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Lived Experience Telephone Support Service (LETSS)

Request for Tender - Guidelines

CLOSING DATE AND TIME: 12pm ACST Wed 28 February 2018

All applications must be lodged through the Adelaide PHN eTender portal www.tenderlink.com/adelaidephn

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1 Purpose

Adelaide Primary Health Network (Adelaide PHN) has issued a Request for Tender (RFT) from organisations interested in delivering the Lived Experience Telephone Support Service.

The purpose of this document is to outline important information about the service specifications and application process. **Prospective applicants should read these guidelines carefully before applying.**

This is NOT an application form. Applications may only be submitted through Tenderlink <https://www.tenderlink.com/adelaidephn/> using the Invitation to Apply (ITA) document (Application Form).

Please note, this document may only be used for the intended purpose and may not be copied or otherwise used without prior written permission from Adelaide Primary Health Network (Adelaide PHN).

2 Background

The Lived Experience Telephone Support Service (LETSS) is a peer-led telephone service where people with mental health issues and their carers can receive real-time information, navigation and support in the social afterhours period.

A component of the Adelaide PHN After Hours Primary Mental Health Service strategy, the LETSS will assist in the reduction of inappropriate attendances at emergency departments and be proactive in the de-escalation of mental health distress, as well as assist with access to mainstream in-hours mental health services and other services as required.

3 Service Specifications

The LETSS is a peer-led telephone service where people with mental health issues and their carers can receive real-time information, navigation and support in the social afterhours period.

3.1 Services

The following service types and their descriptions are to be delivered.

Information services

- A. General information, guidance and advice about mental health and other services, mental health conditions and other associated topics.

Navigation

- B. Assisting with access to relevant mental health and other services;

- C. Helping callers understand the service landscape, entry points, eligibility criteria, referral processes and tips on how to avoid barriers and pitfalls to accessing services;
- D. Coordinated access to services in real time;
- E. Facilitating referrals including warm referrals;
- F. Signposting* callers so they receive services and assistance appropriate to their needs.

Support

- G. Listening, understanding, brief intervention and informal counselling from people who understand and have experienced mental health issues;
- H. Emotional support during times of distress;
- I. Advocacy;
- J. Coaching and Mentoring;
- K. Support implementing care, recovery and wellness plans;
- L. Facilitating attendance at appointments;
- M. Follow up support can be provided e.g. scheduled call backs, welfare checks, and facilitating connection to services.

3.2 Additional Characteristics and Service Requirements

The LETSS is to include the following characteristics and requirements:

- A. A free call peer-led telephone helpline where callers receive the benefits of speaking to trained staff with lived experience of mental health problems or caring for people with mental health problems. This is considered a key feature of the service where all the benefits provided by lived experience workers are available to callers;
- B. Available in the social afterhours period defined as 5pm to 11.30pm seven days per week including public holidays. Note there may be a scale up period i.e. service levels at commencement may not cover the entire social afterhours period;
- C. The service is non-clinical and not a crisis service. It is expected that the commissioned service provider will have clear escalation pathways and processes in place to deal with callers who are in crisis, and conversely clear de-escalation and 'warm handover' arrangements in place with crisis services;
- D. The commissioned service provider will be required to develop and demonstrate a suitable Service Governance Framework covering all aspects of quality, risk, accountability and evaluation including:
 - i. Critical incidents;
 - ii. Escalation pathways;
 - iii. Expertise and supervision of staff;
 - iv. Monitoring, coordination and review practices;
 - v. Providing evidence based practices;
 - vi. Continuous quality improvement and use of service standards;
 - vii. Client consent, information sharing and client record keeping;
 - viii. Staff safety (e.g. working alone and duress procedures);
 - ix. Mandatory reporting.

