Invitation to Tender

National LGBTQ+ Youth Counselling Service

Provision and clinical management of a blended counselling service for LGBTQ+ young people aged 13-23 across Ireland

OPEN COMPETITIVE PROCESS | PILOT

Tender reference	BT-T001
Contracting authority	Belong To - LGBTQ+ Youth Ireland
Contract term	10.5 months, anticipated March to mid-December 2027
Estimated contract value	Up to EUR 44,000 inclusive of VAT, subject to funding and final approval
Issue date	Tuesday the 24th of November 2026
Deadline for clarification questions	Friday the 11th of December 2026
Tender closing date	Tuesday the 15th of December 2026
Submission method	Email to liam@belongto.org
Contact	Liam@belongto.org

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Key interpretation

“Belong To” means Belong To - LGBTQ+ Youth Ireland. “Contractor” means the successful tenderer. “Young person” means an eligible service user aged 13-23. “Service” means the national blended counselling service described in this document.

Procurement assumptions

- A single service contract is proposed for an initial pilot period.
- The procurement is contingent on funding approval and Belong To may amend, postpone or cancel the process before contract signature.
- The successful tenderer may be an organisation, or appropriately structured sole provider, but must demonstrate capacity to deliver the complete service and clinical governance requirements.
- This tender creates no guaranteed minimum volume. The available budget is based on the maximum service outputs specified in the tender, and the final amount payable will reflect the number of eligible sessions actually delivered at the agreed rate.

1. Procurement Overview

1.1 Purpose

Belong To invites tenders from suitably qualified providers to establish, clinically manage and deliver a national, LGBTQ+ inclusive counselling service for young people aged 13-23. The service will use a blended model of secure online counselling and in-person sessions at Belong To offices in Dublin City.

1.2 Procurement summary

Item	Requirement
Service type	Counselling, assessment, risk management, referral, signposting, case management and outcome reporting
Target cohort	LGBTQ+ young people aged 13-23, with particular accessibility for trans, non-binary and questioning young people
Geographic reach	Republic of Ireland, with online national access and in-person delivery in Dublin
Delivery model	The service will be delivered over three agreed days per week between Tuesday and Friday, comprising approximately five hours of direct therapeutic work per delivery day and one additional hour of administration per week.
Pilot outcomes	Approximately 80-100 young people and 600 direct sessions, subject to demand and clinical need
Intervention	Six weekly sessions, with up to six additional sessions where clinically justified
Commencement	Anticipated March 2027
End date	Anticipated mid-December 2027

1.3 Procurement timetable

Milestone	Provisional date
Issue date	Tuesday, 24th November 2026
Clarification deadline	Friday, 8th December 2026 at 12:00 noon
Responses to clarifications	Monday,11th December 2026
Tender deadline	Tuesday, 15th December 2026 at 12:00 noon

Milestone	Provisional date
Interviews	Wednesday, 13th January 2027
Notification of outcome	Monday, 18th January 2027
Service commencement	March 2027 (anticipated

2. About Belong To and Service Context

2.1 About the contracting authority

Belong To - LGBTQ+ Youth Ireland is Ireland's national organisation supporting lesbian, gay, bisexual, transgender and queer (LGBTQ+) young people aged 10-24. We work alongside LGBTQ+ young people to create a world where they are equal, safe and valued. Our mission is to empower LGBTQ+ young people through youth work, education, research, advocacy and the promotion of positive societal change. We provide direct support to young people, families and professionals, while working to ensure that LGBTQ+ young people can thrive in their schools, communities and wider society.

Through our work, we:

- Deliver high-quality LGBTQ+ youth work services and support a growing network of LGBTQ+ youth groups across Ireland.
- Build safe, inclusive spaces and services by training and supporting professionals working with young people in education, youth services, sport and community settings.
- Support parents, caregivers and families to better understand and support their LGBTQ+ young people.
- Champion the voices of LGBTQ+ young people through advocacy, research and campaigns that promote equality, inclusion and social change.
- Strengthen our organisation and systems to ensure sustainable, impactful support for LGBTQ+ young people now and into the future.

Together, these activities contribute to our vision of an Ireland where every LGBTQ+ young person is equal, safe and thriving.

This tender marks the development of a standalone counselling service within our wider frontline services. We intend the new counselling service to provide a wraparound support structure for LGBTQ+ young people and their families, integrated with Belong To's youth services, the National Network of LGBTQ+ youth groups across Ireland, our family support service, and our partnership with Pieta, which provides crisis counselling for young people experiencing self-harm or suicidal ideation.

