Request for Proposal (RFP)

Aboriginal Health Initiative Program (AHIP)

PHASE I - Community Health Collaboration
Community Health Education

All Areas in Interior Health

RFP Number: RFP 2012-13 001

Issue Date: May 2, 2012

Closing Time: June 6, 2012
2:00 pm Local Time

Contact Person: Melanie Reinhardt
Strategic Business Consultant
Contracted Services
requestsforproposals@interiorhealth.ca

Closing Location: Contracted Services
Interior Health Authority
1440 - 14th Avenue, Vernon, BC V1B 2T1

All enquiries related to this Request for Proposal (RFP) are to be directed, in writing, to the contact person at the e-mail address on the front cover of this RFP. Information obtained from any other source is not official and should not be relied upon. Enquiries and answers will be recorded and posted on BC Bid.
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1 - EXECUTIVE SUMMARY

1.1 INTERIOR HEALTH AUTHORITY AND ABORIGINAL HEALTH

Interior Health is one of six Health Authorities in British Columbia and is divided into three Health Service Areas:

- Central - includes the Okanagan, Salmon Arm and Revelstoke
- West – includes the area bounded by Chase, Kamloops, Merritt, Lytton, and Williams Lake.
- East – includes the East and West Kootenays

Interior Health (the Authority) operates acute care, extended care and intermediate care facilities, and provides health care through major programs such as Community Care, Public Health and Mental Health and Addictions. The Authority provides a wide range of medical, ambulatory care and paramedical services at its acute care sites.

Interior Health’s Aboriginal Health program collaborates with Aboriginal Communities and with other Health Programs to provide a comprehensive strategy for improving the quality of life and health care for the most significantly impacted segment of the population. The Program’s goal is to improve the health and wellbeing of Aboriginal people living in the Interior Health region by developing a holistic health and wellness system that is responsive to the unique needs of Aboriginal communities. Aboriginal Health is guided by the principles of the Aboriginal Health and Wellness Plan:

**Vision**

*Our vision is to improve the health and well being of Aboriginal People living in the Interior Health region to the same standard of that of the non-Indigenous population.*

**Mission**

*To create respectful, trusting, responsible partnership between Aboriginal People and Interior Health to support the development of a holistic health and wellness system that is responsive to the needs of diverse Aboriginal Communities.*

**Values**

*Accountability, accessibility, commitment, connection, equity, family, holism, honesty, humility, inclusion, opportunity, relationship, renewal, respect, unity.*

- Aboriginal people are entitled to the same level and opportunity for high-quality health care as any other member of society.
- Health care programs should be accessible
- We need to reduce the inequity in health between Aboriginal and non-Aboriginal populations
- We want a planning process with meaningful participation.

Please refer to Interior Health’s website [www.interiorhealth.ca](http://www.interiorhealth.ca) for additional details.
1.2 SUMMARY OF OPPORTUNITY

Interior Health is inviting qualified not-for-profit Aboriginal organizations to propose projects supporting either Community Health Collaboration or Community Health Education.

(a) Community Health Collaboration is intended to increase the community’s ability to provide support for Aboriginal people who have been impacted by a lack of communication or assistance from local health services.

(b) Community Health Education is intended to provide community health capacity building, positive health outcome and promote general community wellness.

Projects should be short-term and completed within one year. Projects appropriate to this funding opportunity will improve cultural safety and health care access including in-reach, outreach, clinical pathways, and integration partnerships. Projects may be research and development based and aimed at conducting a needs assessment, gap analysis, or environmental scan, etc to inform on a need or gap within services and develop an action or implementation plan. All projects should support and strengthen the ability of the community members to link with local or regional health care services.

Special consideration will be given to small, remote and/or developing organizations with the intention of promoting and improving greater geographic and cultural equity in health service delivery. Small communities are determined as those with population of 500 or less and remote is considered those located 30 minutes travel from an urban centre.

Available funding will be dispersed based on population and maximum awards per region are as follows:

<table>
<thead>
<tr>
<th>Region</th>
<th>Maximum Number of Awards</th>
</tr>
</thead>
<tbody>
<tr>
<td>IH West</td>
<td>2</td>
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<tr>
<td>IH Central</td>
<td>1</td>
</tr>
<tr>
<td>IH East</td>
<td>1</td>
</tr>
</tbody>
</table>
2 - TERMINOLOGY

The following terms will apply to this RFP and to any subsequent Agreement. Submission of a Proposal in response to this RFP indicates acceptance of all the following terms:

**Authority** – The Interior Health Authority;

**BC Bid**– The website maintained by BC Bid at www.bcbid.ca, or any replacement website

**Contract** – The agreement resulting from this RFP executed by the Authority and the successful Proponent, and will consist of the RFP and any addenda and amendments, the Proponent’s response, documents containing any additional terms or conditions clarified or mutually agreed to before awarding the Contract and written ratification of the Development and Operating Agreements by the Authority;

**Contractor** – The successful Proponent to this RFP who enters into a written agreement with the Authority;

**Evaluation Committee** – A committee, comprised of members of the Authority and consultants that may be contracted at the sole and unfettered discretion of the Authority, assembled to complete the evaluation of the Proposals;

**Must or Mandatory** – A requirement that must be met in order for a Proposal to receive consideration;

**Standard Service Contract** – An agreement between the Authority and the Contractor for the full, long-term operation and management of Services including maintenance, and life cycle renewal of the Service, the proposed form of which is included as part of the RFP.

