



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

Invitation for Tender
for the Provision of Social Support Services
targeted for
Pneumoconiosis/Mesothelioma patients
and/or Carers

Trophy Mak
12 July 2019

Introduction



The Pneumoconiosis Compensation Fund Board is a statutory body established in 1980 under the former Pneumoconiosis (Compensation) Ordinance [now known as the Pneumoconiosis and Mesothelioma (Compensation) Ordinance]



Statutory functions of Pneumoconiosis Compensation Fund Board (PCFB)



- According to the Pneumoconiosis & Mesothelioma (Compensation) Ordinance, PCFB should have 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.

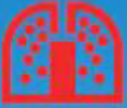
[Section 26, Cap 360, Pneumoconiosis and Mesothelioma (Compensation) Ordinance]

Background



- As at 31 December 2018, there are around 1,460 pneumoconiosis and mesothelioma patients registered in PCFB.
- PCFB upholds the following beliefs for provision of high quality rehabilitation service to the service targets:
 - Varied programme settings and contents should be worked out so that a variety of programmes could be tailored for service targets with different needs.
 - Individualised rehabilitation care is one of the best approaches to provide holistic health care to the patients.
 - The scope of rehabilitation services should be “all-rounded” covering bio-psycho-socio-spiritual aspects of the service targets.
 - While patients should always be focus of attention, the informal family carers also play an important role in the caring process of the patients.

Current programme



- Community-based rehabilitation exercise training arranged by PCFB in cooperation with individual rehabilitation exercise centres and a separate assessment team.
- Home-based rehabilitation exercise training.
- Home-based social support programme for patients.
- Community-based social supported programmes for patients.
- Other training and social activities as funded by PCFB through the rehabilitation sponsorship scheme.

New services required (for this Tender)



- Targets:
Pneumoconiosis/Mesothelioma patients and/or **carers of the patients.**
- Main objective:
 - No matter the programme is targeted for patients or carers, the main objective should be for providing rehabilitation service and assistance to patients, facilitating their integration into society.
 - By improving the caring skill of patients' family members/carers, it will lessen their burden and in turn improve the quality of lives of service users, including patients, their family members and/or carers.
- Programme setting:
 - Home-based/community-based, depending on the nature of the programmes and the needs of the targets

Home-based social support services (for patients and /or carers)



Targets

- Patients with frail conditions and being home-bound.
- Patients' health or other conditions restrict them to join any rehabilitation programmes arranged in the community.
- Patients with frequent hospital admissions (3 times or more in the previous year)
- Patients being identified to have emotional/psychological/social/family/other problems that would affect their life quality.
- Patients' carers being identified to have emotional/psychological/social/family/ other problem that would eventually affect patients' quality of life.
- The service could be offered to patient alone/patient and carer together/patient and carer separately. However, in whatever cases the outcome should be aiming at improving the rehabilitation and quality of life of the patients.

Home-based social support services (for patients and /or carers)



Inclusion criteria

- To be worked out by the Tenders and be included in the technical proposal
- To be finalised by PCFB

Home-based social support services (for patients and /or carers) Estimated target numbers



- About 60-100# home-bound/institutionalised pneumoconiosis and mesothelioma patients.
- About 60 patients with frequent hospital admissions (3 times or more in the previous year).
- About 100 carers possibly being identified to have social/psychological problems that would eventually affect patients' quality of care.
- The above numbers have been worked out based on past records of various programmes and those cases grouped in (a)-(c) might be overlapping.
- The Tenderer could either propose serving all patients or only cover patients living in selected districts. Such information should be clearly specified in the Technical Proposal.
- In any case, PCFB would not guarantee a minimum number of cases to be referred to any Tenderer(s).



- In case more than one Tenderers being awarded for the Tender, PCFB would assign to each Tenderer district(s) that she would be responsible for. In this case, PCFB's decision would be final and Tenderers need to follow the case allocations strictly.