2.2 Rationale

Belong To and Trinity College Dublin's research 'Being LGBTQI+ in Ireland in 2024', highlighted the urgent need for mental health supports for LGBTQ+ young people and reinforces Belong To's concern regarding the high levels of self-harm and suicidal ideation amongst LGBTQ+ young people. From this research, it can be noted that 77% of LGBTQ+ young people aged 14 to 18 reported suicidal thoughts, while 72% had self-harmed. The findings also identify transgender and gender non-conforming people as one of the groups at greatest risk, with 82% reporting suicidal thoughts, 75% reporting self-harm, and 39% having made a suicide attempt. These figures demonstrate the significant and disproportionate mental health

burden experienced by trans and non-binary young people and reinforce the need for accessible early-intervention counselling services.

The need for a dedicated LGBTQ+ counselling service is further highlighted by the findings of the Hidden Barriers: Access to Mental Health Services for LGBTQI+ People in Ireland report (September 2026). The report identified a range of barriers that prevent LGBTQI+ people from accessing timely and effective mental health support, including concerns about affordability, long waiting lists, geographical access, fear of discrimination, and a lack of understanding of LGBTQ+ experiences among some mental health professionals. These barriers often result in delayed help-seeking, unmet need and poorer mental health outcomes. Research (Higgins et al., 2021) with over 1,000 LGBTQ+ young people in Ireland found that barriers to accessing mental health services exist at individual, social and health-system levels with many young people reporting difficulties finding services that understood their identities and experiences. The research recommended improved LGBTQ+ cultural competency among providers and more accessible pathways to support. While excellent counselling services exist nationally, many LGBTQ+ young people report to Belong To, difficulties accessing fully inclusive supports with professionals who understand their lived experience.

Through Belong To's direct frontline services, current challenges for young people include:

- Long waiting lists within public mental health and gender services
- High costs associated with private counselling and services
- Limited availability of LGBTQ+ competent and confident therapists
- Variable geographical access across Ireland

The service responds to barriers experienced by LGBTQ+ young people when seeking timely and inclusive mental health support, including cost, waiting lists, geography, fear of discrimination and limited availability of practitioners with appropriate cultural competence. It is intended to complement, rather than replace, statutory, crisis and specialist services.

- Short-term, early intervention before needs escalate to crisis.
- A step-up and step-down pathway alongside youth work and crisis counselling.
- Support while young people await statutory or specialist services.

2.3 Service philosophy

The service must be person-centered, strengths-based, trauma-informed, developmentally appropriate It must recognise the impacts of bullying, discrimination, intersectionality, isolation, family rejection and minority stress while respecting each young person's autonomy, identity and pace of exploration.

2.4 Boundaries of service

The service will provide counselling and psychosocial support for LGBTQ+ young people across Ireland with mild to moderate mental health difficulties. It will not provide gender healthcare, medical assessment for transition, emergency psychiatry, or a substitute for CAMHS, adult mental health services or crisis intervention. The Contractor must maintain clear escalation and onward-referral pathways.

This is an early-intervention counselling service for young people presenting with mild to moderate anxiety, depression or emotional distress and is not a crisis service; where self-harm or suicidal ideation is identified, the young person will be risk-assessed and referred through Belong To's partnership with Pieta or to another suitably qualified crisis-intervention service.

3. Scope and Model of Care

3.1 Core model

1. Accept and triage referrals through agreed secure channels.
2. Complete an initial assessment addressing presenting needs, suitability, safeguarding, risk and onward-referral requirements.
3. Agree therapeutic goals with the young person.
4. Deliver short-term individual counselling, primarily using CBT-informed and other evidence-based approaches appropriate to the young person.
5. Review progress, outcomes and ongoing risk throughout engagement.
6. Complete planned endings and onward referral or signposting where required.
7. Support the monitoring and evaluation of this pilot service.

3.2 Access and referral

- Young people aged 18-23 may self-refer.
- For those under 18, referral must be made by a parent/guardian or approved referring service with appropriate parent/guardian consent, subject to applicable safeguarding and legal requirements such as schools, GPs, Pieta etc.
- The Contractor must support accessible referral by online form, email and/or telephone as agreed with Belong To.