**Proponent** – An individual or a company that submits, or intends to submit, a Proposal in response to this RFP;

**Proposal** – The written submission by the Proponent in response to the RFP;

**Provider** – The successful Proponent to this Request for Proposal who enters into a written Contract with the Authority

**RFP** – This Request for Proposal;

**Should** – A requirement having a significant degree of importance to the objectives of the RFP. The significance will be determined solely by the Authority;
3 - SERVICE DESCRIPTION
OPTION A: COMMUNITY HEALTH COLLABORATION

3.1 PROJECT SUMMARY
Term: One-year contract
Value: Maximum contract value $25,000.00

A Community Health Collaboration project is intended to increase the community’s capacity to provide support for Aboriginal people who have been impacted by a lack of communication or assistance from local health services.

A Community Health Collaboration project does not provide direct clinical services to communities and organizations (e.g., counseling, therapy, etc.). Rather, its aim is to strengthen the capacity of communities to support their people. Therefore, the project is targeted toward:

a) Coordination with health care professionals including where possible, provision of appropriate opportunities for professional health care workers to engage the Aboriginal community.

b) Research and development based projects that conduct a needs assessment, gap analysis, or environmental scan, etc to inform on a need or gap within services and develop an action or implementation plan.

c) Providing a more comfortable and appropriate environment for Aboriginal clients who are in or entering the mainstream health care system.

3.2 TARGET POPULATION (AND AREA SERVED)
First Nations and Aboriginal Communities inclusive of self-governing First Nations peoples living on-reserve and off-reserve, Métis, and Inuit within the geographic boundaries of the Interior Health service region.

3.3 PRINCIPLES
Services are based on a health program planning model that will improve the health and wellbeing of Aboriginal people living in the Interior Health region through the development of a holistic health and wellness system that is responsive to the unique needs of Aboriginal communities.

3.4 PROJECT DELIVERY
3.4.1 Goals
The Goals of the Project are to improve the community’s capacity to:

(a) Develop strategies to prevent barriers and to respond to Aboriginal peoples experiencing barriers to health care.

(b) Assist Aboriginal Community Organizations in appropriately engaging local health care professionals.

(c) Promote coordination with health care professionals resulting in increased access to local health care resources and increased community knowledge.
3.4.2 Objectives

The Contractor will work toward the following objectives:

(a) Identifying gaps in, or barriers to, health services or access to health services to achieve a greater understanding amongst community leaders, local health and wellness workers, educators and the Health Authority of the issues related to barriers to Aboriginal Health.

(b) The Community will develop greater coordination and collaboration in responding to health care access issues; this could be through creation of integrated community health services plans.

(c) The Community will identify a strategy for addressing health care access and increased coordination with the Authority or other health partners.

3.4.3 Services

Services will include but not be limited to:

(a) Research and development based projects that conduct a needs assessment, gap analysis, or environmental scan, etc to inform on a need or gap within services and develop an action or implementation plan.

(b) Community coordination with the Authority or other health partners.

(c) Providing a more comfortable and appropriate environment for Aboriginal clients who are in or entering the mainstream health care system.

3.4.4 Staffing

If the Project requires the use of experts, consultants and/or educators, then the Proposal must outline the qualifications and credentials of the experts, consultants and educators proposed.

3.5 INSURANCE REQUIREMENTS

Insurance requirements are detailed in Appendix 1 (Insurance).
4 - SERVICE DESCRIPTION
OPTION B: COMMUNITY HEALTH EDUCATION

4.1 PROJECT SUMMARY
Term: One-year contract
Value: Maximum contract value $25,000.00

A Community Health Education project is intended to provide community health capacity building, positive health outcome and promote general community wellness.

4.2 TARGET POPULATION (AND AREA SERVED)
First Nations and Aboriginal Communities inclusive of self-governing First Nations peoples living on-reserve and off-reserve, Métis, and Inuit within the geographic boundaries of the Interior Health service region.

4.3 PRINCIPLES
Services will improve the health and wellbeing of Aboriginal people living in the Interior Health region through the development of a holistic health and wellness system that is responsive to the unique needs of Aboriginal communities.

4.4 PROJECT DELIVERY

4.4.1 Goals
The Goals of the Project are to improve the health status, health capacity and the overall health of the community.

