

s22

From: s22
Sent: Wednesday, 24 February 2021 9:31 AM
To: s47E(d)
Cc: s22
Subject: ACTION; clearance to send BIDS Notice - Tender for the provision of Goods, Equipment and Assistive Technology under the Commonwealth Home Support Programme [SEC=OFFICIAL]
Attachments: BIDS notice - Expansion of GEAT - Release of RFT February.DOCX

Hi, approval has been given for this bids notice by Nick Hartland.

Can you please distribute as soon as you can given the tender went out last Friday.

Thanks

s22

s22

Assistant Director
 Reablement & CHSP Policy Section

Home Support & Assessment Branch
 In Home Aged Care Division | Department of Health
 p: s22 | e: s22 @health.gov.au

From: HARTLAND, Nicholas s22 @health.gov.au>
Sent: Tuesday, 23 February 2021 7:45 PM
To: s22 @health.gov.au>
Cc: s22 @health.gov.au>
Subject: RE: ACTION 23/2: clearance to send BIDS Notice - Tender for the provision of Goods, Equipment and Assistive Technology under the Commonwealth Home Support Programme [SEC=OFFICIAL]

AH, thanks. OK to go out as drafted.

Nick Hartland

Ageing and Aged Care Group | The Australian Government Department of Health

P | 02 s22 M | s22
 E | s22 @health.gov.au W | www.health.gov.au

*I acknowledge the Traditional Custodians of Australia and their continued connection to land, sea and community.
 I pay my respects to all Elders past and present.*

From: s22 @health.gov.au>
Sent: Tuesday, 23 February 2021 3:21 PM
To: HARTLAND, Nicholas s22 @health.gov.au>
Cc: s22 @health.gov.au>
Subject: RE: ACTION 23/2: clearance to send BIDS Notice - Tender for the provision of Goods, Equipment and Assistive Technology under the Commonwealth Home Support Programme [SEC=OFFICIAL]

Sorry I should add that unless s47F can meet all the tender requirements eg. Provide all GEAT products, deliver nationwide, install, maintain the GEAT then he won't fair well in the evaluation.

From: s22

Sent: Tuesday, 23 February 2021 3:18 PM

To: HARTLAND, Nicholas s22 @health.gov.au>

Cc: s22 @health.gov.au>

Subject: RE: ACTION 23/2: clearance to send BIDS Notice - Tender for the provision of Goods, Equipment and Assistive Technology under the Commonwealth Home Support Programme [SEC=OFFICIAL]

Short answer No. you only have to be an accredited aged care provider for Aged Care Act services. CHSP isn't a service under the Act.

Applicants will need to meet the requirements to become a CHSP provider which is not onerous.

From: HARTLAND, Nicholas s22 @health.gov.au>

Sent: Tuesday, 23 February 2021 3:09 PM

To: s22 @health.gov.au>

Cc: s22 @health.gov.au>

Subject: RE: ACTION 23/2: clearance to send BIDS Notice - Tender for the provision of Goods, Equipment and Assistive Technology under the Commonwealth Home Support Programme [SEC=OFFICIAL]

Do they have to be an accredited aged care provider – bit worried about opening up to lots of applications by, eg, Care Alert

Nick Hartland

Ageing and Aged Care Group | The Australian Government Department of Health

P | 02 s22 M | s22

E | s22 @health.gov.au W | www.health.gov.au

*I acknowledge the Traditional Custodians of Australia and their continued connection to land, sea and community.
I pay my respects to all Elders past and present.*

From: s22 @health.gov.au>

Sent: Tuesday, 23 February 2021 2:57 PM

To: HARTLAND, Nicholas s22 @health.gov.au>

Cc: s22 @health.gov.au>

Subject: RE: ACTION 23/2: clearance to send BIDS Notice - Tender for the provision of Goods, Equipment and Assistive Technology under the Commonwealth Home Support Programme [SEC=OFFICIAL]

Hi Nick, this is tender is not limited to CHSP providers but is open to anyone with the capability.

Are you happy for the BIDS notice to go still?

Cheers

s22

From: HARTLAND, Nicholas s22 @health.gov.au>
Sent: Tuesday, 23 February 2021 12:41 PM
To: s22 @health.gov.au>
Cc: s22 @health.gov.au>
Subject: RE: ACTION 23/2: clearance to send BIDS Notice - Tender for the provision of Goods, Equipment and Assistive Technology under the Commonwealth Home Support Programme [SEC=OFFICIAL]

Thanks, I think this works well, but do we need to be clearer who is open to participate in the tender. I assume that it is just CHSP providers, in which case it might be helpful to say so.

Nick Hartland

Ageing and Aged Care Group | The Australian Government Department of Health

P | 02 s22 M | s22
 E | s22 @health.gov.au W | www.health.gov.au

*I acknowledge the Traditional Custodians of Australia and their continued connection to land, sea and community.
 I pay my respects to all Elders past and present.*

From: s22 @health.gov.au>
Sent: Tuesday, 23 February 2021 11:19 AM
To: HARTLAND, Nicholas s22 @health.gov.au>
Cc: s22 @health.gov.au>
Subject: ACTION 23/2: clearance to send BIDS Notice - Tender for the provision of Goods, Equipment and Assistive Technology under the Commonwealth Home Support Programme [SEC=OFFICIAL]

Morning Nick, can you please clear the BIDS notice for the GEAT tender advertised on 19/2.

Thanks
 s22

s22
 Assistant Director
 Reablement & CHSP Policy Section
 Home Support & Assessment Branch
 In Home Aged Care Division | Department of Health
 p: s22 | e: s22 @health.gov.au

From: MORGAN, Nick s22 @health.gov.au>
Sent: Tuesday, 23 February 2021 10:37 AM
To: s22 @health.gov.au>
Subject: RE: For ACTION 23/2: clearance to send BIDS Notice - Tender for the provision of Goods, Equipment and Assistive Technology under the Commonwealth Home Support Programme [SEC=OFFICIAL]

Cleared. thanks

From: s22 @health.gov.au>
Sent: Monday, 22 February 2021 3:56 PM
To: MORGAN, Nick s22 @health.gov.au>

Subject: For ACTION 23/2: clearance to send BIDS Notice - Tender for the provision of Goods, Equipment and Assistive Technology under the Commonwealth Home Support Programme [SEC=OFFICIAL]

Hi Nick,

For your clearance please, BIDS notice for the Tender for the provision of Goods, Equipment and Assistive Technology under the CHSP advising that the tender has been released and tenders are due by 16 March 2021.

Cheers

s22

s22

A/g Director – Reablement and CHSP Policy Section

Home Support and Assessment Branch
In Home Aged Care Division | Ageing and Aged Care Group
Australian Government Department of Health
T: 02 s22 | E: s22 @health.gov.au
Location: Level 5, Sirius Building
GPO Box 9848, Canberra ACT 2601, Australia

The Department of Health acknowledges the Traditional Custodians of Australia and their continued connection to land, sea and community. We pay our respects to all Elders past and present.

From: s22 @health.gov.au>

Sent: Monday, 22 February 2021 3:18 PM

To: s22 @health.gov.au>

Subject: ACTION: clearance to send BIDS Notice - Tender for the provision of Goods, Equipment and Assistive Technology under the Commonwealth Home Support Programme [SEC=OFFICIAL]

s22 can you please review the BIDS notice for the GEAT tender that is now up on Austender - and send up to Nick Morgan then to Nick Hartland for approval. Approvals are recorded in the attached form.

Thanks

s22

s22

Assistant Director
Reablement & CHSP Policy Section

Home Support & Assessment Branch
In Home Aged Care Division | Department of Health
p: s22 | e: s22 @health.gov.au

SCHEDULE 6

OFFICIAL ORDER



Australian Government

Department of Health

Official Order/Contract details for Provider of National Goods, Equipment and Assistive Technology under the Commonwealth Home Support Programme for older people

Under Deed of Standing Offer (Head Agreement for Services) – SON 3770633

Customer details	Contractor details
Department of Health ABN 83 605 426 759 Home and Residential Funding Division Home Support Operations Branch Sirius Building, Furzer Street Woden ACT 2602	Indigo Australasia Incorporated ABN 82 056 232 143 Suite A, 11 Aberdare Road Nedlands WA 6009
Customer Contract Liaison Officer: Assistant Director, currently s22 Telephone: s22 Email: s47E(d) @health.gov.au	Contractor Contract Liaison Officer: General Manager Service Delivery, currently s47F Telephone: s47F Email: s47F @indigosolutions.org.au

This Official Order is placed pursuant to and subject to the terms and conditions of the Deed of Standing Offer (Head Agreement for Services) between the **Commonwealth of Australia as represented by the Department of Health** and **Indigo Australasia Incorporated** dated **10 June 2021**.

Note to Contractor: If you wish to provide the Services to the Customer, please sign this Official Order and send it to the Customer. If the Customer wishes to accept your offer to provide the Services, it will execute the Official Order and return a copy of the executed Official Order to you. You must not supply the Services until after you have received the copy of the executed Official Order from the Customer.

Service	Detail
Service Description	Source and deliver the full range of goods, equipment and assistive technology (GEAT) items nationally to older Australians under the Commonwealth Home Support Programme.
Cost	\$1 million (GST inc.) in 2020-21 and up to \$10 million (GST inc.) in 2021-22. \$11 million TOTAL COST (GST Inc.)
Date services to commence on	Upon execution of this official order
Date services to be completed by	30 June 2022 with extension option up to 24 months to 30 June 2024

Invoices are to be issued to s47E(d) @concursolutions.com with attention to the Customer Contract Liaison Officer named above.

Internal codes for Customer Purposes Only

Internal Code	Insert code number
Cost Centre	s47E(d)
Charge Code	N/A
SAP Contract #	6000113207
SAP PO#	TBC

1. The Services and subcontractors

Source and deliver the full range of goods, equipment and assistive technology (GEAT) items nationally to older Australians under the Commonwealth Home Support Programme in relation to:

- Aids for vision and hearing
- Bathing, showering and toileting
- Communication: speak, read and listen
- Computer access
- Design and building for access and safety
- Vehicle modifications
- Eating and drinking
- Kitchen and household tasks
- Lifting and transferring people
- Personal care and dressing
- Driving
- Walking aids
- Telephones, intercoms and call systems
- Safety and health management
- Scooters, wheelchairs and wheeled mobility
- Seating, sleeping and body support
- Standing aids
- Switches and remote controls

Provide GEAT direct to clients via sale, lease or loan.

Coordinate the supply and delivery of GEAT to CHSP clients throughout Australia, including rural and remote areas. GEAT must be delivered in a timely manner to ensure CHSP clients assessed needs are met.

Coordinate the ongoing maintenance and repair of GEAT provided to the CHSP client, as required, for the duration of the contract.

Ensure under-advice or prescribed GEAT (complex or specialised equipment) has been referred or configured by an Occupational Therapist who has assessed the CHSP client as needing this level of GEAT.

Provision of GEAT goods and services must meet Australian Standards and be provided in accordance with:

- CHSP Manual Program Manual 2020-2022 (where applicable)
- Aged Care Quality and Safety Standards; and
- Charter of Aged Care Rights
- Australian Consumer Law

As required, provide ongoing user support to Regional Assessment Service (RAS) or Aged Care Assessment Team (ACAT).

The national GEAT provider will determine if GEAT is appropriate for the clients' needs as assessed, and may need to engage with the assessor and/or Occupational Therapist if required.

As appropriate for the type and complexity of the GEAT, provide support to the consumer for example via online written resources, videos, instructional guides.

2. Time frame

Date of execution of contract through to 30 June 2022 (with a possible extension to 30 June 2024).

3. Fees, allowances and costs

For 2020-21, \$1 million (GST inc) will be paid upon Execution of Official Order.

Thereafter, for July 2021 to 30 June 2022, the Customer will be invoiced for services delivered each month for the term of the contract.

The Contractor will issue the Customer with a correctly rendered monthly tax invoice, for the preceding month, following supply of GEAT products and services delivered to older Australians under the Commonwealth Home Support Programme, as outlined in the Deed.

The amounts payable by the Customer to the Contractor are stated inclusive of GST.

In line with the CHSP Manual, it is expected that clients who are unable to purchase the item/s independently will be able to access up to \$1,000 in total support per financial year under this service type. This cap applies in total per client, regardless of how many items are loaned or purchased. It is not a cap applied per item.

4. Specified Personnel

In accordance with the terms of the Deed, Indigo must provide personnel and subcontractors with appropriate skills to provide the Services required under this Official Order, and to avoid doubt all subcontractors must be engaged in strict adherence to Schedule 2 item 6 of the Deed of Standing Offer.

5. Customer Material to be provided by Customer

The Department will monitor policy developments and provide any relevant documentation to support the Indigo to undertake the activities required as set out in this Official Order.

