

**THE AUSTRALIAN REAL WORLD EVIDENCE NETWORK FOR
CANCER (PAN CANCER)
WORK PACKAGE 3: PATIENT-REPORTED DATA NATIONAL
REPORTING AND VISUALISATION**

***A CO-INVESTMENT PARTNERSHIP BETWEEN MOVEMBER,
CANCER AUSTRALIA, AND THE DEPARTMENT OF HEALTH,
DISABILITY AND AGEING***

Request for Proposal

ISSUE DATE: 27 April 2026

CLOSING TIME: 23:59 on the 26 June 2026

DOCUMENT STRUCTURE:

Section	Description
Part A	General information and instructions to Respondents
Part B	Specific RFP requirements – overview of the services requested, key dates and any other requirements.
Part C	Proposed agreement (including any schedules and annexures)



PART A – GENERAL INFORMATION AND INSTRUCTIONS

1. INTRODUCTION

1.1. The Opportunity

Movember is seeking Respondents to submit a Proposal and quote (maximum \$200,000.00 AUD) outlining their approach to conducting an evidence-based assessment of discovery, feasibility, and readiness to develop and implement national reporting and visualisation of patient-reported outcome and experience data across Australia.

This opportunity is structured across three independent, stage-gated phases, with progression to each stage contingent on a favourable outcome from the previous one. All proposals should reflect this approach, i.e., if the vendor deems the project not feasible, the engagement will conclude, and the vendor will be paid for work undertaken up to that point.

*Please refer to **Part B – Specific RFP Requirements** for more details.*

1.2. About Movember

Movember is the leading charity changing the face of men's health on a global scale. Since 2003, the charity has created a men's health movement, funding men's health projects around the world, challenging the status quo, shaking up men's health research and transforming the way health services reach and support men. They have taken on mental health and suicide prevention, prostate cancer, and testicular cancer and as a result, men are living healthier, longer lives.

Movember are working with their community and expert partners all year round to improve the health of men and boys, their families, mates, and communities. Raising awareness and critical funds to tackle some of the most complex problems affecting men's health today. The charity's vision is to have an everlasting impact on the face of men's health. Leading the charge in encouraging men to adopt healthy behaviours, challenging health systems and confronting gender norms to reduce health inequalities and save more lives.

1.3. About the Pan Cancer Initiative

The Australian Real World Cancer Evidence Network (Pan Cancer Initiative) is a landmark initiative aimed at transforming cancer care across Australia through the strategic integration of Patient-Reported Measures (PRMs) into healthcare systems, alongside efforts to optimise the collection and use of clinical data within Clinical Quality Registries (CQRs). The initiative seeks to enable more consistent, meaningful use of data to inform improvements in patient care and system performance across the cancer continuum.

The Pan Cancer Initiative is a partnership between Movember, Cancer Australia, and the Department of Health, Disability and Ageing. The partnership represents a key contribution to the delivery of the Australian Cancer Plan, including its priority to embed patient-reported outcomes and experiences into routine care and system-level decision-making.

The Pan Cancer Initiative comprises seven work packages, of which this RFP focuses on:

Work Package 3: To undertake national-level discovery, feasibility, and readiness activities to inform the potential future development and implementation of patient-reported data reporting capability across Australia.

1.4. Purpose of this RFP

The purpose of this RFP is to:

- (a) invite each Respondent to submit a fully costed and binding Proposal;

- (b) provide each Respondent with general information to assist in the preparation and lodgement of Proposals; and
- (c) set out information about the evaluation and assessment process, and other requirements of Movember.

2. THE RFP PROCESS

2.1. Proposed RFP timetable

- (a) The RFP process timetable and requirements for lodgement is set out in Part B.
- (b) Movember will acknowledge receipt of Proposals by email and Respondents must retain email confirmation as verification that the application has been received.

2.2. Communications

Unless directed otherwise, Respondents must direct their communications with Movember, including any questions arising during the preparation of a Proposal or requests for clarification, via email to pancancer@movember.com.

2.3. Questions

Prior to the Closing Time, all questions and enquiries received from a Respondent, and the subsequent answers to such questions, may be shared with all Respondents. Movember may refuse to answer any question at any time. Movember request that Respondents register their interest in submitting a Proposal by emailing pancancer@movember.com. Not registering interest does not preclude a Respondent from submitting a Proposal, however the Respondent will not receive the responses to questions asked by other Respondents.

