# Part A – Invitation and Procurement Information

Process and Systems Improvement Project

November 2026

Acknowledgement of Country

We acknowledge that Aboriginal and Torres Strait Islander peoples are the First Peoples and Traditional Custodians of Australia, and the oldest continuing culture in human history. We pay respect to Elders past and present and commit to respecting the lands we walk on, and the communities we walk with.

Australian Medical Council Limited

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# 1. Introduction to AMC

Established in 1985, the Australian Medical Council (AMC) operates as an independent national standards body and plays a critical role in maintaining the quality, safety and integrity of the Australian medical profession. The AMC is Australia's designated accreditation authority for the medical profession under the National Registration and Accreditation Scheme. The AMC is Australia's key healthcare quality assurance organisation and national standard body for medical education, training, and assessment.

Its purpose is to ensure that standards of medical education, training and assessment of the medical profession promote and protect the health of the Australian community including enhancing outcomes for Aboriginal and/or Torres Strait Islander and Māori peoples. The AMC's Assessment, Accreditation and Standards functions collectively ensure that medical practitioners and education providers meet national standards of competence and quality.

The AMC operates within a highly regulated environment where quality, transparency, consistency, cultural safety and stakeholder confidence are critical.

### 1.1 AMC vision, mission, values

AMC values and focus on culturally safe engagement and approaches are core to our ways of working. Our values are:

- Excellence: Striving for excellence in medical education and training
- Cultural Safety: Ensuring culturally safe practice and culturally competent care for Aboriginal and Torres Strait Islander peoples and Māori
- Collaboration: Working together with regulators, medical schools, and stakeholders
- Integrity: Maintaining honesty, ethical standards and accountability
- Openness and Accountability: Being transparent in operations and decisions
- Innovation: Adapting and improving standards in medical education and assessment.

The AMC's vision and values are available at https://www.amc.org.au/about-the amc/purpose/.

All AMC procurement decisions are based on alignment with AMC values and cultural safety and achieving value and the optimum result for the AMC.

# 2. Background

### 2.1 About the Process and Systems Improvement (PSI) project

The PSI Project is a transformation initiative established to ensure AMC can continue to effectively support Australia's future healthcare workforce through efficient, scalable and sustainable Assessment and Accreditation Functions.

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The PSI project is a strategic priority, aiming to deliver efficiency, effectiveness, adaptability, and stakeholder satisfaction by aligning technology investments with strategic objectives including:

- Streamlining and modernising the assessment and accreditation workflows
- Embedding cultural safety approaches and engagement across all activities
- Reducing unnecessary delays
- Enhancing digital infrastructure and data utilisation
- Enhancing service quality
- Improving stakeholder experience across the assessment and accreditation processes
- Improving organisational agility to enable adaptable system architecture and balanced change management
- Improving efficiency and effectiveness of core processes by reducing workload and manual handling, and by strengthening system connectivity.

The project aims to lay a foundation for future innovation including exploring AI and automation, and enabling sustainability, scalability, and adaptability in a continuously evolving regulatory and healthcare environment. The intended outcome is a future state operating model that enables improved service delivery, greater automation, enhanced stakeholder experiences and stronger organisational capacity and capability to support AMC's long-term strategic objectives.

## 2.2 Context

The Assessment, Accreditation and Standards functions form the core operational mechanisms through which the AMC fulfils its national mandate to ensure medical education and training meets standards that protect the health and safety of the Australian community. Together, they provide assurance that both medical practitioners and education providers are capable, competent, and aligned to contemporary healthcare needs.

**Assessment Function**

The Assessment function is responsible for evaluating international medical graduates (IMGs) seeking registration to practice medicine in Australia. Through a combination of eligibility assessment, examination processes (Clinical Exam or Workplace Based Assessment (WBA)), and structured decision-making pathways, the function ensure that IMGs demonstrate the knowledge, clinical skills, and professional competencies required for safe and effective medical practice within the Australian health system.

Assessment activities extend across the entire candidate journey from application and pathway determination through to verification, examination scheduling, delivery, and results processing. The function works closely with a wide range of stakeholders including examiners, simulated patients (SPs), marshals, regulatory bodies, IT and operational teams. These activities are highly operationalised and involve complex logistics, stakeholder coordination, and compliance considerations.

The primary outcome of the Assessment function is to support public safety by ensuring that IMGs meet the standards expected of medical practitioners in Australia. In doing so, the function upholds AMC’s regulatory and community mandate, while enabling workforce mobility and contributing to national medical workforce supply.

