**Part One and Two**

 

**Department of Health**

**Funding for an organisation/s to**

**deliver the Primary Care Support Initiative**

**(1 July 2023 – 30 June 2024)**

**Request for Grant Proposals**

# CLOSING TIME: 5:00 pm, Thursday 1 June 2023

Request for Grant proposal

(“RFGP”)

BY

department of health

FOR

Primary Care Support Initiative

# ISSUE DATE: 31 March 2023

# ENQUIRIES ABOUT THIS REQUEST FOR Grant Proposals (RFGP) SHOULD BE DIRECTED TO THE CONTACT OFFICER:

Name: Jessica Leonard

Telephone: 03 6777 4105

Email: primaryhealth.caregrants@health.tas.gov.au

Address: Level 1, CS Smith Centre, 16-14 Charles Street, Launceston TAS 7250

PO Box 1963, Launceston TAS 7250

# LODGEMENT OF PROPOSALS:

All proposals may be submitted electronically by emailing the contact officer as per the details below with “*RFGP – Primary Care Support Initiative”* in the subject line. If an organisation is not able to submit their application electronically, they are advised to contact the Contact Officer (above).

**Preference will be given to organisations that have not previously been awarded funding via:**

* **Rounds 1and 2 – Hospital Avoidance Grants**
* **Round 1 – GP After Hours Support Initiative (focus on GPs and Pharmacy)**
* **Round 2 – GP After Hours Support Initiative (focus on Urgent Care Services)**
* **Round 3 – Primary Care Support Initiative**

Any supporting documentation that cannot be submitted electronically can be sent via post and must be received prior to the closing time.

**Email submissions to:** primaryhealth.caregrants@health.tas.gov.au

**Posted** items can be sent to:

Department of Health

Strategic Purchasing and Funding

Attention: Jessica Leonard (CH Smith Building)

PO Box 1963

Launceston TAS 7250

So that it is received by the Department before the closing time.

# CLOSING TIME: 5:00 pm, Thursday 1 June 2023

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**PART FOUR**

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IMPORTANT INFORMATION FOR RESPONDENTS

## 1. EXPLANATION OF THE REQUEST FOR GRANT PROPOSALS DOCUMENTATION

1.1 Conditions

The Conditions are the conditions upon which the Department is prepared to receive and evaluate Proposals. Failure to strictly observe these conditions may result in a Proposal being refused without evaluation.

The Conditions also specify the **evaluation criteria** against which Proposals will be evaluated.

1.2 Specifications

The Specifications provide a comprehensive description of the Department’s Requirements.

1.3 The Funding Agreement contains the terms of the contract with successful Respondents. It may be varied only by agreement between the Respondent and the Department during the Proposal evaluation and negotiation process.

A contract to supply the Department’s Requirements is not formed until counterparts of the Funding Agreement have been signed and exchanged between the Department and the Respondent.

## 2. SERVICES

The quantity or the extent of the demand for Department’s Requirements stated in the RFGP are indicative and for Proposal purposes only.

No assurances are given that the successful Respondent/s will have the right to be the sole supplier of the Department’s Requirements.

## 3. CONTACT OFFICER FOR RFGP ENQUIRIES

During the Proposal period, prospective Respondents may seek clarification of the general or technical areas of this RFGP through the Contact Officer. Contact details are provided on Page 1 of this RFGP. Unauthorised communication with other staff may lead to disqualification of the Respondent.

## 4. LODGEMENT OF PROPOSAL

Details for lodgement of Proposal are set out on Page 1of this RFGP and in clauses 12 and 13 of the Conditions of Proposal.

## 5. PROPOSAL MAY BE IN RESPECT OF SOME OR ALL OF THE DEPARTMENT’S REQUIREMENTS.

5.1 A Respondent may submit a proposal in respect of one, some, or all of the specific elements of the Department’s requirements being:

1. These grant rounds are focused on vulnerable populations. In this context, this refers to those who have a combination of poor access to health care, receive poor quality care, and experience poor care outcomes, often resulting from an accumulation of societal injustices related to race, ethnicity, poverty, gender, sexual orientation, age, first language, or physical or mental health condition.
2. Whilst there are many vulnerable populations within our communities who are deserving of funding, for this grant round, preference will be given to models of expanded after hours care that focus on people who are homeless or at immediate risk of homelessness.