3. SUBMISSION OF PROPOSALS

3.1. Proposal documents

In lodging a Proposal, each Respondent understands and agrees that:

- (a) its Proposal must conform with the requirements of this RFP (including the requirements set out in Part B);
- (b) its Proposal will become the property of Movember at the time of lodgement and will be treated as confidential; and
- (c) Movember may use and copy the Proposal as required for the purpose of this RFP process, evaluating the Proposals, negotiating a contract and external audit requirements.

3.2. Non-conforming Proposals

A Proposal may be regarded as non-conforming if it is not lodged in accordance with the terms and conditions or the requirements of this RFP. Movember may, in its absolute discretion, accept or reject a Proposal that is non-conforming.

3.3. Validity Period

Proposals are to remain valid and open for acceptance by Movember for a period of 120 days from the Closing Time.

3.4. Costs and expenses

Participation in any stage of this RFP is at the Respondent's sole risk, cost and expense. In particular, all costs incurred by or on behalf of a Respondent in relation to this RFP, including:

- (a) in relation to preparing and lodging a Proposal;

- (b) providing Movember with any further information; or
- (c) attending briefings, meetings, interviews and participating in subsequent negotiations with Movember,

are wholly the responsibility of the Respondent (regardless of whether the Respondent is successful in the RFP process).

3.5. General Proposal Requirements

Proposals submitted under this RFP must include the following:

- (a) information about the corporate profile of the Respondent including, but not limited to:
 - (i) information on corporate and ownership structure, including information on related bodies corporate;
 - (ii) information about how long it has been in business;
 - (iii) details about the Respondent's management team and key personnel who will be involved in implementing the Services;
 - (iv) confirmation that there is no past, current, pending or finalised litigation that would impact upon the Respondent's ability to perform the Services, or an explanation of such litigation;
 - (v) particulars of any petition, claim, action, judgment or decision which is likely to impact or affect the Respondent's performance of the Services;
- (b) information about how the Respondent will meet each of the requirements set out in this RFP;
- (c) details about the delivery of similar services which the Respondent has been involved in (which are relevant to the Services), including the contact details of applicable referees for whom the Respondent has provided similar services;
- (d) any other matters that are relevant to the Respondent's ability to perform the Services, including any 'value add' services; and
- (e) details about the Respondent's payment terms for the payment of all fees and costs in relation to the provision of the Services.

4. PROPOSAL EVALUATION AND ASSESSMENT

4.1. Overview

The evaluation of Proposals by Movember will be based on the information provided by Respondents as set out in their Proposals. The evaluation of Proposals will be completed in accordance with:

- (a) any assessment criteria set out in Part B;
- (b) the best 'value for money' Proposal as a whole (assessed at Movember's complete discretion) – this involves consideration of both price and the value represented by the assessment of capability and capacity, in the context of the risk profile presented by each Proposal; and
- (c) the Respondent's ability to satisfy Movember that it is able to comply with any service, reporting or insurance requirements as set out in this RFP in its performance of the Services.

4.2. Independent enquiries

Movember may make independent enquiries about any of the matters that may be relevant to the evaluation of the Proposal. Movember reserves the right to contact Respondents' referees, or any other person, directly and without notifying the Respondent.

5. ENGAGEMENT OF RESPONDENT

5.1. Notification

If Movember decides to proceed with a Respondent, Movember will notify the preferred Respondent in writing. Unsuccessful Respondents will not be contacted unless otherwise stated in this RFP. Prior to formally engaging the preferred Respondent, execution of a formal agreement as set out in section 5.2, will be required.

5.2. Execution of Agreement

- (a) By submitting a Proposal, and if Movember decides to proceed with a Respondent, the Respondent agrees that any agreement set out in Part C (or a similar version of it) will apply to the Services to be provided pursuant to this RFP (**Agreement**).
- (b) When submitting its Proposal, the Respondent must identify any terms of the Agreement which it considers it is unable to comply with (if any) and provide justification for its reasoning. Such submission in no way confirms Movember will accept the Respondent's position or agree to amend the Agreement if the Respondent's Proposal is successful.
- (c) Notwithstanding the binding nature of a Proposal, the Respondent acknowledges that there is no binding agreement with Movember until the Agreement is executed by the Respondent and Movember.