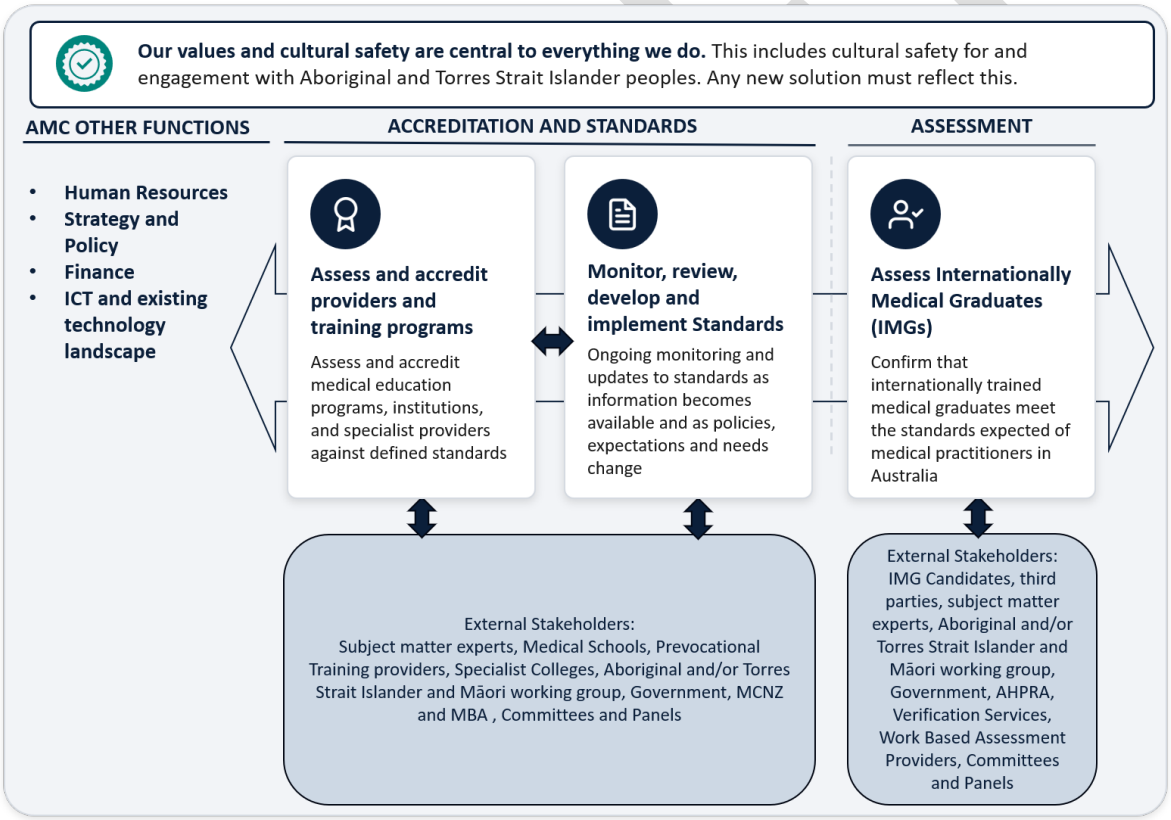
**Accreditation and Standards function**

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The Accreditation function is responsible for assessing and accrediting medical education programs, institutions, and specialist providers against defined standards. The AMC uses approved standards to judge whether a medical program and the organisation delivering it, produces graduates with the knowledge, skills and professional attributes required to practise medicine safely in Australia. AMC develops accreditation standards, assesses education providers and programs against those standards, and monitors them to ensure ongoing compliance.

Accreditation activities encompass submission review, program assessment, stakeholder consultation, site visits, reporting, and governance processes. Accreditation also incorporates continuous monitoring and reporting to ensure ongoing compliance and improvement, reflecting a model that extends beyond singular periodic assessments. The function engages with medical schools, specialist medical colleges, regulatory bodies, government, and the wider health and education sectors.

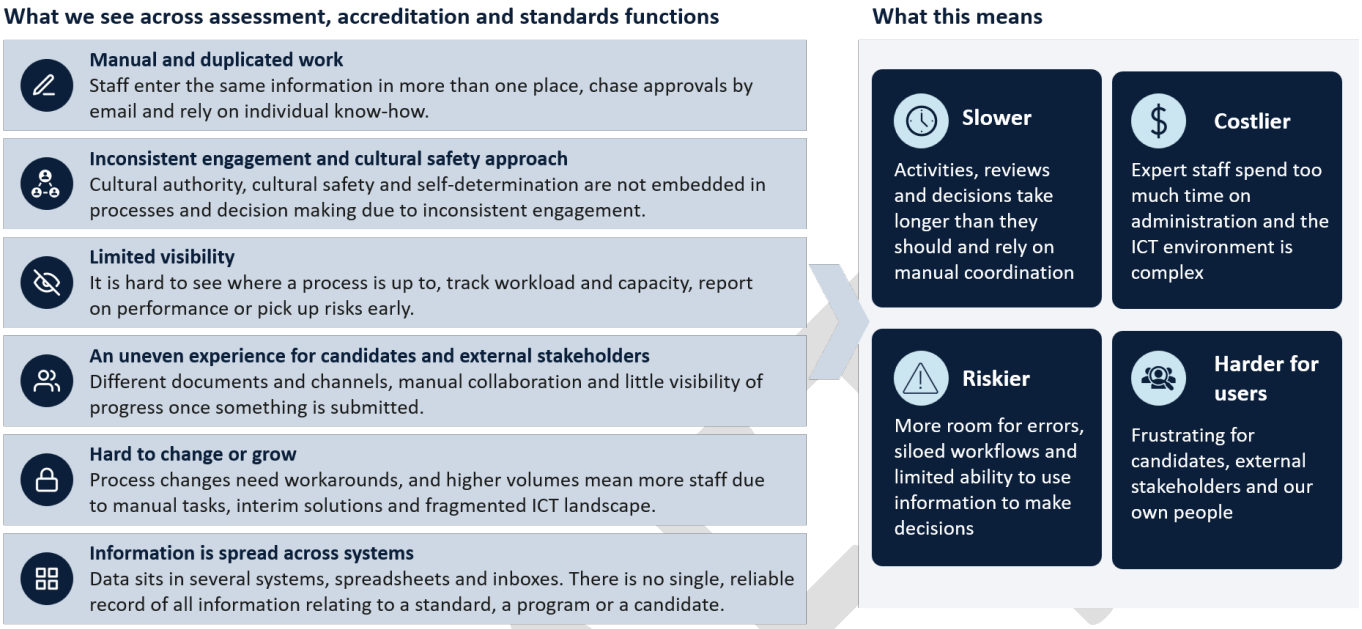
The Standards Review processes involve the ongoing monitoring and evaluation of Standards, and formal reviews. The Standards Review processes enable ongoing improvements and changes as information becomes available and as policies, expectations and needs change in the future. Processes include the stakeholder consultations, cultural engagement, development of standards, environment scans, building relationships, review of standards, evaluation of performance, implementation and reporting.The primary outcome of the Accreditation and Standards function is to support continuous quality improvement in medical education and




