

## **Capital & Coast District Health Board**

### **Request for Expression of Interest**

### **Self – Management Support**

**CAPITAL & COAST DISTRICT HEALTH BOARD**  
Planning & Funding Directorate  
Level 1, Lotteries Commission Bldg  
54-56 Cambridge Terrace  
Private Bag 7902  
Wellington  
Tel (04) 803 1112  
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## **How to use this document**

### **Process**

- 1. This REOI consists of:**
  - **Section A – Overview & REOI process**
  - **Section B – General Conditions**
  - **Section C – Evaluation Criteria**
  - **Appendices 1-4:**
    - Appendix 1 – Form of EOI & Checklist**
    - Appendix 2 – EOI Format & Information Required**
    - Appendix 3 – Contract Price Form**
    - Appendix 4 – Background Information**
- 2. You need to read and understand all sections.**
- 3. Please complete and return with your EOI, your acknowledgment of the requirements and conditions as set out on the EOI form in Appendix 1.**

## Section A – Overview & REOI Process

### Overview

#### **Purpose of Request for Expression of Interest**

The purpose of this request for expression of interest ('REOI') is to invite interested parties to register their interest, by way of an expression of interest ('EOI') in providing self management support approaches for long term conditions.

This REOI is issued by Capital & Coast District Health Board (C&CDHB).

#### **Background**

There is good evidence to show that people with long term conditions have better health outcomes if they feel understood, respected, empowered and able to share in the clinical decision making about their management. (NHC,2006)<sup>1</sup>. Successful long term condition management programmes focus on providing extra resources and activities that enhance patient self management and monitoring, empowering the patient to take a lead role in managing their health. (WHO,2002)<sup>2</sup>. This can have a profound effect on health outcome, and can significantly improve quality of life and satisfaction.

The aim of this initiative is to work with people in ways that promote the skills of self-management and the ability to adapt treatment to their condition by improving their knowledge, skills and confidence, enabling them to take increasing control of their own condition and integrate effective self-management into their daily lives.

### REOI Process

1. This REOI is not a tender document and will not form part of any subsequent tender.

#### **Outcomes**

2. Following evaluation of the EOIs received, C&CDHB may:
  - invite short listed participants to respond to a closed tender or request for proposal;
  - issue an open tender or request for proposal;
  - enter negotiations with preferred participants(s);
  - conclude the process without tendering or awarding any contracts;
  - for the purposes of any subsequent tender or negotiations amend the proposed contract structure, the description of services required or any other aspect of this REOI.

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<sup>1</sup> National Health Committee (NHC), (2006). National Advisory Committee on Health and Disability, Wellington.

<sup>2</sup> WHO (2002) 'Innovative Care for Chronic Conditions': Building Blocks for Action", ref no: WHO/MNC/02.01.

3. The anticipated timetable for this REOI is:

Date due	Activity
20 May 2008	Issue of REOI
1 July 2008	EOI submissions due
22 July 2008	Participants notified of decision
5 August 2008	Contract award (if any)
(as negotiated)	Services commence (if contracted)

4. Please note, this timetable is indicative only and may be subject to change at the sole discretion of C&CDHB. C&CDHB will notify participants of any changes by notification on the C&CDHB website.

Joint EOIs

5. Joint EOIs may be submitted. Where a joint EOI is submitted participants must provide full details of each party submitting the EOI and name one party as the single contact point for all communications relating to your EOI.

Submission of EOIs

6. EOIs must be enclosed in a sealed envelope and addressed to:

Bridget Macfarlane  
Re: EOI Self Management Approaches  
Long Term Conditions Management Framework  
Capital & Coast DHB  
Planning & Funding Directorate  
Level 1, Lotteries Commission Building  
54-56 Cambridge Terrace  
Private Bag 7902  
Wellington

7. EOIs must be received at C&CDHB's Planning & Funding Directorate by 4pm, Tuesday, 1 July 2008.
8. Please provide six (6) hard copies of your EOI. You only need to supply 1 copy of any additional material (eg brochures) not specifically requested by this REOI. Please note that only one copy of documents required by the REOI will be retained after the process. C&CDHB does not undertake to return any material supplied as part of this process.
9. EOIs forwarded by mail or courier should be forwarded in adequate time to ensure they are received before the close time in clause 7.
10. C&CDHB will take every care to place EOIs in the EOI collection box. However, C&CDHB will have no responsibility or liability for failure to do so before the closing date.
11. EOIs should not be forwarded by facsimile or electronic mail. EOIs sent by facsimile or electronic mail will not be accepted.
12. You should ensure that your EOI is delivered before the closing date and time. C&CDHB's policy is not to consider late EOIs. However, C&CDHB does retain the right to consider late EOIs where there is no material prejudice to other

participants.