Home-based social support services (for patients and /or carers)



Objectives

- To obtain data of service users' social rehabilitation needs and identify any social barriers.
- To provide social support services to service users in a home setting so as to promote social well-being.
- To solve or at least ease the social/psychological problems faced by service users so as to assist in meeting patients' rehabilitation needs with a view to improving their quality of life.
- To assist carers to care for patients efficiently, resolve their stresses and emotional distress while enhancing their psychological and mental health. Eventually, family resilience is strengthened through resolution of family crises.



- To help home-bound patients re-integrate with the society and to promote participation and networking in society.
- To assist service users applying for various compensation items, for example medical appliances from PCFB.
- To provide resources of other social welfare schemes and make proper referral so as to assist the service users obtaining the related service in need.

Home-based social support services (for patients and /or carers)



Service descriptions

- All cases should meet the inclusion criteria mutually agreed by the Service Provider (SP) and PCFB otherwise individual approval should be obtained from PCFB.
- Case Management approach – each service user will be treated as an individual case and an individual case file should be opened for each case and care plan has to be set and implemented throughout the service. The SP would be responsible for closely monitoring the progress of the service user and keep proper record in the case file.



- Assessment – the SP should adopt a set of required tools for assessing the service users' conditions in the 1st visit and then at a regular interval to check the progress and any improvements.

Examples of tools include HADs; APGAR. OADS (Social Resource Scale), *Rasch*-Type Loneliness Scale (Long Version), Functional Impairment Checklist and any assessment tools proposed by the service providers whichever are valid.

The SP would need to suggest her own set of assessment tools to be used and provide clear justifications. In case license fees are required for the above tools, the SP should be responsible to obtain the license. However, the final set of tools to be used must be mutually agreed by PCFB and the SP after the Tender(s) is/are being awarded.



Intervention

- deliver social support services such as counselling;
- help reinforce the skills taught by other disciplines e.g. rehabilitation exercises and/or any other skills that can promote physical and social well-beings;
- help solve personal problems such as poor family relationship and emotional stress;
- induce and encourage positive thinking; provide spiritual support if applicable;
- empower carers to take better care of the patients; make proper referral and provide relevant assistance.



Intervention

- As the service will be conducted in an outreach approach, caring visits are the main service delivery mode. The total number of visits per case per year (12 months) is set at 17 in general
- each visit should last for at least 60 minutes (in order to charge the service fee. Additional visits may be required according to service users' needs as suggested by service provider, whereas number of visits may not be fully achieved due to occasional refusal by the service users due to various personal reasons.



Intervention

- While the home visits could be targeted to serve patients alone, patients and carers as a single unit or the carers alone, the home visit must be terminated after the patient passes away. In this case, a maximum of 1 home visit session is allowed for rounding up the service after the patient passes away.
- Caring Calls can be used as a supplementary service whenever necessary so as to keep close contact with the service users.
- The SP is required to keep close communication with the Case Manager of PCFB and/or other service providers, for example staff from hospitals for providing a 'all-rounded' service to the service users. In this case, staff of SP has to attend case conference whenever necessary. A maximum of 12 case conferences could be called by PCFB during a year.

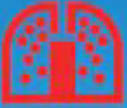
Home-based social support services (for patients and /or carers)



Requirement of designated staff

- For all home-visits, they must be conducted by a registered social worker.
- He/she must have at least 8 years of post-registration social work experience.
- Worker with a higher degree, for example, master degree in counselling or in other relevant disciplines would be considered as an advantage.
- One designated staff should be assigned to each case and all home visits for a same case should be conducted by this assigned staff as far as possible.

Home-based social support services (for patients and /or carers)



Patients' record

- The SP should establish a separate system (hard copies and/or electronic files) with proper back-up and security control to store all patients' record
- PCFB should be the data owner of the above information.
- The SP should agree to send the whole set of records to PCFB after the termination of the service contract. Transfer of such data should be completed within 2 months after the termination of contract.

