

**THE AUSTRALIAN REAL WORLD EVIDENCE NETWORK FOR  
CANCER (PAN CANCER)  
WORK PACKAGE 6: CLINICAL DATA AUTOMATION  
DISCOVERY PHASE**

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

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Request for Proposal

**ISSUE DATE:** 29 September 2025

**CLOSING TIME:** 23:59 on the 21 November 2025

**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 outlining their approach to conducting a comprehensive discovery phase for the integration of clinical data automation solutions into Australian cancer clinical quality registries (CQRs). This work will focus on reviewing the data being captured by CQRs, identifying data sources across Australia, and identifying opportunities for streamlining data collection through automation.

This opportunity will be completed in three independent stages. Progression to each stage is dependent upon a favourable outcome from the previous stage. All proposals and quotes should reflect this stage-gated approach, i.e., if the vendor deems that this project is not feasible, the discovery phase 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, as well as integrating innovative solutions to optimise the collection of clinical data in clinical quality registries through automation. The goal is to harmonise data collection across various cancer care settings and use this data to benchmark performance across clinical environments. This initiative is an important step toward ensuring that patient experiences and outcomes are central to cancer care.

The Pan Cancer Initiative is a partnership between Movember, Cancer Australia, and the Department of Health, Disability and Ageing, and is an important step toward ensuring that patient experiences and outcomes are central to cancer care, a key five-year strategic goal of the Australian Cancer Plan.

The Pan Cancer Initiative aims to achieve a range of objectives through seven distinct work packages. For the purposes of this brief, we will focus on:

***Work Package 6: To design and implement an effective clinical data automation system ensuring rigorous testing processes to enhance accuracy, efficiency, and reliability in the***

*collection of clinical data across CQRs and the cancer system.*

#### **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](mailto: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.

### **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
<b>Closing Time</b>	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.
<b>Commencement Date</b>	means the commencement date of the Services.
<b>Intellectual Property Rights</b>	means all intellectual property rights, including but not limited to the following rights: <ul style="list-style-type: none"><li>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;</li><li>b. any application or right to apply for registration of any of the rights referred to above; and</li><li>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.</li></ul>
<b>Movember</b>	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.
<b>Proposal</b>	means the documents constituting the Respondent's offer to deliver Movember's requirements under this RFP.
<b>Respondent</b>	means a person or organisation who offers to deliver the Services pursuant to this RFP.
<b>RFP</b>	means this Request for Proposal, including all attachments,

	annexures, or schedules.
<b>Services</b>	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	29 September 2025
Registration of interest	29 September to 22 October 2025
Last date for questions and enquiries	14 November 2025
Closing Time	By 23:59 on 21 November 2025
Evaluation and shortlisting of Respondents	24 November to 12 December 2025
Interviews	15 December 2025 to 16 January 2026
Discussions and negotiations with shortlisted Respondents	30 January 2026
Provide Statement of Work (SoW) and other relevant documentation, as requested by Movember under this RFP	16 February 2026
Notice of outcomes	23 February 2026
Commencement Date	2 March 2026

#### 1.3 Lodgement of Proposals

The Proposal must be lodged by the Closing Time by email to [pancancer@movember.com](mailto:pancancer@movember.com).

#### 1.4 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).

#### 1.5 Proposal Content

Respondents should propose clear and structured methodologies that focus on answering these core questions:

- 1. Is clinical data automation for cancer CQRs currently feasible?
- 2. If feasible, what is the potential value or benefit of pursuing automation (e.g., efficiency, sustainability, data quality)?
- 3. If there is a strong business case, what types of automation opportunities appear most promising, and what would be required to explore or implement them further?

Respondents should also consider the **General Proposal Guidelines outlined in Section A 3.5**. Proposals will be assessed on clarity, conciseness, and responsiveness to requirements.

To support a fair and consistent process, Respondents are requested to structure their proposals to include the following elements:

- **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.
- **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.

## 2 Services

### 2.1 Overview

Movember are seeking a qualified service provider to lead a focused discovery phase under Work Package 6 (Data Automation) of the Pan Cancer Initiative (**Discovery Phase**). The purpose of this Discovery Phase is to determine whether the automation of clinical data collection for cancer Clinical Quality Registries (**CQRs**) is feasible under current legislative, operational, and technological conditions – and, if so, whether there is a compelling business case for doing so.

This work will provide an evidence-based foundation to guide future decision-making on potential investment in data automation. It will assess the existing barriers and enablers to automation across up to ten (10) participating cancer CQRs (as set out in **Annexure A**) and explore the expected value of automation in improving efficiency, sustainability, and data quality. If feasibility is established, the Discovery Phase may also include early identification of priority areas where automation is most likely to succeed and deliver benefit.