#### Communication between C&CDHB and participants

- 13. All communications with C&CDHB concerning this REOI or requests for clarification or further information should be directed to Bridget Macfarlane ('the authorised representative'), who is authorised to represent C&CDHB in all matters regarding this REOI. Bridget Macfarlane can be contacted at: [bridget.macfarlane@ccdhb.org.nz](mailto:bridget.macfarlane@ccdhb.org.nz)**

#### Additional information and clarification

- 14. Any requests for additional information or for clarification of this EOI should be forwarded in writing to the authorised representative.**
- 15. C&CDHB will issue any clarification and/or change to this REOI by posting it on our website. All such notices will become part of this REOI.**
- 16. Requests for information or clarification that relate solely to a participant's EOI will be provided to the participant requesting the information or clarification only.**
- 17. C&CDHB will not be bound by any statement, written or verbal, made by any person other than the authorised representative. The authorised representative (or any other person specifically authorised by the authorised representative) is the only person authorised to make representations or explanations as to this REOI.**

#### Indicative pricing

- 18. Prices quoted should be exclusive of goods and services tax, and in New Zealand dollars.**

#### Information required in EOI

- 19. Appendix 2 of this document sets out the information required in your EOI. Please answer each question in this section. Please use this format in your response.**
- 20. Appendix 2 also contains the EOI form that must be completed, signed and returned along with your responses to the questions.**

**Please provide six (6) copies of your EOI. You may also provide further material in support of your EOI. Please list all further material in a covering letter.**

## **Section B - General Conditions**

### **Rights reserved by C&CDHB**

- 1. C&CDHB reserves the right to:**
  - vary this REOI. Any such variation once notified by way of written amendment notice, will become part of this REOI;
  - select participants based on their EOI and invite them to participate in a closed tender or request for proposal;
  - issue an open tender or request for proposal;
  - issue tenders with modified descriptions of service requirements, including innovations proposed to C&CDHB, through this REOI process;
  - deal separately with any of the divisible elements of any EOI, received through this REOI process, unless the relevant EOI specifically states that those elements must be taken collectively;
  - enter into discussions and/or negotiations with any one or more participants relating to matters dealt with in this REOI;
  - not to proceed to evaluation of EOI's;
  - reject all EOI's and not proceed to tender, request for proposal or negotiation;
  - limit or extend the list of potential respondents beyond those who respond to this REOI;
  - seek clarification of any aspect or information provided in an EOI and to seek further information from any party;
  - waive any irregularities or informalities in this REOI process;
  - amend the closing date for submission of EOIs or any other date referred to or implied in this REOI;
  - in whole or in part, to suspend or cancel this REOI process and/or the overall process;
  - Re-advertise the REOI.

**C&CDHB shall not be bound to give reasons for any action taken under this clause.**

### **Canvassing**

- 2. Any participant who directly or indirectly canvasses any director, councillor, officer, employee or advisor of C&CDHB other than the authorised representative, concerning any aspect of this REOI process may, in C&CDHB's discretion, be disqualified.**

### **No warranties or representations re information provided by C&CDHB**

- 3. C&CDHB makes no representations and gives no warranties other than as set out in this document.**

#### **Information complete and accurate**

- 4. All information provided by a participant in its EOI is warranted by the participant to be complete and accurate in all material respects. The participant also warrants to C&CDHB that the provision of information to C&CDHB, and the use of it by C&CDHB for the evaluation of EOIs and for the negotiation of any resulting contractual agreement, will not breach any third party intellectual property rights.**

#### **Conflict of Interest**

- 5. Any participant who (if an individual) is also an employee of C&CDHB or (if a company) has an employee of C&CDHB as a shareholder or officer, shall be disqualified from submitting a tender, other than an EOI on behalf of a C&CDHB's business unit.**

#### **Errors**

- 6. C&CDHB is under no obligation to check EOIs for errors. Acceptance of an EOI that contains errors will not invalidate any contract formed arising from this REOI process.**

