



INVITATION TO TENDER

FOR

**THE PROVISION OF ADULT RESPITE SERVICES for
Dublin and North East Regional Health Area:**
Integrated Health Area Dublin North County and Integrated
Health Area Dublin North City and West
(IHA DNC and IHA DNCW)

HSE PROJECT 28072

**This document should be read in conjunction with all
other tender documentation**

Tender Title	Tender for Provision of Adult Respite Service for Integrated Health Area Dublin North County and Integrated Health Area Dublin North City and West (IHA DNC and IHA DNCW)
HSE Ref	HSE 28072
Tender Description	The Health Services Executive, Integrated Health Area Dublin North County and Integrated Health Area Dublin North City and West Disability Services invite tender responses from suitably qualified providers for provision and operation of a registered residential respite service. The service is required to be conveniently located for IHA DNC or IHA DNCW and must provide a 5-bed house, which will meet HIQA standards and will be registered within 4 months of contract agreement. The service is required to operate 7 nights per week and will support adults aged 18 and upwards who have complex needs arising from a disability within the IHA DNC/IHA DNCW areas. The registered respite service must provide for complex care including intensive behaviour support needs at all times and medical care needs at periodic intervals, which will be informed by service demands in IHA DNC / IHA DNCW. The maximum available annual budget for this project is €1,400,000. Tenders exceeding this amount will not be considered for further evaluation. The property should ideally be located within one of the following areas: • Within IHA DNC, IHA DNCW – i.e. north of River Liffey <u>and</u> within county Dublin or • In Louth or Meath - within 20 kilometres of the border with IHA DNC and IHA DNCW or • South of river Liffey – within 2 km of IHA DNCW While the locations outlined above are preferred, properties situated outside these areas will still be considered. Properties located within the preferred areas will receive the highest scores, while those outside these areas will be assessed with proportionately lower scores, reflecting their relative geographic suitability and accessibility for service delivery. This tender process is being conducted under Annex XIV of Procurement directives 2014/24/EU. The required services are listed as Annex XIV services, and accordingly, only Articles 74 to 77 of Directive 2014/24/EC applies to the award of any contract(s) that arise from this process.



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	The Tenderer Statement, the Tender Response and Costing documents are required to be completed and returned with your submission. <u>Please also ensure that you complete and submit the ESPD.</u> Tenderers are advised that they may be required to attend clarification meetings at short notice during or following the closing date for the receipt of submissions. Note: Service Providers are requested to only submit a tender if they are confident that they are in possession of a compliant property and have the requisite capacity, suitably qualified staff, experience and expertise within their organisation to deliver on the service as outlined in the project documentation, commencing as soon as practicable after award of contract. The successful tenderer will be required to sign a service contract with the HSE.
Contract Duration	3 years (36 months), with an option to extend for a further 2 years (12 + 12 months)
CPV Code/Description	85100000 – Health Services 85144000 – Residential Health Facilities Services 85323000-9 - Community health services 85320000-8 - Social services 98000000-3 - Other community, social and personal services
Completed tenders must be returned to:	Via the e-tenders post box facility on the etenders website, www.etenders.gov.ie
Closing Date	14 th of August 2026 @15:00
Queries Deadline	31 st of July 2026 @15:00
Site Visits / Tender	In order to fully evaluate and consider the tender bid, the HSE evaluation group may choose to perform a site visit, request a presentation of the bid or request a clarification meeting. If required, these requests will be communicated with the tenderer to arrange for a suitable date and time. Please note that the site visit plays a significant role in the evaluation process, whereby the Procurement Evaluation Group can validate the information submitted in relation to the property.



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HSE Tender Contact

The HSE tender contact is Justyna Tulidzinska; all correspondence must be via the message facility on the etenders website, www.etenders.gov.ie.

Tender Submission Instructions – eTenders post-box facility

1. For guidance on ePost-box facilities go to [electronic tender management system quick guide](#)
2. Post-box facility is time locked. Receipt of submissions is not possible after the official closing deadline.
3. Avoid last minute problems by rehearsing tender submission process well in advance of deadline.
4. Tender submissions will not be accepted in hard copy or by electronic means other than www.etenders.gov.ie
5. A tender will not be deemed formally accepted until all required documents have been uploaded and the submission has been officially lodged within the required deadline.
6. Incomplete tenders, or tenders that do not include all mandatory documentation (including missing files or empty folders), will be deemed non-compliant. HSE Procurement reserves the right to exclude such tenders from further evaluation.
7. Tenders received after the submission will not be accepted or considered for evaluation. It is the sole responsibility of the tenderer to ensure that submissions are lodged in full prior to the deadline.

Note:

- It is imperative that **all questions** in the Tender Response Document and the Costing Matrix are completed in the format provided as this Tender Response section will be used as the basis for evaluation of selection and award.
- If you have any queries or problems completing this document, please raise them using the etenders messaging facility.
- For general information on HSE refer to www.hse.ie
- Defined terms used in this Invitation to Tender include defined terms contained in the Tender Competition Rules available at www.hse.ie. This Invitation to Tender should be read in conjunction with the Tender Competition Rules.
- Please note that any single document should not exceed 5MB in memory

1) SPECIFICATION OF REQUIREMENT

1.1. Background

HSE Disability Services focus on enabling people with disabilities to achieve their full potential, living ordinary lives in ordinary places, as independently as possible while ensuring that the voices of service users and their families are heard, and that they are fully involved in planning and improving services to meet their needs. A priority is to provide further respite care and support to adult service users with disabilities and their families.

An important part of the development of quality respite services included the commencement of regulation in 2013 under the Health Act 2007, (Statutory Instruments 366 and 367). Government, through the Department of Health (DoH) and The Department of Children, Disability and Equality (DCDE), working through the HSE and with the support of the Health Information and Quality Authority (HIQA) as the regulator, are committed to ensuring all residential services, (including residential respite), are delivered consistent with the requirements as set out in the regulations and in the associated HIQA Standards.