6. GENERAL

6.1. Insurance

The Respondent must take out and maintain with reputable insurance companies such insurance policies as set out in Part B and/or as reasonable for the purpose of the requirements of this RFP, including the Services (at Movember's request). The Respondent must also provide certificates of currency or other appropriate evidence of such insurance on the reasonable written request of Movember.

6.2. Conflict of interest

Where a Respondent identifies that circumstances or relationships exist (or may arise in the performance of the Services) which constitute or may constitute a conflict or potential conflict of interest, the Respondent must detail that conflict of interest in their Proposal.

Where any actual or potential conflict of interest is notified, Movember may, in its absolute discretion, take any action it considers appropriate.

If any actual or potential conflict of interest arises after the Closing Time and prior to submitting a Proposal, the Respondent must immediately notify Movember in writing.

6.3. Confidentiality

Each Respondent acknowledges that it is under an obligation of confidentiality to ensure that this RFP and any other documents or information concerning this RFP is kept confidential and is only used for the sole purpose of preparing a Proposal and participating in this RFP process. This obligation of confidentiality survives the termination or expiration of the RFP process, and any further written agreements between the parties.

6.4. Anti-competitive conduct

- (a) Respondents must not engage in any collusive, anti-competitive or similar conduct with any other Respondent in relation to the RFP process which includes, but is not limited to:
 - (i) preparation, content or lodgement of their Proposal; and
 - (ii) the conduct of negotiations with Movember.
- (b) For the purpose of this clause 6.4, anti-competitive conduct or any other similar conduct may include disclosure, exchange and clarification of information, whether or not such information is confidential to Movember or any other Respondent.

6.5. Intellectual Property

All documents comprising this RFP remain the property of Movember. All copyright and other Intellectual Property Rights contained in this RFP are, and remain, vested in Movember.

6.6. Accuracy of RFP

Whilst all due care has been taken in connection with the preparation of this RFP, Movember does not make any warranties or representations that the content of this RFP or any part of it or any information communicated to or provided to Respondents in connection with this RFP or during the RFP process is, or will be, accurate, current or complete. Movember will not be liable in respect of any information communicated or provided which is not accurate, current or complete or for any omission from this RFP. Respondents should conduct their own independent investigations, review and analysis of the information set out in this RFP.

6.7. Movember's rights

Movember may, in its absolute discretion and at any time without penalty:

- (a) amend this RFP, provide additional information or clarification and/or change the structure and timing of the RFP process. Any changes to this RFP will be communicated by Movember in writing. It is the responsibility of each Respondent to ensure they are referring to, and referencing, the most up to date RFP;
- (b) suspend, defer, discontinue or vary the RFP process (including during the negotiation process);
- (c) determine, at any stage a shortlist of Respondents;
- (d) require additional information or clarification from a Respondent;
- (e) before final selection (with or without shortlisting), enter into negotiations with one or more Respondents (including parallel negotiations with one or more Respondents or negotiations with all Respondents) or select a successful Respondent;
- (f) exclude or disqualify a Respondent, or discontinue negotiations with a Respondent for any reason; and
- (g) negotiate with or enter into contractual arrangements with a party who is not a Respondent and enter into a contract with that party on such terms as Movember accepts.

6.8. Acknowledgement

In lodging a Proposal, the Respondent acknowledges that:

- (a) it has reviewed this RFP, any documents referred to in it, and any other information made available in writing by Movember in relation to this RFP process;
- (b) this RFP is designed to summarise information concerning Movember's requirements only and is not necessarily a comprehensive description;

- (c) to the maximum extent permitted by law, neither Movember, nor its employees, advisors or agents will in any way be liable to any person or body for any claim related to this RFP;
- (d) in lodging a Proposal, it did not rely on any express or implied statement, warranty or representation, whether written or oral other than as expressly contained in this RFP;
- (e) it did not use the improper assistance of Movember's employees;
- (f) it has satisfied itself as to the correctness and sufficiency of its Proposal;
- (g) nothing in this RFP is to be construed, interpreted or relied upon, whether expressly or implied, as an offer capable of acceptance by any person, or as creating any form of contractual, promissory or other rights;

all Respondents are deemed to accept the terms and conditions contained in this RFP, which will also form part of a further written agreement between the parties (if the Respondent is successful in the RFP process).