The emphasis of this piece of work is on strategic clarity and actionable insights – not on defining technical solutions. The outputs of this Discovery Phase will directly inform whether, where, and how automation efforts should be pursued in subsequent phases

### 2.2 Problem Statement

CQRs play a vital role in monitoring and improving the quality of cancer care in Australia. However, most cancer CQRs currently rely on manual processes to extract clinical data from hospital records and other sources. These processes are time-consuming, resource-intensive, and prone to human error – limiting scalability, delaying data availability, and placing a heavy burden on registry teams and participating health services.

At the same time, Australia's health system is evolving, with increasing digital maturity, expanded data availability, and emerging technologies such as APIs, structured Electronic Medical Records, Natural Language Processing (NLP), and data linkage frameworks. These developments suggest that data automation may be a viable opportunity to improve the efficiency and sustainability of cancer CQRs.

However, it is unclear whether automation is currently feasible across the diverse registry and health system landscape. Key uncertainties include:

- legislative and governance constraints around data sharing and linkage (especially across jurisdictions);
- variability in technical infrastructure, digital maturity, and interoperability of clinical systems;
- operational readiness and workforce capability to adopt automation; and
- whether the investment required to automate data collection would result in meaningful efficiency gains or other benefits for registries.

Without a clear understanding of feasibility and value, there is a risk of investing in automation efforts that are not sustainable or scalable. A structured Discovery Phase is needed to assess whether automation is achievable and worthwhile – and to identify, at a high level, the areas where future efforts should be focused.

### **2.3 Objectives**

This Discovery Phase aims to build a clear and evidence-based understanding of whether clinical data automation for cancer CQRs is currently feasible, and whether it would deliver sufficient value to warrant further investment. The focus is on clarifying the foundational conditions – legal, operational, and technical – that would enable or constrain automation, and on assessing the potential benefits and implications for registry operations.

Specifically, the Discovery Phase will seek to:

- assess the feasibility of automating clinical data collection within the current legal, governance, and technology landscape;
- identify key barriers and enablers to automation across jurisdictions, systems, and stakeholders;
- estimate the potential benefits of automation, including cost savings, efficiency gains, and improvements in data quality and timeliness;
- determine whether there is a viable business case for investing in automation at scale; and
- if appropriate, identify and prioritise.

### **2.4 Service Requirements**

The successful Respondent will undertake a structured Discovery Phase comprising three sequential stages: (1) Feasibility Assessment, (2) Business Case Development, and (3) Identification and Prioritisation of Automation Opportunities (if appropriate). Each stage builds upon the findings of the previous one and will only proceed pending a favourable outcome from the previous stage, determined by Movember. This will ensure that solution-focused work only proceeds where feasibility and value have been clearly established, ensuring resources are allocated appropriately. Please note that the contractual agreement between the successful Respondent and Movember will be structured in stage-gated manner, i.e., the business case will only proceed if Movember determines the feasibility is

favourable and the identification and prioritisation of automation opportunities will only proceed if Movember determines the business case is favourable. Proposals (and accompanying quotes) should be broken down accordingly, ensuring that each of these three stages can be undertaken independently without assuming progression to the stage is guaranteed.

### **Stage 1: Feasibility Assessment**

This stage will determine whether clinical data automation for cancer CQRs is currently feasible, considering the legislative, operational, and technological landscape across Australia. Key outcomes should include:

- a clear assessment of whether automation is possible under current conditions;
- identification of the key enablers and barriers to automation, including, but not limited to, legal, governance, data-sharing, technical, and jurisdictional considerations; and
- (i) insight into the readiness and variability of existing systems and data sources across health services and registries, including digital infrastructure, system interoperability, and use of data standards (e.g., SNOMED, ICD-11, FHIR, etc.).

### **Stage 2: Business Case Development (if feasibility assessment is favourable)**

If feasibility is established (as determined by Movember), this stage will develop a business case for pursuing automation. It should provide decision-makers with a compelling rationale to proceed (or not), based on potential value and return on investment. Key outcomes should include:

- an estimate of the current burden and cost of manual data collection for CQRs;
- an assessment of the potential benefits of automation (e.g., efficiency, sustainability, data quality);
- a high-level view of the resources, investments, or policy changes that may be required;
- a recommendation on whether automation should be pursued further; and
- an analysis of the anticipated return on investment, quantifying potential cost savings, efficiency gains, and long-term value relative to the required investment.

### **Stage 3: Identification and Prioritisation of Automation Opportunities (if business case is favourable)**

If the feasibility and business case support further action (as determined by Movember at its discretion), this phase will provide a high-level view of where automation may be most achievable and impactful across the CQR network. Key outcomes should include:

- identification of areas or data domains with strong potential for automation (e.g., staging, pathology, structured EMR data);
- a prioritised view of potential opportunities, based on feasibility and expected value; and
- guidance on where future efforts should be focused, including possible pilots or more detailed design work.

## Stakeholder Access and Engagement Expectations

Movember maintains active relationships with all ten (10) participating CQRs and will facilitate introductions to registry leads as needed. Movember, Cancer Australia, and the Department of Health, Disability and Ageing (partners on this program) also hold strong connections across Commonwealth, state, and territory health systems. Where required, appropriate introductions to jurisdictional stakeholders can be arranged.