Prior to your submission, please read and review the attached link, as it provides valuable background information.

<https://www.hiqa.ie/areas-we-work/disability-services>

The following are the principles that should be considered:

- That respite services be person-centred and family-centred;
- That respite services be provided on a rights basis;
- That respite be defined as a support service and regarded among a system of support services;
- That there is a single point of access to respite care services in a given administrative area.
- That respite services be designed in consultation with families in acknowledgement of their expertise in providing care;
- That respite services be age-appropriate and developed as the service user develops;
- That respite care services have clear goals and that systematic and regular reviews ensure achievement of those goals.

1.2. Requirement

IHA DNC and IHA DNCW Disability Services are seeking a single provider to work in partnership with the HSE to deliver, from a single location, a respite service for adults aged 18 years and upwards with complex needs arising from a disability. Adult respite service users may present with a range of difficulties including intellectual disability, physical & sensory disability, autism, medical needs and behaviours that challenge. The service will also support adults with a disability who have additional complex medical needs.

The service should be underpinned by an inclusive Person-Centred Planning approach, based on a model of positive behaviour support, in alignment with HIQA Residential Standards for Adults and Children with Disabilities, Health Act 2007, if applicable. At all times, the service should incorporate the service user, their family or advocate and all other relevant professionals contributing to the overall care and support being provided to the service user.

1.3. Service user profile

Service users will present with complex needs arising from a disability. ***The service users may or may not have a confirmed diagnosis.*** The service users referred to the service will in the main also be linked with Day Opportunity Services.

Detailed below is a sample of the profile of service users who may present to the respite house.

	Description	No of service users identified	Day Staff Requirement	24 Hour Support	Target service provision based on need
Profile 1	Service users with complex challenging behaviour requiring access to apartment	10	1:1 (Day)	Yes	2-4 nights/month
Profile 2	Service users with intellectual disability and autism +/- visual impairment/ hearing impairment	37	1:1 Day	Yes	2 nights/month
Profile 3	Service users with physical disability including Wheelchair Users	10	1:1	Yes	2 nights/month
Profile 4	Service users with nursing care needs including PEG/ epilepsy/ medication	5	1:1	Yes	2 nights/month

1.4. Scope of Service:

- The HSE is seeking commencement of the service in Q4 2026. The service is required to operate 24/7/363 (closed for Christmas Eve and Christmas Day).
- The allocation per service user is generally 2 nights/month.
- Accommodation for a maximum of 5 service users at any one time (depending on service user needs).
- The service provider will have responsibility for management and governance of the service in line with the policies and procedures of their organisation and those of the HSE.



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- The service provider will be expected to provide a safe and appropriate service to individuals with varying degrees of disability including those with complex care and/or behavioural needs.
- The adults using this service will have high support needs with varying degrees of disability. The service provided will have to meet the needs of all adults referred to the service.
- Due to the nature of adult services and on-going referrals, the service needs will change. The service provider will have to be flexible, creative and adaptable to the developing profiles of the adults and changing needs within the service.
- The required capacity will vary depending on need and user profile.
- Day provision required for holiday periods, all day Saturday & all day Sunday, on Bank Holidays and where the adult does not have a Day Service.
- Transition day visits prior to overnight stay if required.

Note: The service must operate at minimum of 90% capacity at all times and the proposal must demonstrate how this will be achieved through appropriate environmental and staffing supports and it will be the responsibility of the provider to manage occupancy levels and submit monthly reports as required by HSE, in a timely manner. The HSE Respite Coordinator will assure that the service provider will have sufficient number of referrals for the service. The HSE Respite Coordinator will meet with the provider on a monthly basis to review occupancy/ to discuss progress on service users, assessments and waitlist. The service provider must assess the service user and ensure service is rostered for each adult so that there is full occupancy of the house. Where the service provider is notified of a cancellation, they must offer this night to another suitable service user.

In submitting a tender response, providers are confirming there is no impediment within their Constitution to them supporting all adults that may be referred to this service (the service is needs based and not reliant on diagnosis, all adults who are eligible for support from HSE funded disability services may access to this respite service).

The provision of the service will also include:

- Carry out compatibility assessments, to include admissions assessments, transition visits, detailed needs assessments and risk assessment specific to residential respite.
- Provision of transport for Day Services, appointments and social activities and social outings.
- Working alongside IHA DNC / IHA DNCW Disability Services in relation to referrals, scheduling of breaks, prioritisation as directed by IHA DNC / IHA DNCW Disability Services. Please note that the HSE will determine referrals and priority but will work in collaboration regarding operational service matters.



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- The provider must comply with and submit agreed Key Performance Indicators (KPIs) which may change as time progresses.
- Aligning to existing HSE referral, admission and discharge pathways for adult respite in IHA DNC / IHA DNCW.
- Provision of respite assessment of need and support planning process to include compatibility of persons accessing the service.
- Develop Person Centred Plans and Care Plans for each adult accessing the service.
- Provider must demonstrate capacity to provide multi-disciplinary assessments, including behavioural assessments to support provision of respite where required.
- Support and provide regular contact with carers/ significant others and professionals as required.
- Facilitate access (including transport) to community supports including:
 - Medical care in an emergency situation.
 - Day Services.
 - Social events, sports, health and leisure activities based on assessment of need and choice.
- Ensure accurate assessment based record keeping.
- Ensure all policies outlined in Schedule 5 of the Health Act 2007, Regulations 2013 are in place and regularly reviewed.
- Deliver a highly flexible approach to rostering of respite in order to respond to the identified individual needs of the adults presenting to the service.
- Be responsive to emergency needs as identified by the Commissioner - HSE Disability Services – including but not limited to flexibility to provide assessments at short notice/ provision urgent respite / re-prioritising caseload and managing cancellations.
- Comply with all relevant legislation, HSE policies and procedures and potential new Policies or regulations which are in place now or that will be enacted over the course of the contract and possible extensions.
- Comply with all relevant national legislation, Children First, Safeguarding, Health Information Quality Authority (HIQA) Regulations and Standards and others. The Children First Declaration included in Appendix 6 must be signed and returned with your tender submission to confirm your commitment to safeguarding children and ensuring full compliance with national child protection.