6. Existing Material

As per clause 10 of Schedule 2 of the Head Agreement, Indigo will own the Contract Material. The Department will have a broad licence to use the Contract Material for the purposes of the Department.

7. Contract Material

Performance reports on the funded activity monthly in the format prescribed by the Department, which will include reporting on delivery of outputs and financial information. Monthly reports will be provided on the template provided by the Customer.

8. Confidential Information

No Department Confidential Information is specified.

9. Customer facilities and assistance

No Customer facilities or assistance is required.

10. Invoice procedures

The Contractor must forward invoices directly to **s47E(d)** [@concursolutions.com](mailto:concursolutions.com) with attention to the Customer Contract Liaison Officer named above.

The tax invoice will include the following:

- the title of the Services or other identification of this Contract;
- the name of the Customer Contract Liaison Officer;
- the fees, allowances and costs due; and
- Purchase Order number (tba) to which the payment relates.

11. Other Terms and Conditions

Nil

THIS DOCUMENT HAS BEEN RELEASED UNDER
THE FREEDOM OF INFORMATION ACT 1982 (CTH)
BY THE DEPARTMENT OF HEALTH AND AGED CARE

This Official Order is **SIGNED** as a Contract.

SIGNED for and on behalf of the **COMMONWEALTH OF AUSTRALIA** as represented by the
Department of Health ABN 83 605 426 759 on:

16/6/2021
 Date

by:

s22

Printed name of signatory

s47F

Signature

A/g director

Position of signatory

in the presence of:

s22

Printed name of witness

s47F

Signature

SIGNED for and on behalf of Indigo Australasia Incorporated, ABN 82 056 232 143 in accordance
 with subsection 127(1) of the Corporations Act 2001 on:

15 June 2021

Date

by:

Wayne Stone

Printed name of Director

s47F

Signature of Director

and:

s47F

Printed name of Director/Secretary

s47F

Signature of Director/Secretary

Review of Assistive Technology programs in Australia

The Department of Health engaged Australian Healthcare Associates (AHA) to undertake a review of assistive technology (AT) programs that support older Australians. The primary purpose of the review was to assess equity of access to AT for older people across Australia.

Key findings

The key finding from the AT review is that impartial information and advice is vital as AT is a broad umbrella term that encompasses an extensive and diverse range of products—from low-risk, simple relatively inexpensive daily living aids, to emerging smart technologies for use around the home, and customised, highly complex and costly products.

High rates of abandonment suggest that consumers would benefit from receiving better information and advice to select the appropriate low-level AT products.

The AT review identified that:

- Consumer understanding of AT is often poor, and many are not aware of the range of AT that can assist them. There is currently no independent and trusted source of information. Low-risk AT can be purchased 'off the shelf' by consumers, without assessment or prescription.
- Consumers may frequently perceive AT to be designed primarily for people with disabilities, which can deter them from seeking advice. This stigma can be felt particularly by those early in the ageing process with relatively low-level needs.
- GPs and other health professionals also commonly have knowledge gaps in relation to AT, including what products, services and programs are available, and how consumers can access them.

Current AT programs

There are more than 60 current AT programs for older people that are difficult to navigate as they are characterised by unnecessary complexity, inconsistent eligibility, access to funding, contribution to costs and a lack of transparency about what types of AT are available.

Examples of inconsistencies include:

- People receiving aged care services being generally excluded from accessing state and territory AT programs. However, in Victoria and Tasmania, Level 1 and 2 Home Care Package recipients can receive assistance.
- Some states and territories not funding items under a certain value, for example \$100 in the NT, NSW and ACT).
- Some states and territories provide assistance to hospital inpatients on discharge, while others excluded patients within 30 days of being discharged from a public hospital.
- In some states, people eligible for palliative care, in receipt of compensation or damages in respect of their disability or with advanced degenerative disease are excluded.

The review also found that all national aged care programs are generally not designed to meet the changing AT needs of older people.

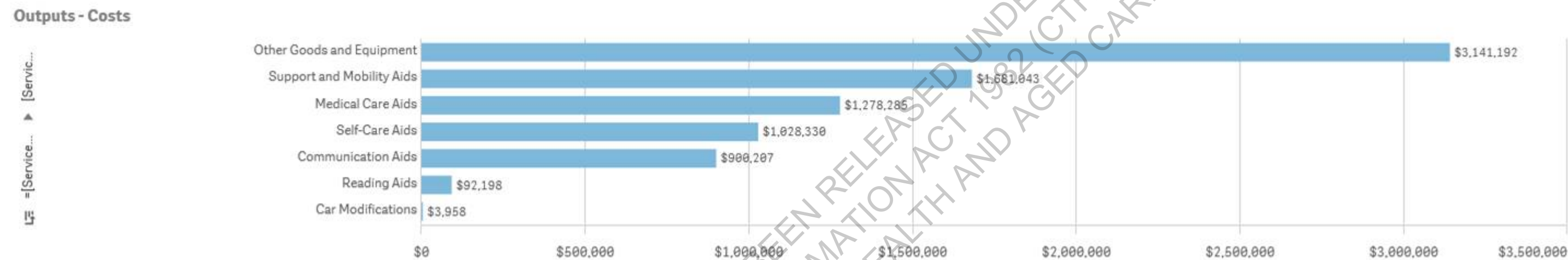
s22

From: s22
Sent: Thursday, 17 December 2020 9:18 AM
To: s22
Subject: GEAT Sub-type data [SEC=OFFICIAL]

Hi s22

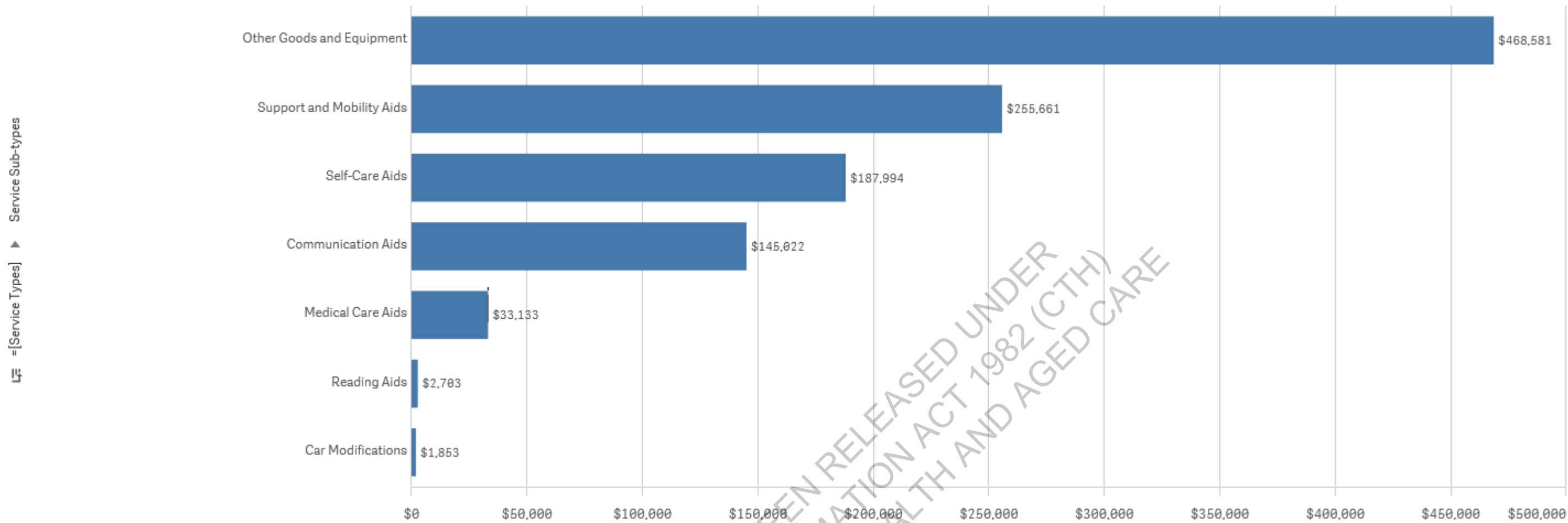
In preparation for your meeting, the following is some data from DEX for services delivered as part of GEAT for the 2019-20 Financial Year.

For the 2019-20 FY, CHSP providers reported the following costs for GEAT in DEX (broken down by service type):



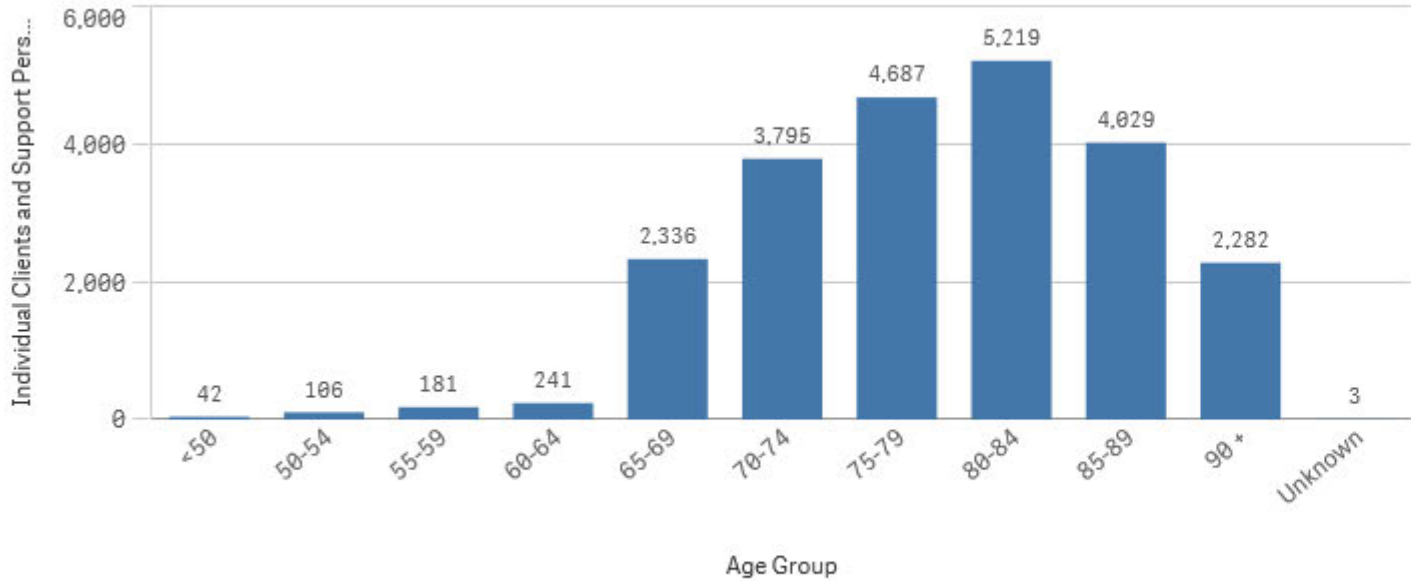
This is reported separately to the client contributions (which are also reported in DEX):

Fees / CHSP Client Contributions



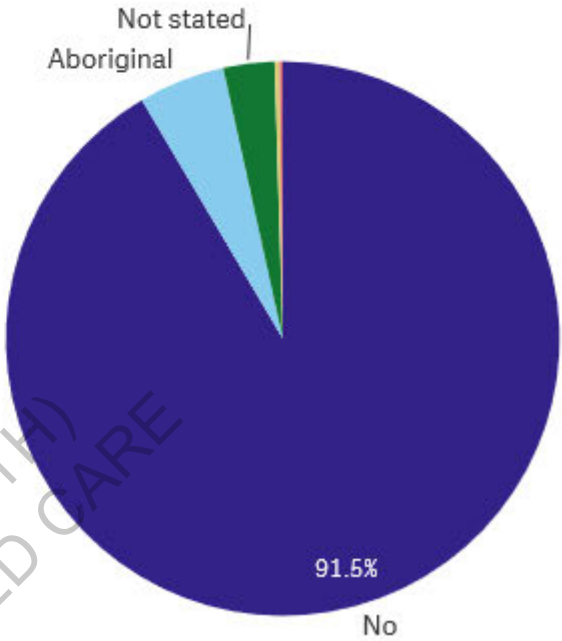
In terms of demographics, 22,737 clients accessed the service:

Individual Clients and Support Persons by Age Group

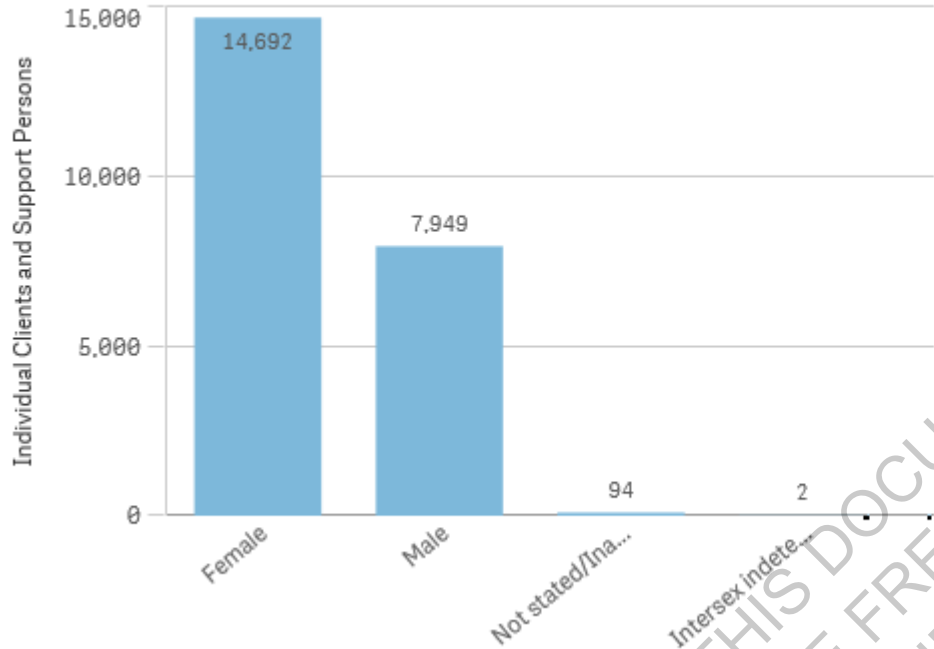


Individual Clients and Support Persons by ATSI Status

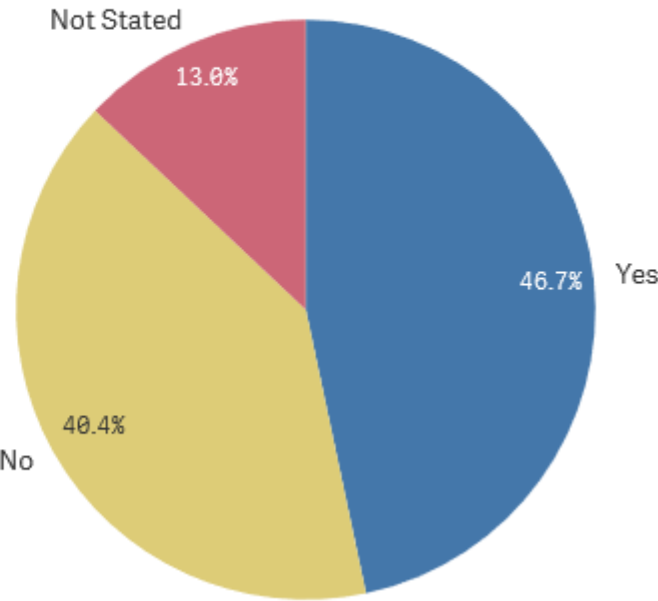
Aboriginal and Torres Strait Islander Status



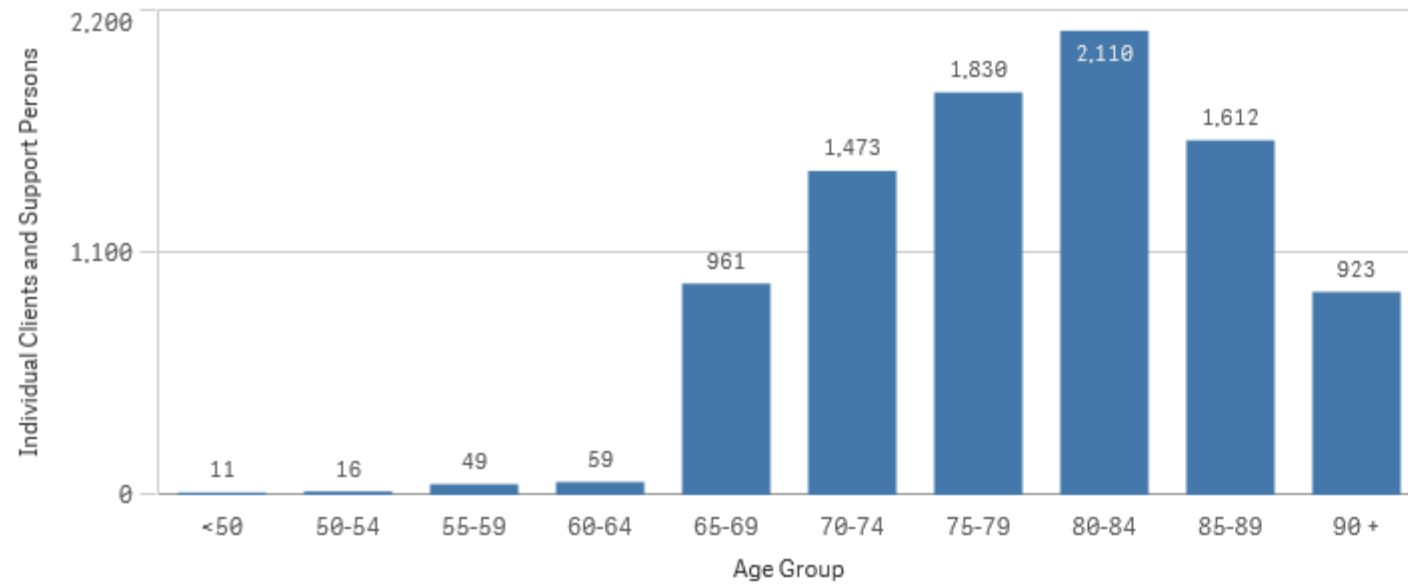
Individual Clients and Support Persons by Gender



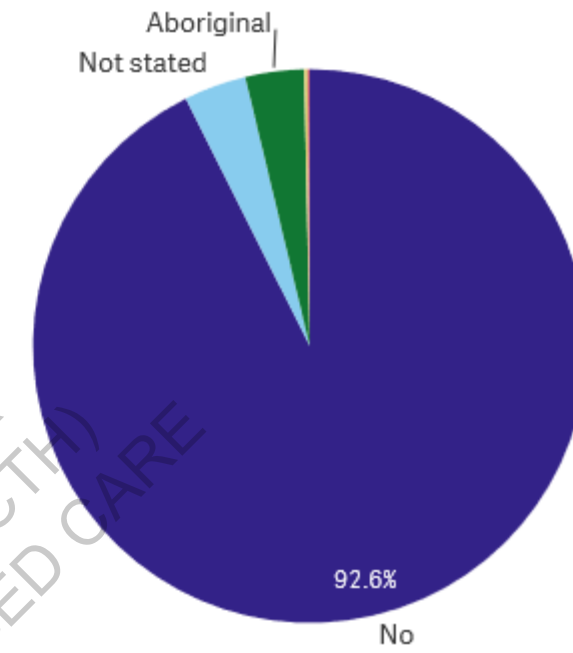
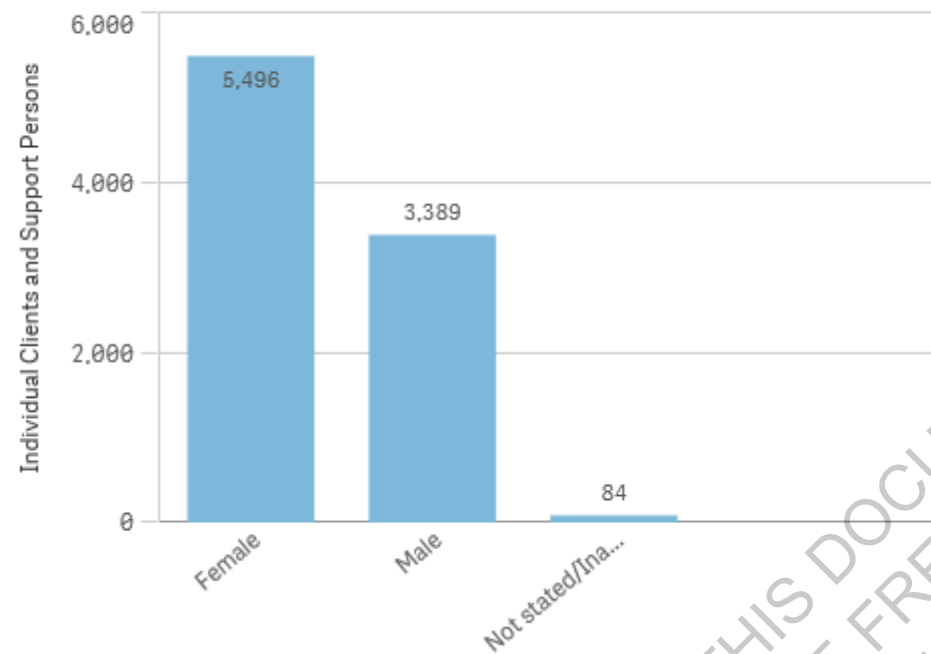
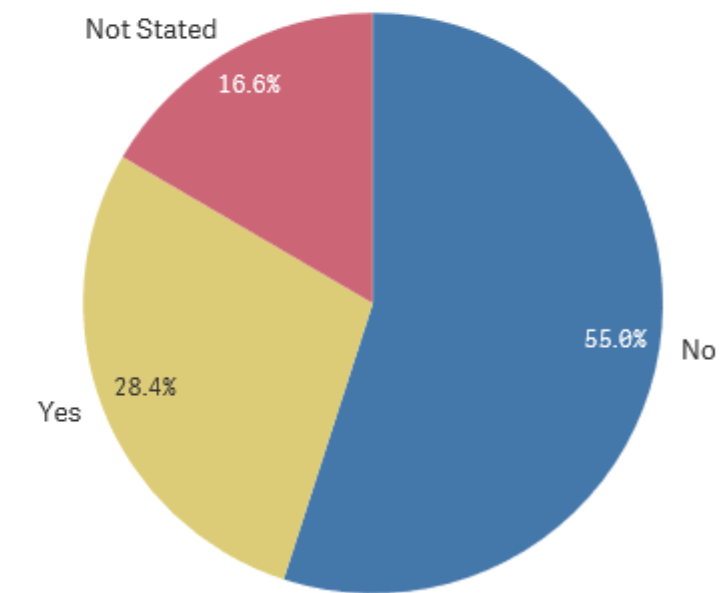
Individual Clients and Support Persons by Disability Status -> Description



To look specifically at “Other Goods” (as the most utilised service type), 8,969 clients accessed this service:

Individual Clients and Support Persons by Age Group**Individual Clients and Support Persons by ATSI Status**

Aboriginal and Torres Strait Islander Status

**Individual Clients and Support Persons by Gender****Individual Clients and Support Persons by Disability Status -> Description**

While not an exact science, by any means, this information could potential be used to establish some loose costing for the services. For example, if CHSP providers reported spending \$3,141,192 on “Other Goods” for 8,969 clients would be \$350 per client on average ☺

While we don’t explicitly fund by service type, I hope this info helps and happy to support any further analysis, if I can.

Kind regards

s22

Regards

s22

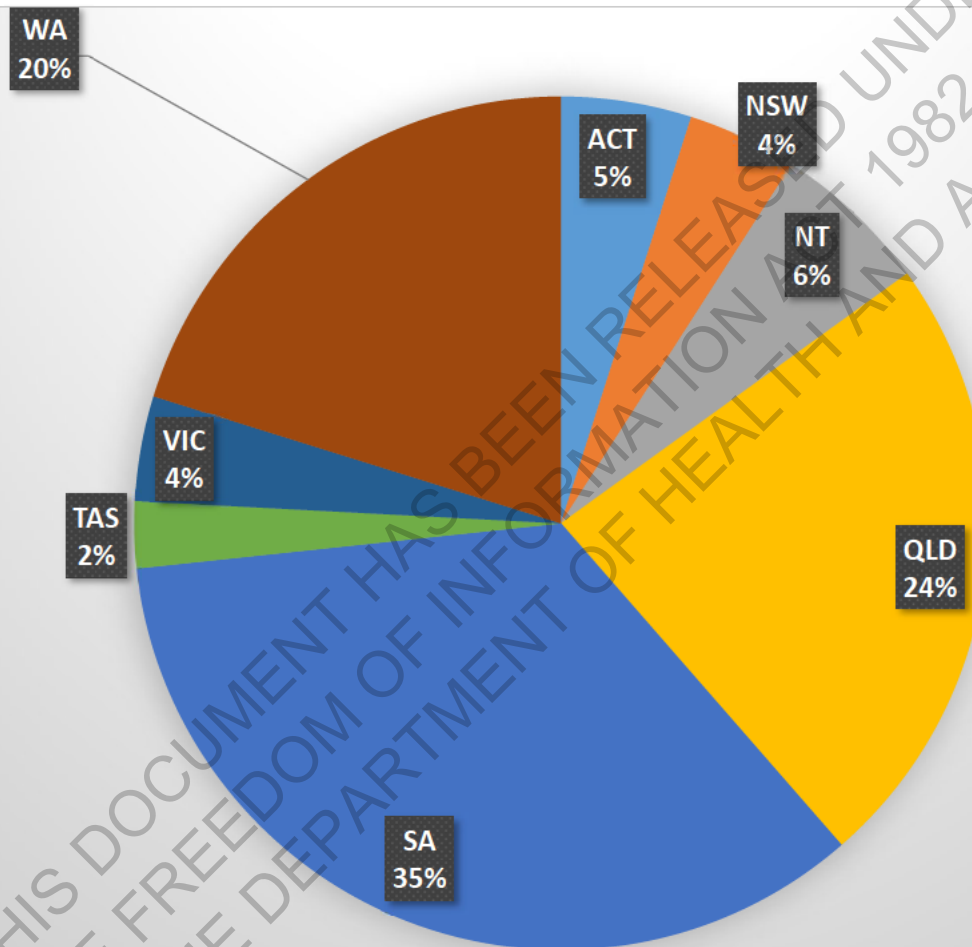
Assistant Director – CHSP Program Management

In Home Aged Care Division | Ageing and Aged Care Group
Home Support and Assessment Branch
Australian Government Department of Health
T: 02 6289 s22 s22 @health.gov.au
GPO Box 9848, Canberra ACT 2601, Australia

The Department of Health acknowledges the Traditional Custodians of Australia and their continued connection to land, sea and community. We pay our respects to all Elders past and present.