7. DEFINED TERMS

In this RFP, these terms have the following meaning:

Term	Definition
Closing Time	means the date and closing time for submitting a Proposal as set out in section 2.1, or as otherwise extended by Movember in writing.
Commencement Date	means the commencement date of the Services.
Intellectual Property Rights	means all intellectual property rights, including but not limited to the following rights: <ul style="list-style-type: none"> a. patents, copyright, rights in circuit layouts, designs, moral rights, trade and service marks (including goodwill in those marks), domain names and trade names and any right to have confidential information kept confidential; b. any application or right to apply for registration of any of the rights referred to above; and c. all rights of a similar nature to any of the rights above which may subsist anywhere in the world, whether or not such rights are registered or capable of being registered.
Movember	means Movember Group Pty Ltd as Trustee for Movember Foundation (ABN 48 894 537 905) or any other entity in the Movember Group as advised by Movember.
Proposal	means the documents constituting the Respondent's offer to deliver Movember's requirements under this RFP.
Respondent	means a person or organisation who offers to deliver the Services pursuant to this RFP.
RFP	means this Request for Proposal, including all attachments, annexures, or schedules.
Services	means the services or deliverables to be provided by the Respondent, as set out in Part B.

PART B – RFP REQUIREMENTS

1. KEY DATES

1.2 Proposed RFP timetable

The following table provides indicative dates in relation to this RFP process (which, may be amended by Movember in writing at any time in its sole discretion):

Activity	Date
RFP issued	27 April 2026
Last date for questions and enquiries	12 June 2026
Closing Time	26 June 2026, 23:59 AEST
Evaluation and shortlisting of Respondents	29 June – 10 July 2026
Interviews	13 – 17 July 2026
Discussions and negotiations with shortlisted Respondents	31 July 2026
Provide Statement of Work (SoW) and other relevant documentation, as requested by Movember under this RFP	14 August 2026
Notice of outcomes	21 August 2026
Commencement Date	31 August 2026

1.3 Budget

A maximum of \$200,000.00 AUD is available as part of this RFP. Respondents are expected to propose a scope and approach that represents strong value for money for each stage within this envelope.

1.4 Lodgement of Proposals

The Proposal must be lodged by the Closing Time by email to pancancer@movember.com.

1.5 Proposal Format

Proposals should be a single PDF document:

- (a) prepared in Arial font (regular), minimum 11 point and in single-spaced text;
- (b) on an A4-sized page 8.3" x 11.7" (21cm x 29.7cm) with 1" (2.54cm) margin on all sides of each page;
- (c) include a header on each page with the Respondent's name in the top left-hand corner, and the page number in the top right-hand corner;
- (d) limited to a maximum of 20 A4 pages; and
- (e) password protected (if applicable).

1.6 Proposal Content

Proposals must be clear, concise, and well-structured, written in the Respondent's own words, and must not replicate or restate the content of this RFP. Movember is seeking evidence of independent thinking, critical analysis, and a clear point of view. Respondents should also consider the **General Proposal Guidelines outlined in Section A 3.5**.

The Proposal must include the following components:

- **Executive Summary** – A short overview of the proposal, including the Respondent’s suitability for this work and the key features of the proposed approach.
- **Understanding of the Brief** – A summary of how the Respondent interprets the problem, objectives, and scope of this Discovery Phase, in the Respondent’s own words.
- **Proposed Methodology and Approach** – An outline of the methods, activities, and engagement processes to be used, including indicative sequencing and rationale. This should also include anticipated challenges and how these will be addressed.
- **Experience and Capability** – Relevant organisational experience and expertise in similar projects, as well as key personnel, their roles, and expected contribution to delivery.
- **Project Management and Deliverability** – A proposed timeline for delivery and outline of how risks and dependencies will be managed.
- **Reporting and Outputs** – Approach to analysing findings and presenting insights, including how recommendations will be framed for decision-makers.
- **Pricing** – A clear breakdown of the proposed pricing structure, with justification of value for money.