- Provide all staff data to the HSE on an anonymised basis at the conclusion of the contract, on request.

1.5. Property

- The Service Provider must be in a position to stand up this service requirement including having possession of the property within the specified timeline of this tender.
- The service provider is required to provide a 5 bed, (up to 5 service users at any one time), HIQA registered respite centre with 2 of the bedrooms to be wheelchair accessible and 1 single occupancy apartment adjoining the house (this may be one of the wheelchair accessible rooms).
- If the property is a two-storey house, the apartment should be on the ground floor. It requires separate access, a sitting room, en-suite bathroom and a bedroom. It requires access to a private outdoor garden area.
- The wheelchair accessible bedrooms must be on the ground floor. The bedroom must be configured to allow emergency evacuation.
- There must be access to a wheelchair accessible shower/ toilet for the individuals using the wheelchair accessible bedrooms.
- There must be access to a toilet on the ground floor for use by service users/ staff and visitors.
- In addition to the apartment and wheelchair accessible rooms, there must be 2 further bedrooms, with a minimum of one toilet and one disability accessible shower rooms, for client usage. If these are combined toilet/ shower rooms, a minimum of one additional toilet is required to be available.
- If the property is a two-storey house, a second evacuation route must be available from second floor. This needs to be safe for a person with a disability to use and meet with necessary fire regulations.
- Each bedroom needs to have adequate space for, and include a minimum of, a bed, clothes storage and a desk plus bedside table. All bedrooms must have a window. Windows need to be able to be fitted with restrictors if required. (*if two-storey house, all upstairs windows must have restrictors fitted)
- Accessible entrance and evacuation route for a wheelchair/ people with physical disabilities on ground floor. Wide enough corridor/ hallway and door entrances for electric wheelchair.
- Minimum of one kitchen area and dining area, and minimum 2 living room areas for service users. Service provider is required to include all required appliances and furniture for these rooms as part of their tender. All common areas must be wheelchair accessible.
- The house must have sensory areas and play spaces – indoors and outdoors.



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- The apartment must be sound-proofed.
- The house must be decorated in a manner that will appeal to adult service users.
- The house must be presented in a manner that is warm, clean, homely.
- Safe, fenced, gated yard, at least partially wheelchair accessible garden, with no direct access to a main road, river, livestock, or any other major hazard including, but not limited, to electric boxes, wells, major cliffs etc.
- Allocated space for fire assembly point as per fire regulations.
- Central heating system, with minimum of double-glazed windows.
- Access to emergency generator.
- Water and waste management systems in place as per all relevant national regulations.
- Access to WIFI network and mobile phone network.
- Space for office including secure filing space and medication storage.
- Separate utility space for laundry and cleaning supplies, provision of all appliances to be included in cost.
- Parking available for minimum of four vehicles, including a minimum of a 7-seater van, at any time.
- Entrance and access space for emergency vehicles.
- Property must meet all HIQA requirements and other relevant national standards such as, but not limited to, HSA and fire regulations for residential centres for people with disabilities.
- The service provider will be required to ensure the property is maintained to an appropriate standard. All modifications and upkeep required will be the responsibility of the service provider. The residence cannot have mould, water damage or any environmental hazards.
- The property must be available for the full duration of the tender and the possible extension period as specified in the tender document. The provider is required to demonstrate that they have ownership/lease permitting service delivery for duration of the contract.
- The proposed property will be for the exclusive use of this service.

- The building(s) shall be in compliance with all relevant current national and international standards including the current Building Regulations, the Building Control (amendment) Regulations SI 09 of 2014, current relevant healthcare design standards, HSE Technical guidance documents, best national and international practice including HBNs, HTMs, and other relevant standards. All project construction work shall comply with procedures as set out in the Code of Practice for inspecting and certifying building works, or subsequent versions of these documents current at the time the design or building work is undertaken.

Also, tenderers are required to note that the contracted service provider will be responsible for the provision of the following:

- All fixture, fittings, furniture, soft furnishings, and the maintenance thereof as required,
- Appliances and the maintenance/ replacement thereof,
- Utility bills – electricity, gas, heating, waste collection, all relevant insurances, IT and communications,
- Fire extinguishers, blankets and pest control.

IHA DNC and IHA DNCW Disability Services have stated a preference for any service provider who has suitable accommodation, available capacity and HIQA registration at the time of tender submission but are aware this may not be possible. If relevant, tenderers are required to include a detailed, time-lined action plan in their response outlining how seamless commencement of service provision will be achieved. Please note that the HSE is seeking commencement of the service as soon as practicable post tender award, in Q4 2026, and preference will be given in scoring to proposals that can meet this timeline.

The service must be registered as a designated centre under the Health Act and the service provider must ensure the registration is maintained and renewed as set out in the Regulations (S.I. No. 367/2013 - Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013) and subject to any amendments by law.

Property must be registered (HIQA registration ready no later than December 2026) as a residential respite service for adults with disabilities by the Health Information and Quality Authority and as such it is recognized as meeting the requirements of the regulations as it pertains to the physical premises.

The following minimum specification applies.