## 6. CROWN POLICY ON CONFIDENTIALITY OF INFORMATION IN GOVERNMENT CONTRACTS

The Crown is committed to ensuring that Government contracting is conducted in an open and transparent manner. The Crown policy in relation to confidentiality in Government contracts is set out in clause 19 of the Conditions of Proposal.

PART ONE

CONDITIONS OF PROPOSAL

**INTERPRETATION**

# 1. DEFINITIONS

 In this RFGP, unless the context precludes it:

|  |  |
| --- | --- |
| **Closing Time** | means the closing time (Tasmanian time) and date for submission of Proposals shown on the cover page of this RFGP or as extended pursuant to clause 3.4; |
| **Contact Officer** | means the person identified as Contact Officer on the page 1 of this RFGP; |
| **Crown** | means the Crown in Right of Tasmania; |
| **Department** | means the Department named on the cover page of this RFGP; |
| **Department’s Requirements** | means the services described in the Specification; |
| **Funding Agreement** | Means the Funding Agreement in “Part Three” of this RFGP; |
| **GST** | means any tax imposed under any GST law and includes GST within the meaning of the GST Act; |
| **GST Act** | means the *A New Tax System (Goods and Services Tax) Act 1999* (Commonwealth) as amended; |
| **GST Law** | means the GST law as defined in the GST Act and includes any Act of the Parliament of Australia that imposes or deals with GST; |
| **Person** | includes a natural person, a corporation, a partnership, a board, a joint venture, an incorporated association, a government, a local government authority and an agency; |
| **Proposal** | means the documents constituting an offer by the Respondent to deliver the Department’s Requirements under this RFGP; |
| **Request for Grant Proposals** or **RFGP** | means this document inviting Respondents to offer to deliver the Department’s Requirements by submitting a Proposal as provided in this document; |
| **Respondent** | means a Person who offers to deliver the Department’s Requirements under this RFGP;  |
| **Specification** | means the Specification contained in Part “Two” of this RFGP; and |
| **Proposal Description** | means the Proposal description shown on the cover page of this RFGP. |

# 2. RIGHTS AND OBLIGATIONS

The Department is part of the Crown and any rights and obligations of the Department under the provisions of this RFGP are to be read and construed as rights and obligations of the Crown.

# 3. RESERVATIONS

3.1 The Department does not warrant the accuracy of the content of the RFGP and the Department is not liable for any omission from the RFGP.

3.2 The Department may vary the RFGP at any time by:

(a) informing all Respondents; and

(b) notifying all persons who have been issued with the RFGP by the Department (or who have downloaded a copy of the RFGP) and who have provided sufficient address details to enable the Department to contact them.

3.3 Quantities stated in the RFGP are indicative and for Proposal purposes only unless otherwise stated specifically in the RFGP. Where quantities are indicative, the Department will be liable to accept only the quantities ordered, subject to contract.

3.4 The Department may extend the Closing Time by:

(a) informing all Respondents; and

(b) notifying all persons who have been issued with an RFGP by the Department (or who have downloaded a copy of the RFGP) and who have provided sufficient address details to enable the Department to contact them; and

(c) advertising the extension in the Saturday edition of each of the daily Tasmanian newspapers in which the original RFGP was advertised.

3.5 The Department may cease to proceed with, or suspend the process outlined in the RFGP.

3.6 The RFGP must not be construed as making any express or implied representation, undertaking or commitment by the Department that it will enter into a binding contract with any person to supply or otherwise for the purposes of the Department’s Requirements.

3.7 No assurances are given that the successful Respondent will have the right to be the sole supplier of services to the Department.

3.8 The Department may reject a Proposal which does not fully comply with the terms of the RFGP.

3.9 The Department reserves the right to accept all or part of a Proposal at the price or prices proposed unless the Proposal states specifically to the contrary.

3.10 The Department may accept more than one Proposal.

3.11 No representation made by or on behalf of the Crown in relation to the Proposal or the RFGP (or their subject matter) is binding on the Crown unless it is in writing and is incorporated into the Funding Agreement.

#

# 4. UNAUTHORISED COMMUNICATION

Respondents must direct all communications through the Contact Officer unless directed otherwise by the Contact Officer. Unauthorised communication with other staff of the Department may lead to disqualification of the Proposal.