Community-based social support services (for carers)



Targets

- Primary carers of patients who spend most of their time daily taking care of the patients.
- Carers who have physical/emotional/psychological problems that would affect the caring quality of the patients.
- Carers who have relationship problems with patients and/or other family members that would affect the caring quality of the patients.
- Carers with no or insufficient caring knowledge or skills to take care of the patients.

Community-based social support services (for carers)



Inclusion criteria

- Based on the above targets the Tenderer(s) should design assessment tools for recruiting suitable carers to receive the programme. The assessment criteria should eventually be agreed by PCFB and the SP(s) after the tender being awarded.
- Carer not having received the service during the last calendar year should have priority to join the programme.
- Carer must quit any programme within 14 days after the caring patient passes away.

Community-based social support services (for carers)



Estimated target numbers

- About 200 - 300 carers. These figures are just rough estimation worked out based on past experience.
- The Tenderer(s) could either propose organising activities to cover all districts in Hong Kong or only cover selected districts. Such information should be clearly specified in the Technical Proposal.
- In case more than one Tenderers being awarded for the Tender, PCFB would assign to each Tenderer district(s) that she would be responsible for. In this case, PCFB's decision would be final and Tenderers need to follow district allocations strictly.

Community-based social support services (for carers) Objectives



- To help carers understand the caring needs of patients.
- To help carers understand the caring burden they have to face so that they could be better prepared for that.
- To release the pressure of carers so as to bring them a good psychological health.
- To enhance the caring skills of carers so as to improve the care quality.
- To help carers establish/maintain a good and stable relationship with the patients.
- Other objectives as proposed by the Tenderer.

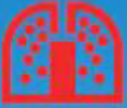
Community-based social support services (for carers)



Service descriptions

- The community services could either be arranged as a one-off activity or a series of activities with fixed number of sessions. The Tenderer should specify this and give details in the proposal.
- No matter the activity is arranged as one-off or in a series, a clear theme should be developed for each programme.
- The minimum length of each session should be 60 minutes but the actual length could be varied according to the contents of the programme. However, whatever length the programme will be, at least 20% of time should be reserved for carers' exchange.

Community-based social support services (for carers)



Service descriptions

- Interactive activities are considered more desirable than one-way lecture.
- Activity with professional input, for example a workshop designed by a university or other professional body would be considered as an advantage.
- A minimum attendance of 10 carers (in case of a one-off activity) or an average attendance of 10 (in case of a series of activities) is required for charging PCFB a full session fee, otherwise PCFB reserves the right to deduct the session fee in pro-rata.

Community-based social support services (for carers)



Service descriptions

- Assessment – the SP should develop and adopt a set of assessment tools for each activity. Such tools should be specified with justifications in the Technical proposal. However, the final set of tools to be used must be mutually agreed by PCFB and the SP after the Tender is being awarded.
- In order to have a fair evaluation, a session fee should be quoted in the Price Proposal (to be elaborated at later part).

Community-based social support services (for carers)



Requirement of designated staff

- All activities should be conducted by designed staff who meets the following basic requirement.
 - For areas related to social work, the programme must be conducted by a registered social worker with at least 8 years of post-registration social work experience.
 - For areas related to other disciplines, the one conduct the activity should be one with relevant qualification and 4 years or more work experience.
- The staff employed to hold the activity could either be a full-time staff employed by the Tenderer or a part-time staff employed for a single activity. Whichever the case, the salary or fee of this staff should be included in the single session fee as quoted above.
- For other clerical and coordination tasks, they could be performed by other staff employed by SP and the fee should be included in the single session fee as quoted above.

Quality Assurance



- A quality assurance system should be designed and implemented so as to ensure high quality of service offered to our clients. Details should be included in the proposal, and the comprehensiveness, feasibility and reliability of the monitoring shall be part of the technical marking criteria.
- A strong supervisory and/or advisory arm could be part of a quality assurance system.

