



肺塵埃沉着病補償基金委員會
Pneumoconiosis Compensation Fund Board

45th週年
Anniversary

Health Assessment and Case Management Care Services

Comprehensive Community Rehabilitation Programme (CCR)

Tender Invitation – Briefing Session (23 April 2025)

Outline



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Pneumoconiosis Compensation Fund Board



According to the Pneumoconiosis and Mesothelioma (Compensation) Ordinance (PMCO), PCFB has the following functions:

- **To administer the fund;**
- **To make recommendations to the Government with respect to the rate of levy;**
- **To conduct and finance educational, publicity, research and other programmes to prevent pneumoconiosis and mesothelioma and to conduct and finance programmes for the rehabilitation of persons suffering from the above diseases;**
- **To administer funds received from the Government and designated by the Government as ex gratia payments to persons diagnosed before 1 January 1981 to be suffering from pneumoconiosis; and**
- **To perform such other duties as are imposed on it by this Ordinance.**

[Section 26(1), Cap 360, Pneumoconiosis and Mesothelioma (Compensation) Ordinance]

Introduction of CCR



- The Comprehensive Community Rehabilitation (CCR) Programme has been launched since September 2016, serving Pneumoconiosis and Mesothelioma patients in Hong Kong.
- **PCFB cordially invites tenderers to submit tenders for the provision of Health Assessment and Case Management Care Services to support above CCR Programme.**
- The service period will be effective from **September 2025** to September 2028 in a **3-year fixed term**.



Roles of the Service Providers

- 1. To set up a center for health assessment**
- 2. To form a Community Rehabilitation Team (CRT) for patients,**
 - a) To perform assessments and design tailor-made care plan
 - b) To recommend prescription of exercise, rehabilitation aids, medial appliances and pain management related to the pneumoconiosis and/or mesothelioma
 - c) To set exercise targets
 - d) To provide assistance during assessment and make appropriate referrals if necessary
 - e) To keep proper patient records with security measures to minimise the risk of data leakage
 - f) To provide a summary report in Chinese and English within 6 weeks after each assessment
 - g) To allow data transfer in a required format to PCFB or designated agents within one month after the service agreement expires or at the requests made by PCFB
 - h) To submit reports to PCFB through its specified channels, in the required format, and at regular intervals as requested
 - i) To attend evaluation meetings upon request (maximum 2 times per year)



Service Hours

- A **minimum of three half-day** sessions per week
- Guarantee a minimum number of time slots offered for patients entering different phases
- All bookings are by appointment
- Cannot cancel any sessions for unapproved reasons
- PCFB will not guarantee a minimum number of bookings per phase



Mandatory disciplines in the CRT

1) Doctor

- Mandatory qualification: Fellow in either **rehabilitation or respiratory medicine**
- Favourable attributes: Experience in **pulmonary rehabilitation, respiratory medicine or elderly care**

2) Nurse

- Mandatory qualification: A registered nurse with at least **3 years** of post-registration experience
- Favourable attributes:
 - Experience in rehabilitation, respiratory medicine, or elderly care
 - Experience in performing nursing assessment
 - Experience in serving as coordinator/case manager in a multi-disciplinary team
 - Familiar with chronic disease self-management

3) PT

- Mandatory qualification: A registered PT registered with the Physiotherapist Board with at **least 3 years** of post-registration experience
- Favourable attributes:
 - Experience in pulmonary rehabilitation or elderly care
 - Experience in working in a multi-disciplinary environment



Roles of PCFB

- To provide **full financial support** to the programme
- To **recruit suitable patients**
- To **assign case managers** for working closely with the CRT
- To launch publicity campaigns and provide advice to the SP if necessary
- To commission training centers with PT supervision for our patients to maintain regular exercising

Assessment packages

Phase 1: Preparatory Phase



1. Medical history
 2. General physical examination with vital sign measurement
 3. Resting pulse rate
 4. Vision screening
 5. Hearing screening
 6. MMRC Dyspnea Scale
 7. One-Foot Stand Balance Test
 8. 6-min Walk Test
 9. Grip Strength Test
 10. Barthel Index 100
 11. Activities of Daily Living Scale (Chinese Lawton)
 12. Abbreviated Mental Test
 13. Chinese version (MMSE-C) with Montreal Cognitive Assessment – Hong Kong version (HK-MoCA)
 14. Patient Health Questionnaire – 9
 15. Malnutrition screening
 16. Short Form Health Survey (SF-36)
 17. Chest X-ray
 18. Lung Function Test (Spirometry)
 19. Treadmill/Ergometry Test*
 20. Electrocardiogram
 21. Blood test on Complete Blood Picture, Renal and Liver Function Test, lipid pattern and spot sugar
 22. Body muscle and water proportion
 23. Body Fat Proportion and Muscle Mass Proportion
 24. Exhaled carbon monoxide test
- * Treadmill Test can be replaced by Ergometry Test if the patient's condition is unfit for this examination.