It is the responsibility of the selected vendor to design and deliver the engagement process. Proposals should include a clear and detailed stakeholder engagement plan, including:

- identification of the types of stakeholders required for meaningful discovery (e.g., CQR managers, hospital CIOs, data custodians, health department representatives);
- a proposed sequencing and format of engagement activities (e.g., interviews, roundtables, workshops, surveys); and
- an outline of how insights will be captured, analysed, and translated into discovery findings.

Vendors with demonstrated access to, or experience working within, health system settings – including registries, hospitals, and jurisdictional health departments – will be viewed favourably. While Movember and its partners can support initial access, the vendor is expected to take the lead in managing stakeholder relationships throughout the engagement process.

## Minimum Coverage Expectations

While vendors may tailor their methodology, proposals should demonstrate how the Discovery Phase will:

- engage with all ten (10) participating cancer CQRs to assess variation in technical maturity, data flows, and readiness for automation;
- include input from stakeholders across jurisdictions, prioritising opportunities that are national or those where the majority of CQRs are active (e.g., jurisdictions with 70% or greater registry coverage);
- explore variation across health system contexts (e.g., public vs private, metropolitan vs regional, state-run vs federated models); and
- produce findings that reflect both national system considerations and local/regional constraints.

## Deliverables

The primary deliverable for this engagement is a **comprehensive final report that provides a clear, evidence-based assessment of the feasibility and value of automating clinical data collection across up to ten cancer CQRs participating in the Pan Cancer Initiative.**

This report will be used to inform investment decisions, stakeholder engagement, and potential next steps in the broader work program. Reports should not only summarise findings but provide interpretation, synthesis, and actionable recommendations. It should be structured to align with the two (or, if applicable, three) stages of the Discovery Phase and contain the following components:

### 1. Feasibility Assessment

- A clear summary of whether data automation is currently feasible within the Australian context, based on legislative, governance, technical, and operational conditions.
- Identification of key enablers and barriers across jurisdictions and systems.
- Insights into the variability and readiness of health data infrastructure relevant to registry data flows.

### 2. Business Case (if feasible)

- An assessment of the value proposition for automation, including qualitative and quantitative benefits (e.g., cost savings, efficiency gains, improved data quality, sustainability)
- An indicative view of the likely investment and resource requirements for efficiently pursuing automation, as well as the potential return on investment.
- A recommendation on whether further action is warranted.

### 3. Identification and Prioritisation of Opportunities (if feasible and a favourable business case)

- A summary of the most promising data automation opportunities should feasibility and value be demonstrated.
- Prioritisation of these opportunities based on factors such as readiness, impact, and alignment with registry needs.
- Recommendations for next steps (e.g., pilot design, stakeholder alignment), where appropriate.

The final report should be accompanied by a short executive summary suitable for use with internal and external stakeholders, and any supporting documentation or artefacts generated through the process (e.g., stakeholder maps, opportunity matrices, etc.)

### Indicative Timeline

Movember anticipates the Discovery Phase may take up to six (6) months from contract execution between the successful Respondent and Movember. However, Respondents may propose an accelerated schedule where appropriate, provided that all required deliverables and stakeholder engagement requirements can be met without compromising rigour or quality.

## 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 are encouraged to address each criterion clearly and comprehensively in their submissions.

- (a) The extent to which the Respondent demonstrates a clear understanding of the problem statement, context, and objectives of the Discovery Phase. Proposals should reflect awareness of the challenges, drivers, and intended outcomes outlined in the brief.
- (b) Quality, clarity, and feasibility of the proposed discovery methods and activities. The approach should be logical, achievable within the timeframes, and well-suited to answering the core feasibility and business case questions.
- (c) Evidence of understanding the cancer Clinical Quality Registry (CQR) landscape and broader stakeholder environment. This includes awareness of jurisdictional differences, governance complexities, health system structures, and sensitivities of engaging diverse stakeholders.
- (d) Demonstrated expertise, qualifications, and capacity to deliver the work. This includes prior experience with health data systems, large-scale stakeholder engagement, and discovery processes, or similar projects. Proposals should also outline team structure, roles, and time commitments.
- (e) Strength of the proposed reporting approach, including how findings will be synthesised, interpreted, and translated into actionable recommendations. Respondents should demonstrate the ability to provide insights, not just data.
- (f) Realism and feasibility of the proposed delivery schedule, including how the Respondent will manage risks, dependencies, and stakeholder access. Proposals should demonstrate confidence in meeting deadlines.
- (g) Assessment of cost-effectiveness in relation to the scope, quality, and expected outcomes of the proposal. Emphasis is on value and impact rather than lowest cost.
- (H) Professionalism, structure, and clarity of the written proposal. High-quality proposals should be well-organised, concise, and responsive to the requirements set out in this RFP.

## 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 automation 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.