#### **Verification and credit check by C&CDHB**

- 7. The participant confirms to C&CDHB, on its behalf and on behalf of each of the individual participant's personnel referred to in the EOI, that C&CDHB is authorised to:**
  - verify with any third person any information included in the EOI or disclosed to C&CDHB in connection with the EOI (whether that information relates to such personnel or otherwise);**
  - carry out a credit check on the participant or any such personnel.**
- 8. C&CDHB is not obliged to contact referees provided by participants and may seek further information on any issue from sources other than the referees provided. C&CDHB may also take into account knowledge of the participant it already has.**

#### **Confidentiality**

- 9. This REOI and all other information supplied by C&CDHB (or its advisers) in relation to this REOI is confidential and shall not be used other than for the purpose of preparing EOIs.**
- 10. All EOIs provided to C&CDHB shall be retained by C&CDHB and shall be treated as confidential by C&CDHB. However, C&CDHB is subject to the Official Information Act 1982. Information provided by participants may be required to be disclosed under that act.**

#### **EOI costs**

- 11. All costs incurred by the participant in connection with its EOI, including any costs relating to:**
  - ♣ preparation of the EOI;**
  - ♣ any communication or negotiation with C&CDHB;**
  - ♣ any presentations to C&CDHB or meetings or interviews with C&CDHB;**

**✦ any site inspections**

**are the sole responsibility of the participant.**

**Governing law**

- 12. This REOI is governed by New Zealand law. The New Zealand courts have non-exclusive jurisdiction as to all matters relating to this REOI.**

**Liability limitation**

- 13. C&CDHB and its agents or advisors will not be liable in contract or tort or in other way for any direct or indirect damage, loss or cost incurred by any participant or other person in respect of this REOI process.**

## Section C - Evaluation of expressions of interest

### Evaluation criteria

1. EOIs will be evaluated against C&CDHB's requirements as set out in this document.
2. Each EOI received will be evaluated as to its merits with respect to the following attributes and will be weighted in importance according to the table below:

Attribute	Weighting
Demonstrate ability to take an interdisciplinary approach to long term conditions	X4
Demonstrated ability to meet the needs of people across a wide range of long term conditions	X3
Experience with high health need populations such as Māori, Pacific peoples, refugees and new migrants	X3
Demonstrate ability to empower and prepare people to manage their health and health care using effective self management support strategies	X3
Experience / track record in undertaking similar work	X2
The ability to work effectively with groups/families/whanau	X2
Ability to demonstrate evaluation of the work undertaken	X2
Demonstrates an innovative approach	X1

### Evaluation process

3. Each EOI will be evaluated as to the capability of the participant/provider and strengths of the proposed service delivery model. The evaluation team assessing the EOIs consists of individuals who have external expertise available to assist in ensuring that an objective evaluation is achieved. The evaluation panel will include:-
  - At least two representatives from C&CDHB's Planning & Funding Directorate;
  - A person from outside the C&C DHB district with experience in Long Term Conditions Management.

### Clarification

4. During EOI evaluation, you may be contacted by the authorised representative in order to clarify any aspect of your EOI.

### Communication of decisions concerning this EOI

5. Participants will be notified in writing of the decisions resulting from this REOI.

### Short listing and negotiation

6. Where there is a decision to short list and proceed to negotiation directly from this REOI process:

- the successful participant(s) will be notified of their preferred status and the expected time frame for negotiations.

Other participants will be notified either that:

- their EOIs have been unsuccessful, or
- that they are short listed but not preferred. In this case, the participant will be asked to confirm that their EOI remains open for the period of negotiation with preferred participants.

Any failure to reach agreement between C&CDHB and preferred participants may result in a re-evaluation of other short listed participants. Contract negotiation may then commence with the participant selected from this re-evaluation.

#### Preferred Participant

7. If any participant is selected as preferred participant resulting from this REOI process then C&CDHB is not obliged to negotiate with you.
8. Should C&CDHB advise that you are the preferred participant, such advice does not:
  - constitute an acceptance by C&CDHB or create a contract or;
  - constitute an award of the contract to you or;
  - imply or create an obligation on C&CDHB to enter into negotiations with you or award the contract to you.
9. C&CDHB may discontinue negotiations at any time.