Proposals should not exceed 20 pages (excluding appendices). Excessively long or generic submissions may be viewed unfavourably.

2 Services

2.1 Overview

Movember is seeking a suitably qualified service provider to undertake a national-level program of discovery, feasibility, and readiness activities under Work Package 3 of the Pan Cancer Initiative.

This engagement is structured into three sequential, stage-gated phases. Progression to each subsequent stage is subject to written approval by Movember of the preceding stage’s outputs and findings. In the event a stage concludes unfavourably (e.g., national reporting is deemed to be unfeasible) at Movember’s discretion, the engagement will conclude at that point, and the vendor will be remunerated for work completed up to that stage.

Stage 1 – Discovery and Landscape Assessment: Structured stakeholder engagement and mapping of current patient-reported data collection practices, data flows, and organisational readiness across the ten in-scope CQRs and relevant health system stakeholders. Key deliverable: an interim landscape findings report and stakeholder presentation.

Stage 2 – Feasibility Analysis and Readiness Assessment: In-depth analysis of the technical, governance, legal, and operational feasibility of a national reporting capability, drawing on Stage 1 findings. Identification and assessment of multiple potential data flow pathways and models. Key deliverable: a feasibility and readiness assessment, and stakeholder presentation.

Stage 3 – Recommendations, Reporting and Stakeholder Presentations: Synthesis of all findings into a final, decision-oriented report with clear recommendations. Presentation of findings to Movember and relevant stakeholders. Key deliverable: the comprehensive final report and stakeholder presentation.

Respondents must provide a breakdown of proposed costs, timeline, and key activities for each stage independently.

There is no single predefined model of how this capability should be realised. The successful

Respondent will be expected to explore and assess multiple potential pathways, including different approaches to data flow, aggregation, and reporting across local, jurisdictional, and national levels.

The Respondent will be expected to take a structured and evidence-based approach to exploring these considerations, engaging with relevant stakeholders, and synthesising insights into a clear and coherent assessment of feasibility and readiness. The work should not assume a predefined solution; rather it should identify viable pathways, constraints, and enabling conditions that would support future decision-making.

To support the successful Respondent, Movember will provide access to a defined set of Pan Cancer Initiative outputs and background documents at commencement of the engagement.

2.2 Problem Statement

The Australian Cancer Plan (2023) commits to embedding patient-reported outcomes (PROs) and experiences (PREs) into national performance monitoring across all providers (Action 4.5.1). However, several critical barriers stand in the way:

(a) **Fragmentation**

Patient-reported data is currently collected across Clinical Quality Registries, health services, and jurisdictional programs with no consistency in how it is collected, governed, or used. No agreed national reporting pathways exist.

(b) **Data Sharing Barriers**

Complex and variable legal, governance, privacy, and custodianship requirements make cross-jurisdictional data exchange difficult, compounded by uneven organisational capability and misaligned stakeholder incentives.

(c) **Tension Between National Consistency and Local Variation**

Any national approach must accommodate existing infrastructure, jurisdictional differences, and both local and national reporting needs, without creating unsustainable burden.

(d) **Risk of Stalling or Fragmentation**

Without a clear pathway, efforts risk being either too conceptual to implement or too siloed to scale.

The Core Question: Is a national approach to patient-reported data reporting feasible, scalable, and valuable within the Australian context – and if so, under what conditions?

2.3 Objectives

The primary objective of Work Package 3 is to provide a clear, evidence-based assessment of the feasibility, readiness, and potential pathways for establishing a national capability for the reporting of patient-reported outcome and experience data across Australia. This work is intended to reduce key uncertainties and support informed decision-making regarding whether, and how, such a capability could be progressed.

The following represent the priority focus areas of this work:

(a) **Assess the Current Landscape**

Develop a comprehensive understanding of how patient-reported data is currently collected, managed, and used across Australia, including key variations across jurisdictions, organisations, and settings. This must extend beyond the ten in-scope CQRs to include state and territory health department programs and any other

national or jurisdictional initiatives relevant to patient-reported data, in order to establish a complete picture of current activity across the sector.

(b) **Evaluate Feasibility of National Reporting**

Assess the technical, operational, and system-level feasibility of enabling a national reporting approach to patient-reported data, including key constraints and enabling conditions.