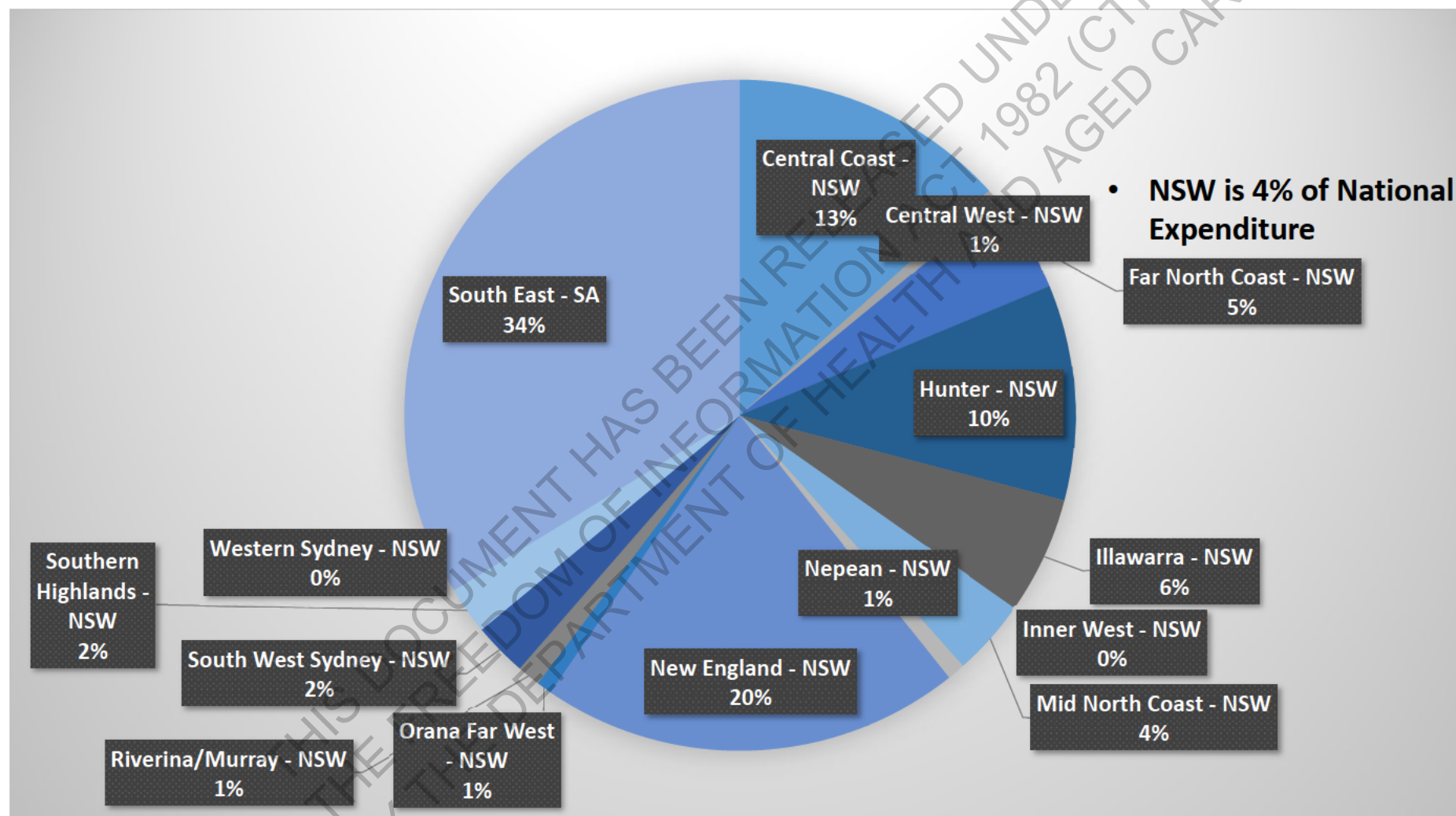
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BY THE DEPARTMENT OF HEALTH AND AGED CARE

Total National GEAT Funding

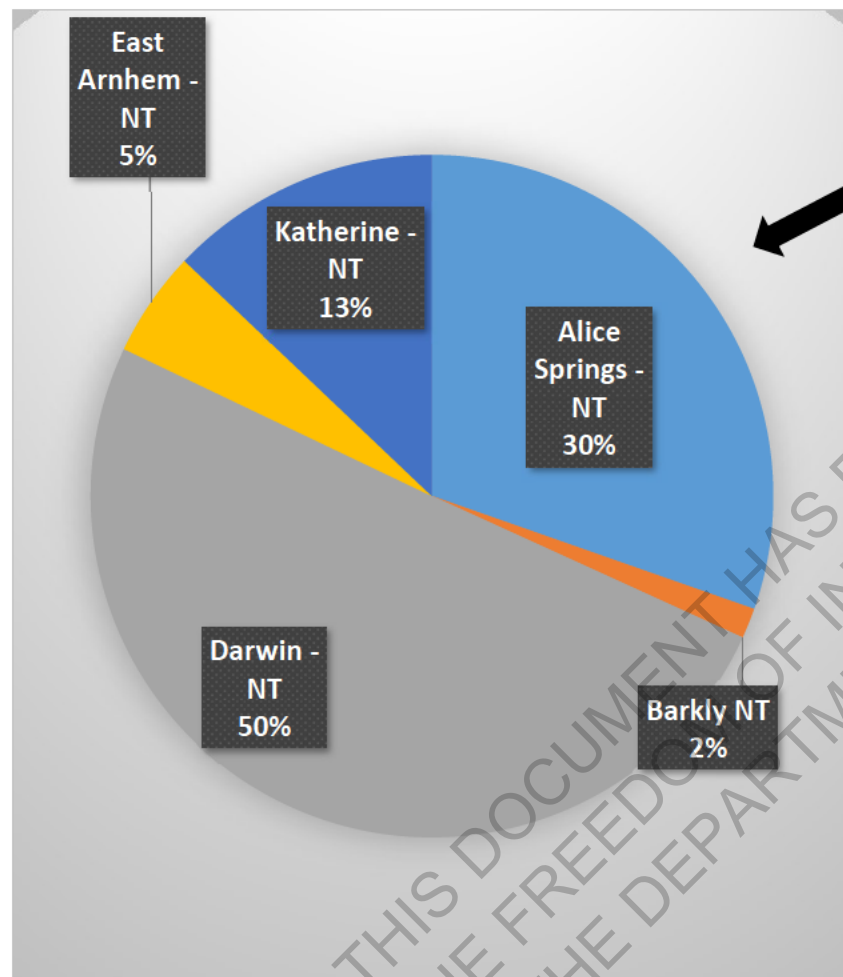


- **Total funding nationally \$10,800,781**
- **Four ACPR's have no funding:**
 - Inner West – NSW
 - Western Sydney – NSW
 - Eastern Metro – VIC
 - Loddon-Mallee - VIC
- **Just four current providers receive more than \$1m in CHSP Funding**
- **Approx 59 current providers receive less than \$100,000**
- **Approx 46 ACPRS are funded for under \$100,000**