3.3 Assessment and allocation

Every referral must receive a proportionate screening and assessment. The Contractor must define inclusion, exclusion, prioritisation and waiting-list management criteria with the Project Lead in Belong To, and must not accept a young person where the service cannot safely meet their needs.

3.4 Clinical intervention

- Sessions will ordinarily be 45-50 minutes.
- The standard intervention is up to six weekly sessions.
- A further block of up to six sessions may be approved where clinically indicated and within capacity.
- Family engagement may be included where appropriate, consented and therapeutically beneficial.
- Online sessions must use a secure, confidential, accessible platform and private & confidential space to deliver online sessions.
- In-person counselling sessions will be delivered at Belong To's premises in Dublin 2, where a private and confidential room will be available on the agreed service-delivery days between 8:00 a.m. and 1:00 p.m. Belong To will also provide the contractor with access to a laptop and Salesforce for the secure management of referrals, appointments and client information, subject to completion of the required data-protection, confidentiality and systems training.

4. Detailed Service Specification

Workstream	Minimum requirement
Mobilisation	Agree implementation plan, referral routes, clinical protocols, service information, consent documentation, outcome tools and reporting templates before launch.
Direct clinical work	Provide assessment, counselling, review, planned ending, referral and signposting. Maintain 15 direct client hours per week at full capacity.
Case administration	Manage appointments, attendance, cancellations, waiting list, consent, case notes, risk records and referral correspondence.
Risk response	Operate documented procedures for self-harm, suicidal ideation, abuse, exploitation, acute deterioration, emergency escalation and welfare checks.
Partnerships	Build and maintain referral pathways with at least 10 relevant statutory, community and voluntary services.
Service promotion	Support accurate service information and referral guidance for young people, families and partners.
Outcome measurement	Collect agreed pre/post wellbeing measures, service activity data, feedback and qualitative learning.
Reporting	Provide regular operational reports, an 8-week review input, bi-annual outcome reporting and an end-of-pilot report.
Continuous improvement	Use demand, access, equality, outcome and feedback data to recommend service improvements and future capacity.

4.1 Required deliverables

- Mobilisation plan within 10 working days of contract award.
- Clinical governance and safeguarding pack before accepting referrals.
- Monthly dashboard within 10 working days of month-end.
- Immediate notification of serious incidents in accordance with agreed protocol.
- Mid-year review report and end-of-year evaluation report.
- Handover and continuity plan at contract end.

4.2 Delivery locations

In-person sessions will take place at Belong To offices in Dublin City. Online delivery will reach eligible young people nationally. Any alternative premises must be accessible, private, safe and approved by Belong To before use.

5. Safeguarding, Clinical Governance and Data Protection

5.1 Safeguarding

- Comply with Children First Act 2015, Children First: National Guidance and Belong To safeguarding policies.
- Maintain a current Child Safeguarding Statement and safeguarding risk assessment.
- Ensure all personnel with access to young people are appropriately Garda vetted before service delivery.
- Provide evidence of safeguarding training and regular refresher arrangements.

5.2 Clinical governance

- Named clinical lead, within Belong To, accountable for safe practice and clinical quality.
- Documented clinical supervision at an appropriate frequency and delivered by a suitably qualified supervisor.
- Policies for assessment, consent, confidentiality, record keeping, risk, complaints, incidents, boundaries, lone working and online practice.
- Use of evidence-informed interventions within practitioner competence.
- Arrangements for cover, leave, sickness, continuity and safe caseload management.

5.3 Data protection and confidentiality

- Comply with GDPR, Data Protection Act 2018 and all applicable privacy requirements.
- Clearly define data-controller responsibilities prior to service commencement. Belong To and the Contractor shall execute a Data Sharing Agreement, as legally appropriate, reflecting the Contractor's clinical governance responsibilities for therapeutic records and Belong To's role in referral management and service oversight. Store counselling records separately and securely, with access limited to authorised clinical personnel.
- Provide only agreed, proportionate and appropriately anonymised or aggregated reporting to Belong To unless disclosure is required for safeguarding, legal or clinical reasons.

5.4 Incident management

The Contractor must maintain a serious incident Belong To protocol defining immediate actions, emergency contacts, notification thresholds, documentation, post-incident review and learning. Critical risks must be escalated without delay.

