

Palliative Care Access to Medicines Project

Request for Proposal **Guidelines**

CLOSING DATE AND TIME:

12:00pm ACDT Thursday 7 December 2017

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

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1 Purpose of this document

This document is designed to provide prospective applicants of the Palliative Care Access to Medicines Project (PCAM Project) Request for Proposal (RFP) with information on the service specifications and application process. Before submitting an application, applicants should read these guidelines carefully.

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

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).

1.1 Acknowledgement

The Adelaide PHN would like to acknowledge the Kaurna peoples who are the Traditional Custodians of the Adelaide Region. We pay tribute to their physical and spiritual connection to land, waters and community, enduring now as it has been throughout time. We pay respect to them, their culture and to Elders past, present and future.

1.2 Adelaide Primary Health Network

Adelaide PHN is one of 31 independent organisations nation-wide that are funded by the Australian Government to coordinate and improve primary health care services in their local areas.

The Australian Government's objectives for PHNs are that they will:

1. increase the efficiency and effectiveness of health services for patients, particularly those at risk of poor health outcomes; and
2. improve coordination of care to ensure patients receive the right care in the right place at the right time.

Adelaide PHN reaches from Sellicks Hill to Angle Vale and from the foothills to the sea. It encompasses a community of some 1.2 million people (Adelaide Metropolitan Region).

Adelaide PHN aims to improve health outcomes for the community by commissioning services to address local needs. The Adelaide PHN is guided by community, clinical and stakeholder input.

For more information, please visit the Adelaide PHN website at www.adelaidephn.com.au. The Adelaide PHN website includes publications, resources, maps, population health data, and needs assessments for the Adelaide Metropolitan area.

2 Introduction

2.1 Background

Adelaide PHN seeks applications from suitably experienced organisations to apply for funding to deliver the PCAM Project.

The PCAM Project aims to support palliative care in the community through enhanced planning and access to essential medicines to support people dying at home.

Difficulties with access to medicines in the terminal phase can act as a barrier for people wishing to die at home and place additional burdens on caregivers. For people living with a life-limiting illness who wish to die at home, planning and availability of medicines to provide good symptom control can be the difference between remaining in the community to die or being transferred to hospital at a vulnerable time.

The terminal phase is often characterised by rapid onset of five commonly seen symptoms causing significant distress. These symptoms include pain; dyspnoea; nausea; noisy breathing; and delirium. The management of these symptoms can be compounded by loss of ability to swallow, driving the need for subcutaneous formulations over oral preparations.

2.2 Core Medicines List

South Australian research has shown that access to subcutaneous medicines from community pharmacies can be difficult, with pharmacists unable to anticipate which medicines to stock. This prompted the development of a Core Medicines List (CML) to improve community access to terminal phase medicines (Table One below refers).

In 2013, a coalition of South Australian palliative care clinicians, convened by Southern Adelaide Palliative Services, developed a Core Medicines List (CML) to minimise access barriers and provide greater support for end-of-life care in the community.

The CML was developed based on evidence of efficacy in management of the five common symptoms, affordability, the option for parenteral administration, availability through the Pharmaceutical Benefits Scheme (PBS) and the PBS Emergency Drug supply list.

Application of the list is considered particularly beneficial for uncomplicated, community-based patients, where it can facilitate timely prescribing and supply of essential medicines for end-of-life symptoms management. The CML provides a safety net to ensure that medicines commonly prescribed in the terminal phase are also those that are stocked by community pharmacies.

The CML has been widely promoted, particularly in the Southern Adelaide metropolitan region through the considerable work of Southern Adelaide Palliative Services, with the support of other key stakeholders.

Further promotion of the CML in the broader Adelaide Metropolitan Region aims to build on the work undertaken to date.¹

¹ Tait P, Morris B, To Timothy. Core palliative medicines: meeting the needs of non-complex community patients. *Australian Family Physician*. 2014;43:29-32; Tait P, Horwood C, Hakendorf P, To Timothy. Improving community access to terminal phase medicines through the implementation of a 'Core Medicines List' in South Australian community pharmacies. *BMJ supportive & palliative care*. 2017;0.1-8. doi:10.1136/bmjspcare-2016-001191

Table One: Core Medicines List

Medicine	Symptom
Clonazepam 1mg injection	Agitation associated with delirium Anxiety associated with dyspnoea
Haloperidol 5mg/mL injection	Delirium & nausea
Hyoscine butylbromide 20mg/mL injection	Noisy breathing
Metoclopramide 10mg/2mL injection	Nausea
Morphine 10mg/mL injection	Pain & dyspnoea

2.3 Project Rationale

In addition to further promotion of the CML, there is a wider need for education and information on anticipatory prescribing for end-of-life care in the community to mitigate ongoing access barriers, particularly where use of the CML is not adopted.

The specific intentions of the PCAM Project are to increase general practitioner and community pharmacy knowledge and collaboration in relation to:

- the availability, use and benefits of the CML; and
- alternate integrated pathways for increasing access to essential medicines through anticipatory prescribing.

Services delivered under the PCAM Project will target general practitioners, community pharmacists, community based palliative care services, residential aged care facilities and other key stakeholders across the Adelaide metropolitan region.

2.4 Project Aims

The aims of the PCAM Project are to:

- Increase awareness and use of the CML;
- Increase the number of community pharmacies stocking CML;
- Increase the number of general practitioners and community pharmacists accessing information and attending training on anticipatory prescribing; and
- Increase the number of general practitioners and community pharmacists collaborating on the care of their end-of-life patients.