# 5. Confidentiality AND INTELLECTUAL PROPERTY

5.1 RFGP remains property of the Department

The RFGP remains the property of the Department and may be used only to prepare a Proposal in response.

5.2 Use of RFGP is restricted.

Except for information available to the public generally (other than by breach of these Conditions), a person receiving the RFGP must not publish, disclose or copy any of its content, except to prepare a Proposal in response.

5.3 Proposers must not disclose information.

The Respondent must keep confidential all information provided by the Crown, as part of, or in connection with, the RFGP.

5.4 Proposals become the property of the Department.

All Proposals become the property of the Department, which may reproduce all or any part of a Request for Grant Proposal evaluation.

5.5 Department’s right to use a Proposal.

Despite any confidentiality or intellectual property right subsisting in the successful Proposal that gives rise to a binding contract with the Crown:

(a) the Department may reproduce all or any part of that Proposal in a contract awarded to the Respondent, without reference to the Respondent;

(b) subject to paragraph (c) of this subclause, either party may publish all or any part of that Proposal that is included in a contract, without reference to the other; and

(c) neither party may publish any part of that Proposal that the Head of Agency has determined should be confidential, during the period determined by the Head of Agency.

5.6 Confidentiality of Proposal to be preserved.

Subject to the previous subclause, the Crown and the Respondent must hold the Proposal in confidence, so far as the law allows, except if:

(a) the information is available to the public generally, other than by breach of this obligation;

(b) a law requires a party to file, record or register something that includes information in the Proposal;

(c) disclosure is necessary or advisable to get a consent, authorisation, approval or licence from a governmental or public body or authority;

(d) it is necessary or advisable to make disclosure to a taxation or fiscal authority;

(e) it is necessary to provide the information in the Proposal in answer to a question asked of a Minister in the Parliament, or otherwise to comply with a Minister’s obligations to Parliament; or

(f) it is disclosed confidentially to a party’s professional advisers:

 (i) to get professional advice about this Proposal process; or

 (ii) otherwise to consult such professional advisers.

# 6. content and format of PROPOSAL

6.1 Proposals must include all the information:

(a) requested in the Specifications; and

(b) requested in the RFGP generally.

6.2 All items, features and functions specified in the RFGP are mandatory requirements unless expressly stated otherwise.

6.3 The Respondent must submit the Proposal under cover of the Proposal Form provided in Part Four of this RFGP. The Proposal Form must be completely filled in, and be accompanied by any other supplemental documents necessary to make the Proposal complete. A Respondent may reproduce the Proposal Form in an expanded format to provide additional space for response.

6.4 Unnecessarily elaborate responses or other presentations beyond what is sufficient to present a complete and effective Proposal are neither required nor desired. Elaborate artwork and bindings, expensive visual and other presentation aids are unnecessary.

# 7. australian business number (ABN)

The Respondent must provide its Australian Business Number (ABN). If the Respondent does not have an ABN, then the reason for not having an ABN must be stated. If the Respondent does not register or disclose an ABN, then PAYG Withholding Tax may apply and the Department is required by law to deduct the relevant amount from each contract payment and to remit that amount to the Australian Taxation Office.

# 8. Compliance

8.1 Respondents will be taken to fully agree or comply with the Conditions of Proposal, Funding Agreement and Specifications, unless the Proposal specifies otherwise.

8.2 If a Proposal does not fully comply with the Conditions of Proposal, Funding Agreement and Specifications, the Respondent must include a statement in the Proposal specifying each condition or requirement with which the Respondent does not agree or comply and indicating, for each condition or requirement, whether the offer:

**Partially Complies**

This means:

- If a clause imposes a contractual condition, that the condition can only be met subject to certain qualifications. Those qualifications must be stated in full; and

- If a clause specifies a characteristic or performance standard, that the condition can only be met subject to certain conditions. Where this is the case, and the Respondent is prepared to make good on the condition, characteristic or performance standard, the Respondent must state or describe how the non-compliance is to be made good.

**Does Not Comply**

This means:

- That the complete contractual condition, or characteristic or performance standard of the clause is not met by the offer. Full details of the non-compliance must be stated.

OR IS

**Alternative**

This means that the services either:

(a) do not require the feature; or

(b) fully comply in a manner different from that described.