training, ensure alignment with contemporary health system needs and expectations to strengthen trust in the medical workforce pipeline and contribute to broader health system performance and safety. This function also provides assurance to the public, government, and the health system that medical education in Australia and New Zealand produces graduates and specialists who are competent, capable, and culturally responsive, and who can practice safely across diverse settings.

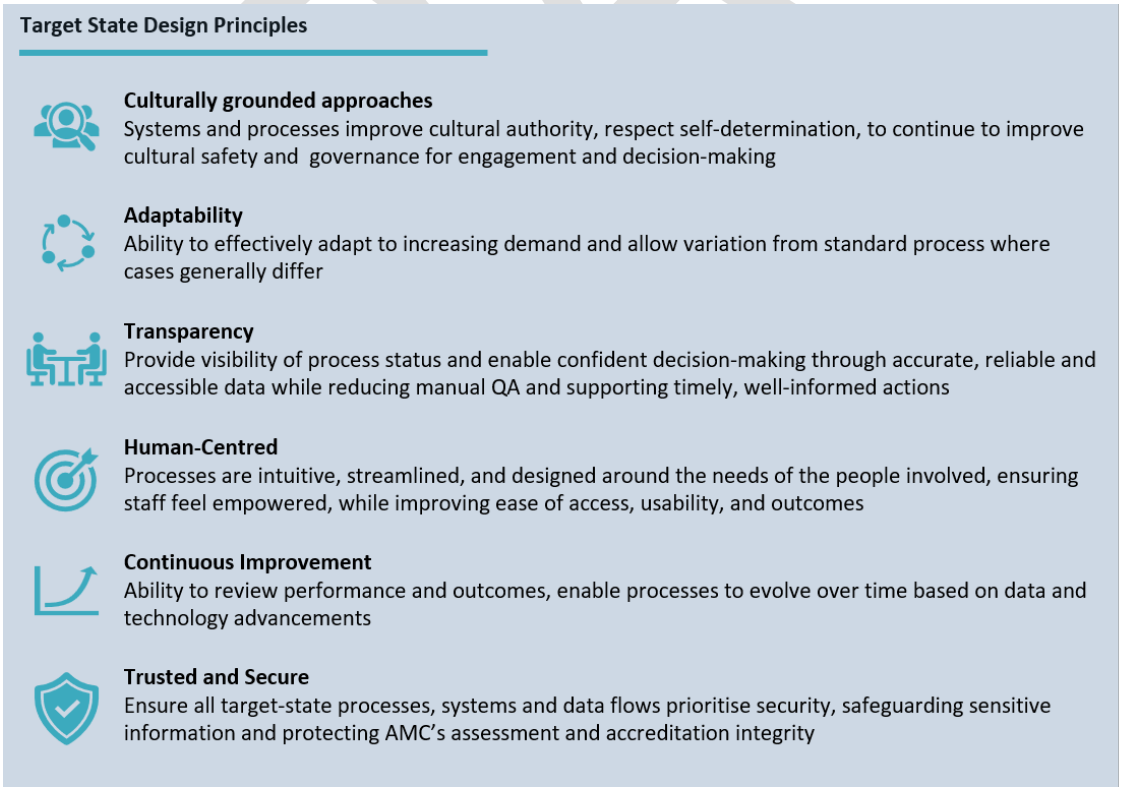
**Current State Challenges and Opportunities**

Key current state opportunities for AMC relate to issues and inefficiencies raised during the delivery, management and administration of the Accreditation, Assessment and Standards functions.