- E. LETSS will be for callers not necessarily needing therapy and a clinical diagnosis will not be required;
- F. Services will be provided in real time;
- G. LETSS is a telephone support service primarily. Other interactive platforms e.g. web chat / instant messaging may supplement the telephone service however providers will need to demonstrate the feasibility and benefits of this to Adelaide PHN;
- H. LETSS would potentially also provide an easily accessible support for those who may be isolated and concerned about the impact of their mental health issues;
- I. *In the context of LETSS, 'sign-posting' refers to 'the identification of presenting issues to the extent the client can be directed and/or guided to access service(s) that can assist, and be informed of the steps and details involved in accessing these services'.
- J. LETSS will be for people living or working in metropolitan South Australia. It is expected that people calling from regional SA can be linked in to Country SA Primary Health Network services;
- K. Access will be via a single number phone service with capacity for messages to be left, callers to be placed on hold and return calls to be made;
- L. Service details e.g. file notes, will be required to be stored in MasterCare, the preferred database of Adelaide PHN;
- M. The successful applicant will be required to staff and deliver the service from a metropolitan Adelaide location. Only organisations with a significant mental health service footprint in SA will be considered. This is to ensure the local service landscape is understood and the benefits of local Peer Workers are realised.
- N. Whilst service provision will be expected to take place in the social afterhours period defined above, the service will require some staffing immediately outside of this to ensure adequate follow up and administration etc.
- O. Applicants are encouraged to submit their own staff profile for the service which will be negotiated with Adelaide PHN.

All aspects of this service will be subject to review, monitoring and evaluation by the Adelaide PHN.

4 Additional Information

The successful applicant will be required via a contract, to deliver the LETSS in the broader context of the Adelaide PHN Primary Mental Health Services system including MaterCare, Central Referral, and Clinical Decision and Monitoring Units and other specialised services. The successful applicant will be required to acquire and demonstrate suitable working knowledge of the Adelaide PHN Primary Mental Health Services system.

4.1 Commissioning of Primary Mental Health Care Services (PMHCS)

In November 2015, the Australian Government announced bold reforms to primary mental health care services in Australia, including the move towards a stepped-care model of service delivery, to be implemented between 2016 and 2019. As a result of these reforms, Primary Health Networks were provided with a flexible-funding pool to commission primary mental health care services under the guidance of six priority areas of focus (see: http://www.health.gov.au/internet/main/publishing.nsf/Content/PHN-Mental_Tools).

The Adelaide PHN undertook extensive community and stakeholder consultation in response to these announcements and commissioned a range of mental health care services, commencing delivery in July 2016. Key features of commissioned PMHCS include:

- One point of entry to PMHCS via PMHCS Central Referral, providing a same day allocation service;
- One dedicated phone number via the Mental Health Enquiry Line;
- One client management system, facilitating warm referrals between services and seamless sharing of treatment and care information where appropriate;
- Two large regional providers of psychological therapeutic services across the stepped-care continuum (mild, moderate through to chronic/complex), including suicide prevention services and Clinical Decision and Monitoring Units (helping people and referrers with linkages, assessment and care planning);
- Nine organisations delivering specialist services, including treatment and care for children and Aboriginal and Torres Strait Islander people;
- A suite of clinical and community based suicide prevention services.

For more information on these organisations, services and the reforms, please refer to the Adelaide PHN website <http://adelaidephn.com.au/what-we-do/development-and-commissioning/mental-health-and-alcohol-and-other-drug-service-reform/>

Adelaide PHN is committed to a PMHCS system that provides a stepped-care approach to service delivery, across a continuum of integrated, targeted and coordinated services for all ages and populations, particularly those that experience barriers to care.

4.2 MasterCare

MasterCare EMR is an electronic client management program specifically designed for mental health services that has been configured and embedded within all Adelaide PHN commissioned PMHCS. MasterCare allows commissioned services to manage clients in one clinical management record concurrently. MasterCare improves the sharing of client information and clinical progress with each provider, whilst assisting with the warm referral of clients across services where appropriate.

