

Expression of Interest

Workers Compensation Provider Directory
Due Date: 10AM 1 st of November 2023

Contact details

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Table of Contents

Expression of Interest	1
Disclaimer	2
1. EOI Conditions	3
1.1 Objective	3
1.2 Purpose	4
1.3 Questions	4
1.4 Confidentiality	4
1.5 Lodgement	4
2. Statement of Requirements	5
2.1 Scope of Services	5
2.2 Activities and Deliverables	7
2.3 Evaluation Criteria	7
2.3.1 Compliance Criteria	7
3. Returnable Response Schedule	8
3.1 Introduction	8
3.2 Attachment - PART A	8
3.3 Statutory Declaration	9

Disclaimer

This Expression of Interest does not create any representation, either express or implied, that a:

- (a) tender or procurement process is guaranteed to proceed; or
- (b) tender or procurement process does proceed, that the participant's tender or other form of application (if any) will be given any preference or special consideration.

Respondents are still required to follow any tender or procurement process that may take place. The agency may follow with a selective tender process post evaluation of the Expression of Interest.

This Expression of Interest does not indicate a commitment to any course of action.

icare will evaluate EOI's in accordance with:

- (c) the framework established under this EOI.
- (d) the laws relating to procurement; and
- (e) policies and procedures relating to procurement adopted by the Agency from time to time.

Subject to the EOI Conditions, only the information and materials submitted with the EOI will be considered in the evaluation.

icare will evaluate EOIs using the evaluation methodology described below:

- (f) EOIs are checked for completeness and compliance. EOIs may be excluded from evaluation if they do not contain all information requested or are otherwise incomplete in any way (for example, an incomplete EOI Response).
- (g) EOIs are evaluated using the Evaluation Criteria.

The Agency may:

- (h) decline to accept any EOI; or
- (i) accept the EOI which, having regard to all the circumstances appears to be the most advantageous.

1. EOI Conditions

1.1 Objective

icare is seeking Expression of Interests from suppliers who can provide the following services:

1. Traffic Management Plans
2. Work Health & Safety Management Systems (WHSMS) and WHS Risk Management
 1. WHSMS Audits
 2. Risk Assessments
 3. WHSMS system development
3. Occupational Hygiene - Managing WHS risks associated with the work environment (and not limited to):
 - a) Asbestos
 - b) Silicosis
 - c) Noise
 - d) Lighting
 - e) Water quality
4. High Risk Work Licence - Dogging and rigging /cranes and reach stacker / hoist / scaffolding / forklift / pressure equipment
5. High Risk Work - Managing WHS risks associated with the work environment (and not limited to):
 - a) Electrical safety
 - b) Hazardous chemicals
 - c) Dangerous goods transport and storage
6. Heavy Vehicle Driver Safety
7. Hazardous Manual Tasks Injury Prevention
8. Health & Safety Representative (HSR) training
9. Contractor Management
10. WHS Due Diligence Training
11. Emergency Management

1.2 Purpose

This Expression of Interest (EOI) is being conducted to gather information for the purpose of creating a Safe and Healthy Workplaces Provider Directory ('Directory').

The directory will be placed on the icare website.

Who will be using the Directory?

icare customers, particularly small and medium sized employers, from high-risk industries i.e. construction, health and community services, manufacturing, transport and storage.

icare is committed to working with our customers to design and implement safe and healthy workplaces that reduce the risk of injury and promote wellbeing. The Directory will make it easy and accessible for our customers to identify and connect with providers in the areas of work health and safety and promote proactive workplace injury prevention activities.

1.3 Questions

Questions regarding this EOI can be submitted by e-mail to the contact officer's email address or on the forum. Verbal questions will not be accepted. All questions will be answered by posting addenda to this EOI via the NSW Department of Finance, Services and Innovation's tenders website at: <https://tenders.nsw.gov.au/>

1.4 Confidentiality

icare Procurement will treat all responses as commercial-in-confidence.

1.5 Lodgement

Responses to this EOI must be submitted electronically by **10AM 1st of November 2023** to the electronic tender box for this EOI via the NSW Department of Finance, Services and Innovation's tenders website at: <https://tenders.nsw.gov.au/> (Login in as a system user, locate the web page for this EOI, and follow the on screen instructions to lodge the response). The lodgement can only be made by a registered system user of the NSW Government eTendering system.