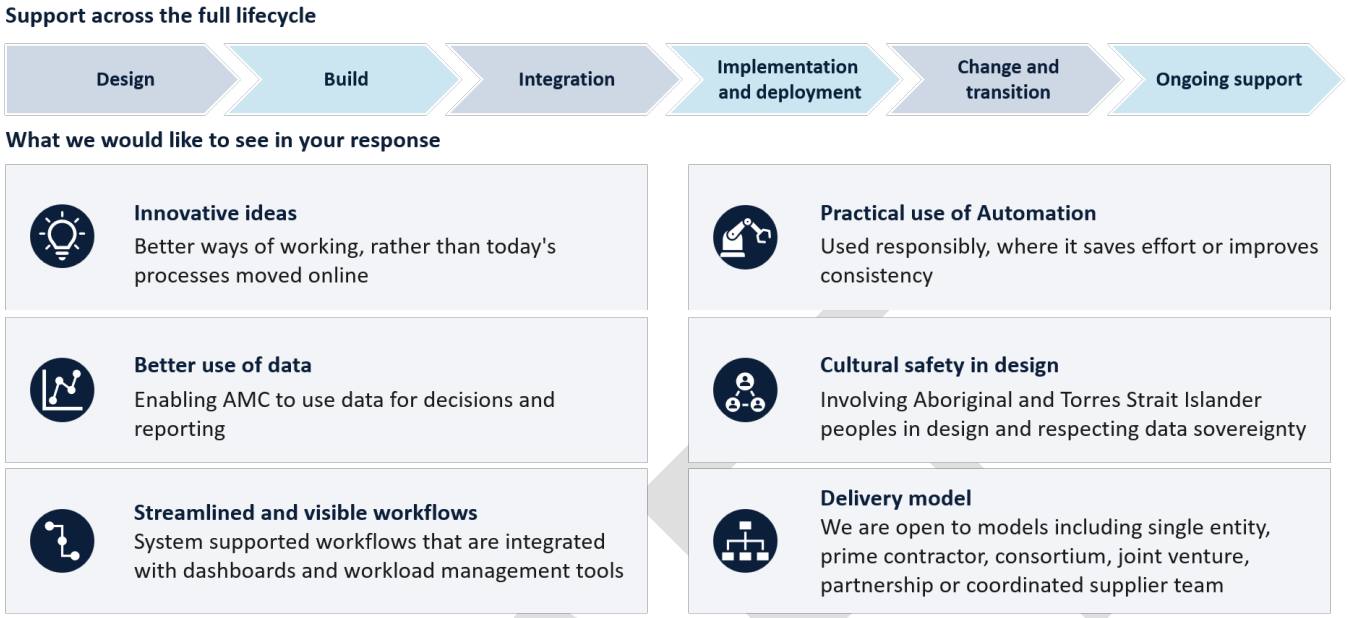



## Target State Design

A target state design activity has been undertaken to address current state challenges, address future business needs and enable desired outcomes. Design principles included:



AMC is looking for a partner to support us from design through to ongoing support. We are open to different approaches that support our target state design.




## 3. Invitation

The Australian Medical Council (AMC) invites suitably qualified Respondents to submit proposals for products, system design, implementation and transition services for the Process and Systems Improvement Project. AMC seeks supportable operating solution/s that improve how Assessment and Accreditation Services manage cases, development of complex documents, governance, stakeholders, records, work and reporting.

AMC is seeking to explore vendor solution/s, design and implementation approaches and technology innovations that can deliver designed target state business outcomes. AMC is not prescribing one product architecture. Respondents may offer a single platform, a platform with an implementation partner, a consortium, a joint venture, a partnership or a coordinated set of specialist components. Each Proposal must state what it covers, who is accountable, how components work together and what AMC or another supplier must provide.

## 4. Purpose and intended outcome

AMC is seeking proposals for solution, or coordinated group of solutions, that improves how its Assessment and Accreditation functions are undertaken. The procurement includes the enabling products, system design, implementation, integration, migration, transition and ongoing services needed to place the nominated scope into operation.

The specifications are outcome-led. Respondents may propose different product and delivery models where they explain how the required outcomes will be achieved, where configuration or customisation is required, solution design and development approach, proposed implementation and deployment methodologies, integration and data migration approach, change management and adoption approach and ongoing support model.

The RFP is an invitation to submit a proposal response. It is not an offer capable of acceptance. No process contract, supply contract or other binding relationship arises merely because AMC issues the RFP, receives or evaluates a Proposal, invites a Respondent to another phase, identifies a preferred Respondent or enters negotiations. A binding supply contract arises only when a written contract is executed by authorised representatives of AMC and the supplier.

## 5. Structure of RFP

The RFP comprises:

- Part A Invitation to Offer
- Part B Conditions of Proposal and Contract Framework
- Part C Specifications and Requirements
- Part D Response Schedule
- Part E Requirements Schedule
- Part F Pricing Schedule
- Each Addendum issued by AMC
- Reference documents including:
  - AMC Privacy Policy
  - AMC Code of Conduct

Respondents must read the RFP documentation as a whole.

If a Respondent identifies an ambiguity, inconsistency or omission, the Respondent must seek clarification through the process in Part A. A Respondent must not rely on its own interpretation where clarification could reasonably have been sought.

## 6. How to use this Part A

Part A provides an overview of what AMC is procuring, the permitted response models and the procurement process. It must be read with:

- Part B Conditions of Proposal and Contract Framework
- Part C Specifications and Requirements
- Part D Response Schedule
- Part E Requirements Schedule
- Part F Pricing Schedule
- Reference Documents.

Respondents must complete Part D in the formats specified by AMC.

Where AMC provides a structured workbook or other native file, the Respondent must complete and return that file without altering its structure unless AMC approves otherwise.

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Part D includes the Respondent's initial contract-departure response.

Part F contains the proposed contractual framework and schedules against which departures must be identified.

The opportunity permits different solution and supplier models. A Respondent may propose one solution, a coordinated set of solutions, or a defined component within a broader solution model. Each Respondent must clearly identify:

- The scope proposed
- The products and services included
- The accountable legal and delivery entities
- Any delivery partner, publisher, subcontractor or third-party component
- The interfaces and dependencies between components
- The responsibilities retained by AMC
- Any requirement that is partly met, not met or dependent on another party.

## 7. Procurement Details

The information below identifies the formal information respondents need to plan and lodge.

| Item | Particular |
|---|---|
| **RFP reference** | PSI 001 |
| **RFP Issue date** | 19 November 2026 |
| **Market Briefing (Zoom)** | A market briefing will be held.<br>Details of the briefing are as follows:<br>• Tuesday, 8 December 2026<br>• Time: 3:00 – 4:00 pm AEDT<br>• Location: Online via Zoom<br>Attendance and joining details will be provided following registration via Zoom.<br>Additional details of the briefing are set out in Section 12.<br>Zoom registration:<br>https://amc.zoom.us/meeting/register/mZ4oj1F2SKST00P8txYZnQ |
| **Clarification deadline** | 14 January 2027, 5:00 pm AEDT |
| **Submission Close** | 29 January 2027, 11:59 pm AEDT |

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| **AMC contact** | Tatenda Chitsungo<br>Email: PSI@amc.org.au |
| **Lodgement information** | Submissions will be via email: PSI@amc.org.au<br>**Subject:** PSI Project Tender Submission - *(insert respondent organisation's name/ lead organisation name for more than one provider*) |
| **Complaints** | Submissions will be via email: Privacy@amc.org.au |

### 7.1 Procurement timetable

The procurement will operate through a staged process. Phase 1 is the only open-entry phase. AMC will issue a written invitation before a Respondent progresses to a later phase.