In either case a full explanation must be provided.

8.3 The Proposal must give prominence to statements of non-compliance (as described in clause 8.2) – it is not sufficient if the statement appears only as part of an attachment to the Proposal, or is included in a general statement of the Respondent’s usual operating conditions.

# 9. ALTERNATIVE PROPOSAL

9.1 The Respondent may submit an alternative proposal if it is clearly identified as an “Alternative Proposal” wherever it fails to comply with the specified requirements.

9.2 A Respondent who submits a Proposal which meets the Department’s Requirements in an alternative and practical manner, taking into account the totality of the requirements must include any supplementary material, together with associated prices, which demonstrates, in detail, that the alternative will fully achieve all the requirements.

9.3 Respondents are encouraged to offer options or solutions which, in a novel or innovative way, contribute to the Department’s ability to carry out its business in a more cost-effective manner. These may be related to the functional, performance and technical aspects of the requirements or to opportunities for more advantageous commercial arrangements.

9.4 The Department reserves the right either to consider Alternative Proposals on their merits or not to consider them further.

# 10. PREPARATION OF PROPOSALS

The Department will neither be responsible for, nor pay for, any expense or loss incurred by a Respondent for:

(a) preparing or lodging a Proposal; or

(b) providing additional information or clarification during the evaluation of a Proposal.

# 11. VALIDITY

A Proposal constitutes an irrevocable, unalterable offer by the Respondent to the Crown which must remain valid and open to be accepted for 90 days from the Closing Time of the RFGP and may be extended by written agreement.

# 12. LODGEMENT OF A PROPOSAL

12.1 The Proposal must be lodged electronically with “Primary Care Support Initiative”in the subject line so that it is received by the Department before the closing time. If a Respondent is unable to lodge its Proposal electronically it is advised to contact the contact officer.

12.2 By lodging a Proposal in accordance with clauses 12.1 and 12.2 of the Conditions of Proposal and in consideration of the Department commencing evaluation of the Proposal, the Respondent agrees to be bound by the Conditions of Proposal and in particular, clauses 3, 4, 5, 10, 11, 12, 15 and 16 of the Conditions of Proposal.

# 13. LATE PROPOSAL

 Late Proposals will not be accepted unless the Department is of the view (and its decision will be absolute and final) that:

(a) circumstances beyond the Respondent’s control were the cause of the lateness; and

(b) accepting a late Proposal will not compromise the integrity of the Request for Grant Proposals process or provide any unfair advantage to the Respondent lodging the late Proposal.

# 14. EVALUATION OF Proposals

14.1 The evaluation process will be undertaken against the following evaluation criteria with the aim of determining which Proposal represents the best innovation and service delivery.

(a) **Compliance Criteria**

Compliance with:

* + - Conditions of Proposal;
		- Funding Agreement;
		- Quality Assurance requirements.

(b) **Qualitative Evaluation Criteria**

Proposals will be assessed against a series of Qualitative Criteria. All Respondents are required to respond to each of the Qualitative Criteria (please refer to Part Four (F) of this RFGP).

Prompts have been provided within the Qualitative Criteria to assist in framing Proposals. Respondents should add any other information they believe is relevant to addressing the criteria.

The Respondent’s ability to satisfy the Qualitative Criteria will be assessed on the basis of scores allocated by the Evaluation Committee by consensus in response to questions relating to each criterion and then weighted as detailed.

The assessment of Proposals will be based on the degree of achievement by the Respondent of the requirements set out in the RFGP. A maximum score for each criterion will be given if the achievement of the criterion is fully compliant, with no risks and weaknesses. The score will be reduced proportionate to the extent of non‑conformities, discrepancies, errors, omissions, and risks for the Crown.

 (c) Quantitative Evaluation Criteria

Once the Qualitative Criteria has been assessed Respondents will then be evaluated for demonstrated value for money. Respondents will be assessed as to their ability to provide services that achieve the required outcomes at the best possible price. The lowest price may not be assessed as providing the best value for money.