NSW GEAT Funding

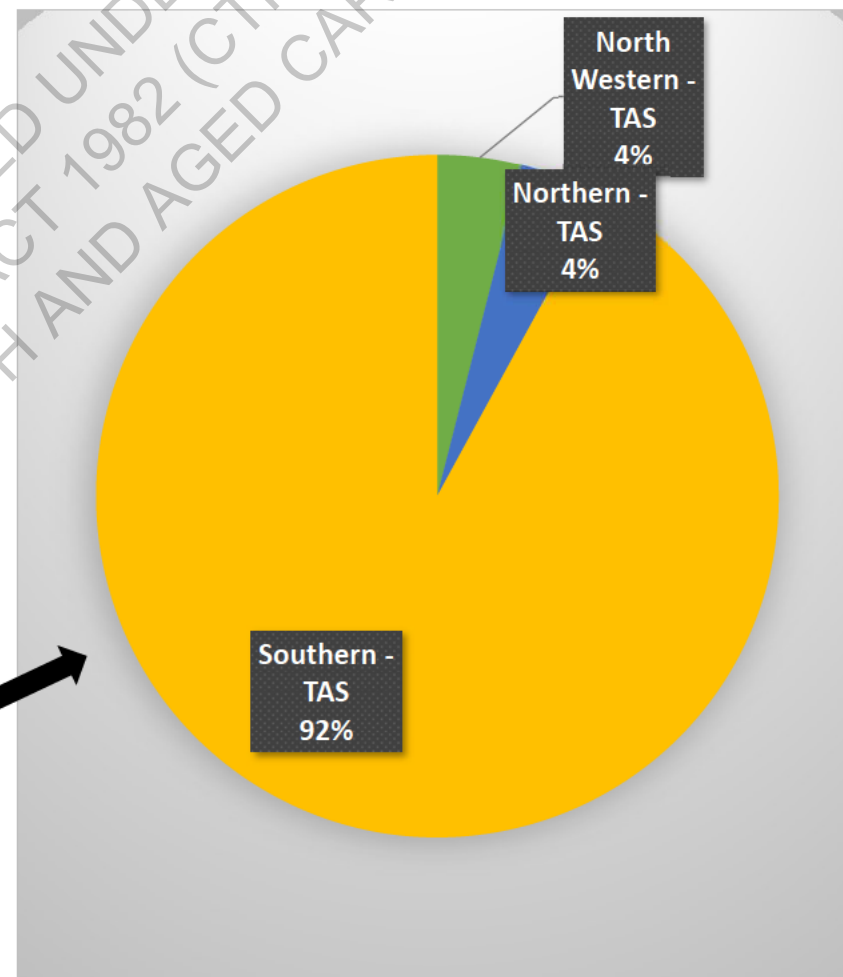


NT/TAS GEAT Funding

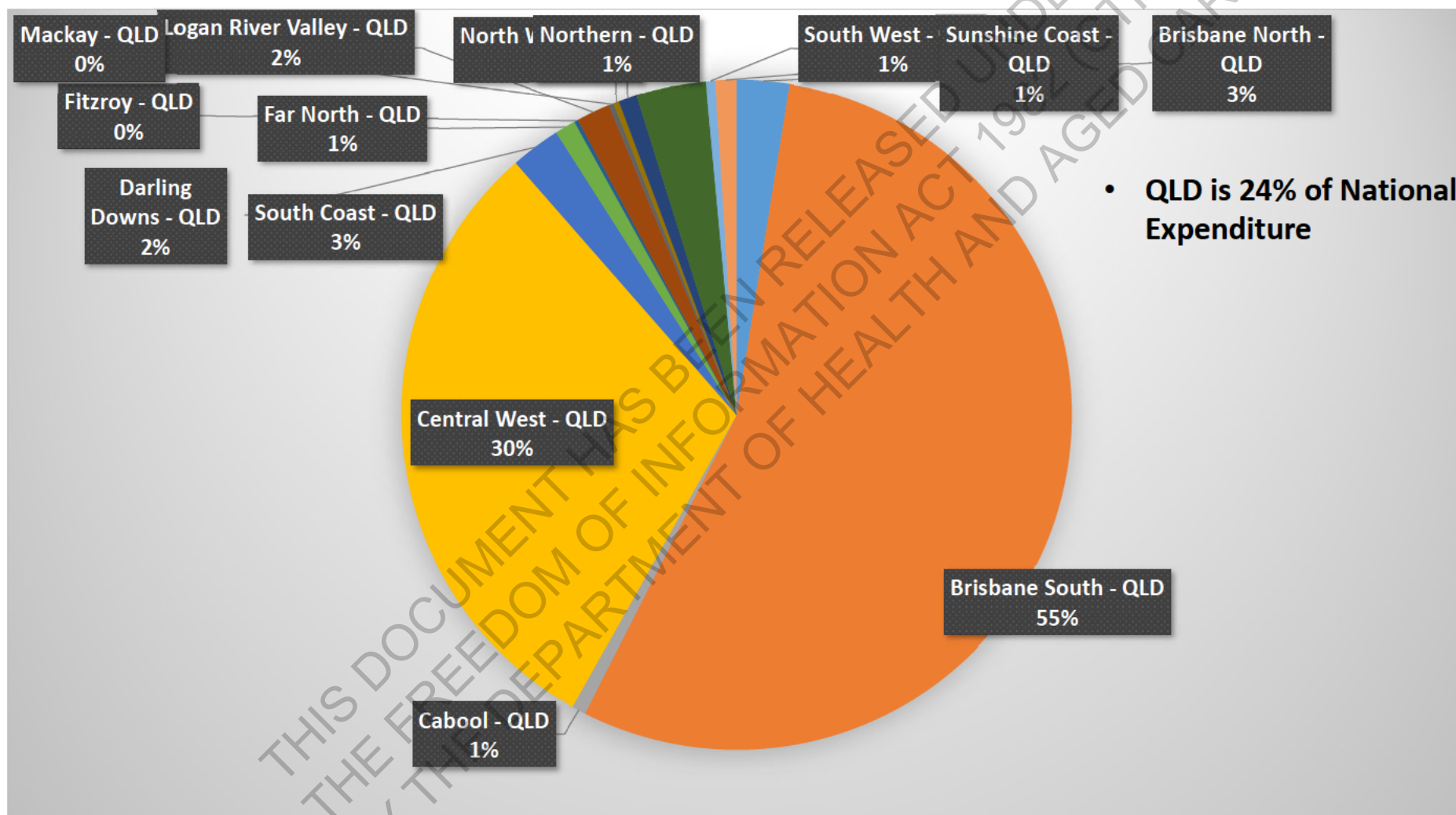


- NT is 6% of National Funding

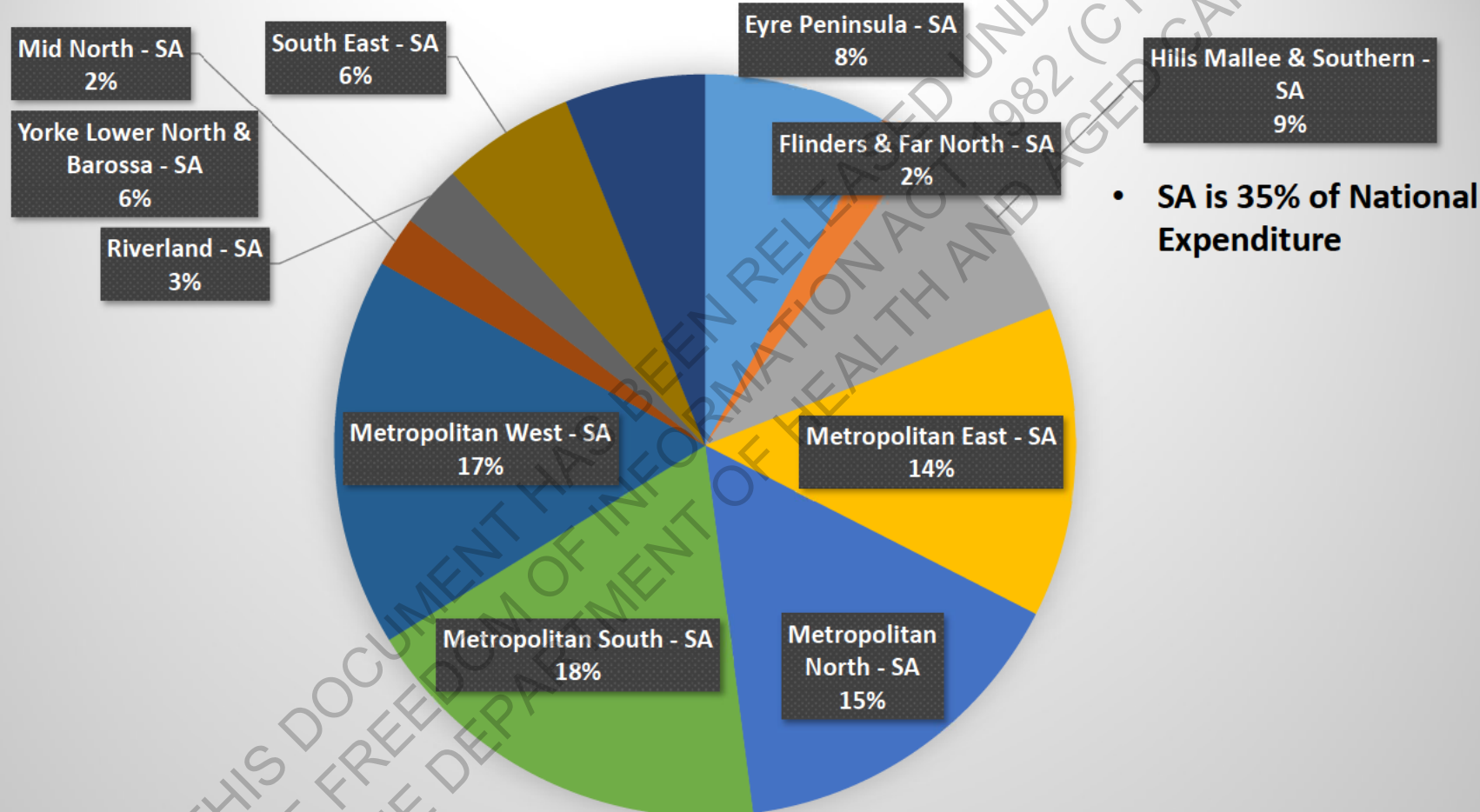
- TAS is 2% of National Funding



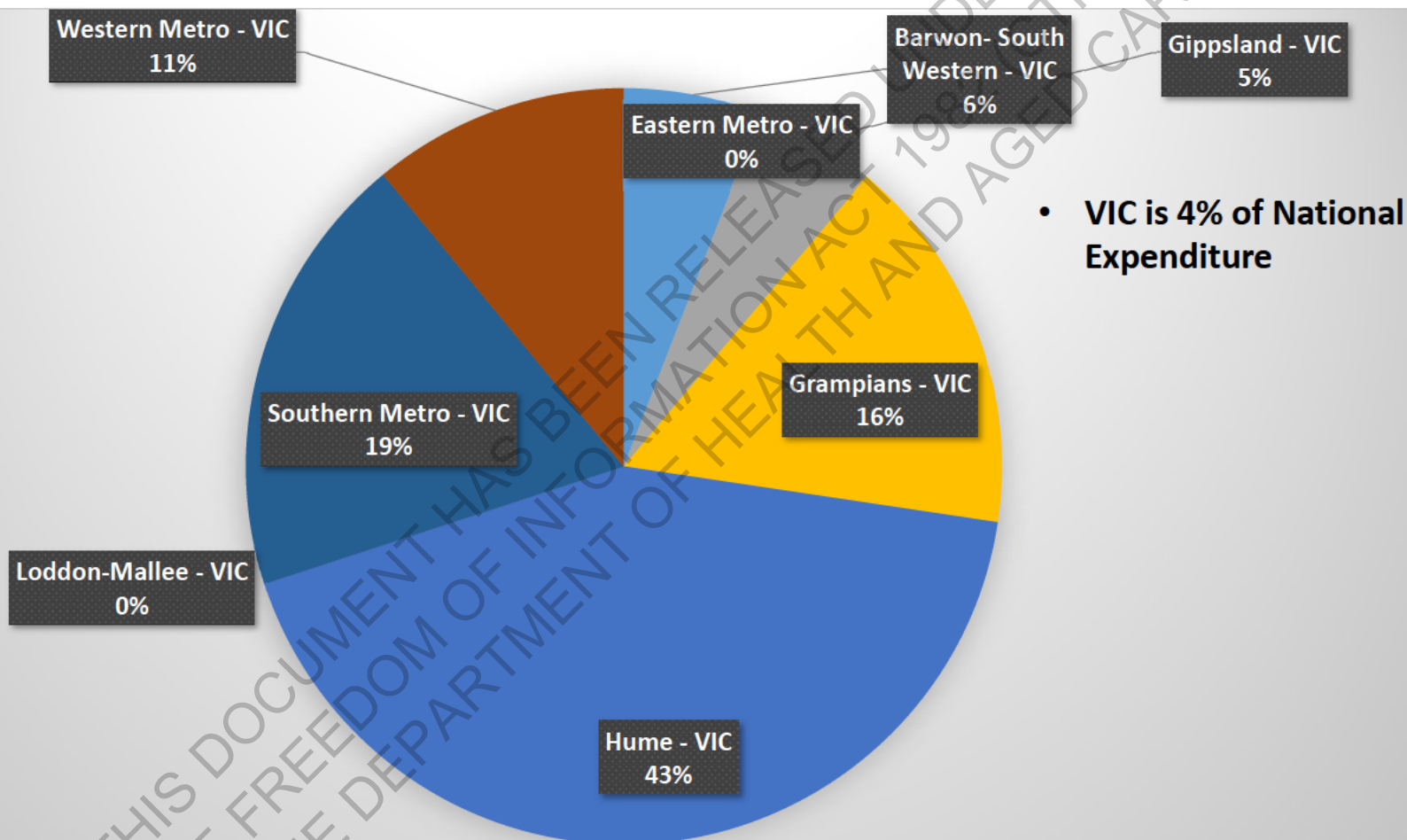
QLD GEAT Funding



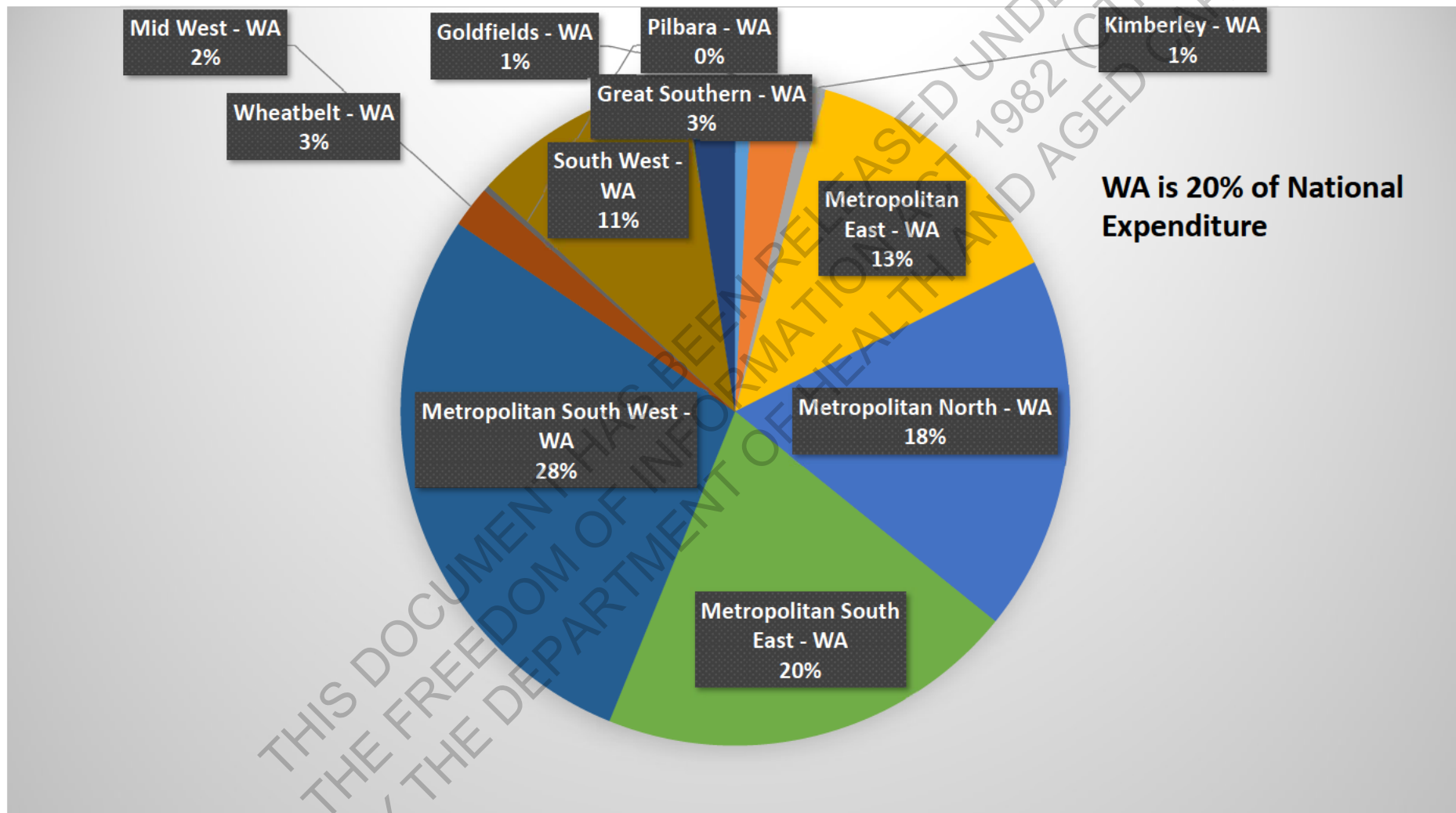
SA GEAT Funding



VIC GEAT Funding



WA GEAT Funding



Service Type	# of Consumers	% of Consumers
Car Modifications	15	0.1%
Communication Aids	510	3.4%
Medical Care Aids	3225	21.5%
Other Goods and Equipment	4560	30.4%
Reading Aids	75	0.5%
Self-care aids	2685	17.9%
Support and Mobility Aids	3930	26.2%
Total	15000	100%

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THE FREEDOM OF INFORMATION ACT 1982 (CTH)
BY THE DEPARTMENT OF HEALTH AND AGED CARE

s22

From: s22
Sent: Friday, 14 August 2020 3:36 PM
To: s22
Cc: s22
Subject: Cost-benefit of AT [SEC=OFFICIAL]

Follow Up Flag: Follow up
Flag Status: Flagged

Hi s22

Here is information on the costs-benefits of AT.