The timetable is indicative and may be amended by Addendum. AMC will allow Respondents reasonable time to form and confirm delivery teams, obtain publisher and partner commitments, interpret the initial requirements baseline and prepare a complete Proposal.

Dates after Phase 2 remain subject to the outcomes of solution validation, AMC's requirements-refinement activities, Gate 2A approval and the time required for affected Respondents to update their offers.

| Activity | Date |
|---|---|
| **Phase 1: Initial evaluation** | 29 January– 27 February 2027 |
| **Phase 2: Demonstrations, technical validation and optional proof of concept** | 12 March – 26 March 2027 |
| **Phase 2A: Requirements refinement and confirmed solution baseline** | 26 March 2027 – 9 April 2027 |
| **Phase 3: Final offer, due diligence and optional BAFO** | 16 April – 30 April 2027 |
| **Phase 4: Negotiation and award** | May 2027 |

AMC may amend, extend, postpone, pause, cancel, terminate or reissue the RFP or any phase before contract execution, subject to the Conditions and applicable approvals. Participation in a phase does not create an entitlement to progress or receive a contract award.

## 8. Scope

A Proposal Response must address the business outcomes, enabling technology, design, implementation and delivery services and ongoing support relevant to its nominated scope.

| Scope layer | Included services and outcomes |
|---|---|
| **Business capabilities** | • Assessment and Accreditation lifecycle workflows<br>• Work management<br>• Stakeholder management and communication services and portals<br>• Examination management and administration<br>• Case management<br>• Governance and decisions<br>• Documents and records<br>• Reporting and analytics. |
| **Enabling technology** | • Products<br>• Licences and subscriptions<br>• Hosting and environments<br>• Solution and technical architecture<br>• Configuration<br>• Extensions and controlled customisation<br>• Integration<br>• Data services<br>• Security<br>• Privacy<br>• Accessibility<br>• Monitoring<br>• Support tooling and<br>• Technical documentation. |
| **Implementation and Change** | • Mobilisation<br>• Discovery<br>• Detailed solution, technical, integration and data design<br>• Configuration and build<br>• Controlled customisation<br>• Integration<br>• Migration<br>• Testing and assurance<br>• Change management<br>• Communications<br>• Training<br>• Deployment<br>• Cutover<br>• Go-live<br>• Hypercare<br>• Operational readiness |

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| | • Transition to support<br>• Knowledge transfer. |
| **Retained AMC environment** | • Interfaces and dependencies involving AMC's retained finance, identity, payment, website, data and examination services, together with any other service confirmed in Part C.<br>• AMC is seeking integration with retained identity services, not replacement of AMC's enterprise identity provider. |
| **Ongoing services** | • Product maintenance<br>• Hosting or managed services where proposed<br>• Application support; monitoring<br>• Service management<br>• Release management<br>• Reporting<br>• Lifecycle management<br>• Knowledge management<br>• Transition and exit assistance. |

Detailed requirements and scope boundaries are contained in Part C.

Where Part A and Part C appear inconsistent, Respondents must seek clarification through the formal RFP contact.

## 9. Minimum conforming proposal

A minimum conforming Proposal must:

- Be submitted by a valid legal entity and be appropriately authorised
- Include completed declarations, Addenda acknowledgements and usable response files
- Address at least one functional domain and all common domains and obligations relevant to the nominated scope
- Nominate one Lead Respondent and disclose the complete Respondent Team
- Include an Indigenous Participation Plan including information requested in Part D as a separate document
- Include the financial, insurance and corporate information requested in Part D
- Demonstrate the ability to meet the applicable privacy, data, records, security, accessibility and identity requirements
- Disclose actual, potential or perceived conflicts and any material legal, integrity, sanction or insolvency matters
- Respond to all requirements applicable to the nominated scope, including gaps, dependencies and Not Met responses
- Identify all contract departures in the response schedule provided by AMC.

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A Proposal must include a minimum response including:

| Requirement | Details |
|---|---|
| **AMC values and cultural safety** | Respond to all requirements in the AMC values and cultural safety section of Part D, including an Indigenous Participation Plan as part of the response. |
| **Functional Capability Domains** | Respond to at least one or all of the functional capability domains below:<br>• Core Assessment and Accreditation<br>• Stakeholder and engagement management<br>• Capacity and workload management. |
| **Common Capability Domain Sub-categories** | Respond to all applicable common Capability Domain Sub-categories related to the selected functional capability domain/s including:<br>• Document and records<br>• Implementation and transition<br>• Integration services<br>• Data migration<br>• Testing and acceptance<br>• Retained AMC environment and dependencies<br>• Non-functional and service.<br><br>Responses should include:<br>• Proposed solution and technical architecture, hosting and environments<br>• Proposed approach and methodologies<br>• Solution limitations, assumptions, risks, exclusions, not met responses and dependencies<br>• Applicable design, implementation, testing, change, cutover, support and transition approaches and timeframes<br>• Applicable data and migration<br>• Applicable interfaces and integrations<br>• Ongoing support and product lifecycle<br>• All dependencies on AMC, a retained service or another supplier and state the proposed accountability<br>• Demonstrated capabilities and experience delivering similar solutions. |
| **References** | At least two References demonstrating previous experience delivering similar requirements and solutions. |
| **Pricing** | Provide whole-of-life pricing, assumptions, options and exit in alignment with Part F – Pricing Response Schedule. |
| **Mandatory Compliance** | • Respondent is a legal entity recognised under Australia Law at the Proposal Closing Time<br>• Compliance with Insurance requirements<br>• The Respondent must not be insolvent or bankrupt<br>• Cultural safety information including an Indigenous Participation Plan has been provided<br>• Minimum content and format requirements are met. |