The property should ideally be located within one of the following areas:

- Within IHA DNC, IHA DNCW – i.e. north of River Liffey and within county Dublin or
- In Louth or Meath - within 20 kilometres of the border with IHA DNC and IHA DNCW or
- South of river Liffey – within 2 km of IHA DNCW

While the locations outlined above are preferred, properties situated outside these areas will still be considered. Properties located within the preferred areas will receive the highest scores, while those outside these areas will be assessed with proportionately lower scores, reflecting their relative geographic suitability and accessibility for service delivery.

1.5.1. Life Safety Systems (Mandatory)

- L1 Fire Alarm (IS 3218:2013 compliant),
- Emergency Lighting (IS 3217:2013+A1:2017 compliant),
- Fire Cert, DAC, fire doors, evacuation plans,
- Fire extinguishers, fire drills, emergency assembly point,
- Emergency backup generator. (Optional)

1.5.2. Medication Storage

- Lockable, tamper-proof medicine cabinet or safe. Located in staff-only area. Supports refrigerated meds with temperature logs as required in medication management policy.

1.5.3. Environmental & Facilities

- Complies with Building Regulations (Parts B, M, F, L),
- Accessible for emergency vehicles.

All costs associated with the provision of the property must be included in the Accommodation Cost section of the Costing Matrix.

Please note that some members of the Evaluation Group may require to take part in a site visit to your proposed property. If this is required, communication will be issued to arrange a suitable date for the visit.

The property must be made available to the Procurement Evaluation Group post tender in order that they can assure themselves of its suitability based on the minimum requirements outlined above.

1.6. Staff requirement as detailed in sample rota:

- **Day**
Healthcare assistant x3: 8am-8pm
Social Care Worker x1: 8am-8pm
Nurse x1: 8am-8pm
- **Night**
Healthcare assistant x2: 8pm-8am (Waking Night)
- **Support Roles**
Person In Charge (CNM2 or Social Care): 35hr in-person working week, aligned to service needs.
Behaviour Support: 35hr in-person working week, aligned to service needs.
- The Service Provider must have a 24-hour support/reporting structure including nursing and management on-call when PIC off duty/ through PPIM or existing governance structure.
- The service will be expected to have an identified Person in Charge to oversee and complete the assessment process, as well as the operation of the respite service. This will require protected time to address and complete risk assessments, mentoring, documentation, daily notes etc. The PIC must meet the requirements as outlined in the Regulations (SI 367). The PIC may be either Social

Care leader grade (SCL) or Clinical Nurse Manager (CNM2). The PIC needs to satisfy relevant HIQA requirements regarding training and experience. The PIC post will be a Whole Time Equivalent (WTE) post.

- Person in Charge – Nurse or Social Care Lead
Nurse PIC: Required to be CNM2 level with 3 years' experience of working with adults in a disability setting and have completed HIQA approved leadership and management course. Required to be registered with NMBI.
Or
Social Care Lead PIC: Required to have 3 years social care experience in working with adults in a disability setting and have completed HIQA approved leadership and management course. Required to be registered with CORU.
- The service will be expected to provide a range of suitably qualified staffing supports including Health Care Assistant, Social Care Workers and/or Nursing Staff as appropriate based on client's needs.
- The staff mix will be based on service user's needs identified in profiles. Staff nurse support will be required for service users with more complex need and medical needs.
- Nurses are required to be registered with NMBI.
- All staff must be suitably qualified, garda vetted and meet the requirement as set out in the Regulations (SI 367).
- Healthcare Assistants required to have a minimum of Fetec Level 5 with Intellectual Disability module.
- Social Care Workers are required to have a minimum of a Social Care degree and be registered with CORU.
- All staff are required to complete and update all HSE mandatory training prior to commencement of service.
- The service provider will have to ensure the adequate skilled staff available to work during high demand times, e.g. school holidays, Christmas and weekends. These periods have been identified as the times families require additional support.
- Service provider to provide reassurances of staff qualifications and mandatory training.
- Deputy Manager/Team Lead are required to have a minimum of a Social Care degree and be registered with CORU and have experience of working with adults with disabilities.

- The service provider is required to ensure there are adequate skilled staff available to work in line with implementation timelines identified in this document.

1.7. Service provider will be responsible for the provision of:

- All policies outlined in schedule 5 of the regulations are in place and actively reviewed.
- Mission Statement and Statement of purpose.
- Health & Safety statement.
- Risk Management structures.
- Accessible transport.
- Medication management.

1.8. Training

Providers are required to confirm that, at a minimum, staff will have received the following training, including, but not limited to:

- GDPR
- Children First
- Safeguarding Vulnerable Adults
- Consent
- Trust in Care
- Covid 19 / Infection Control
- Health and Safety
- Positive behaviour Support or similar
- Manual Handling
- First Aid
- Safe Administration of Medication
- Epilepsy training, fire training, autism awareness, HIQA human rights module HSEland, CPR

Certificates to be available to the HSE on request

2. GUIDANCE FOR TENDER RESPONSES:

This tender is seeking a service provider that will best fit with the approach of the HSE in the provision of this service. Your understanding of this should be evident from your responses. A demonstration of the capability of your organisation to deliver the required services, in terms of governance structure is required, together with relevant detailed examples of where you have delivered this type of service previously.

Evidence and understanding around HSE policy as relevant to the Disability Services is required and should be reflected in your responses. Evidence of appropriate engagement with stakeholders including client, families, regulator and funder should be included. Evidence of delivery on key performance indicators, while maintaining person-centred services, should be reflected in your answers.

In addition, the HSE is seeking details on how your proposal will deliver a quality, client centred service which is flexible in response to changing demand. The HSE requires that the start-up of the new service

be as seamless as possible. Your responses should at all times reflect the current needs of the population and should include relevant examples of your experience to illustrate and demonstrate your capacity and expertise in relation to the requirement.

Tenders must provide costs based on the number of clients and the level of support required as outlined in this and accompanying documents. Should there be requirement for additional capacity over the course of the contract, the HSE will negotiate the additional cost on the basis of the breakdown of the tendered cost for this requirement.