2. Statement of Requirements

2.1 Scope of Services

Core Services	Description	Minimum qualifications, and / or competencies
Traffic Management Plans	<p>Conduct risk assessments.</p> <p>Design and implement traffic management plans.</p>	<p>1. RIIWHS302E Implement traffic management plan; and</p> <p>2. Certificate IV BSB41419; and</p> <p>3. Traffic Control Work Training Card issued by Safework NSW.</p>
<p>Work Health & Safety Management Systems (WHSMS) and WHS Risk Management</p> <p>1. WHSMS Audits 2. Risk Assessments 3. WHSMS system development</p>	<p>1. Conduct WHSMS audits.</p> <p>2. Conduct risk assessments.</p> <p>3. Provide advice on developing and implementing WHSMS systems and procedures.</p>	<p>1. WHSMS audits: Equivalent to 'Lead auditor in ISO 45001:2018'.</p> <p>2. Risk Assessments: Certificate IV in Work Health and Safety BSB41419</p> <p>3. WHSMS system development: Equivalent to 'Implementing an ISO 45001: 2018 OHS Management System'.</p>
<p>Occupational Hygiene Managing WHS risks associated with the work environment (and not limited to): asbestos / silicosis / noise / lighting / water quality</p>	<p>Conduct risk assessments and testing.</p> <p>Establish and conduct occupational hygiene hazard monitoring programs.</p> <p>Provide advice on risk control measures.</p>	<p>Minimum: Graduate Certificate in Occupational Hygiene</p> <p>Desired: Bachelor or Master of Occupational Hygiene</p>
<p>High Risk Work Licence Dogging and rigging /cranes and reach stacker / hoist / scaffolding / forklift / pressure equipment</p>	<p>Provide training and assessment services associated with high-risk work licences.</p>	<p>A high-risk work licence achieved through a SafeWork NSW accredited assessor, who is accredited in the high-risk work class relevant to the applicant.</p>

High Risk Work Managing WHS risks associated with the work environment (and not limited to): Electrical safety / hazardous chemicals / dangerous goods transport and storage	Provide training and advice on managing high risk work.	Accreditation achieved through a Registered Training Organisation (RTO) accredited in high-risk work
Heavy Vehicle Driver Safety	<p>1. Provide fatigue management training to heavy vehicle drivers.</p> <p>2. Provide fatigue management training to transport schedulers and managers on how to identify and manage fatigue risks.</p>	<p>Qualifications through an RTO that is accredited with NHVAS*:</p> <p>1. General staff, drivers, operators: 'TLIF0005 - Apply a fatigue risk management system';</p> <p>and</p> <p>2. Senior managers: 'TLIF0006 - Administer a fatigue risk management system'.</p> <p>* NHVAS = National Heavy Vehicle Accreditation Scheme</p>
Hazardous Manual Tasks Injury Prevention	<p>Identify hazardous manual tasks.</p> <p>Conduct risk assessments.</p> <p>Provide advice on risk control measures.</p>	<p>Minimum: Allied health degrees (e.g. Physiotherapy, Occupational Therapy)</p> <p>Desired: Master of Ergonomics</p>
Health & Safety Representative (HSR) training	<p>Conduct approved HSR training</p> <p>Training to help health and safety representatives to understand and fulfill their role and functions in a business.</p>	SafeWork NSW accredited provider for HSR training
Contractor Management	Provide advice to employers when conducting business with, or as a contractor.	BSBWHS418 'Assist with managing WHS compliance of contractors '

WHS Due Diligence Training	Develop and conduct WHS Due Diligence training.	Certificate IV in Work Health and Safety BSB41419; and Certificate IV in Training and Assessment TAE40122
Emergency Management	Develop emergency management plans. Support the testing and assessment of emergency management plans.	NCEMS* Emergency Management Training or equivalent * NCEMS National Centre Emergency Management Studies

2.2 Activities and Deliverables

As per table 2.2.1

2.3 Evaluation Criteria

This Expression of Interest (EOI) is an information gathering process in which icare Procurement seeks to collect information and opinions from various suppliers. This EOI and the responses provided may be used a precursor to a procurement process.