6. Capacity and Performance Requirements

6.1 Minimum practitioner requirements

- A recognised counselling or psychotherapy qualification at minimum diploma/degree level appropriate to professional accreditation.
- Current accredited membership of IACP, IAHIP, PSI or another demonstrably equivalent recognised professional body.
- At least three years' post-qualification clinical experience, including work with adolescents and young adults.
- Demonstrable competence in LGBTQ+ inclusive practice, including work with trans, non-binary and questioning young people.
- Training and experience in safeguarding, suicide/self-harm risk assessment, trauma-informed practice and online counselling.
- Evidence of ongoing clinical supervision.

6.2 Capacity assumptions

Measure	Pilot expectation
Delivery time	Three days per week
Direct work	Approximately 15 hours per week at full capacity
Initial assessments	Approximately 80-100
Counselling sessions	Approximately 600 total direct sessions
Clients supported	Approximately 80-100
National reach	At least 50% of service users from outside Dublin, subject to referral demand
Priority cohort	Target of 70% trans, non-binary or questioning service users, subject to equitable access and demand
Waiting time	Average six weeks or less from referral to assessment and from assessment to first session

6.3 Key performance indicators

- 80% of young people requiring additional support receive appropriate referral or signposting.
- Service activity and outcome data are complete, timely and accurate.
- Complaints, incidents, safeguarding concerns and data breaches are managed within agreed timescales.
- Positive change is demonstrated through agreed wellbeing and feedback measures.
- 90% of respondents report improved coping skills and resilience, where measured and subject to response rates.

7. Contract Management, Pricing and Payment

7.1 Governance

The Director of Youth Services will act as Belong To's contract owner. Operational review meetings will normally occur every eight weeks, with additional meetings where risk, performance, or mobilisation requires.

7.2 Performance management

Performance will be reviewed by the Director of Youth Services, against the specification, mobilisation plan, KPIs, safeguarding and clinical standards, data quality, service-user experience and value for money. Belong To may require a corrective action plan where performance is below standard. Material or repeated failure may lead to suspension of referrals or termination in accordance with the contract.

7.3 Pricing

- The maximum total contract value is €44,000, inclusive of VAT where applicable and all costs associated with delivering the service, subject to funding approval.
- The contract value is fixed, and tenderers are not required to compete on price. Tenders exceeding €44,000 will not be considered.
- The budget is based on the maximum service outputs specified in this tender, including the agreed number of therapeutic sessions, external clinical supervision sessions and administration hours.
- Payment will reflect the number of eligible therapeutic sessions and other approved services actually delivered and verified at the rates specified in the tender. The maximum contract value is not a guaranteed payment.
- Tenderers must confirm that they can deliver the full service specification within the stated budget and provide a breakdown showing the allocation across therapeutic sessions, external supervision and administration.
- The contract price must include all staffing, clinical records, referral management, reporting, professional accreditation, insurance, travel, technology and other costs required to deliver the service, except for the premises, laptop and Salesforce access provided by Belong To.
- No additional fee, expense or price increase will be payable unless approved in advance and in writing through a formal contract variation.

Budget item	Hours/sessions	Rate	Total cost
Therapeutic sessions	600 sessions/hours	€70	**€42,000**
Project Management	N/A		**€2,000**
Total tender cost			**€44,000**

7.4 Invoicing and payment

- Invoices will be submitted monthly in arrears against agreed milestones or verified service delivery.

- Invoices must include the purchase order or contract reference, service period, deliverables completed, net amount, VAT and total.
- Payment will be by electronic funds transfer, subject to satisfactory performance and receipt of a valid invoice.
- Belong To and the successful contractor will agree, at contract stage, the circumstances in which a service fee may be payable for appointments cancelled by a service user with less than 24 hours' notice. No cancellation fee will apply unless it is expressly agreed in the final contract.

7.5 Contract term and extension

The initial term is anticipated to run for 10.5 months. Any continuation, extension or new contract will depend on funding, evaluation, performance, demand and procurement requirements. This tender does not guarantee renewal.

8. Tenderer Eligibility, Mandatory and Desirable Requirements

Tenders must satisfy every mandatory requirement. A failure may result in exclusion, subject to any clarification permitted by Belong To.