3. GENERAL REQUIREMENTS

3.1. Confidentiality & Data Protection:

The contracted service provider will be obliged to manage and process any information which they acquire from the HSE in accordance with the Data Protection Act 1988, The Data Protection (Amendment) Act 2003 and Directive 2002/58/EC of the European Parliament and of the Council and the General Data Protection Regulation (EU) 2016/679 which became directly applicable on 25th May 2018. The contracted service provider will further be obliged to manage and process any information which they acquire from the HSE in accordance with any data protection legislation as and when enacted in Ireland throughout the course of this contract.

The HSE shall use only processors providing sufficient guarantees to implement appropriate technical and organisational measures in such a manner that processing will meet the requirements of this Regulation and ensure the protection of the rights of the data subject including, but not limited to, the following:

- Completion of the Supplier Confidentiality Agreement (copy attached).
- Not engaging another processor without prior specific or general written authorisation of the HSE.
- Assisting the HSE in complying with various obligations of the GDPR. These obligations may include assisting with and/or notifying the Data Protection Commissioner and/or a data subject of a data breach.
- Assistance with carrying out data protection impact assessments, as well as assisting the HSE to fulfil its obligation to respond to requests from the data subjects for their personal information.
- Holding of adequate indemnity where liability and fines for data breaches and other GDPR obligations may be the subject of insurance coverage.
- Assurance of the security of the data including its movement and where data is hosted.
- Delete or return all the personal data to the HSE, at the termination of contract and delete any existing copies of the personal data held (unless otherwise required by law)

The successful service provider will be required to demonstrate it has satisfactory policies and procedures in relation to maintaining data protection and security of information. Furthermore, the successful service provider will be required to confirm that they have a Data Protection Officer in place.

In the course of providing the service, the service provider, on behalf of the HSE, will have access to highly confidential information pertaining to personal data of patients and clients of the HSE. The Service Provider's staff and agents will have access to this highly sensitive information and may also have access to and/or hear information concerning the medical or personal affairs of HSE clients and/or staff or other HSE business. Such records and information are strictly confidential, and divulgence or discussion of such information by the staff of the service provider is strictly prohibited and is likely to result in immediate

termination of the Contract. All staff of the service provider to be engaged in the provision of services under this contract will be required to sign a confidentiality declaration.

The service provider is to ensure that it complies in full with all relevant and applicable legislation. This applies to all legislation over the course of the contract.

3.2. Covid 19 & infection control guidelines:

The service provider is required to be fully compliant with COVID Public Health Guidance and COVID19 Return to Work Safely document. Service providers are required to have developed policy in relation to carrying out assessments in compliance with HSE Infection Control Guidelines.

3.3. Joint applications

Where two or more parties are making a joint application, this should be outlined in detail as to which inputs are expected from each, as well as being very clear who takes overall clinical responsibility for the provision of the service.

3.4. Staff Vetting and Training

The Service Provider will also be required to demonstrate it has satisfactory staff training and vetting, procedures in place and in operation in order to meet requirements of HSE, to include but not limited to Garda Vetting.

All staff need to be Garda Vetted as per national legislation. The National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016 provide a statutory basis for the vetting of persons carrying out relevant work with children or vulnerable persons. The Act also creates offences and penalties for persons who fail to comply with its provisions. All staff involved in the provision of this service are required to have valid Garda and International Police Vetting on file and revised every 3 years minimum or as indicated.

3.5. Payment

Payment schedule will be in line with normal HSE payments. The HSE is committed to meeting supplier payments in an efficient and timely manner in keeping with the HSE's Prompt Payment of Interest Policy.

4. PROCUREMENT PROCESS – OPEN PROCEDURE ANNEX XIV

Tenderers are advised to read all the tender documentation and appendices provided with this tender in order to inform their tender response.

4.1. List of Documentation & Appendices

- HSE 28072 Invitation to Tender (this document)
- HSE 28072 Sample rota
- HSE 28072 Tender Response Document
- HSE 28072 Costing Matrix, including the core roster
- Appendix 1 Commercial Declaration (must be signed and included with tender submission)

- Appendix 2 Statement of Compliance (must be signed and included with tender submission)
- Appendix 3 Acknowledgement and Confirmation of Communication Protocol (must be signed and included with tender submission)
- Appendix 4 Certificate of Bona Fide Tender (must be signed and included with tender submission)
- Appendix 5 Supplier / Candidate Declaration (must be signed and included with tender submission)
- Appendix 6 Children First Act Declaration
- Attachment 1 Tender Competition Rules
- Attachment 2 HSE Service Provider Confidentiality Agreement
- Attachment 3 Data Processing Agreement
- Attachment 4 Service Arrangements
- Attachment 5 HSE Standard Terms for Services and Supplies
- Attachment 6 ESPD Guidance

The HSE's aim in this tender process is to secure a suitable service provider for the provision of the defined services outlined for the service users as per the service user profile document.

The specification is designed to provide potential tenderers with clarity about the nature and quality of services the HSE seeks to procure. Should a procured provider fail to have all necessary registrations in place, or to otherwise meet any of the specification requirements at any time, the HSE reserves the right to cancel any contract signed with/without notice as it deems necessary.

Tenderers should read the tender structure below, and evaluation methodology fully before completing the tender response documents, i.e. the **Tender Response Document and the Costing Matrix including Core Roster**.