With the assistance of Adelaide PHN (e.g. licenses and technical support) the successful applicant be expected to use the MasterCare platform for all clients accessing LETSS.

4.3 Central Referral, Clinical Decision and Monitoring Units (CDMU)

PMHCS Central Referral and CDMU provide referrers and individuals seeking services with assessment, support and assistance navigating and care-planning their mental health

treatment and care. PMHCS Central Referral provides a single access point for all faxed mental health treatment plans and referrals. CDMUs are hosted by organisations that deliver psychological therapeutic services and other mental health services across two sub-regions:

- North and Centre/West Metropolitan Area (Northern Health Network)
- South and Centre/East Metropolitan Area (Links to Wellbeing)

CDMUs are expected to link broadly with relevant primary, acute and tertiary health services along with Adelaide PHN commissioned PMHCS in the sub-regions they deliver services.

Further information about these and other services can be found here:

<http://adelaidephn.com.au/what-we-do/development-and-commissioning/mental-health-and-alcohol-and-other-drug-service-reform/>

4.4 Specialised PMHCS and AOD Treatment Services

Adelaide PHN commissions nine specialised providers of mental health services across the region that target specific geographic areas, populations and/or treatment needs, and twelve alcohol and other drug treatment services across the region.

These and other services should be considered by the successful applicant when delivering the LETSS including when formulating partnerships, pathways and coordination activities.

Further information about these and other services can be found here:

Primary Mental Health Care Services:

<http://adelaidephn.com.au/what-we-do/development-and-commissioning/mental-health-and-alcohol-and-other-drug-service-reform/>

Alcohol and other Drug Treatment Services:

<http://adelaidephn.com.au/what-we-do/development-and-commissioning/alcohol-and-other-drug-treatment-services/>

5 Key Timelines

The RFT will open on Thursday 1 February and close four weeks later at 12pm ACST Wednesday 28 February 2018.

Applications will be assessed in March 2018 with a preferred applicant / provider also identified in March 2018.

Contract negotiations and commencement of services expected to take place in March 2018 and April 2018.

6 Applications

6.1 Submitting Applications

Applications can only be submitted via Tenderlink <https://www.tenderlink.com/adelaidephn> from Thursday 1 February to 12pm ACST Wednesday 28 February 2018.

6.2 Queries and Updates

Queries about the RFT must be made through the Tenderlink Q&A Forum. Responses (de-identified) will be made available to all potential applicants via the Tenderlink Q&A Forum. The opportunity to submit queries through Tenderlink closes seven days prior to the closing date.

Any updates to RFT documentation or additional information released once the RFT is open will be added to Tenderlink and all applicants who have downloaded the RFT will be notified by email of the additional information.

6.3 Revising Applications

Applicants may revise their applications submitted through Tenderlink at any time up to the closing date. Revisions of applications will not be accepted after the closing date.

6.4 Late Applications

Applications will not be accepted after the closing date.

6.5 Administrative Support for Submitting Applications

Applicants are encouraged to contact the Tenderlink Support services on **1800 233 533** with any questions relating to submitting applications in Tenderlink.

6.6 Acknowledgement of Applications

Each application lodged will be acknowledged via an automated email through Tenderlink.

6.7 Confidentiality of Applications

Each application is treated as confidential.

6.8 Notification of Outcomes to Applicants

All applicants will be advised in writing of the outcome of their application.

6.9 Opportunities for Feedback

Once a contract has been awarded all applicants will be formally advised of the outcome verbally and in writing. Unsuccessful applicants may request general feedback from Adelaide PHN on their application and characteristics of the successful proposal(s) via applications@adelaidephn.com.au. Applicants should include "LETSS RFT Request for Feedback" in the subject line.