(c) **Assess Organisational Readiness**

Evaluate the capability, capacity, and willingness of participating entities (e.g., hospitals, CQRs, state-based registries) to support national data sharing and reporting, including key barriers and enablers.

(d) **Analyse Legal, Governance, and Privacy Considerations**

Identify the frameworks, constraints, and requirements that would shape the sharing and reporting of data across jurisdictions and organisations.

(e) **Explore Data Flow Pathways and Models**

Identify and assess multiple potential data flow pathways (e.g. via state-based systems, state data systems, or direct to national aggregation points), including associated trade-offs, risks, and implications.

The following areas must also be addressed in sufficient depth to inform the overall findings and to support clear, practical, and evidence-based recommendations on whether, and how, a national patient-reported data visualisation and reporting platform could be realised:

(f) **Consider Local and National Reporting Needs**

Assess how patient-reported data could be used at both local (e.g., state or organisational) and national levels and identify how these needs can be balanced within potential approaches.

(g) **Identify Short- and Long-Term Opportunities and Pathways**

Identify practical, near-term opportunities to report on and showcase patient-reported data (e.g. scoping current collection, spotlighting existing practices), without requiring significant change to current data collection or existing infrastructure, while articulating viable longer-term approaches to enabling a national reporting capability, including key trade-offs, dependencies, and conditions required for implementation.

2.4 Service Requirements

The successful Respondent will be responsible for delivering a structured program of work that addresses the objectives outlined in this RFP. The following requirements set out Movember's expectations in relation to stakeholder engagement, scope coverage, deliverables, and timing.

Stakeholder Access and Engagement Expectations

The successful Respondent must conduct structured, insight-driven engagement across the cancer care ecosystem – including CQRs, health services, state and territory health department and data agencies, policymakers, and data custodians – spanning all jurisdictions and system levels. Engagement with state and territory health departments is considered essential, as their data governance policies and systems are central to any viable national data flow pathway.

Movember will provide the successful Respondent with introductory access to the ten in-scope CQRs, Cancer Australia and other key stakeholders. Beyond these introductions, the successful Respondent is expected to proactively manage and expand their own stakeholder relationships. Respondents should not assume ongoing facilitation support from Movember and should factor this into their proposed methodology, timeline, and resource plan.

Some of the key challenges to navigate include:

- significant variation in perspectives, priorities, and feasibility views across jurisdictions and organisations;
- sensitive and context-specific governance, privacy, and data sharing considerations; and
- potentially conflicting stakeholder views on approaches and priorities.

The successful Respondent is expected to:

- proactively identify, prioritise, and manage stakeholder engagement – not rely solely on Movember and Cancer Australia for access;
- tailor engagement approaches to different stakeholder types based on their roles, incentives, and perspectives;
- go beyond surface-level consultation to produce practical, decision-relevant insights on barriers, enablers, trade-offs, and system constraints; and
- explore how local (state-level) and national reporting needs can be aligned or balanced.

The output of engagement must clearly show how stakeholder input was synthesised and reflected in final recommendations, the emphasis is on depth and utility of insight, not breadth of consultation alone.

Minimum Coverage Expectations

The successful Respondent must ensure that the work addresses, at a minimum, the following core areas, each explored in sufficient depth to inform feasibility, readiness, and potential pathways.

(a) Current Landscape and Reporting Practices

Coverage must include variation in tools, approaches, and governance arrangements across jurisdictions, organisations, and settings, and must identify organisations and jurisdictions currently collecting and using PROMs and PREMs and how that data is being applied.

(b) Data Flows and Systems

Coverage must address both existing and potential data flow pathways, including flows via state-based registries, state data systems, and direct to national aggregation points, and must assess the opportunities, constraints, trade-offs, dependencies, and scalability considerations associated with each.

(c) Local and National Reporting Considerations

Coverage must address how patient-reported data is currently used and reported at local (e.g. state or organisational) levels, the opportunities and requirements for national-level reporting and aggregation, and the specific implications of balancing local and national needs, including alignment, duplication, and stakeholder burden.