I know it is not what want to include in the storyboard, but is a starting point to show Nick and other executive the benefits of investment. We can work out how it is presented in the storyboard.

Please note that there appears to be problems with some of the percentages as they do not always add up to 100% (and in one case exceeds 100%). The meaning of some percentages is not clear. Also, the costing of AT products and services needs to be clarified.

As the benefits of access to, and use of, AT are rarely costed through a robust economic evaluation, Australian Healthcare Associates (AHA) used a rapid evidence review (RER) and iterative process (Delphi Technique) to report costs-benefit of AT.

It should be noted that quantifying the cost-benefit of AT is difficult due to reliance on an RER of minimal and generally low-quality papers, as well as the subjective nature of the Delphi technique. However, due to consistency between the findings from the two processes, AHA is confident that the provision of AT results in a strong cost-benefit to society and has reported the conservative Delphi derived cost-benefits as a return on investment (ROI) for every \$1 spent on combined AT products, kits and services. The following table summarises the results for each archetype representing an impairment category.

Table 3-4: Cost-benefit based on the cost of AT products as well as the cost of AT services

	Mild impairment	Moderate impairment	Severe impairment	Profound impairment	Total
Cost of AT products	\$287	\$40	\$773	\$1,174	\$2,274
Cost of AT services	\$144	\$20	\$387	\$587	\$1,138
Combined AT costs	\$431	\$60	\$1,160	\$1,761	\$3,412
Benefit of AT	\$17	\$2,835	\$3,345	\$13,555	\$19,752
Return on investment	\$0.04*	\$47.25	\$2.88	\$7.70	\$57.87

*This figure is likely to be an underestimate as it does not include likely longer-term cost offsets arising from delays in accessing more costly aged care services. Future cost offsets were identified but not costed due to significant degrees of views on:

- Delays in the need to increase unpaid formal care, paid carer support and paid formal care, estimated between 2 and 12 years.
- Delays in the need for residential aged care admission (not in the foreseeable future).

For person with a mild impairment (largely independent and not using aged care services), there is little immediate cost savings, reporting a savings of \$17 per year. However, the mild group has significant long-term cost-savings through delays in accessing

services which is not included in the ROI calculation. These potential cost offsets are reinforced by the Gore et.al research which emphasised the need to slow the progression of functional decline (Gore et al. 2018).

Benefits of AT for each archetype

Mild impairment:

- reduced GP visits (100%).

Moderate impairment:

- reduced hospitalisation (78.9%)
- reduced falls (20.3%)
- reduced GP visits (0.7%)

There is an increase in paid formal care despite the provision of AT (20.0%), however. these were not costed due to the significant variation of views on:

- Delays in the need to increase unpaid formal care, paid carer support and paid formal care—estimated between 1 and 10 years.
- Delays in the need for residential aged care admission—estimated between 6 months and 10 years

Severe impairment

- reduced hospitalisations (100.6%)
- reduced unpaid informal care (6.7%)
- reduced GP visits (1.1%)

There is an increase in paid formal care despite the provision of AT (8.5%). Delays in the need to increase unpaid formal care, paid carer support and paid formal care were estimated at between 1 and 10 years.

Profound impairments:

- reduced hospitalisations (70.3%)
- reduced unpaid informal care (13.3%)
- reduced GP visits (1.6%)
- reduced paid carer support (10.8%)
- reduced paid formal care (2.1%)
- reduced days in a Residential aged care (0.3%).

s22

Assistant Director – Assessment Reform Section

In-Home Aged Care Division | Ageing and Aged Care Group
Home Support and Assessment Branch
Australian Government Department of Health
T: 02 s22 | E: s22@health.gov.au
Location: Sirius Building 5.S.122
GPO Box 9848, Canberra ACT 2601, Australia

The Department of Health acknowledges the Traditional Custodians of Australia and their continued connection to land, sea and community. We pay our respects to all Elders past and present.



Australian Government

Department of Health

RFT EVALUATION REPORT

**PROVISION OF GOODS, EQUIPMENT AND ASSISTIVE TECHNOLOGY UNDER
THE COMMONWEALTH HOME SUPPORT PROGRAMME**

RFT Health/20-21/E20-276998

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1. INTRODUCTION

1.1. Background

This is a report on the evaluation of submissions in response to a Request for Tender to establish a panel to provide Goods, Equipment and Assistive Technology (GEAT) nationally to older Australians.

The evaluation is the culmination of:

- Request for Tender (RFT) and Tender Evaluation Plan approved by Nick Morgan on 18 February 2021
- RFT released on 18 February 2021
- Submissions closed on 16 March 2021

1.2. Purpose

This report seeks approval of the recommendations outlined in Section 5 - Recommendations.

2. MANAGING THE TENDERING PROCESS

2.1. Tendering Process

Over the period open for submissions:

- 30 requests for clarification were received
- 1 Formal Addenda was drafted and posted to AusTender

Copies of all communications during this period are retained at TRIM E21-18995

2.2. Submissions Received

18 submissions were received electronically via AusTender by Procurement Advice Services (PAS) at the closing time.

2.3. Screening and Compliance Issues

Of the submissions registered at closing, 0 were excluded from evaluation on the basis of failing to meet:

- Conditions for Participation
- Minimum Content and Format Requirements
- All of the Essential Requirements

2.4. Variations from the Evaluation Plan

No variations to the Evaluation Plan were required.

2.5. Integrity and Probity Issues

No probity issues occurred.

2.6. Conflict of Interest Issues

No conflicts of interest arose.

2.7. Evaluation Team

The Evaluation Team consisted of:

Name	Position Title	Branch/ Division	Role
s22	A/g Director	HSAB, IHACD	Chair
s22	Assistant Director	HSAB, IHACD	member
s22	APS6	HSAB, IHACD	member

s47E(b)

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4. VALUE FOR MONEY ASSESSMENT

The Tender is supported by funding of up to \$10 million in 2020-21 and \$10 million in 2021-22, expecting to assist around 15,000 clients per financial year.

Payments will be made to contractors monthly in arrears upon receipt of tax invoice.

5. RECOMMENDATIONS

5.1. Engage a Supplier

R1. The Evaluation Team recommends that six providers be appointed to the panel as follows:

• Indigo Australia
• Independent Living Specialists
• Aidacare
• Country Care Group
• Feros Care
• Ballarat Health Services

R2. The Evaluation Team seeks a decision from the delegate to approach one or more of the following providers to coordinate the supply and delivery and maintenance of GEAT to CHSP clients throughout Australia.

• Indigo
s47G(1)(a)

R3. The Evaluation Team recommends that after execution of Standing Offers that the remaining applicants will be informed that they were unsuccessful.

5.2. Negotiate with Preferred Supplier with Fallback Options

Not applicable, as the organisations are being placed on a panel for future engagement.

5.3. Shortlist

N/A

6. DECLARATION BY THE CHAIR OF THE EVALUATION TEAM

- I certify that this report accurately reflects the conduct of the evaluation process and the conclusions of the tender evaluation team members.

Signature

Name: s22

Position: Evaluation Committee Chair

Date: 2021

**To: Nick Morgan, Assistant Secretary,
Home Support and Assessment Branch, IHAC**

SUBJECT: PANEL FOR GOODS, EQUIPMENT AND ASSISTIVE TECHNOLOGY UNDER CHSP

Purpose

That you:

1. **APPOINT** up to six organisations to the Goods, Equipment and Assistive Technology (GEAT) Panel in line with the recommendations noted in the RFT Evaluation Report at **Attachment A**;
2. **APPROVE** approaching one or more organisations to operate as national GEAT provider/s; and
3. **NOTE** the remaining panel appointees may be approached for future projects.

Timing

Your approval is required as soon as possible to enable Deed of Standing Offers to be in place before 20 May 2021.

Background

- The tender for a GEAT panel opened on 19 February 2021 and closed on 16 March 2021.
- The Panel of GEAT Agent/providers will:
 - i. Supply, install, maintain and deliver GEAT Australian wide – including rural and remote
 - ii. expand the current reach of GEAT providers
 - iii. Work with Occupational Therapists for more complex GEAT
- 18 tender applications were received.
- All tenders met the pre-eligibility and compliance requirements to progress to the evaluation phase.
- The tender evaluation panel met on 23 April 2021.
- An evaluation of the tenders has been completed and details are provided in the attached RFT evaluation report (Attachment A).

Tender Evaluation panel recommendations

- The evaluation panel has recommended six organisations that may be appointed to the GEAT panel.
- Of the six recommended, the evaluation panel agreed Indigo Australasia, s47G(1)(a) have demonstrated capability, capacity, experience and have the appropriate infrastructure to commence operating as a national GEAT provider precipitously.
- The tender evaluation panel found merit in recommending all three applicants with the knowledge not all will be selected for approach to provide national GEAT services.
- The procurement plan for this tender proposed that one or two organisations will provide national GEAT services. The national GEAT service(s) will operate in parallel with current grant funded CHSP GEAT providers.
- Market share will be made thinner, and possibly undermine the intention to pilot an alternative funding mechanism for GEAT services across Australia, if too many organisations are contracted as national GEAT providers.
- The evaluation panel therefore seeks an appropriate decision by the Delegate on which of the three organisations should be approached for the national GEAT provider role(s).
- The table below shows the six highest rated organisations as determined by the evaluation panel for appointment to the GEAT Panel:

Rank	Tender Applicant	proposed GEAT Panel	proposed GEAT Providers for delegate consideration	Current CHSP Provider
1	Indigo Australasia	Y	Y	Allied Health and Therapy; Goods Equipment Assistive Technology; Home Modifications; SSD
1	s47G(1)(a)			
1				
2				
2				
3				

The remaining 12 applicants provided less satisfactory proposals and did not adequately address the tender criteria, nor provide a viable business model for operating as a national GEAT provider or have the necessary experience and knowledge. The full list and rankings is at **Attachment B** and the Score Matrix is at Attachment C.

Appointment process

Following your decision on which organisations to appoint to the GEAT panel, letters to successful applicants will be provided to you for your signature. The letters will include a Deed of Standing Offer until 30 June 2022, which also contains extension provisions for up to two 12 month periods.

Funds Availability

Funding is available from s47E(d) – Home Support and Care for the 2020-21 and 2021-22 financial years.