 (d) **Scoring**

Scoring will be based on the following allocation:

| **Score** | **Description** | **Full Description** |
| --- | --- | --- |
| 10 | Exceptional | Full achievement of the requirements specified in the RFGP for that criterion. Demonstrated strengths, no errors, weaknesses or omissions. |
| 8 to <10 | Superior | Sound achievement of the requirements specified in the RFGP for that criterion. Some minor errors, risks, weaknesses or omissions, which may be acceptable as offered. |
| 6 to <8 | Good | Reasonable achievement of the requirements specified in the RFGP for that criterion. Some errors, risks, weaknesses or omissions, which can be corrected/overcome with minimum effort. |
| 4 to <6 | Adequate | Satisfactory achievement of the requirements specified in the RFGP for that criterion. Some errors, risks, weaknesses or omissions, which are possible to correct/overcome and make acceptable. |
| 2 to <4 | Inadequate | Minimal achievement of the requirements specified in the RFGP for that criterion. Several errors, risks, weaknesses or omissions, which are possible, but difficult to correct/overcome and make acceptable. |
| >0 to <2 | Poor to deficient | No achievement of the requirements specified in the RFGP for that criterion. Existence of numerous errors, risks, weaknesses or omissions, which are very difficult to correct/overcome and make acceptable. |
| 0 | Unacceptable | Totally deficient and non-compliant for that criterion. |

14.2 During the evaluation process, the Respondent may be required to provide additional information or clarification. The Respondent must comply with any such requests within the timeframe specified.

14.3 Short-listed Respondents may be requested to deliver a presentation to provide further detail about their Proposal.

# 15. RIGHT TO NEGOTIATE

15.1 During the period of the evaluation process, the Department may negotiate with Respondents to vary their Proposals either on the grounds of technical capability, cost, effectiveness, or matters relating to the combination of one part of the Proposal with another part of the Proposal.

15.2 The Department also reserves the right to negotiate with several Respondents to finalise the terms to form a contract.

# 16. FORMATION OF FUNDING AGREEMENT

16.1 The successful Respondent will be required to sign a formal Funding Agreement containing standard terms and conditions supplemented by the addition of relevant information, requirements or variations:

(a) contained in the Specifications;

(b) contained in the successful Proposal;

(c) arising during the Proposal evaluation; and

(d) arising out of negotiations after the Proposal evaluation.

16.2 No contractual relationship or other obligation arises between the Department and a Respondent, for the supply of the Department’s Requirements, until the Department and the successful Respondent formally exchange signed counterparts of the Funding Agreement. This clause applies despite any oral or written advice to the Respondent that a Proposal is successful or has been, or will be, accepted during the term of this Funding.

# 17. DEBRIEFING

17.1 All unsuccessful Respondents are encouraged to request a debriefing from the Department to discuss the reasons for their non-selection. Respondents who would like a debriefing should contact the Contact Officer.

17.2 If requested to do so, the Department will provide a debriefing for interested Respondents after either:

(a) a Funding Agreement has been executed for the supply of the Department’s Requirements; or

(b) the Department decides not to award a Funding Agreement for the supply of the Department’s Requirements.

# 18. COMPLAINTS PROCESS

18.1 Where a respondent has concerns regarding the RFGP process, they should refer the matter in the first instance to the Contact Officer for the RFGP process.

# 19. government policies

## 19.1 Crown policy on Confidentiality Provisions in Government contracts

(a) In this clause:

**accountable authority** has the same meaning as in the Financial Management Act 2016 (Tas).

**Confidentiality** **Provision** means a provision that, if included in a contract, would restrict or prohibit the capacity of any party to that contract to lawfully disclose any term of, or other information in or concerning, the contents of, that contract.

**TI C-1** means Treasurer's Instruction C-1 issued under the Financial Management Act 2016 (Tas).

(b) Except in accordance with TI C-1, contracts are not to include any Confidentiality Provision. Where inclusion of a Confidentiality Provision is approved in accordance with TI C-1, the terms of the contract will be drafted to give effect to the decision of the accountable authority, including any decision on any limit on the period of confidentiality.

(c) The restriction on Confidentiality Provisions does not apply to:

 (i) pre-contract information which passes between the parties in order to enable the contract to be performed; or

 (ii) the services or products that flow from the performance of the contract, including information that is brought into existence pursuant to the contract.

(d) Subject to any Confidentiality Provision included in a contract, a party to a contract may publish all or any part of the contract without reference to another party.

# 20. SPECIAL CONDITIONS

20.1 Funding is for the period from 1 July 2023 to 30 June 2024 with services to be reviewed at intervals specified within the Funding Agreement.