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| **Evaluation Criteria** | • Alignment with AMC Values<br>• Relevant experience and proven capability<br>• Business, functional and process fit<br>• Configurability, data, architecture, and integration, non-functional requirements<br>• Implementation, change management and transition approach<br>• Commercial and whole-of-life value |
| **Terms and Condition departures and commitments** | The commitment proposed for incorporation into Part G schedule. |

AMC may treat a generic staff-augmentation response without a defined solution context as non-conforming.

Respondent submissions must include:

- Completed Part D in the required format
- Completed Part E in native Excel format
- Complete Part F in native Excel format
- Provide Indigenous Participation Plan as a clearly labelled attachment in either Microsoft Word, PowerPoint or PDF format (Maximum 3 page limit)
- Respondents may choose to provide additional supporting information in pdf or Microsoft PowerPoint format. Additional information should be referenced in the relevant section of Part D.

If a respondent would like to provide large files or information in a format not outlined above, please notify the AMC Contact in Section 7.

## 10. Capability domains and respondent scope election

The capability domains below define the areas for which a Respondent may submit a Proposal. The domains are not fixed contract lots and AMC has not predetermined the final packaging or award model.

A Respondent may submit a proposal for one or more Capability Domains.

Respondent submissions should include supporting information for all common Capability Domain Sub-Categories for each Capability Domain included in the proposal.

| Capability Domain | Type | Required outcome |
|---|---|---|
| **Core Assessment and Accreditation** | Functional | Support end-to-end Assessment and Accreditation function activities including workflow management, case management, cultural safety considerations, examination management, collaboration on complex documents, site visits, accreditation and standards processes, appeals and decisions processes.<br>Provide operational reporting, performance insight, audit traceability, and access to governed information across the solution ecosystem. |
| **Stakeholder and engagement management** | Functional | Provide operational reporting, performance insight, audit traceability, and access to governed information across the solution ecosystem. |

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| **Capacity and workload management** | Functional | Maintain trusted stakeholder information, support secure interactions, communications, scheduling visibility, task management, search capabilities, reporting, portals and delegated access. |

Capability domain sub-categories are applicable across the functional capability domains.

| Capability Domain Sub-Categories | Type | Required Outcome |
|---|---|---|
| **Document and records** | Common | Manage documents and evidence through capture, classification, versioning, access, retention, retrieval, disclosure, disposal and export. |
| **Implementation and change** | Common | Provide the services required to design, configure, migrate, test, deploy, train, adopt and support the nominated solution. |
| **Integration services** | Common | Enable secure, monitored information exchange across new, retained, and external systems using the integration pattern required by the final architecture. |
| **Data migration** | Common | Provide governed operational, regulatory and management reporting with traceability and controlled data access. |
| **Testing and acceptance** | Common | Provide the testing, assurance, traceability and acceptance services needed to demonstrate that the implemented solution satisfies the contracted requirements and approved solution baseline. |
| **Retained AMC environment and dependencies** | Common | Enable the required interactions with the retained AMC environment. |
| **Non-functional and service** | Common | Provide the services to deliver non-functional and service requirements. |

The domains are not fixed lots. AMC may combine domains differently at award where the resulting solution remains viable, affordable and accountable. Additional details on capacity domains and requirements are outlined in Part C Specifications and Requirements.

## 11. Preferred contracting and delivery model

AMC may award one contract or multiple coordinated contracts. AMC has not predetermined the final contracting model.

The award structure will depend on solution viability, accountability, integration risk, service-management requirements, affordability and AMC's capacity to manage supplier interfaces. AMC prefers arrangements that minimise unclear or fragmented accountability.

Where a Proposal includes multiple products or delivery parties, the Proposal must identify:

- The Lead Respondent and proposed contracting entity
- The party responsible for solution and design authority
- Responsibility for integration and implementation coordination
- Interface and dependency ownership
- Service-management and incident-resolution responsibilities
- Responsibility for testing and end-to-end acceptance

- The consequences of delay or non-performance by another supplier
- The governance and commercial mechanisms proposed to manage cross-supplier obligations.

AMC may require shortlisted Respondents to clarify or revise their proposed team or contracting model. AMC may also invite Respondents to develop a coordinated arrangement with another shortlisted Respondent where this is permitted by the Conditions of Proposal and managed consistently with competition and probity requirements.

A Respondent must not add, remove or substitute a material Respondent Team member, publisher, product or component without AMC's prior written approval.

| Requirement | Respondent obligation |
|---|---|
| **Permitted models** | Single entity, prime contractor, consortium, joint venture, partnership or coordinated supplier team. |
| **Lead Respondent** | Nominate one Lead Respondent and proposed contracting entity for each Proposal. |
| **Award structure** | AMC may award one or more contracts by domain or coordinated package. |
| **Interfaces** | Identify ownership, dependencies, evidence, support and boundary responsibilities. |
| **Service integration** | AMC retains service integration authority and may contract operational coordination where required. |
| **Change control** | Obtain AMC approval before any material team, publisher, product or component change after the initial RFP. |

## 12. Market Briefing

AMC intends to conduct an optional market briefing at the date, time and registration instructions are provided in Section 5. The briefing will provide background information and explain the procurement process.