7 Assessment

7.1 Compliance

Applications must be compliant with the following in order to be assessed:

- a) Applications must be **complete** and submitted through the relevant page on Tenderlink - <https://www.tenderlink.com/adelaidephn/>
- b) Applications must be received by the closing date/time
- c) Applications must be provided in English and typed
- d) Applications must adhere to word limits. If word limits are exceeded the application may be considered non-compliant and not assessed further or additional words will not be considered

7.2 Evaluation of Applications

Successful applicants will be selected through a competitive process. An application assessment panel will consider each submission against the requirements outlined in these guidelines and application form.

Adelaide PHN reserves the right to request additional and clarifying information from applicants (at no cost to Adelaide PHN) to further assess applications. Adelaide PHN is not bound to request additional information. The onus is on applicants to ensure their application is clear and complete.

Adelaide PHN reserves the right to work with preferred applicants to clarify and adjust applications and in some cases, request revised applications prior to a contract being awarded.

7.3 Contracting, Reporting and Evaluation Requirements

Contract negotiations are undertaken with the preferred applicant(s). If negotiations are not successful within a reasonable timeframe, Adelaide PHN may choose to approach the next preferred applicant and re-commence contract negotiations.

The preferred applicant(s) will only be permitted to engage in contract negotiations to amend sections of the standard **Adelaide PHN Contractor Agreement** aka Main Body (excludes schedules to the agreement) that they have pre-identified in their Tenderlink application.

Applicants are therefore required to consider the standard **Adelaide PHN Contractor Agreement** aka Main Body (available for download as part of the RFT documentation) before applying in order to be aware of their contractual obligations and identify any proposed amendments they seek to negotiate.

The successful applicant(s) will report regularly to Adelaide PHN as per the requirements set out in the agreed contract. Contracted organisations will be required to report against agreed Key Performance Indicators (KPIs) contained in the contract and progress reports.

8 Reporting

Progress Reports, Financial Reports and a Final Report are part of the reporting obligations.

9 Budget

Initial funding is available for a two year period expected to commence in April 2018. Full funding per year is \$500,000 (exc GST) which is expected to cover services in the social afterhours period defined as 5pm to 11.30pm seven days per week including public holidays. If the service is to be scaled up, funding may be provided on a pro rata basis.

Subject to ongoing Commonwealth funding to the APHN this contract would be extended accordingly without the need to re-tender, subject to the service provider continuing to achieve deliverables and performance outcomes.

Adelaide PHN works with providers throughout the course of each year, monitoring activity and performance via reporting, evaluation, and capacity building processes.

9.1 Funding Exclusions

Funding outlined in this RFT is not available for the following:

- To pay for work undertaken to develop your application
- Items of capital equipment
- Infrastructure and capital works
- Local, State or Federal Government organisations

Note: The successful applicant will be required to staff and deliver the service from a metropolitan Adelaide location. Only organisations with a significant mental health service footprint in SA will be considered. This is to ensure the local service landscape is understood and the benefits of local Peer Workers are realised.

10 Acknowledgements

In the application form, applicants will be asked (if successful) to agree to the following:

- i. Prior to a formal contract being finalised between all the parties, a description of the project, amount of funding, and the identity of the applicants may be used in media releases and other publications, and be provided to organisations or individuals with a view to them contacting the applicants for further information;
- ii. Applicants may be required to produce proof of insurance cover held, registrations, and accreditation status;
- iii. Accept the terms and conditions of the 'Adelaide PHN Compliance Policy' and the Policy 'Working with Vulnerable Persons for Contractors' (as supplied);
- iv. Applicants agree to and accept the terms and conditions of the standard **Adelaide PHN Contractor Agreement** (available for download as part of the RFT documentation) without modification; or Agrees and accepts the terms and conditions of the standard **Adelaide PHN Contractor Agreement** subject to good faith negotiation of proposed amendments (by the applicant) to the agreement outlined in the **Contract Negotiation Request Template** (available for download as part of the RFT documentation);

11 Attachments

- i. Standard ***Adelaide PHN Contractor Agreement*** aka 'Main Body'
- ii. ***Contract Negotiation Request Template***