Budget



- The Tenderer should work out a budget for the whole project period (3 years) based on the followings:
 - Unit cost per home-visit (at least 60 minutes)
 - Unit cost (per session cost) of each community programme
- The unit cost should be a lump-sum figure inclusive of all service provided the above.
- PCFB would only pay for those cases that have received the full services, and not for those cases who only receive part of the service (eg a home visit only lasts for 30 minutes and the patient refuses to continue)
- All prices quoted should be valid during the whole service period. No price increase will be allowed during the period.

Technical proposal

General requirement



- The Technical Proposal should include the following information:
 - A one or two page executive summary for the proposal;
 - An introduction about the Tenderer and its experience or supervisory experience on related services;
 - Name and CV of key personnel (operation and supervisory) going to be in-charge and operations of this project limited to a maximum of 2-page each);
 - Area(s) chosen to be served (whole Hong Kong or specified areas)
 - Number of maximum service capacity (for each item) that the Tender could provide in one year;

Technical proposal

Specific requirement

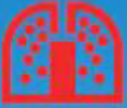


- Proposed programme details, including but not limited to the followings:
 - Objectives of the programmes;
 - Proposed assessment package(s) to be used and justifications;
 - Proposed contents of the different service items;
 - Data record and protection measures;
 - Quality assurance measures; and
 - Others information as considered applicable.
 - Appendices to be included (optional)
 - Specifications/copy of other assessment tools, for example questionnaire

Compliance with the Personal Data Privacy Ordinance (PDPO)

- For inclusion of any personal data in the technical proposal, for example the CVs of the responsible physician, the Tenderers must ensure that the concerned personnel have explicitly given consents allowing transfer of the personal data from the Tenderer to PCFB.
- PCFB will not hold any responsibility of breaching PDPO during the Tender process

Price Proposal



- Tenderers should submit an all-inclusive package cost for the different items
 - Unit cost per home-visit (at least 60 minutes)
 - Unit cost (per session cost) of each community programme
 - The quotation should be made valid during the whole contract period
- Cost breakdown could be provided for reference (not compulsory)

Requirements for Tender Submission



- The Technical Proposal with all documents and information required should be submitted in TRIPLICATE together with one softcopy (in Microsoft Word format saved in a compact disc). These should be placed and sealed in one envelope. The envelop should be marked “Tender Submission: **Social Support Services - Technical**”; and



- The Price Proposal in TRIPLICATE should be placed and sealed in another envelope marked “Tender Submission: **Social Support Services - Price**”.
- In the event of any discrepancy between the soft copy and the hard copy of any tender submission, unless the PCFB wishes to seek clarification, the hard copy will prevail.

Requirements for Tender Submission



- All Tenders must be addressed to Mr. Ricky Law, Secretary General and deposited in the PCFB Secretariat Tender Box situated on 15/F, Nam Wo Hong Building, 148 Wing Lok Street, Sheung Wan, Hong Kong before

the Tender Closing Date
12:00 noon on 05 August 2019

Late tenders will NOT be considered. Tenders submitted by post, e-mail or facsimile will also NOT be considered.

Assessment



- A weighting of 70%: 30% will be assigned to the Technical Proposal and Price Proposal.
- For the evaluation of the technical proposal, the following criteria would be considered:
 - Background/track record of the Tenderer and the designated staff
 - Quality of the programmes
 - Relevancy of assessment tools being chosen
 - Others (eg quality control system, data privacy protection system etc.)

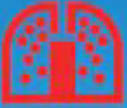
Other conditions



- **Other conditions**

- PCFB does not bind herself to accept the lowest price Tender or any Tender, and reserves the right to negotiate with any Tenderer about the terms of the offer.
- PCFB reserves the right to reject any or all of the Tenders.
- PCFB will not disclose the fee or any information to a third party.
- PCFB's decision will be final. All information related to the selection such as scores and comments will be treated confidentially.
- PCFB reserves the right to grant similar contracts to more than one SPs at the same period of time. (Not necessarily at the same price)

Enquiries



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Enquiries



THANK YOU