4.2. Tender structure

It is intended to conduct this competition through the following stages:

- The HSE will issue tender documentation and provide any clarifications required during the clarification period stipulated.
- Receive tender submissions before the stated closing date and time. No tenders received after the closing date will be considered.
- The HSE reserves the right to meet as appropriate any tenderers with a view to clarifying any outstanding issues in relation to their submission proposals. This would be at the sole discretion of the HSE with the purpose of seeking additional information or clarification in relation to that submission.
- Conduct site visits, if required.
- The HSE reserves the right to meet with any/all/none of the tenderers.
- Evaluate tender submissions on the basis of the stated award criteria.
- Enter into direct negotiations with the identified highest scoring tenderer.
- Finalise service arrangement with highest scoring tenderer.
- Commence new arrangement.

Without prejudice, the HSE has endeavoured to give potential respondents an accurate description of the requirements. The information given in these tender documents are indicative only and the HSE does not make any commitment or any guarantee of business resulting from the tender process. Please note that



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HSE Procurement are managing this process on behalf of HSE Integrated Health Area Dublin North County and Integrated Health Area Dublin North City and West.

The Tender process will be run under Article 74 of EU Directive 2014/24/EU (Annex XIV Services - Formerly Annex II B Services). These Services are categorised as Annex XIV for the purposes of Directive 2014/24/EU of the European Parliament and of the Council, on the co-ordination of procedures for the award of public works contracts, public supply contracts and public service contracts. The HSE is not obliged to comply with the full requirements of the Directive. Notwithstanding this, it is the intention of the HSE to carry out the process in a manner that is fair, objective, transparent and non-discriminatory. The HSE will define the parameters of the contract within this document. Tenderers should note that the award process for any contract awarded as a result of this tender competition is not subject to the provisions applicable to contracts in EC Directive 2014/24/EU.

The HSE will define the parameters of the tender competition and the nature of subsequent contract awarded as a result of this tender competition within this and other tender documentation.

4.3. Evaluation of Tenders

Tenders are evaluated under the following 3 stages:

- (a) **Exclusion:** Tenderers who fail to sign the Tenderer Declaration at the end of the Tender Response Document (without amendment or qualification) will be excluded from the Tender Process, as indicated in Section 2.1 below.
- (b) Candidates must complete and submit the European Single Procurement Document (“**ESPD**”). The ESPD must be completed and submitted through the etenders website/ Irish Government Procurement Opportunities Portal (www.etenders.gov.ie).
- (c) **Selection Criteria:** Tenders must meet or exceed the minimum requirements for EACH of the Selection Criteria outlined below. Those tenders that meet the minimum requirement will progress to be evaluated under the Award Criteria.
- (d) **Award Criteria:** Tenders must meet or exceed the minimum requirements of each of the Award Criteria outlined below. To be eligible for award, tenders must achieve 60% of the available marks under non-cost criteria in the table below. The award of marks for cost will only be applied to those tenders deemed eligible for award.

4.4. Format of Tender

The HSE now invites tender submissions as an Open Procedure tender process, under which it will qualify tenderers on the basis of the Exclusion Criteria and Selection Criteria. Tenders that sufficiently meet the requirements under Selection Criteria will be evaluated under the published Award Criteria.

Please see the **Tender Response Document** template to be completed. Please refer to the **HSE Tender Competition Rules** provided as part of tender documentation in advance of completing the Tender Response Document. **Completed Tenders must be returned as indicated above.**

4.5. Communication Protocol



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The sole point of contact for this tender competition shall be via e-tenders messaging. Service providers must not contact any HSE/HSE personnel about this Invitation to Tender unless authorised to do so by the HSE contact. The HSE reserves the right to exclude from the process any service provider who fails to comply with these requirements.

All consultation will be conducted through the Communications Protocol for this competition. Any queries in regard to the competition should be **submitted in writing** via the message facility on the etenders website.

All responses to queries will be circulated by the HSE via the messaging facility on www.etenders.gov.ie. Where appropriate, queries may be amalgamated. Candidates should note that the HSE will not respond to individual candidates privately. The identity of the person making the query will not be disclosed when circulating the response.

Please refer to the Communications Protocol set out in the Tender Competition Rules. Please note the final date for receipt of queries in regard to this competition.

Any necessary meetings or discussions will be arranged and/or facilitated by the point of contact. In all phases of this procurement, all communication among tenderers and the HSE related to the Invitation to Tender must be in writing, via etenders messaging facility. All tenderers will be advised of any significant issues raised by any tenderer. Copies of all questions received and answers given will be forwarded to all participants via etenders messaging.

Questions received after the closing date for queries will not be entertained.

Tenderers shall not contact any other personnel about this tender between the issuance of this document and the date of award unless previously authorised to do so.

Failure to comply with any of the above procedures may disqualify the tenderer.

4.6. Communication Processes

Each tenderer (or consortium) must nominate a primary contact person who will have irrevocable authority to communicate and make commitments in regard of their tender proposal and any subsequent contract award.

4.7. Clarification of Tenders

During the evaluation period, clarifications may be sought from tenderers. Clarifications may include testimonials from customers in support of particular aspects of a tender, whether such aspects are contained in the original submission or in subsequent responses to requests for clarification. Deadlines will be imposed for the receipt of such clarifications and failure to meet these deadlines may result in the disqualification of the tender or loss of marks. Responses to requests for clarification shall not materially change any of the elements of the proposals submitted. Unsolicited communications from tenderers will not be entertained during the evaluation period.

4.8. Timeframe

Without prejudice, it is anticipated that a contract will be awarded in Q3 2026 with the contract to be commence following award no later than December 2026. The HSE requests that tenderers respond to



this Invitation to Tender **only** if they are confident that they have both the level of expertise and the capacity within their organisation to meet the requirement of the HSE within this timeframe. Tenderers will be required to state estimated timeframes for completion of the main task and document any foreseen limiting or delaying factors.

4.9. Conditions of Contract & Agreement

The HSE's Standard Conditions of Contract will apply to any contract awarded as a result of this tender competition, a copy of which is included with the tender documentation published alongside this Invitation to Tender.