(d) Organisational Readiness

Coverage must address the maturity of participating entities (e.g., hospitals, CQRs, state-based registries) in addition to their capability and capacity, and must identify variation in readiness across jurisdictions and organisations, including the specific incentives and barriers that shape participation in national reporting.

(e) **Legal, Governance, and Privacy Considerations**

Coverage must address data custodianship models including roles and responsibilities across jurisdictions and organisations, legislative and regulatory constraints on data sharing, linkage, and reporting, and the requirements for trusted, appropriate, and sustainable data use. Governance considerations must be treated as central to feasibility, not secondary to technical considerations.

(f) **Inter-Governmental Coordination and Data Governance**

Coverage must specifically address the inter-governmental dimension of national data aggregation. This includes the roles and responsibilities of state and territory health departments as data custodians and governance authorities; the existing cross-jurisdictional agreements, frameworks, or bodies that could support or constrain national data sharing; the variation in state-based data governance arrangements and their implications for a national reporting model; and the coordination mechanisms (formal or informal) that would be required to enable state governments to contribute data to a national reporting capability. The vendor must assess the feasibility and complexity of achieving the necessary level of inter-governmental alignment and identify the key dependencies and enabling conditions that would be required.

(g) **Stakeholder Needs and Use Cases**

How different stakeholders may use patient-reported data, including variations in needs, expectations, and priorities, and the implications for how data is accessed, reported, and applied.

(h) **Short-Term and Long-Term Opportunities and Pathways**

Near-term coverage must include scoping of current collection activities, spotlighting of existing efforts across the sector, and identification of feasible mechanisms for delivering early value with minimal changes to infrastructure or data collection. Longer-term coverage must address maturity progression from initial data availability through to meaningful outcome reporting and indicator-level insights, and must identify the key dependencies, risks, and enabling conditions required for scaling.

Deliverables

The successful Respondent will deliver a series of outputs demonstrating progressive development of insight, from initial scoping through to final, decision-oriented recommendations.

Final Report: Minimum 40 pages, maximum 80 pages (excluding appendices), provided in Word and PDF format.

At a minimum, the report must include a synthesis of findings across all areas of investigation; a clear feasibility and readiness assessment; identification and comparison of viable pathways and models, including key trade-offs and implications; analysis of governance, privacy, and data custodianship considerations; identification of key risks, dependencies, and enabling conditions; and recommendations for both short-term actions

and longer-term implementation. The report must be clearly structured, provide interpretation and insight rather than description alone, and be suitable for use by Movember, Cancer Australia, and other stakeholders to inform future decision-making.

Stakeholder Engagement Outputs: A written synthesis document of no more than 20 pages summarising key themes, areas of alignment and divergence, and implications for feasibility. This is distinct from raw meeting notes or transcripts.

The document must identify stakeholder-specific needs, constraints, and perspectives, and translate these into clear implications for feasibility, pathways, and decision-making.

Short-Term Reporting Outputs: At least two short-form outputs, each no more than six pages, written in plain language and suitable for public or stakeholder distribution.

These outputs are intended to demonstrate early, practical value and support stakeholder engagement with minimal new data collection or system development. They may include scoping outputs identifying who is currently collecting PROMs and PREMs, spotlight examples of existing practices, or simple artefacts illustrating how patient-reported data could be surfaced and communicated.

Conceptual Models and Frameworks: Minimum of three visual artefacts (e.g., data flow diagram, maturity model, options framework), provided as editable files and embedded in the final report.

These artefacts should be clear, practical, and accessible to both technical and non-technical stakeholders.

Presentations and Briefings: Minimum of three formal presentations, at key points throughout the project, delivered to Movember, Cancer Australia and relevant governance groups, with slide decks provided in editable PowerPoint format.

Presentations should support discussion and alignment on emerging findings. The final presentation should frame recommendations in a clear, decision-oriented format suitable for key stakeholders.

Indicative Timeline

The Services are expected to be delivered over an indicative period of approximately 24-28 weeks from the commencement date.

This timeframe reflects the expected complexity of the work, including the need for meaningful stakeholder engagement, analysis across multiple domains, and the development of robust, decision-oriented recommendations.