Recommendation THAT YOU:

- R1. APPOINT** up to six organisations to the Goods, Equipment and Assistive Technology (GEAT) Panel in line with the recommendations noted in the RFT Evaluation Report at **Attachment A**;
- R2. APPROVE** approaching one or more organisations to operate as national GEAT provider/s; and
- R3. NOTE** the remaining panel appointees may be approached for future projects.

s47F

Nick Morgan
Assistant Secretary
Home Support and Assessment Branch
11 May 2021

R1. **APPROVED** / NOT APPROVED / DISCUSS
R2. **APPROVED** / NOT APPROVED / DISCUSS
R3. **NOTED**

I am comfortable with the top ranked provider, Indigo Australasia being approached as the single national provider. s47F

11/5/21

Recommending **s22**
Officer: A/g Director
Reablement and CHSP Policy
Phone: 02 **s22**
TRIM ref: D20-2571363

Attachments:

- A:** RFT Evaluation Report
- B:** final scores and evaluation panel recommendations
- C:** GEAT panel evaluation - Score Matrix

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s22

From: s22
Sent: Monday, 8 February 2021, 12:33 PM
To: s22
Subject: RE: URGENT - Map of Consumers [SEC=OFFICIAL]
Attachments: CHSP 2019-2020.docx

Follow Up Flag: Follow up
Flag Status: Flagged

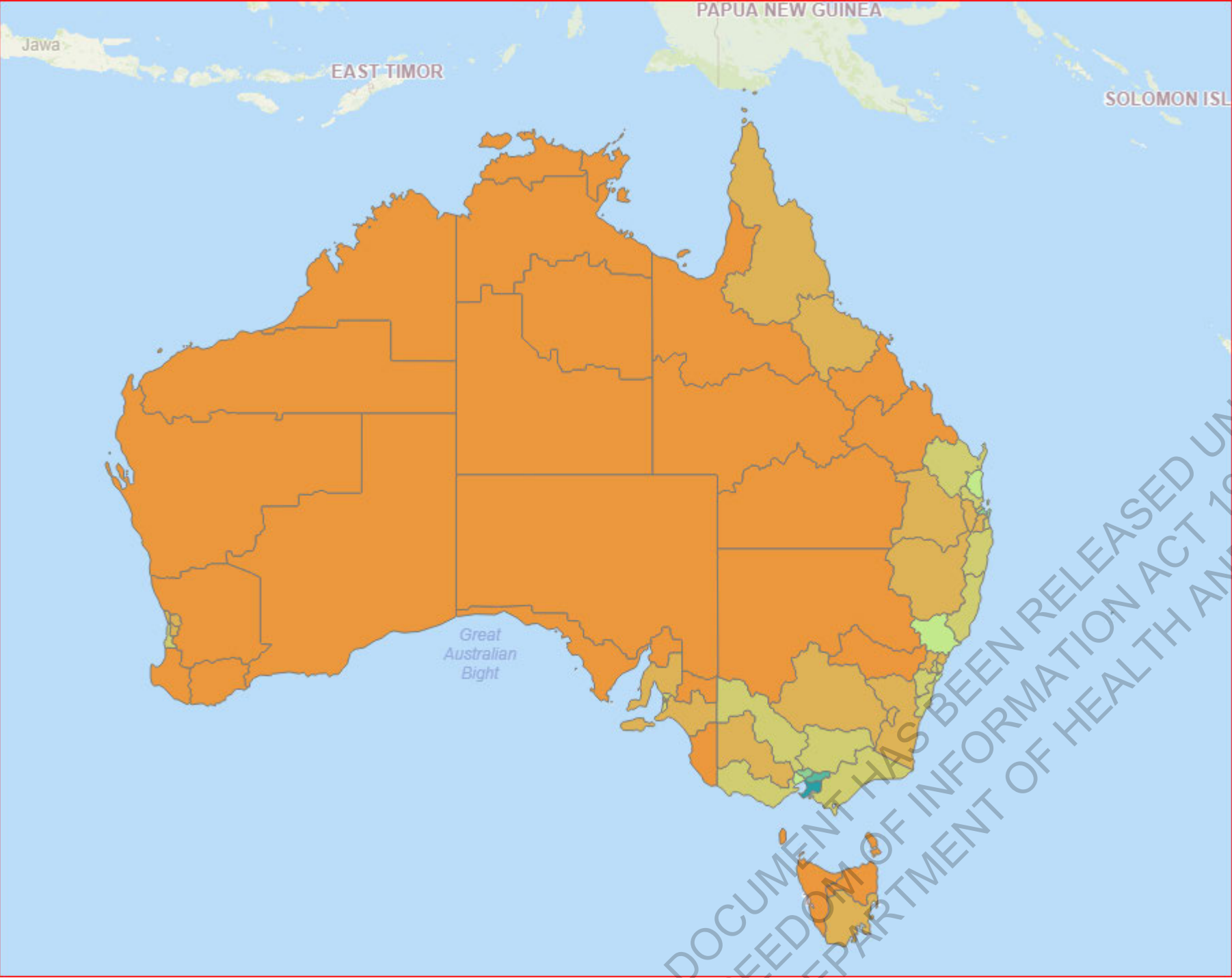
Hi,

I cannot pick 2,3 or 4 other colures combos to use in the gradient only play with opacity and select either full green or full brown shades, which won't contrast more, in fact less. Different colours by ACPRs is possible but it is not what we want.

This is what I came up with:

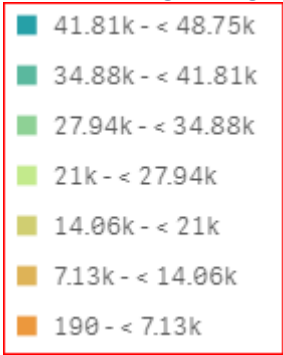
I used this image for the map:

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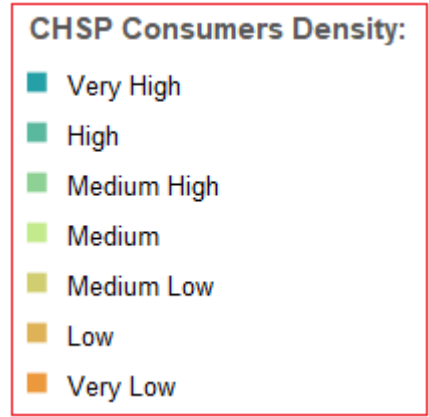
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This is the original legend:

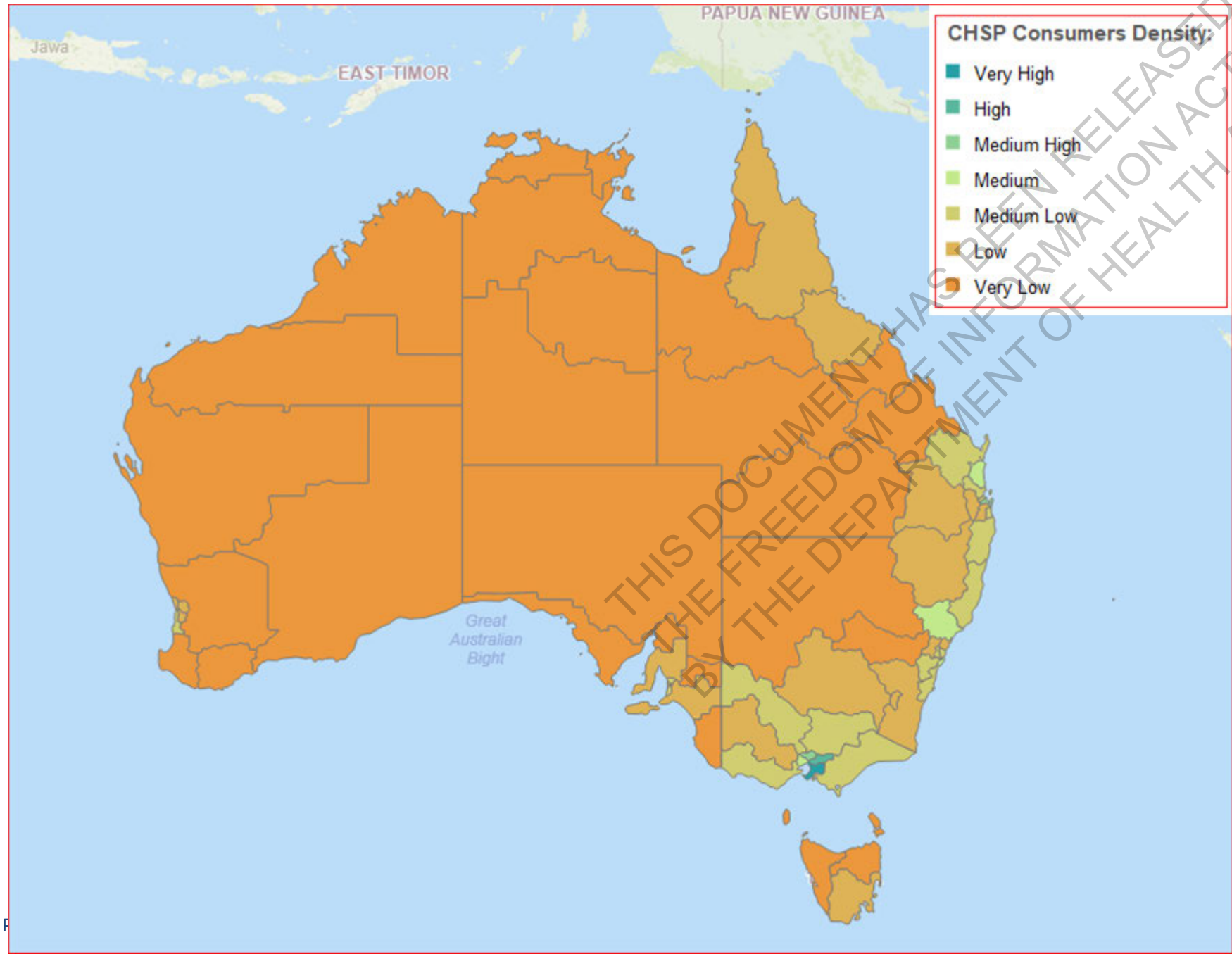


I edited the legend with Paint to add the following labels. Please advise if you prefer different labels:
CHSP Consumers Density:
Very High
High

Medium High
Medium
Medium Low
Low
Very Low



Final map for CHSP consumers by ACPRs::



Kind Regards,
s22

From: s22 @health.gov.au>
Sent: Monday, 8 February 2021 11:49 AM
To: s22 @health.gov.au>; s22 @health.gov.au>
Subject: RE: URGENT - Map of Consumers [SEC=OFFICIAL]

Thanks s22 as discussed could you please change the colours to make it a little more obvious.

Cheers
s22

From: s22 @health.gov.au>
Sent: Monday, 8 February 2021 11:37 AM
To: s22 @health.gov.au>
Cc: s22 @health.gov.au>
Subject: RE: URGENT - Map of Consumers [SEC=OFFICIAL]

Hi s22 and s22

Please let me know if attached is what you were expecting.

I'm happy to try to find out if we have anywhere an Australia MMM map as such (there are files with pre-defined shapes) but I doubt I'll get the answer and the time to figure out how to implement it today. However if this is something long term you would be interested in please let me know and I can start digging. I should have it ready (assuming it exists) in a few days.

Currently I only have ACPRs maps and I also have SA2 maps, however client mapping to that level might lose a few clients where data wasn't good enough, but it's still ok, please let me know if you would like to see how that one looks.

Kind Regards,
s22

From: s22
Sent: Monday, 8 February 2021 10:07 AM
To: s22 @health.gov.au>
Cc: s22 @health.gov.au>
Subject: RE: URGENT - Map of Consumers [SEC=OFFICIAL]

Hi s22

I don't have a map and I'm not exactly sure what do you mean by "map for CHSP consumers", but I can get some numbers...

I'm assuming you are interested in 2019-2020, right?

There are a few caveats associated with this

- this is according to a tmp table we were told we can use
- Some clients are not "mapped"

Is this for or instead of the meeting?

Regards,
s22

From: s22 @health.gov.au>
Sent: Monday, 8 February 2021 10:03 AM
To: s22 @health.gov.au>


Cc: s22 @health.gov.au>
Subject: URGENT - Map of Consumers [SEC=OFFICIAL]

Hi s22

Can you please send a map of CHSP consumers by their regions (i.e. metro, regional, rural, remote and very remote).

This information will be used in an RFT to be released publicly.

Kind regards

s22
Assessment Reform Section

In Home Aged Care Division | Ageing and Aged Care Group
Australian Government Department of Health
T: 02 6289 s22 E: s22 @health.gov.au
GPO Box 9848, Canberra ACT 2601, Australia

The Department of Health acknowledges the Traditional Custodians of Australia and their continued connection to land, sea and community. We pay our respects to all Elders past and present.