20.2 Respondents may submit a proposal in respect of one, some, or all of the specific elements of the Department’s requirements being:

* Expanded and/or after hours primary care for vulnerable cohorts, especially those experiencing homelessness.

20.3 The Respondent’s Proposal must clearly identify if it is in respect of one or all of the elements of the Department’s Requirements referred to in clause 20.2.

PART TWO

SPECIFICATIONS

**FUNDING FOR ORGANISATION(S)**

**TO PRIMARY CARE SUPPORT INITIATIVE**

# 1. INTRODUCTION AND BACKGROUND

**1.1 Purpose:**

These grant rounds are focussed on vulnerable populations. In this context, this refers to those who have a combination of poor access to health care, receive poor quality care, and experience poor care outcomes, often resulting from an accumulation of societal injustices related to race, ethnicity, poverty, gender, sexual orientation, age, first language, or physical or mental health condition.

Whilst there are many vulnerable populations within our communities who are deserving of funding, for this grant round, preference will be given to models that focus on people who are homeless or at immediate risk of homelessness.

**1.2 Background and policy context:**

There has been significant research and consultation undertaken to explore and understand the unique and complex challenges experienced by Tasmania’s primary health care and public hospital systems.

Evidence suggests that treating people in the community, where safe and appropriate to do so, reduces pressure on hospitals and provides patients with more comfortable and accessible care closer to home.

The Government is committed to helping Tasmanians access the essential health services they need when they need it. The preceding three grant rounds under the *GP After Hours Support initiative and Primary Care Support Initiative* have seen several primary healthcare service providers funded to expand local after hours and existing within-hour services, with the majority being general practices and pharmacies located in metropolitan areas.

Many of the previously funded programs are ongoing and therefore receiving Department of Health Funding. It has been decided that preference will be given to organisations that have **not** previously been awarded funding via:

1. Rounds 1and 2 – Hospital Avoidance Grants
2. Round 1 – GP After Hours Support Initiative (focus on GPs and Pharmacy)
3. Round 2 – GP After Hours Support Initiative (focus on Urgent Care Services)
4. Round 3 – Primary Care Support Initiative

2 SERVICE STRUCTURE

2.1 Description of services required:

Funded services under the Primary Care Support Initiative will include activities that support the development and implementation of innovative and sustainable models of care that address either or all of the following:

**In-Hours Primary Health Care Services**

Primary health care services that treat vulnerable cohorts and communities, particularly those experiencing homelessness, during standard operating hours.

**After Hours Primary Health Care Services**

Expanded after hours primary health care services that treat vulnerable cohorts and communities, particularly those experiencing homelessness.

The services outlined in this Schedule will include the following activities:

* Provide expanded after hours primary health care services. ‘After hours’ will include:
	+ Sociable hours 6:00 pm – 11:00 pm weeknights and 8:00 am – 12:00 pm Saturdays
	+ Unsociable hours – 11:00 pm – 8:00 am weeknights
	+ Before 8:00 am, or after 12:00 pm on a Saturday
	+ At any stage on a Sunday or
	+ At any stage on a public holiday.

This RFGP does not explicitly prescribe how these services must be delivered as this allows Respondents a degree of flexibility to identify the most efficient and effective way to meet the Department’s requirements. This is aimed at encouraging innovation and enables Respondents to develop proposals that emphasise their specific strengths. The Department will work collaboratively with the Respondents in refining activities, service requirements and Key Performance Indicators (KPIs) once the successful proposal/s have been accepted.

2.2 Target Group and Target Areas/ Geographic Region(s)

All submitted proposals must specify how they will meet and/or continue to meet the below elements:

1. Increasing service provision to vulnerable populations within their community over and above existing service provision, noting that preference will be given to people who are homeless or at immediate risk of homelessness.

2.3 Qualifications of Staff

Respondents must demonstrate that all staff involved in the operation and delivery of the Primary Care Support Initiative are appropriately qualified, and that ongoing professional development and supervision is offered to support staff and enhance staff performance.

2.4 Outcomes:

It is intended this initiative will contribute to the overarching goal of the Primary Care Support Initiative.