2.3.1 Compliance Criteria

Description of Compliance Criteria	
(a) Compliance with the Specification contained in this Invitation.	Yes / No
(b) Compliance with the Conditions of Expression of Interest in this Invitation.	Yes / No
(e) Compliance with the Deadline.	Yes / No
(f) Compliance with providing icare with data regarding referrals from the icare website and conversion to actual work.	Yes / No
(g) Compliance with all necessary Insurances, Licences and Registrations	Yes / No

3. Returnable Response Schedule

3.1 Introduction

The information provided by the Respondent in response to this section will be used for the assessment of the EOI.

1. Respondents must complete the attached excel file named **PART A - Returnable Schedule** and with that attach the documentation which shows the qualifications/ competencies for the category you are interested in providing services.
2. All responses should be concise and directly address the information requested.
3. All information relevant to your answers to each criterion are to be contained within your Expression of Interest.
4. Respondents are to assume that the evaluation panel has no previous knowledge of your organisation, its activities or experience.
5. Additional material may be provided in attachments. When providing multiple attachments, please include an index listing all attachments and clearly label all attachments and cross-reference to the response, including corresponding numbering. For electronic files, please name files in sequential order (e.g., Attachment 1 – Key Staff CVs, Attachment 2 – Example Reports) for easy identification.
6. References to “you” in this Part means the Respondent and all responses given will be taken to be responses of the Respondent.
7. References to “Services” in this Part means the services as described in the Statement of Requirements at Part 2.

3.2 Attachment - PART A

See attached excel file.

3.3 Statutory Declaration

The Respondent shall complete the following: -

I			(Full Name)
			(Position)
Of			(Company's Name and Address)
ABN		ACN	

do solemnly and sincerely declare, in respect of this Expression of Interest for

.....

....., that: -

I am duly authorised by		(The Proponent)
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to submit this offer and make this declaration on the Proponent's behalf.

1 Prior to the submission of the Proponent's proposal, neither the Proponent nor any servant, agent or contractor of the Proponent who has been involved in the formulation of the Proponent's proposal had any knowledge of the terms of:

(a) any other potential EOI response by another person or corporation; or

(b) any other actual EOI response by another person or corporation.

2 Prior to the submission of the Proponent's proposal, neither the Proponent nor any servant, agent or contractor of the Proponent who has been involved in the formulation of the Proponent's response disclosed to any other person or corporation the terms of the Proponent's proposal.

3 The Proponent's proposal has been submitted in good faith.

4 In formulating the Proponent's proposal the Proponent and any servant, agent or contractor of the Proponent who has been involved in the formulation of the Proponent's proposal has consulted with potential agents and sub-contractors on a confidential basis.

5 Neither the Proponent nor any servant, agent or contractor of the Proponent who has been involved in the formulation of the Proponent's response has entered into any contract, arrangement or understanding with another person or corporation (*third party*) who has also submitted EOI response that involves making monetary payment to the third party or providing the third party with a non-monetary benefit of any kind if the EOI response submitted by the third party is unsuccessful.

6 The Proponent nor any servant, agent or contractor of the Proponent who has been involved in the formulation of the Proponent's response has a conflict of interest or a criminal conviction or both that has not been disclosed in the EOI response.

And I make this solemn declaration conscientiously believing the same to be true and by virtue of the provisions of the Oaths Act, 1900.

Signature of Authorised Person		Date

I **Name of authorised witness**

A **Qualification to be authorised witness**

certify the following matters concerning the making of this statutory declaration by the person who made it:

*Please cross out any text that does not apply

1. * I saw the face of the person or *I did not see the face of the person because the person was wearing a face covering, but I am satisfied that the person had a special justification for not removing the covering.

2. * I have known the person for at least 12 months or * I have not known the person for at least 12 months, but I have confirmed the person's identity using an identification document and the document I relied on was:

..... **Describe identification document relied on**

..... **Signature of authorised witness**

..... **Date**

iCare NSW

Address: Level 15, 321 Kent Street, Sydney NSW 2000

Phone: 13 44 22

