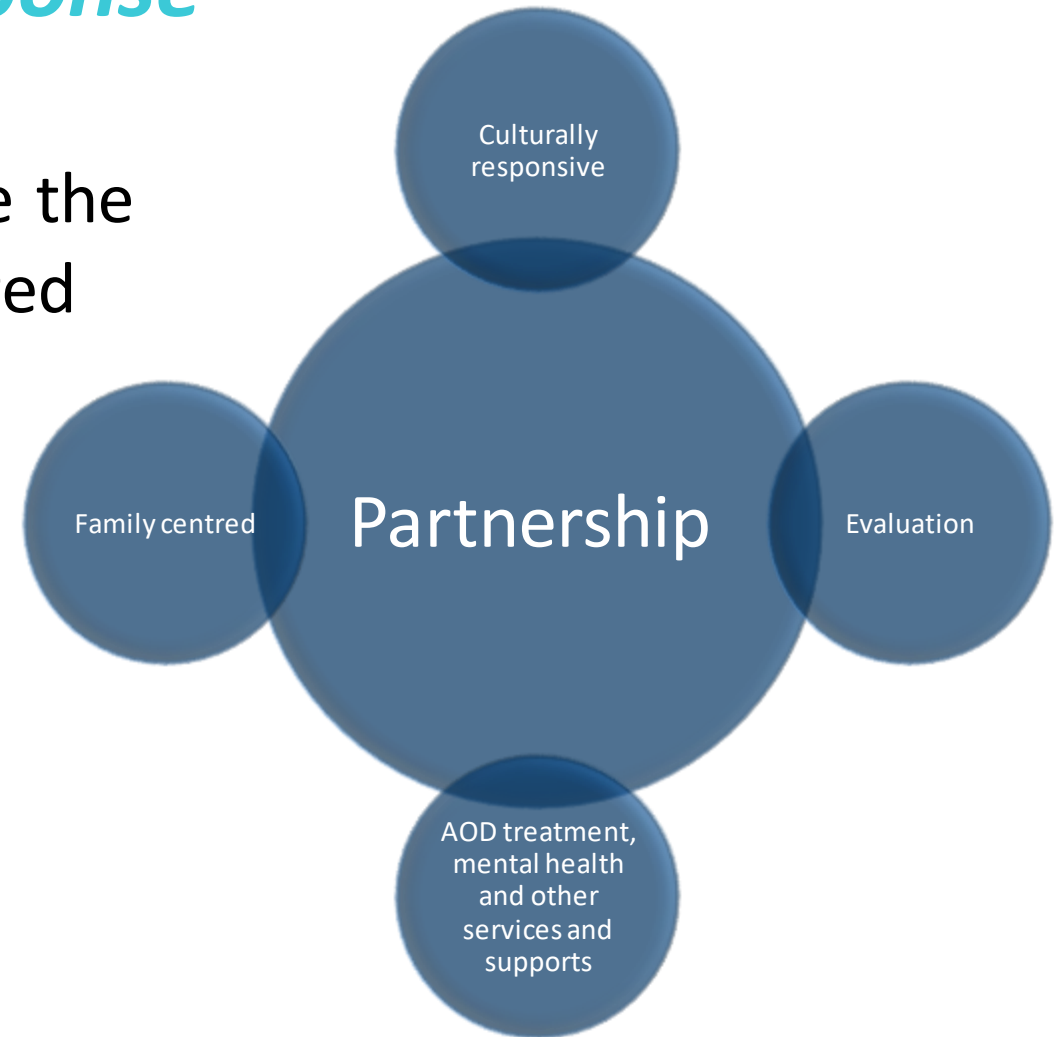
[1] <http://dro.deakin.edu.au/eserv/DU:30029825/renzaho-preventionofalcohol-2010.pdf>

[2] <http://dro.deakin.edu.au/eserv/DU:30029825/renzaho-preventionofalcohol-2010.pdf>



## *NWMPHN commissioning response*

- Unlikely that any one service can provide the multi-disciplinary suite of services required to meet the needs of this approach
- Partnership between organisations that:
  - Increases community understanding of the treatment and support options
  - Improves access to culturally safe service provision
  - Builds awareness of afterhours service responses