2.5 Project Outcomes

The intended outcomes of the PCAM Project are:

- Improved access to essential, affordable end-of-life medicines to support people wishing to die in the community;
- Reduced burden on community caregivers during the terminal phase through improved access to medicines for end-of-life care; and
- Increased understanding by general practitioners and community pharmacies on the importance of anticipatory prescribing;
- Increased collaboration between general practitioners and community pharmacies around the provision of medicines for community based end-of-life care.

3 Service Specification

3.1 Activities

The successful applicant will be required to deliver the Project to improve access to medicines to support end-of-life care in the community in the Adelaide PHN Adelaide metropolitan region. In performing the Project the successful applicant will be required to:

- Identify, establish and maintain formal partnerships across the end-of-life care sector to ensure integration and collaboration in the provision of access to end-of-life medicines, particularly in relation to the promotion of the CML and existing anticipatory prescribing strategies.
- Build on, develop and implement strategies and targeted resources for patients, caregivers, community palliative care services, residential aged care services, general practitioners and community pharmacies to promote the:
 - use, availability and benefits of the CML for end-of-life care in the community; and
 - the benefits of anticipatory prescribing on end-of-life care in the community.
- Build on, develop and deliver training, information and support for general practitioners and community pharmacists in relation to the CML and existing anticipatory prescribing strategies to:
 - strengthen collaboration in relation to the CML and anticipatory prescribing to improve timely access to essential medications to support end-of-life care in the community; and
 - mitigate barriers associated with the stocking of CML and other essential end-of-life medications.
- Establish and maintain a PCAM Project Expert Advisory Group to contribute to knowledge, understanding, information sharing and research in relation to CML and anticipatory prescribing activities to support community based end-of-life care, comprised of, but not necessarily limited to, representatives from:
 - SA Health (Specialist Palliative Care Services Pharmacist);
 - GP Partners;
 - Pharmaceutical Society of Australia (SA Branch);
 - Pharmacy Guild of Australia (SA Branch);
 - Palliative Care SA;
 - Aged and Community Services SA & NT and Leading Age Services Australia.
- Develop, maintain and make readily available as appropriate a register (database) of community pharmacies in the Adelaide Metropolitan Region stocking CML.
- Work collaboratively with Adelaide PHN and other key stakeholders on the development and implementation of the Project.

- Collect and maintain data, provide periodic reports to, and undertake evaluation activities in collaboration with the Adelaide PHN to monitor the performance and effectiveness of the PCAM Project, including building on the existing CLM evidence-base established by Southern Adelaide Palliative Care Services and key partners.

4 Timeline

The RFP will open for four weeks from 8 November 2017 to 7 December 2017. Applications received by the cut-off date and time will be reviewed by an assessment panel. Adelaide PHN may work with preferred applicants to refine the proposed services.

5 Applications

5.1 Submitting Applications

Applications may only be submitted via Tenderlink <https://www.tenderlink.com/adelaidephn> from 8 November 2017 to 7 December 2017.

5.2 Queries and Updates

Queries about the Invitation to Apply 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 closing date.

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

5.3 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.

5.4 Late Applications

Applications will not be accepted after the closing date.

5.5 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.

5.6 Acknowledgement of Applications

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

5.7 Confidentiality of Applications

Each application is treated as confidential.

5.8 Notification of Outcomes to Applicants

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

5.9 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 verbal or written feedback from Adelaide PHN. Unsuccessful applicants will be debriefed against the evaluation criteria, and may be provided with general information concerning the RFP outcome. No comparison with other applications will be provided.

Unsuccessful applicants may request a debriefing via applications@adelaidephn.com.au. Applicants should include PCAM Project RFP Request for Feedback in the subject line.

6 Assessment

6.1 Compliance

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

1. Applications must be complete and be submitted through the relevant Invitation to Apply page on Tenderlink - <https://www.tenderlink.com/adelaidephn/>.
2. Applications must be received by the closing date/time.
3. Applications must be provided in English.
4. 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.

6.2 Evaluation of applications

Successful applicants will be selected through a competitive process. An application assessment panel will consider each submission against the requirements as defined in Section 3 Service Specifications and the ITA documentation.

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 fine-tune applications and in some cases request revised applications prior to a contract being awarded.

6.3 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 Contractor Agreement (excludes schedules to the agreement) that they have pre-identified in their Tenderlink application. It is therefore recommended that applicants

consider the Contractor Agreement template (as supplied) before applying for funds in order to be aware of the contractual obligations.

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

7 Reporting

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

8 Budget

A total budget of up to \$100,000 (ex GST) for establishment and operational costs is available for the PCAM Project for the period of one year.

Applicants will be required to complete an indicative operational budget for the entire period using the template provided as an appendix to the ITA documentation.

8.1 Funding Exclusions

Funding will not be available for the following:

- Existing services;
- Retrospectively for activities already undertaken or expenses already incurred;
- To pay for work undertaken to develop your proposal;
- Items of capital equipment;
- Infrastructure and capital works.

9 Acknowledgements

In the ITA documentation applicants will be asked, if successful, to agree to the following:

- 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 provided to organisations or individuals with a view to them contacting the applicants for further information;
- Applicants may be required to produce proof of insurance cover held, registrations, and accreditation status;
- Accept the terms and conditions of the Adelaide PHN Policy 'Working with Vulnerable Persons for Contractors' (as supplied);
- Applicants agree to and accept the terms and conditions of the standard Adelaide PHN Contractor Agreement (as provided with the ITA 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 (supplied).