Ref	Mandatory requirement	Evidence
M1	Legal identity and authority to contract	Registration / constitution / company details
M2	Professional Qualifications	The contractor must hold a recognised qualification in counselling, psychotherapy, counselling psychology or clinical psychology, together with full accreditation from the IACP, IAHIP, PSI or an equivalent recognised professional body.
M3	Tax compliance	Tax Clearance Access Number and Tax Reference Number, where applicable

Ref	Mandatory requirement	Evidence
M4	Professional standing	Evidence of current accreditation and professional membership must be provided with the tender and maintained throughout the contract, for example accredited membership of the Irish Association for Counselling and Psychotherapy (IACP), Irish Association of Humanistic and Integrative Psychotherapy (IAHIP), or Psychological Society of Ireland (PSI). Student, associate or pre-accredited membership will not satisfy this requirement.
M5	Relevant experience	CV, examples of relevant service delivery
M6	Safeguarding	The appointment and commencement of the contract are subject to satisfactory Garda vetting clearance and completion of all relevant safeguarding checks. Further evidence of Children First, Mandated Person and other child protection training to be submitted.
M7	Clinical governance	Clinical governance framework, and risk protocols evidence. The contractor must provide evidence of regular clinical supervision throughout the contract, such as dated confirmation of attendance from an accredited supervisor or a supervision log showing the date and duration of each session, without disclosing confidential client information.
M7	Data protection	Privacy, security, retention and incident-management arrangements

Ref	Mandatory requirement	Evidence
M9	Financial capacity	Accountant/auditor confirmation or equivalent evidence
M10	Conflicts and exclusions	Signed declaration of bona fides, conflicts and exclusion grounds
M11	Service capacity	Named personnel and mobilisation/continuity plan
M13	Experience providing LGBTQ+ inclusive counselling, including support for trans, non-binary and questioning young people	CV, examples of relevant service delivery and details of specialist training completed

Ref	Desirable requirements	Evidence
D2	Training in child and adolescent counselling or psychotherapy	Copy of relevant qualification, certificate or continuing professional development record
D3	Training and practical experience in suicide and self-harm risk assessment and safety planning	Training certificate and a brief description of the risk-assessment and referral approach used in practice
D4	Experience developing referral pathways with services such as Pieta, CAMHS, Jigsaw, GPs and community mental health organisations	Examples of previous referral or partnership arrangements and contact details for a relevant referee

Tenderers should demonstrate how they meet the desirable requirements listed above and provide the specified supporting evidence. Desirable requirements will form part of the qualitative evaluation and will not replace the mandatory requirements concerning qualifications, professional accreditation, Garda vetting, safeguarding and insurance.

9. Tender Response Requirements

Tenderers must submit one complete response using the following structure. Page limits exclude certificates, policies and supporting appendices.

Section	Required content	Suggested limit
A. Organisation	Legal/trading name, address, contacts, structure, subcontractors and conflicts	1 pages
B. Cover Letter	A signed introduction confirming the tenderer's legal identity, authorised representative, lead contact, understanding of the service, availability, capacity to meet the required outputs within the fixed budget, acceptance of the tender conditions, and details of any assumptions or conflicts of interest.	2 pages
C. Understanding and model	Understanding of need; proposed pathway from referral to discharge; inclusion/exclusion and accessibility	1 pages

Section	Required content	Suggested limit
D. Clinical quality and safeguarding	Governance, supervision, risk, consent, safeguarding, incidents, complaints and quality assurance	1 page
E. Team	Named personnel, roles, CVs, accreditation, LGBTQ+ competence, availability and cover	2 pages plus CVs
F. Mobilisation and delivery	Implementation plan, capacity, scheduling, technology, partnership/referral arrangements and continuity	2 page
G. Experience	Two relevant examples with client referees	2 pages
H. Outcomes, monitoring and reporting	Proposed outcome measures; therapeutic goal review; activity and KPI monitoring; waiting-time and attendance data; service-user feedback; monthly dashboards; eight-week reviews; mid-year reporting; end-of-pilot evaluation; data quality, confidentiality and continuous improvement.	3 pages
1. Declarations	Completed Appendix B and all mandatory evidence	Appendix B

9.1 Method statement emphasis

- How the service will be safe and accessible for LGBTQ+ young people nationally.
- How the tenderer will respond to self-harm, suicidal ideation, safeguarding concerns and presentations outside scope.
- How the practitioner will work with minors, parents/guardians and referring agencies while maintaining therapeutically appropriate confidentiality.
- How referral pathways with Pieta, CAMHS, Jigsaw, GPs, community services and the National Network will be developed.
- How clinical records and Belong To reporting data will be separated and protected.