## *Culturally responsive practice*

*"Cultural responsiveness is a concept that has been offered up as an extension of cultural competence in its attempts to more fully and more actively integrate culture – It is cultural competence enacted.*

*Culture is considered not simply as a contextual factor for service delivery but to have its own significance as part of the processes and outcomes for services of all kind"*

Bicultural Practice in the Northern Territory Children and Families Sector (2013) Menzies School of Health Research, Centre for Child Development and Education



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# *Procurement*

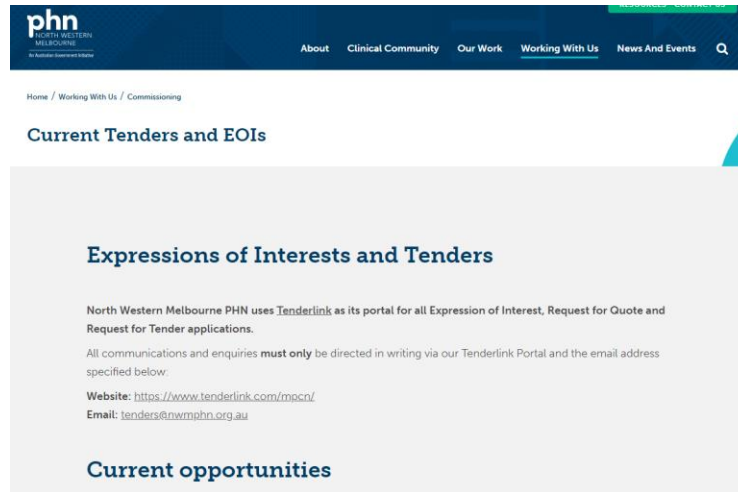
# *Procurement objectives*

1. We aim to provide the highest levels of probity, ethical and professional tendering of our services.
2. We expect to provide a transparent, fair process where suppliers are treated equally and assessed on their capability.
3. We are working on a model of outcome based commissioning:
  - This is where we look to providers to promote approaches that enable them to deliver the outcomes required as opposed to prescribing the solution.
  - We are looking at innovation that originates from the providers and communities we support
  - Our evaluation approach includes consumer engagement to ensure it is relevant to those we support.



# Procurement access and portal

1. Tenders are advertised on the NWMPHN website and this contains a link to the e-tendering portal



2. Tenderlink is our e-tendering portal and providers are required to register in order to access tenders or respond to requests.
3. All questions and submissions must be addressed through Tenderlink.
4. Tender responses are evaluated in accordance to the published criteria in the request for tender

# *Procurement process (your response)*

1. Before uploading your response ensure you have all the required documentation. This includes your response, declaration, conformity to contract terms and supporting information (such as insurances and Policies).
2. Ensure that you have reviewed the contract terms and clearly stated any clauses that you are unable to commit to agree. This is part of your offer and if you do not state any requirements in your response it is assumed that you accept all terms in the contract.
3. All questions and submissions must be addressed through Tenderlink. Any responses to questions received, including those from other providers will be published through Tenderlink.
4. Ensure that you can access the Tenderlink portal and understand the tasks needed for uploading your tender. It is best to complete this check the day before closing.

# Procurement tips

1. When reading a tender check the return date, that you are able to meet any mandatory requirements and understand the requirements set out in the weighted criteria.
2. When responding to questions please ensure you provide evidence to support your responses, examples are useful.
3. Criteria will often be linked to your existing experience, your approach to providing a service that meets the outcomes required in the tender and how you will be able to provide the resources needed to deliver the services.
4. If unsure about any aspect of the tender ask a question through the portal
5. When uploading responses **do not leave it to just before the closing time.**
6. If you have problems uploading responses, contact either Tenderlink or the Procurement **before the closing** time for assistance.



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## *Questions and Answers*





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*Thank you*

**Networking activity!**

# Networking activity

Organisations who see their names in the inner circle please have a seat

Everyone else can choose a spot in the outer circle

## Activity

1. person in the **inner circle** introduces themselves and asks the person opposite how their organisation contributes to the principles of the partnership

## Time keeper calls time

2. person in the **outer circle** introduces themselves and asks the person opposite how their organisation contributes to the principles of the partnership

Time keeper calls time & people in the outer circle shift to the right