Respondents may submit questions through the formal clarification process.

A statement made during the briefing does not amend the RFP. Any change to the RFP will take effect only where AMC issues it in writing through an Addendum or other formal procurement communication.

## 13. Procurement progression

The procurement will be conducted using the staged approach below, this RFP is the only open-entry stage. AMC will issue a written decision before a Respondent progresses through each phase.

| Phase | Details |
|---|---|
| **Phase 1: Initial Proposal Response** | Respondents provide eligibility information, scope election, team and contracting model, proposed solution, coverage against the requirements, evidence, delivery approach, assumptions, risks, references, initial contract departures and ROM whole-of-life pricing. |
| **Phase 2: Demonstration,** | Shortlisted Respondents participate in common AMC-scripted demonstrations and technical and delivery validation. Where authorised, AMC may conduct a |

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| **technical validation and optional proof of concept** | limited proof of concept for material uncertainties or high-risk requirements. |
| **Phase 2A: Requirements refinement and confirmed solution baseline** | AMC may confirm, clarify, amend, add, reprioritise, defer, remove, group or split requirements, or identify controlled discovery items.<br>Affected Respondents will be provided an opportunity to submit a revised response. |
| **Phase 3: Final offer, due diligence and optional BAFO** | Invited Respondents provide firm scope, licensing, implementation, key personnel, pricing, AMC effort, assumptions, acceptance position and updated contract departures against the Gate 2A approved baseline.<br>AMC conducts reference, financial, legal, security, privacy and product due diligence. |
| **Phase 4: Negotiation and award** | AMC resolves scope, solution and design boundaries, implementation obligations, acceptance, price, interfaces, risks, service obligations and contract terms. |
| **Phase 5: Mobilisation** | The selected supplier or suppliers establish governance, plans, environments and delivery controls and commence detailed design within the contracted outcomes and approved discovery boundaries. |

A person or organisation that does not lodge a compliant RFP cannot enter a later procurement stage directly or through a new Proposal. A Respondent not invited to the next procurement state ceases active participation, subject to continuing confidentiality, records, complaint and debriefing obligations.

## 14. Evaluation Approach

AMC will assess the participation conditions and mandatory requirements. Eligible Proposals will then be assessed against the approved evaluation criteria.

Phase 1 evaluation will use outcome-level criteria as the primary scored structure. AMC will use the detailed requirements response to assess coverage, gaps, evidence, dependencies, implementation implications and risk. AMC may also consider mandatory compliance, evidence strength, affordability, residual risk, market sufficiency, due diligence, legal and probity matters.

| Criterion | Assessment focus |
|---|---|
| **Solution fit and requirements coverage** | Required outcomes delivered, standard or configured capability, user fit, accessibility, gaps and customisation risk. |
| **Design, implementation, transition and adoption** | Design and delivery approach, schedule, resources, migration, integration, testing, change, training, cutover, AMC effort and support transition. |
| **Architecture, integration, data, security and service** | Fit with retained services, architecture, data, security, privacy, records, accessibility, resilience and ongoing services. |
| **Supplier, partner model, accountability and capacity** | Legal and delivery responsibility, experience, key personnel capabilities, publisher and partner commitment, financial capacity and continuity. |
| **Alignment with AMC values accessibility** | Alignment with AMC values including culturally safe design, Indigenous data considerations and participation commitments. |

| | |
|---|---|
| **Commercial and whole-of-life value** | Normalised whole-of-life cost, price transparency, flexibility, risk allocation, options, assumptions and value protections. |

### 14.1 Solution validation

Shortlisted Respondents will receive scenarios, preparation instructions, evidence requirements and session rules to support Phase 2 activities. AMC may conduct:

- Common end-to-end demonstrations
- Technical and architecture review
- Implementation and delivery validation
- Security, privacy, data, records and accessibility review
- Commercial and licensing clarifications.

A presentation, description or pre-recorded demonstration will not be treated as equivalent to live or tested evidence unless AMC states otherwise.

Respondents must distinguish:

- Current standard capability
- Configured capability
- Extension or customisation
- Prototype or mock-up
- Third-party capability
- Capability that is not available.

A limited proof of concept may be requested where AMC needs stronger evidence for a material uncertainty or high-risk requirement.

AMC may record observed opportunities, gaps, workarounds, dependencies, design implications and commercial impacts for use in Phase 2A.

### 14.2 Phase 2A requirements refinement

After solution validation, AMC may refine the initial requirements using the evidence obtained from Proposals, demonstrations, technical review and any proof of concept. AMC may:

- Confirm or clarify a requirement
- Amend its wording or priority
- Add a material omission
- Group or split requirements
- Defer or remove a requirement
- Revise a scenario or acceptance expectation

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- Identify a matter for controlled post-award discovery.

AMC will issue approved changes through a Requirements Baseline Addendum or another controlled procurement communication.

Affected shortlisted Respondents will be given materially equivalent information and a reasonable opportunity to update the affected parts of their proposed solution, implementation approach, assumptions, dependencies, price, schedule and contract commitments.

Where a proposed change could have influenced participation in the open-market phase or materially changed the competitive basis, AMC may extend, reopen, reissue, pause or cancel the procurement.