**Appendix 1**  
**Form of EOI & Checklist**

**To: Bridget Macfarlane**  
**Re: EOI Self Management Approaches**  
**Long Term Conditions Management Framework**  
**Capital & Coast DHB**  
**Planning & Funding Directorate**  
**Level 1, Lotteries Commission Building**  
**54-56 Cambridge Terrace**  
**Private Bag 7902**  
**Wellington**

**We attach our expression of interest ('EOI') for: Self-Management Support Approaches**

**The party(ies) submitting this EOI are:**

- **[List party or parties]**

**The primary contact person is:**

**Contact person:**

**Phone:**

**Mobile:**

**Postal:**

**Email:**

**Street address:**

**We attach:**

- **checklist**
- **all information required by the REOI.**

**We have read and understood this REOI.**

**Dated**

**Signed by**

**for and on behalf of the**  
**submitting party(ies)**

**NOTE: PLEASE COMPLETE THE CHECKLIST ON THE FOLLOWING PAGE**

## Checklist

Our proposal ..... (tick boxes to indicate 'yes')

Includes all required contractor information - see Appendix 2.

Includes all required pricing information (including the contract price form - see Appendix 3.

Proposer: \_\_\_\_\_

Dated: \_\_\_\_\_

Signature(s): \_\_\_\_\_ in position of \_\_\_\_\_

Witness(es): \_\_\_\_\_

## **Appendix 2 Proposal Format and Information Required**

This appendix broadly outlines the information required in your EOI.

Where a question is not relevant to your EOI then indicate 'N/A' or 'Not Applicable' against the question number in your EOI. If the question invites you to comment and you do not choose to, then you indicate 'No Comment' against the question number in your EOI.

Proposals should be structured and include the information as set out in this appendix.

### ***Part One – General***

- 1. Information about yourself***
- 2. Relevant skills and experience in undertaking research/evaluations***
- 3. Health sector knowledge and understanding of long term conditions management.***

### ***Introduction***

***The introduction to the proposal should state that you have read and understood all the terms and conditions contained in this EOI and that they have been complied with and will continue to be complied with.***

### ***Executive summary***

***This section should include:***

- a) an overview of your proposal for the provision of services required by this EOI***
- b) a summary of the major benefits which, in your opinion, C&C DHB would gain from accepting your proposal***
- c) an overview of your capability to carry out the works and of any subcontractors (if any) which you propose to engage in connection with the services.***
- d) Please state if any conflict of interest in service provision. If there is a potential conflict of interest, how this will be managed.***
- e) confirmation that your proposal covers all of the requirements of the general conditions of contract or otherwise expressly identifies those requirements which are not covered by your proposal.***

### ***Assumptions***

- f) Your proposal should set out clearly any assumptions you have made in respect of the requirements set out in this EOI.***

***Part Two - Corporate structure (as appropriate)***

***Information about your organisation, including legal status, infrastructure, location***

***Full details of:***

- 1. the street and postal address and a facsimile number for your main office***
- 2. your corporate structure (eg a partnership? a company?)***
- 3. if a company, full names of all major shareholders of the company, including any beneficial shareholders who are not the registered shareholders***
- 4. numbers of administrative and operational staff you employ.***
- 5. Information about organisation, including legal status, infrastructure, location***

***Part Three – Relevant Experience and linkages***

- 6. Any further comment***

***Part four– Resources, Subcontractors and Personnel***

- 7. Any further comment***

***Part five – Price***

- 8. Any additional comment***

***Part six – Insurance***

- 9. Any additional comment***

***Part seven – Health and Safety***

- 10. Any additional comment***

**Appendix 3  
Contract Price Form**

**C&CDHB**

**Proposal for:** \_\_\_\_\_

**We/I offer to provide the services in accordance with the REOI, our proposal and the Schedule of Prices for the sum of \_\_\_\_\_ (excl GST) or such amount as shall be determined in accordance with the Contract Documents.**

**Proposer:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Signature(s):** \_\_\_\_\_

\_\_\_\_\_

## Appendix Four Background Information

### Objectives

Working with people in ways that promotes the skills of self-management and the ability to adapt treatment to their condition by improving their knowledge, skills and confidence, enables them to take increasing control of their own condition and integrate effective self-management into their daily lives. This can have a profound effect on health outcome, and can significantly improve quality of life and satisfaction.

Our objectives in prevention of chronic disease link with all these plans and others in the DHB. To achieve common goals across these plans requires a collaborative approach to:

- promote and support evidence based interventions to reduce disparity and impact of chronic conditions across the spectrum
- target those likely to benefit from the intervention
- promote protective measures, behaviour change and environments
- reduce risk factors and modify behaviour associated with chronic conditions
- increase awareness and understanding of chronic conditions
- improve quality and effectiveness of the management of long term conditions
- increase capacity of communities

### Health Outcomes

There is good evidence to show that people with long term conditions have better health outcomes if they feel understood, respected, empowered and able to share in the clinical decision making about their management. (NHC,2006). Successful long term condition management programmes focus on providing extra resources and activities that enhance patient self management and monitoring, empowering the patient to take a lead role in managing their health. (WHO,2002).