9.2 Detailed Requirements for Section G: Outcomes, Monitoring and Reporting

Tenderers must explain their proposed approach to:

1. Outcomes framework, including the wellbeing measures used at the beginning and end of counselling and how therapeutic goals will be reviewed.
2. Service-activity monitoring, including referrals, assessments, waiting times, sessions delivered, attendance, cancellations, completed interventions and onward referrals.
3. Performance monitoring, including how delivery will be measured against the service outputs and KPIs stated in the tender.
4. Service-user feedback, including accessible and anonymous ways for young people to provide feedback.
5. Reporting arrangements, including monthly dashboards, eight-week review meetings, mid-year reporting and an end-of-pilot evaluation.
6. Data management and confidentiality, including secure record keeping, anonymised reporting, GDPR compliance and data-quality checks.
7. Continuous improvement, including how monitoring information and feedback will be used to improve access, referral pathways and service delivery.

10. Evaluation and Award Methodology

10.1 Stage 1 - compliance

Responses will first be checked for timely submission, completeness and satisfaction of mandatory requirements. Belong To may seek clarification but is not obliged to permit missing substantive material to be introduced after the deadline.

10.2 Stage 2 - qualitative evaluation

Award criterion	Weighting
Cover Letter	0%
Understanding, service model and accessibility	25%
Clinical quality, safeguarding and risk management	30%
Team competence, experience and capacity	20%
Mobilisation, partnerships, outcomes and reporting	25%
Total	100%

10.3 Scoring scale

Score	Descriptor
0	No response or wholly unacceptable
1	Very poor: major omissions; little confidence
2	Poor: material weaknesses; limited confidence
3	Acceptable: meets requirement with manageable weaknesses
4	Good: fully meets requirement with clear added value
5	Excellent: comprehensive, evidenced and low-risk response

10.4 Clarification or presentation

Shortlisted tenderers may be invited for interview which may include a presentation. No material change to the tender will be permitted. Any scored presentation approach will be notified in advance and applied consistently.

11. Instructions and Conditions of Tender

- Submit electronically by the stated deadline. Late tenders may not be considered.
- Responses must be in English and prices in euro, including VAT unless stated otherwise.
- Clarification questions must be sent only through the stated channel. Answers that may affect all tenderers may be circulated on an anonymised basis.
- Tenderers bear all costs of preparing and presenting their tender.
- Tenders must remain valid for six months from the closing date.
- Tenderers must disclose actual or potential conflicts of interest and any proposed subcontracting or consortium arrangements.
- Canvassing, inducement, collusion or anti-competitive conduct may result in exclusion.
- Tender information will be treated as confidential subject to law, governance, audit, funding and regulatory obligations. Tenderers must identify genuinely commercially sensitive material and explain the basis.
- The successful tenderer must comply with applicable Irish law, employment law, health and safety, equality, safeguarding, data protection and professional standards.
- Material developed specifically for the service will be subject to agreed intellectual-property terms. Pre-existing tools and methodologies must be identified.
- No contract exists until a formal written agreement is signed by authorised representatives.

11.1 Submission checklist

- Signed tender form and declarations
- Complete method statement
- Named team and CVs
- Accreditation and supervision evidence

- Safeguarding and clinical governance documents
- Data-protection and security information
- Tax and financial-capacity evidence
- Two referees

11.2 Reservation

Belong To may verify information, contact referees, seek evidence of professional standing, require disclosure of subcontractors and confirm compliance before award. Any false or misleading statement may result in exclusion or termination.

Appendix B - Tenderer Declaration and Checklist

Tenderer legal name: _____

I/We declare that:

- The information supplied is complete and accurate.
- The tenderer has authority and capacity to enter and perform the contract.
- No mandatory exclusion ground applies, or any relevant matter is fully disclosed below.
- All actual or potential conflicts of interest are disclosed.
- The named personnel hold the qualifications, accreditation and experience stated.
- The tenderer will comply with safeguarding, Garda vetting, clinical governance, data protection and insurance requirements before service commencement.
- The tender is valid for six months from the closing date.
- No canvassing, collusion, inducement or anti-competitive conduct has occurred.
- The tenderer accepts that award is subject to funding, due diligence and contract signature.

Disclosures (if none, state "None"):

_____

_____

Document	Included (Y/N)
Tender response sections A-I	
Accreditation evidence	
CVs and supervision details	
Child Safeguarding Statement and risk assessment	
Clinical governance / risk policies	
Data protection and security information	
Two referees	

Name: _____ Role: _____

Signature: _____ Date: _____

END OF DOCUMENT