The tenderers may add or delete above items but should provide justifications



1. Medical records between the present and last assessment and vital sign measurement
2. Resting pulse rate
3. Blood test on lipid pattern and spot sugar
4. Body muscle and water proportion
5. Body Fat Proportion and Muscle Mass Proportion
6. 6-min Walk Test
7. Grip Strength Test
8. One-Foot Stand Balance Test
9. Short form health survey (SF-36)
10. Exhaled carbon monoxide test

The tenderers may add or delete above items but should provide justifications



Additional services

- **Not compulsory** but will be considered and accepted by PCFB
- Can be offered free of charge or at extra cost (stated clearly in the proposal)
- E.g. **Smoking cessation counselling and referral** by a registered nurse who has completed smoking cessation counselling training and at least 1 year of relevant work experience



Requirements of Technical Proposal

1. Not more than **40 pages** and at least 12 font size
2. Supplementary materials will be excluded from the total page count
3. 1-2 pages of **executive summary** for the proposal
4. An **introduction** about the Tenderer and its experience in related services
5. Contact information of its authorized representative
6. CVs of personnel limited to 2 pages each in the CRT (if available)
7. Proposed **programme details** in each phase
 - Proposed assessment packages in different phases
 - Detailed descriptions of the whole programme
 - A detailed flowchart showing workflows in each
 - Proposed job duties of all CRT personnel
 - Proposed subcontracting items and agents (if applicable)
 - Data record and protection measures
 - Quality assurance measures
 - Specifications of assessment items and tools
 - Suggested report formats to patient
 - Details of value-added services and additional fee (if applicable)



Requirements of Price Proposal

Tenderers should submit an **ALL INCLUSIVE** Package cost for 4 phases below separately.

Phase 1A: Health assessment tests

Phase 1B:

- Individual care plan meeting with patients
- Prescription of exercise/rehabilitation aids/medical appliances/pain management related to pneumoconiosis and/or mesothelioma

Phase 2 and Phase 3: 1 encounter after patient completes 12 training sessions in 3 or 6 months

- Health assessment tests
- Individual care plan meeting with patients
- Prescription of exercise/rehabilitation aids/medical appliances/pain management related to pneumoconiosis and/or mesothelioma

The all-inclusive package cost should cover all fixed and variable costs **under special circumstances** (E.g. Oxygen provision during assessment or emergency care)



Marking Scheme

Markings for Technical Proposal	Maximum score	Guidelines
Experience of organisations in providing related services	2	Years of experience
Qualification and experience of CRT staff involved in the programme	25	Mandatory qualifications must be fulfilled Doctor: 10 Nurse and PT: 7.5 each
Relevancy and comprehensiveness of the assessment packages (All stages)	13	
The details or specifics of the proposal	15	Including all information required with adequate explanation and elaboration
A reliable data record and protection system	15	<ul style="list-style-type: none"> • Data record policy • Training record • Internal/External Audit record (with supporting documents)
A reliable quality assurance scheme	15	<ul style="list-style-type: none"> • A reliable quality assurance scheme • Internal audit available and frequency • External audit available and frequency
Number and location of the rehabilitation clinic(s)	15	Number of clinics Convenience One-stop service
Total	100	
Passing mark	50	If the total score is below 50, the tender will be disqualified.

Grand Total = Technical score (70%) + Price score (30%)

If the total technical score is below 50 out of 100, the tender will be disqualified.



Requirements for Tender Submission

A. Technical Proposal

- **5 copies** of the Technical Proposal with all documents and information required should be submitted together **with one softcopy** (in Microsoft Word format saved in a compact disc/USB device)
- Placed and sealed **in one envelope**, which should be marked “Tender Submission: CCR Technical Proposal”

B. Price Proposal

- **5 copies** of the Price Proposal
- Placed and sealed **in another envelope** marked “Tender Submission: CCR Price Proposal”
- Complete the **price proposal form** (All-inclusive price and **optional** value-added service price) in Appendix V

Encounter Type	All-inclusive Unit Price (HK\$)
Phase 1 first encounter (1A)	
Phase 1 second encounter (1B)	
Phase II encounter	
Phase III encounter	
Total	(Total sum of all the above prices) HK\$

Technical Proposal and Price Proposal **should be submitted in separate envelopes.**
Don't put them together.



Tender Closing Date

- All Tenders must be addressed to **Mr. Ricky Law, Secretary General**
- Deposit in the **PCFB Tender Box** before **12:00 noon on 8 May 2025**
- Late tenders will NOT be considered
- Tenders submitted by post, e-mail or facsimile will NOT be considered

PCFB will notify successful tenderer(s) latest in **August 2025**

Patient Information



Age and Degree of Incapacity (DOI) Distributions among Patients as of 31 January 2025

Age distribution

Age	
Below 50	4
50-59	20
60-69	436
70-79	664
80 & above	247
Total	1 371

Degree of Incapacity (DOI)

DOI	
5-20%	1 087
25-40%	180
45-60%	63
65-80%	24
85-100%	17
Total	1 371



Compliance with Law

- PDPO (Section 6.2)
- Prevention of Bribery Ordinance Requirement (Section 10.3)
- Anti-collusion (Section 10.5)
- Anti-Competitive Conduct (Section 10.6)
- Safeguarding National Security in Hong Kong (Section 10.7)

Enquires



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Thanks