### Capital and Coast District Health Board (C&C DHB) Strategies

Self-Management supports fits under the Long Term conditions Management Framework, supports the C&C DHB high level outcomes to: 'Reduce Disparities in Health Status' and 'Reduce the Incidence and Impact of Chronic Disease' which is designed to inform direction and work of the C&C DHB and its partners in health to prevent and better manage chronic conditions.

<b>Our Vision</b>	<b>Better health and independence for people, families and communities.</b>		
<b>Our High Level Outcomes (Health Goals)</b>	<b>Reduced disparities in health status</b>		<b>Reduced incidence and impact of chronic conditions</b>
<b>Our Strategies</b>	Focusing on people through integrated care	Supporting and promoting healthy lifestyles	Working with our communities
	Developing our workforce	Updating our hospitals	Managing our money
<b>Our Mission</b>	<b>Together, improve the health and independence of the people of the District</b>		
<b>Our Values</b>	Focusing on people and patients	Innovation	Living the Treaty
	Professionalism	Action	Excellence

#### **Reduced disparities in health status**

Reduce illness and disease among high health need populations such as Māori, Pacific peoples, refugees and new migrants, so there is less difference in the health of people across the district.

There are many initiatives in place specifically aimed at reducing inequalities. Many of these involve partnerships with particular communities, a mix of primary care, whanau ora, Pacific models, public health and community development approaches (HNA, 2003)<sup>3</sup>.

#### **Reduced incidence and impact of chronic conditions**

Reduce the number of people who develop an on-going illness or disease and when an illness or disease does develop, reduce the impact on people's lives to maximise opportunities for independence and maintain or improve their quality of life, particularly for high health need populations. We want to improve our ability to enhance the capabilities of individuals and their families/whanau by promoting self-management. It is across these areas that C&C DHB aspires to be more systematic and effective. The framework and action plans will assist in this by supporting a common set of expectations and systematic, collective action to achieve common goals.

The LTC Framework recognises important related strategic and operational plans that contribute to progress in this area, including Te Plan II, Promoting participation, the Pacific Health Action Plan, HEHA plan, Cancer Control Strategy and Palliative Care planning, proposed Youth Health and Child Health Action Plans, Health of Older People Strategy, Intersectoral Strategy, The Journey Forward and others.

Our C&C DHB Health Needs Assessment (HNA, 2003), has identified several population groups within the Capital and Coast district that have particular health needs. These populations include Maori, Pacific, and people from areas of high deprivation, older people and children (with some sub-groups requiring high use of health services), people with disabilities, refugees, and those with serious mental health conditions. In general, these sub-populations develop chronic conditions many years earlier than the general population have a lower life expectancy, higher morbidity and mortality rates. The incidence of chronic disease often clusters in low income families and communities as contributing personal and environmental risk factors tend to be linked and cumulative.

#### **Model of Care**

There are many theoretical frameworks that describe the components required to provide effective care for people with chronic conditions.

One such model, 'The Chronic Care Model' (Wagner, 1998)<sup>4</sup> is well known and has been adapted by C&C DHB for the LTC Management Framework. (See the diagram below).

One of the components of this model is self-management support in effect, empower and prepare patients to manage their health and health care using effective self management support strategies that include assessment, goal setting, action planning, problem solving, and follow up.

Based on this model self management support may include:

- Resources, access to information

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<sup>3</sup> C&C DHB Health Needs Assessment (2003)

[http://www.ccdhb.org.nz/Aboutus/reports/HNA\\_2004.pdf](http://www.ccdhb.org.nz/Aboutus/reports/HNA_2004.pdf)

<sup>4</sup> Wagner, E.H (1998). Chronic disease management: what will it take to improve care for chronic illness? *Effective Clinical Practise* 1998; 1: 2-4.

- Early advice to prevent long term conditions and to reduce complications and progress in those with LTCs
- Consumer friendly information sources and support –for individuals, families, different populations
- Support for consumer groups, peer-led support for different communities
- Community information re early symptoms and signs of chronic disease
- Resources in appropriate formats and languages
- Face to face support
- Whanau models of care
- Culturally competent workforce training in support for self /whanau management

**C&C DHB CCM Model (Adapted from Wagner's CCM Model, 1998)**