However, Respondents are encouraged to propose a timeline that they consider to be realistic and achievable. Alternative timeframes will not be penalised, provided the Proposal clearly articulates: the sequencing of key activities; critical milestones, decision points, and dependencies (including stakeholder availability); and how delivery will be managed to maintain momentum while ensuring depth and rigour.

2.5 Insurance Requirements

Prior to the Commencement Date, the Respondent must ensure that the following insurances are in place before the Commencement Date and for the duration of the agreement:

Insurance type	Amount
Public Liability	\$10,000,000 AUD
Professional Indemnity	\$5,000,000 AUD

3 PROPOSAL EVALUATION AND ASSESSMENT CRITERIA

Proposals submitted in response to this RFP will be evaluated against the following criteria. Respondents must address each criterion clearly and comprehensively in their submissions.

- (a) The extent to which the Respondent demonstrates a clear and thoughtful understanding of the problem statement, context, and objectives of Work Package 3. Proposals should reflect an appreciation for the complexity of the current landscape, including fragmentation, governance and privacy considerations, and the challenges associated with enabling national-level data reporting.

Weighting – 15%

- (b) Quality, clarity, and suitability of the proposed methodology and approach. The approach should be logical, well-structured, and appropriately designed to assess feasibility, readiness, and potential pathways, rather than assume a predefined solution.

Weighting – 20%

- (c) Evidence of understanding the broader health system and stakeholder environment. This includes awareness of jurisdictional variation, organisational diversity, governance complexities, and the sensitivities associated with engaging stakeholders across the cancer care ecosystem.

Weighting – 20%

- (d) Demonstrated capability and capacity to deliver the work. This includes relevant organisational experience, expertise in health data and system-level work, experience with complex stakeholder engagement, and the suitability of the proposed team, including roles and level of involvement.

Weighting – 10%

- (e) Strength of the proposed approach to analysis and reporting, including how findings will be synthesised, interpreted, and translated into clear, evidence-based, and decision-oriented recommendations. Respondents should demonstrate the ability to provide insight and practical options, not just descriptive outputs.

Weighting – 10%

- (f) Realism and feasibility of the proposed delivery approach, including the proposed timeline, sequencing of work, and approach to managing risks, dependencies, and stakeholder access. Proposals should demonstrate an understanding of the factors that may impact delivery and how these will be managed.

Weighting – 10%

- (g) Value for money, including the relationship between the proposed pricing, the scope of work, and the expected quality and impact of the outcomes. Assessment will consider overall value rather than the lowest cost.

Weighting – 10%

- (H) Professionalism, structure, and clarity of the written proposal. High-quality submissions should be well-organised, concise, clearly articulated, and directly responsive to the requirements of this RFP.

Weighting – 5%

PART C – AGREEMENT

Provided separately and titled ***Part C – Movember Standard Master Services Agreement Template***

ANNEXURE A: Scope of Coverage – Clinical Quality Registries in Scope

This Discovery Phase will focus on the following ten cancer CQRs, which represent a range of tumour streams and jurisdictional coverage across Australia. All ten registries are considered in scope for this work. The below table indicates the states and territories where each CQR operates.

CQR	ACT	NSW	NT	QLD	SA	TAS	VIC	WA
Australian and New Zealand Thyroid Cancer Registry	Yes	Yes		Yes	Yes		Yes	
Bowel Cancer Outcomes Registry	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Lymphoma and Related Diseases Registry	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Lung Cancer Data Quality Platform				Yes				Yes
Melanoma Clinical Outcomes Registry				Yes			Yes	
Myeloma and Related Diseases Registry	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
National Gynae-Oncology Registry	Yes	Yes		Yes	Yes	Yes	Yes	Yes
Prostate Cancer Outcomes Registry	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Upper Gastro-Intestinal Cancer Registry		Yes					Yes	
Victorian Lung Cancer Registry	Yes				Yes	Yes	Yes	
<i>Number of CQRs Present in State / Territory</i>	<i>7</i>	<i>7</i>	<i>4</i>	<i>8</i>	<i>7</i>	<i>6</i>	<i>9</i>	<i>6</i>

Respondents should propose an approach that examines reporting and visualisation feasibility for all ten registries, taking into account their individual technical maturity, data flows, and jurisdictional contexts. Understanding the variation in registry models and coverage will be critical to assessing feasibility and identifying priority opportunities.