The intended service delivery outcomes include:

1. An increase to the existing primary health services delivered to vulnerable populations, with a focus on homeless populations.
2. Improvements in physical health
3. Improvements in psychological wellbeing
4. Successful referral to appropriate ongoing support services

The intended system improvement outcomes for this initiative include:

1. Tasmanians who utilise these services achieve stable life circumstances over the longer term.
2. Tasmanians have improved access to a seamless and integrated service system that provides a continuum of care.

2.5 Funding and Distribution

The total funding to be provided for this round has been determined to be no greater than $500,000 (Excluding GST) state-wide for the one-year funding period of 1 July 2023 to 30 June 2024. Each Respondent can apply for a Grant of up to $250,000 per annum (GST exclusive) with the proposed funding period of 1 July 2023 to 30 June 2024.

Note that whilst the Department of Health will do everything its power to distribute funding to successful respondents as quickly as possible, successful respondents should liaise with the Department prior to engaging in any expenditure related to the proposed model.

Funding does not include capital costs, however, can include up to $20 000 for the purchase of technology to improve efficiency of business operations. These should be detailed in the budget you submit at Part Four (E).

Proposals will be assessed upon the ability of the Respondent to demonstrate that the required services will be delivered within that budget and provide best value for money.

The attached Funding Agreement “RFGP – Part Three – Blank Template Funding Agreement” is a standard Agreement and elements of this Agreement, including payment arrangements, will be reviewed and where necessary updated to meet the administrative arrangements that result from awarding the RFGP.

2.6 Monitoring and Support from Department of Health:

The [*DHHS Outcomes Purchasing Framework*](https://doh.health.tas.gov.au/__data/assets/pdf_file/0013/161005/DHHS_Funded_Community_Sector_Outcomes_Purchasing_Framework_Final.pdf) was finalised in April 2014 and aims to establish a common approach to the commissioning and monitoring of client outcomes across all Department program areas that administer grant funding to the community sector.

The outcomes purchasing framework will be used to systematically document what each Department program is trying to achieve, the indicators for measuring the achievement of these outcomes and the processes for using this information to improve outcomes. It is intended that the framework be progressively applied across all Department grant programs and all funding agreements under these programs.

2.7 Service Reporting Requirements:

The Respondent must meet the Service reporting requirements as outlined in the following Schedules of the Funding Agreement:

Schedules 3.1 – Financial Accountability Reporting;

Schedules 3.2 – Service Delivery Reporting;

Schedules 3.3 – Quality and Safety Framework Reporting;

Schedules 3.4 – Other Service Information.

3. Implementation Timetable – Proposed (subject to final approval)

|  |  |
| --- | --- |
| **Date/Timeframe** | **Action** |
| 18, 19, 20 April 2023 | Seminars for Applicants |
| 28 April 2023 | Request for Grant Proposals advertised |
| 1 June 2023 | Closing Date for lodgement of Requests for Grant Proposals |
| 9 June 2023 | Assessment and Evaluation of Submissions (including any requests for additional information) |
| 23 June 2023  | Decision on Successful Provider/s |
| 12 July 2023 | Applicants informed of outcome |
| 9 August 2023 | Funding Agreement with successful organisation agreed and signed |
| 6 September 2023  | Initial funding payments made by the Department |

# 4. INFORMATION TO BE PROVIDED BY THE RESPONDENT

Respondents must complete the following information, as set out in Part Four (A) – (G). This is provided as a separate word document for completion by respondents. If the proposal is one that relates to more than one distinct action and a respondent is providing a proposal for more than one action separate documents must be provided for each action.

* *Part Four (A) – Request for Grant Proposals Form*

Completed Request for Grant Proposals form

* *Part Four (B) – Respondent Details.*

Completed Respondent Details form

* *Part Four (C) – Financial Details*

Completed Financial Details form – noting that organisations currently grant funded through Department of Health are not required to complete this section.

* *Part Four (D) – Financial Viability and Governance*

Completed Financial Viability and Governance Form

* *Part Four (E) – Budget Details*

Completed Budget Details Spreadsheet

* *Part Four (F) – Qualitative Evaluation Criteria / Selection Criteria*

A written response to each of the questions listed.

* *Part Four (G) – Quality and Safety Framework*

Evidence of compliance with the Quality and Safety Framework.

# 5. Glossary

‘The Department’ or “DOH” means the ‘Department of Health.