It is intended that approved provider will sign formal Service Arrangement with the HSE for the provision of those services. The HSE guarantees no level of business purchase agreements to any service provider as a result of this tender competition.

The contract will be subject to continuous performance monitoring and ongoing review.

It is intended that the duration of the contract awarded under this tender process will be for an initial period of 3 years with the option to extend, for a further 2 years subject to funding.

All support staff involved in the provision of services will have the appropriate qualification and mandatory/specific training for the relevant grade of staff in keeping with National Disability policies.

The contracted personal support service will be subject to a Service Arrangement between the HSE and the contracted service provider copies of which are included with the tender documentation published alongside this Invitation to Tender.

In addition, tenderers will be required to adhere to National Financial Regulations.

4.10. Cost

The HSE seeks to achieve value for money in line with the current budgetary constraints. Tenderers must be cognisant of these in costing their tender submissions.

The maximum available annual budget for this project is €1,400,000. Tenders exceeding this amount will not be considered for further evaluation.

The highest mark is assigned to the tender with the lowest cost, which has been deemed to meet the minimum requirements identified in this document. The score assigned for cost, for all other Tenderers, is calculated pro rata in relation to this score.

Tenderers must provide costs based on the level of support required per client and on the number of clients proposed to be resident in the property/location. Tenderers should complete the tables for the property in the Costing Matrix. The HSE reserves the right to use the tendered costs to apply to similar properties/locations should it have a future requirement that may be met under the award of contract.

- The prices tendered are to be inclusive of all labour, travel and expenses, administration and reporting to HSE during the course of the contract;
- All prices tendered must be in Euro and submitted in the format as requested using the Costing Matrix and no other charges whatsoever will be payable by the HSE;



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- The prices quoted will remain fixed for the initial term of the contract;
- The prices quoted are to be exclusive of VAT.

Notes

Tenders will only be considered on completion of the Costing Matrix. Additional information may be submitted by attachment or enclosure.

The prices tendered will be inclusive of all costs; for clarity no other payments or expenses whatsoever shall be made by the HSE.

2) EVALUATION PROCESS

The methodology for evaluation of tenders is outlined in the following stages:

Exclusion Criteria

Tenderers who fail to sign the Supplier Declaration at the end of the Tender Response section will be excluded from this competition.

Tenderers are required to complete and submit the ESPD.

Tenderers who fail to sign any of the other appendices may be excluded from further consideration in this competition, at the discretion of the HSE.

Selection Criteria

Main Criteria	Sub-Criteria	Minimum Requirement
Economic and Financial Standing	Overall Turnover	Pass/Fail (an average minimum turnover of at least €1,000,000 (per annum) over the three previous financial years)
	Turnover Relating to Specific Product(s)/Service(s)	To be provided
	Professional Statement	Statement of Purpose, Independent professional opinion (i.e. Bank, Auditor or Accountant) assuring financial capacity to undertake the Contract
	Insurance	Must meet HSE minimum requirements detailed within the Tender Response Document
	Tax Clearance	Tenderers must be tax compliant and provide evidence.
Suitability To Pursue Professional Activity	HIQA Registration / Minimum Service Requirements	Tenderers will only be considered where they can demonstrate evidence of previously meeting HIQA Residential Standards for Adults and Children with a Disability and achieving registration in residential services within the Republic of Ireland. Must provide latest HIQA Inspection Report/s.



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		Tenderers outside the jurisdiction of the Republic of Ireland must demonstrate evidence of compliance with the statutory obligations of that jurisdiction.
	Relevant Experience	Tenderers must provide examples of relevant experience as detailed within the Tender Response Document
	Staff Training and Vetting Procedures	Tenderers must provide details of staff training policy and vetting procedures as detailed within the Tender Response Document.
	Data Protection	Details are required regarding the Tenderer's policies and procedures in relation to maintaining data protection and security of information held by the Tenderer or within the Tenderer's company

Note: Tender proposals must meet the minimum requirements in all criteria above to qualify for the next stage of the evaluation process.

Tenders that have achieved the minimum requirements set out in phase one will be evaluated to determine which presents the most economically advantageous tenderer(s).

The HSE reserves the right to review the suitability of successful tenderers at the point of award of contract to ensure that there has been no material change to the standing of tenderers.

Turnover - tenderers must have achieved (or be guaranteed by an entity with) an average minimum turnover of at least €1,000,000 (per annum) over the three previous financial years.

As noted above, in the first instance, **Tenderers must submit the eESPD.**

Tenderers, upon request, must promptly provide the HSE with a completed Evidence of Compliance Document in the form set out in Appendix 4. The information provided must be representative, current, up-to-date and accurate as at the date of its submission to the HSE.

Please note that where the Tenderer is a subsidiary company and is relying on its parent company to meet the minimum turnover requirements, the details required by this Section should also be provided in respect of the parent company.

Consortia

Each individual entity is required to apply on an individual basis in order to demonstrate that they meet the relevant service standards.

Organisations, and in particular SME's, may wish to consider a consortium, where they are not of sufficient scale to bid solely in their own right. Their application will require that there is a Lead/Prime



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Entity for all such groupings and undertakings who assumes full responsibility for the delivery of the Contract. If an application is submitted by a group of Applicants or subcontractors, each entity must show that they have the required economic and financial capacity and the professional and technical ability to perform the Services as detailed in this document.

Should the contract be awarded to a consortium, each firm in the consortium shall be jointly and severally liable to the HSE for the fulfilment of the terms of the contract.

An economic operator may, where appropriate and for a particular contract, rely on the capacities of other entities, regardless of the legal nature of the links which it has with them. It must, in that case, prove to the HSE that it will have at its disposal the resources necessary, for example, by producing an undertaking by those entities to that effect.