### 14.3 Commercial assessment

AMC will assess whole-of-life value, including supplier pricing, licensing, implementation, ongoing services, AMC-side effort, retained-service cost, contingency, transition and exit.

Phase 1 pricing will be treated as ROM pricing unless AMC states otherwise. Following Gate 2A, invited Respondents must provide firm or otherwise specified pricing against the confirmed requirements baseline.

Respondents are not required to allocate a separate price to every detailed requirement unless Part E expressly requests it. Pricing references should identify the relevant product, service, implementation activity, option, component or cost category.

### 14.4 Respondent team continuity

The RFP must identify every material participant. No consortium member, publisher, implementation partner, material subcontractor or solution component may be added, removed or substituted without prior written AMC approval. AMC may refuse or condition a change, seek evidence, reassess or deselect.

AMC may invite or approve a change to a Respondent Team where requirements refinement indicates that different or additional capability is needed. AMC will consider competition, fairness, accountability, confidentiality, capacity and the effect on the evaluated Proposal before approving any change.

### 14.5 Requirements response

AMC has provided the full target state business requirements for Phase 1. Each applicable requirement must be classified using the response categories provided in Part D. The response must identify:

- The ability to deliver
- Applicable product or service proposed to deliver the requirement
- Whether the requirement is met by standard capability, configuration, extension, customisation, roadmap, third-party capability or a service.

Where applicable additional information should be provided in response to the relevant Capability Domain/s in Part D including:

- Supporting evidence
- Dependencies and assumptions
- Required system design and implementation activities

- Anticipated timing
- The relevant pricing component or cost reference where applicable.

A Respondent may identify a requirement as partially met, provided the response clearly identifies the supported and unsupported elements and the proposed treatment.

AMC will use the response to assess coverage and risk and to identify matters requiring clarification, demonstration, proof of concept or requirements refinement. Unsupported claims and commitments may receive reduced or no evaluation credit.

The initial requirements baseline is not the final contracted baseline. The confirmed baseline will be established through Phase 2A activities before final offers or BAFO are requested.

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# Appendix

## Definitions

| Term | Definition |
|---|---|
| Addendum | A written amendment, clarification or supplement issued by AMC as part of the RFP. |
| AMC | Australian Medical Council Limited. |
| BAFO or Best and Final Offer | A revised and final offer requested by AMC under Section 20. |
| Base Proposal | The Respondent's principal conforming Proposal. |
| Closing Time | The date and time stated in Part A, as amended by Addendum. |
| Confirmed Requirements Baseline | The requirements baseline approved by AMC at Gate 2A. |
| Consortium | Two or more organisations collaborating to submit and deliver a combined solution, bringing together complementary capabilities, products or services. |
| Controlled Discovery Item | A matter approved by AMC for further investigation or elaboration after contract award within defined scope, responsibility, commercial and change-control boundaries. |
| **Configuration** | Delivered through supported configuration using standard product tools. |
| **Current standard capability** | Available in the proposed product, edition or service without implementation change beyond normal activation. |
| **Customisation** | Requires bespoke code or modification that may affect support, testing or upgradeability. |
| **Extension** | Delivered through a supported extension that remains separate from the product core. |
| Gate | A formal AMC decision point determining whether and how the procurement will proceed. |
| Gate 2A | The AMC decision point for approval of the Confirmed Requirements Baseline and authority to request final offers or BAFO. |
| Initial Requirements Baseline | The requirements issued by AMC for response in Phase 1. |
| Joint venture | Two or more organisations establish a formal joint arrangement, potentially through a separate legal entity, to jointly pursue and deliver the opportunity. |
| Lead Respondent | The organisation nominated as the primary point of responsibility for preparing, coordinating and submitting the response on behalf of multiple participating organisations. Unless otherwise specified, being the lead respondent does not necessarily mean it will hold sole contractual accountability if the proposal is successful. |

| | |
|---|---|
| Partnership or coordinated supplier team | Two or more organisations working together to provide an integrated solution or service, with each organisation contributing defined capabilities or responsibilities. The arrangement may be less formally structured than a consortium or joint venture but should clearly establish accountability and interfaces between suppliers. |
| Phase 2A | The requirements-refinement phase conducted after solution validation and before final offers or BAFO. |
| Prime contractor | One entity acts as the principal contractor and holds overall contractual accountability for delivery, while engaging and managing subcontractors or other third parties to deliver components of the solution or services. |
| Proof of Concept | A limited and controlled activity used to test one or more material uncertainties or high-risk requirements. |
| Requirements Baseline Addendum | An Addendum issued after Phase 2 that records approved changes to the Initial Requirements Baseline. |
| Respondent | The legal entity that submits a Proposal. |
| Respondent Team | The Lead Respondent and each disclosed consortium member, implementation partner, software publisher, subcontractor or other material participant. |
| **Professional or managed service** | Delivered through a professional or recurring managed service rather than product capability. |
| Proposal | The Respondent's complete response, including any approved clarification, delta response, final offer or BAFO. |
| Proposal Material | All information, documents, models, demonstrations, data and other material supplied by or for a Respondent during the procurement. |
| **Roadmap** | Not currently available and dependent on a future product release. The response must state whether it is publicly committed, contractually committed, subject to a target release, dependent on another party or indicative only. |
| Single entity | One legal entity submits the response and, if successful, enters into the contract and assumes responsibility for delivery of the proposed technology solution and services. |
| **Third-party capability** | Delivered by another identified product, supplier or service. |
| **Unavailable capability** | The proposed solution does not provide the capability. |



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