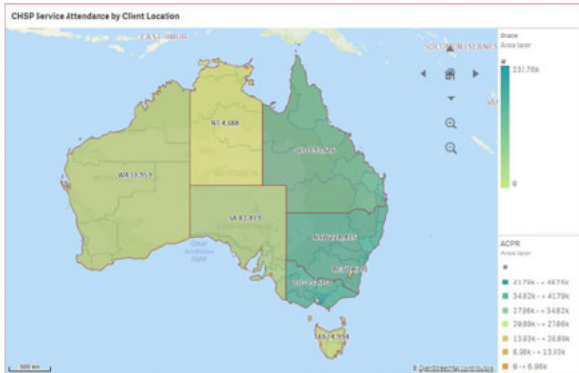
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2019-2020 CHSP Attendance By Client Location

Maps

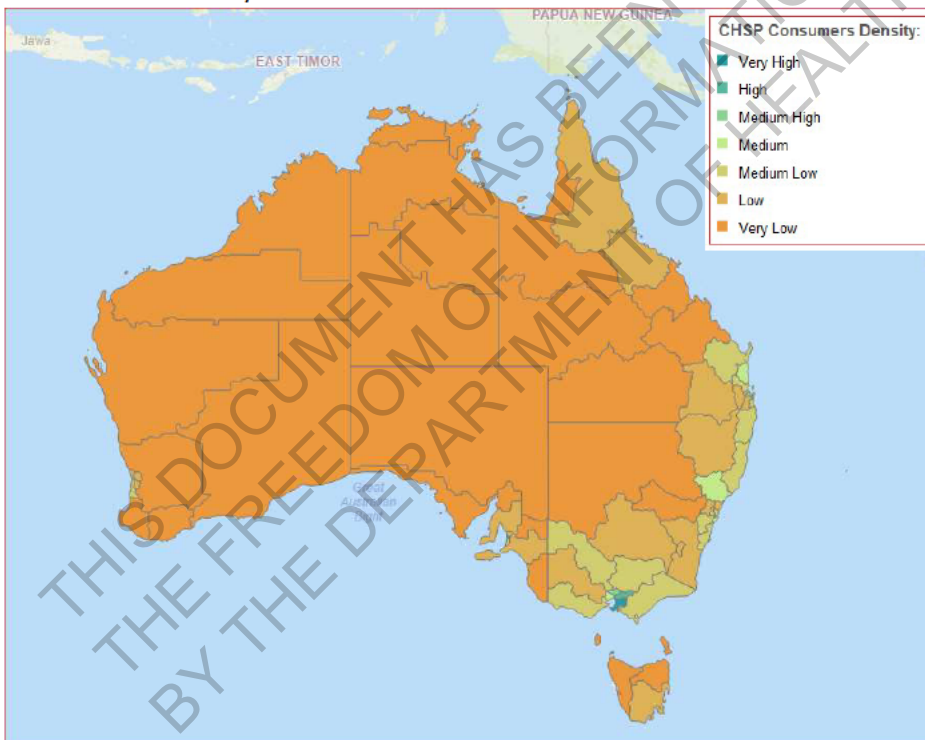
- For each client only one locations is used
- Only individual clients are included;
- Individual Client without a location are not included

Map by States:



Map by ACPRs:

CHSP Services Attendance by ACPRs:



Individual Clients by Remoteness and States

Modified Monash Model Classification:

State	Totals	MM1 Metropolitan	MM2 Regional centres	MM3 Large rural towns	MM4 Medium rural towns	MM5 Small rural towns	MM6 Remote communities	MM7 Very remote communities	No MMM classification found
Totals	839,049	530,467	87,932	70,180	48,912	85,792	10,247	5,510	9
ACT	10,791	10,784	7	-	-	-	-	-	-
NSW	228,415	142,926	4,963	31,516	18,830	27,330	2,512	338	-
NT	4,688	-	2,598	-	-	29	1,065	996	-
QLD	193,626	118,418	41,773	5,985	7,745	15,350	2,230	2,122	3
SA	83,819	58,155	823	7,663	3,844	9,954	2,359	1,020	1
TAS	24,994	-	14,701	4,698	200	4,699	531	165	-
VIC	232,757	154,287	19,496	16,535	17,501	24,546	387	-	5
WA	59,959	45,897	3,571	3,783	792	3,884	1,163	869	-

Regional Classification

State	Totals	Inner Regional Australia	Major Cities of Australia	Outer Regional Australia	Remote Australia	Very Remote Australia	No Remote classification found
Totals	839,049	203,676	530,725	89,142	10,329	5,168	9
ACT	10,791	7	10,784	-	-	-	-
NSW	228,415	60,095	143,103	22,385	2,495	337	-
NT	4,688	-	-	2,627	1,088	973	-
QLD	193,626	46,532	118,454	24,411	2,142	2,084	3
SA	83,819	12,026	58,158	10,256	2,635	743	1
TAS	24,994	16,146	-	8,266	417	165	-
VIC	232,757	62,013	154,328	16,025	386	-	5
WA	59,959	6,857	45,898	5,172	1,166	866	-

Commented S22 : Sorry I don't know how this classification is actually called

Individual Clients by Remoteness and ACPRs

Please note only ACPRS where CHSP services attendance is found are listed below.

Analyse shows that CHSP clients are listed in all ACPRs except Indian Ocean Territories.

State	ACPR	Totals	MM1 Metro.	MM2 Regiona l centres	MM3 Large rural towns	MM4 Mediu m rural towns	MM5 Small rural towns	MM6 Remote comm.	MM7 Very remote comm.	Inner Regiona l Australi a	Major Cities of Australi a	Outer Regiona l Australi a	Remote Australi a	Very Remote Australi a	No Cls.
Totals		839,049	530,467	87,932	70,180	48,912	85,792	10,247	5,510	203,676	530,725	89,142	10,329	5,168	9
ACT	ACT	10,791	10,784	7	-	-	-	-	-	7	10,784	-	-	-	-
NSW	Central Coast	12,839	12,682	117	-	-	40	-	-	155	12,684	-	-	-	-
	Central West (NSW)	7,046	-	-	2,533	1,802	2,332	379	-	4,552	-	2,117	377	-	-
	Far North Coast	14,695	4,673	132	4,863	1,871	3,156	-	-	9,509	4,677	509	-	-	-
	Hunter	22,266	16,813	834	886	2,213	1,520	-	-	5,237	16,829	200	-	-	-
	Illawarra	14,391	8,894	812	1,822	2,106	757	-	-	5,470	8,909	12	-	-	-
	Inner West	11,849	11,849	-	-	-	-	-	-	-	11,849	-	-	-	-
	Mid North Coast	17,138	-	-	10,454	3,426	3,258	-	-	14,171	-	2,967	-	-	-
	Nepean	7,864	7,257	301	229	-	77	-	-	567	7,296	1	-	-	-
	New England	9,868	-	-	2,970	2,465	4,360	73	-	3,191	-	6,604	73	-	-
	Northern Sydney	20,984	20,800	170	-	-	3	11	-	94	20,890	-	-	-	-
	Orana Far West	7,004	-	-	2,083	562	2,289	1,794	276	2,124	-	2,815	1,790	275	-
	Riverina/Murray	11,410	-	1,747	3,077	1,832	4,499	255	-	6,699	-	4,456	255	-	-
	South East Sydney	24,404	24,039	238	-	-	65	-	62	295	24,047	-	-	62	-
	South West Sydney	18,165	15,300	391	1,642	-	832	-	-	2,863	15,302	-	-	-	-
	Southern Highlands	8,484	786	71	957	2,553	4,117	-	-	4,994	786	2,704	-	-	-
	Western Sydney	20,008	19,833	150	-	-	25	-	-	174	19,834	-	-	-	-
NT	Alice Springs	1,028	-	-	-	-	-	748	280	-	-	-	748	280	-
	Barkly	190	-	-	-	-	-	-	190	-	-	-	-	190	-
	Darwin	2,806	-	2,598	-	-	29	83	96	-	-	2,627	106	73	-
	East Arnhem	200	-	-	-	-	-	-	200	-	-	-	-	200	-
	Katherine	464	-	-	-	-	-	234	230	-	-	-	234	230	-
QLD	Brisbane North	20,636	20,621	15	-	-	-	-	-	1	20,635	-	-	-	-
	Brisbane South	29,251	27,994	2	-	-	780	474	-	511	27,994	391	354	-	1
	Cabool	20,940	17,018	3,443	217	-	262	-	-	3,902	17,018	20	-	-	-
	Central West (QLD)	534	-	-	-	-	-	-	534	-	-	-	-	534	-

	Darling Downs	10,895	-	6,014	-	2,470	2,360	51	-	9,097	-	1,747	51	-	-
	Far North	10,257	-	5,208	-	1,696	2,438	419	496	-	-	9,346	415	496	-
	Fitzroy	7,068	-	3,145	2,179	382	1,087	273	1	5,966	-	827	273	1	1
	Logan River Valley	11,985	10,681	531	-	554	219	-	-	1,296	10,689	-	-	-	-
	Mackay	4,710	-	3,378	-	137	1,032	163	-	3,166	-	1,381	163	-	-
	North West	927	-	-	-	-	-	316	611	-	-	-	316	611	-
	Northern (QLD)	9,550	-	6,151	-	1,586	1,483	279	51	-	-	9,222	315	13	-
	South Coast	19,147	19,018	111	-	-	18	-	-	128	19,019	-	-	-	-
	South West (QLD)	961	-	-	-	276	1	255	429	-	-	277	255	429	-
	Sunshine Coast	23,093	17,019	2,935	1,561	46	1,532	-	-	6,063	17,030	-	-	-	-
	West Moreton	8,178	6,067	456	-	47	1,608	-	-	2,109	6,069	-	-	-	-
	Wide Bay	15,494	-	10,384	2,028	551	2,530	-	-	14,293	-	1,200	-	-	1
SA	Eyre Peninsula	3,319	-	-	1,139	-	5	1,809	366	-	-	1,144	1,809	366	-
	Flinders & Far North	1,295	-	-	-	774	130	14	377	-	-	904	14	377	-
	Hills, Mallee & Southern	8,588	628	527	4,825	559	1,644	128	277	7,143	629	411	405	-	-
	Metropolitan East (SA)	11,652	11,652	-	-	-	-	-	-	-	11,652	-	-	-	-
	Metropolitan North (SA)	15,394	15,336	58	-	-	-	-	-	57	15,337	-	-	-	-
	Metropolitan South	17,413	17,327	86	-	-	-	-	-	86	17,327	-	-	-	-
	Metropolitan West	11,605	11,605	-	-	-	-	-	-	-	11,605	-	-	-	-
	Mid North	1,706	-	-	-	886	820	-	-	-	-	1,706	-	-	-
	Riverland	2,266	-	-	-	-	2,266	-	-	361	-	1,905	-	-	-
	South East	2,966	-	-	1,441	330	1,193	2	-	1,365	-	1,599	2	-	-
	Yorke, Lower North & Barossa	7,615	1,607	152	258	1,295	3,896	406	-	3,014	1,608	2,587	405	-	1
TAS	North Western	6,176	-	-	4,698	130	1,056	213	79	1,611	-	4,273	213	79	-
	Northern (TAS)	6,934	-	4,693	-	-	2,152	3	86	4,575	-	2,270	3	86	-
	Southern	11,884	-	10,008	-	70	1,491	315	-	9,960	-	1,723	201	-	-
VIC	Barwon-South Western	20,356	8,003	3,603	2,730	2,345	3,675	-	-	10,492	8,006	1,858	-	-	-
	Eastern Metro	39,187	37,960	831	-	54	342	-	-	1,225	37,962	-	-	-	-
	Gippsland	17,432	-	-	5,131	7,076	4,991	233	-	13,937	-	3,262	232	-	1
	Grampians	13,433	924	6,093	1,323	1,216	3,806	68	-	9,092	927	3,343	68	-	3
	Hume	14,547	320	1,592	3,844	3,190	5,601	-	-	12,888	320	1,339	-	-	-
	Loddon-Mallee	17,664	-	4,588	3,507	3,521	5,962	86	-	11,355	-	6,223	86	-	-

	Northern Metro	33,935	32,180	1,755	-	-	-	-	-	1,755	32,180	-	-	-	-
	Southern Metro	48,752	47,895	588	-	99	169	-	-	836	47,915	-	-	-	1
	Western Metro	27,451	27,005	446	-	-	-	-	-	433	27,018	-	-	-	-
WA	Goldfields	913	-	-	266	-	9	353	285	-	-	275	353	285	-
	Great Southern	2,215	-	-	1,500	-	684	31	-	-	-	2,184	31	-	-
	Kimberley	425	-	-	-	-	-	136	289	-	-	-	136	289	-
	Metropolitan East (WA)	8,676	8,471	204	-	-	1	-	-	205	8,471	-	-	-	-
	Metropolitan North (WA)	13,068	12,904	164	-	-	-	-	-	164	12,904	-	-	-	-
	Metropolitan South East	10,562	10,446	97	-	-	19	-	-	115	10,447	-	-	-	-
	Metropolitan South West	14,593	14,076	397	-	-	119	-	1	516	14,076	-	1	-	-
	Mid West	1,496	-	-	906	-	215	200	175	-	-	1,121	200	175	-
	Pilbara	257	-	-	-	-	-	147	110	-	-	-	147	110	-
	South West (WA)	5,593	-	2,707	1,111	486	1,289	-	-	5,066	-	527	-	-	-
	Wheatbelt	2,161	-	2	-	306	1,548	296	9	791	-	1,065	298	7	-

Map by ACPRs:

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