Applications should make clear which companies are proposed to be members of the consortium (and jointly and severally liable to the Contracting Authority) and which are to be subcontractors. Subsequent changes to the members of the consortium may result in disqualification of that group.

Any conflict of interest or potential conflict of interest involving an Applicant, (or Applicant(s) in the event of a consortium bid), must be fully disclosed to the HSE, particularly where there is a conflict of interest in relation to any recommendation or proposals put forward by the Applicant. In the event that the HSE considers that a conflict of interest or potential conflict of interest exists, the HSE will, at its absolute discretion, decide on the appropriate course of action.

Applicants may submit a response in their own capacity or within a consortium, however they will not be permitted to be considered for this tender in both capacities. In the event that this occurs, the HSE will contact both the consortium lead and the sole provider applicant for them to agree which party should be withdrawn from consideration for the tender.

Criteria for Award

Submitting parties that achieve the minimum requirements set out in the Selection Criteria will be evaluated to determine which presents the most economically advantageous tender. Tenders will be evaluated using the criteria and associated weightings outlined below:

Main Criteria	Weighting	Marks Available	Minimum Marks Required
Service management proposals	25%	250	150
Service Governance and Standards	20%	200	120
Property	10%	100	60
Environmental, Green, Social Value - Value added proposals	5%	50	n/a
Cost	40%	400	n/a
Total	100%	1,000	

Note: Overall Minimum Requirements for Award: Tenders must achieve the minimum of 60% of the available marks for the non-cost criteria as listed above. Where a tender submission does not achieve the minimum required score under a specific criterion, it will not be further scored or considered, and that tender submission will be eliminated from the tender competition.



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The HSE is seeking to put in place suitable service arrangements that will deliver a client centred approach at a fair price for the HSE and the service provider. The HSE intends to appoint an approved provider and for fair and fixed prices to be set for these services.

Guide to Award Evaluation Process

Cost Criteria:

The tenderer should include a complete fixed rate in relation to cost; the highest mark is assigned to the tender with the lowest **fixed** cost that meets minimum requirements identified in this Invitation to Tender. The score assigned for cost, for all other Tenderers is calculated as per the following formula (Lowest Valid Tender Cost / Vendor Tender Cost X Maximum Score Available) in relation to this score.

The cost score will be calculated based on the total cost for the initial three years of the contract.

In relation to cost, the highest mark is assigned to the tender with the lowest cost, which has been deemed to meet the minimum requirements identified in this document. The score assigned for cost, for all other Tenderers, is calculated pro rata in relation to this score.

- The tender submission should include a full breakdown of costs clearly identifiable within the overall price. All submissions should be fully transparent in terms of the costs tendered.
- The annual cost will be calculated based on 24/7/363 service
- The contract price shall not be subject to increase for the initial duration of the contract.
- The HSE reserves the right to review the contract price each year on the anniversary of the commencement date of the Contract.
- In the event of an unexpected change in service delivery, the HSE will discuss the implications of additional costs and reserves the right to renegotiate improved terms.

The HSE reserves the right to interview all tenderers, or the highest scoring tenderer, following an assessment of the submissions.

Tenders will be evaluated on the basis of the award criteria in order to identify a MEAT (Most Economically Advantageous Tender) proposal. However, the HSE reserves the right (under Annex XIV) to negotiate down the levels of service with the highest scoring tenderer following approval if the tendered cost exceeds the available budget.

Please refer to the Response document(s) for further details.



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Non-cost Criteria:

For non-cost criteria identified in this tender, including, where applicable, sub-criteria, the specific measures and scoring are further described below. Scoring of the weighted criteria will be based on tenderer's responses to each of the sub-sections outlined above. The Evaluation Group will assess the information provided under each of the sub-sections above and attribute scoring on a rating of 0–100% as follows:

Weighting	Meaning
91% - 100%	An excellent response, with very few or no weaknesses, that demonstrates a complete understanding of requirements and provides comprehensive and convincing assurance that the Tenderer will deliver to an excellent standard.
80% - 90%	A very good response that demonstrates real understanding and fully meets the requirements and assurance that the Tenderer will deliver to high standard.
60% - 79%	A satisfactory response which demonstrates a reasonable understanding of requirements and gives reasonable assurance of delivery to an adequate standard but does not provide sufficiently convincing assurance to award a higher mark.
30% - 59%	A response where reservations exist. Lacks full credibility/convincing detail, and there is a significant risk that the response will not be successful.
1% - 29%	A response where serious reservations exist. This may be because, for example, insufficient detail is provided, and the response has fundamental flaws, or is seriously inadequate or seriously lacks credibility with a high risk of non-delivery.
0%	No response

In order to achieve optimised scoring, the Contracting Authority requires comprehensive and detailed responses to the specification questions which demonstrate the capabilities of the tenderer relative to the requirements.

Please note the minimum pass score indicated above. Should a tenderer fail to meet this minimum score, their submission will be eliminated, no further assessment will take place, including under cost, and no other information regarding their submission (including costing information) will be released.

As noted in the scoring range table above, in certain circumstances tenderers may attain a higher score than otherwise merited under the non-cost award criteria minimum scoring requirement. In order to achieve this higher score, tenderers must provide and demonstrate additional comprehensive assurances that the tenderer will deliver to an excellent, very good or high standard which, in the view of the PEG, exceeds the minimum requirements as identified in the tender specifications without additional costs to the HSE.



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The Contracting Authority evaluation team may wish to receive a presentation based on your tender submission.

Companies who wish to bid for the above project should have the appropriate team members available to make a presentation or participate in a conference call on their submission to the evaluation team. Details will be finalised post tender closing date. In particular, the Contracting Authority requests that the members of the team who will lead this project would be available to attend the presentation.

The Contracting Authority does not bind itself to accept the lowest or any tender and will not pay any compensation whatsoever in connection therewith. It reserves the right to reject in whole or in part any or all tenders received.