4.4.2 Objectives
The Contractor will work toward the following objectives:

(a) Community members will gain knowledge regarding their own health, and factors and issues pertaining to negative health outcomes;

(b) Community members will improve their capacity in guiding their own health lives through improved nutrition and exercise;

(c) Community members will gain an understanding of holistic health and advantages of healthy lifestyles.

4.4.3 Services
Services will include but not be limited to:

- Community-based training provided by a qualified organization, related to management of healthy nutrition and active lifestyles;

- Support to Community members with current unhealthy practices in their life. Support is provided in group or individual settings;

- Collaboration with local health and wellness professionals including (but not limited to):
  - Nutrition
  - Physical Fitness
  - Holistic and traditional healers
  - Other community organizations
4.4.4 Staffing

If the Project requires the use of experts, consultants and/or educators, then the Proposal must outline the qualifications and credentials of the experts, consultants and educators proposed.

4.5 INSURANCE REQUIREMENTS

Insurance requirements are detailed in Appendix 1 (Insurance).
5 - SUBMISSION GUIDELINES

5.1 SUBMISSION INSTRUCTIONS & FORMAT

Proposals should be delivered to the Contact Person before the Closing Time listed on the front cover of this RFP.

The Proposal should contain a table of contents illustrating the page numbers of all major sections as well as identifying relevant appendices or attachments. Each page is to be numbered and clearly marked with the Proponent’s name. The Proposal should be based on the structure outlined in the Appendix 2 (Evaluation Criteria and Submission Requirements) and contain the following sections:

- Section 1: Corporate Strength
- Section 2: Business Case
- Section 3: Project Activities
- Section 4: Community Capacity Development

Proponents should submit two (2) identically printed copies of the written Proposal.

**Proposals received after the Closing Time will not be evaluated.**

5.2 MANDATORY CRITERIA (PASS/FAIL)

To receive consideration the following mandatory criteria must be met.

5.2.1 Proposal Submission Deadline

Two (2) copies of the written proposal:
- To the Contact Person at the location identified on the front cover of this RFP; and
- At or before the Closing Time identified on the front cover of this RFP

**Proposals received after the Closing Time will not be evaluated.**

5.2.2 Declaration

Appendix 5 (Declaration) must be completed and signed by an Authorized Representative of the Applicant. **Proposals with missing or incomplete Declarations will not be evaluated.**

5.2.3 Legal Entity

The Applicant must be an Aboriginal Not-for-Profit legal entity.

5.3 PROONENT INFORMATION MEETING

A Proponent Meeting is scheduled for **May 10th, 2012** starting at **2:00 pm** at Royal Inland Hospital, 311 Columbia Street, Kamloops BC. Participants may attend in person or via teleconference. **Please confirm attendance to the Contract Person by May 8th, 2012.**

5.4 GENERAL TERMS AND CONDITIONS

This Opportunity Notice is governed by the General Terms and Conditions outlined in **Appendix 6** (Terms and Conditions).
6 - PROJECT EVALUATION AND IMPLEMENTATION

6.1 TIMETABLE
The issue date and Closing Time are noted on the front cover of this RFP. The Project is expected to commence August 1, 2012 and terminate no later than 12 months after the commencement date. The timing and sequence of events resulting from this Opportunity Notice may vary and shall be determined by the Authority.

6.2 PROPOSAL EVALUATION
The evaluation will be conducted by an Evaluation Committee comprised of sufficiently qualified representatives of the Authority. Proposals may not be evaluated if the Proponents current or past corporate or other interests may, in the opinion of the Authority, give rise to a conflict of interest in connection with this RFP.

The evaluation committee will first review compliance with mandatory criteria and continue reviewing only those fully meeting these standards. Proposals will then be rated on the following criteria as outlined in this RFP.

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<thead>
<tr>
<th>Mandatory Criteria</th>
<th>Max Score</th>
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<tbody>
<tr>
<td>✓ Submission deadline met (Pass/Fail)</td>
<td>PASS</td>
</tr>
<tr>
<td>✓ Declaration – Appendix 5 completed (Pass/Fail)</td>
<td>PASS</td>
</tr>
<tr>
<td>✓ Proponent is Legal Entity (Pass/Fail)</td>
<td>PASS</td>
</tr>
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<th>Non-Financial Review</th>
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<tbody>
<tr>
<td>Corporate Strength</td>
<td>15</td>
</tr>
<tr>
<td>Business Case</td>
<td>20</td>
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<tr>
<td>Project Activities</td>
<td>40</td>
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<tr>
<td>Community Capacity Development</td>
<td>25</td>
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<td>TOTAL</td>
<td>100</td>
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</table>

**TABLE A – Evaluation Criteria**

6.3 FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT
This project is subject to the application of the *Freedom of Information and Protection of Privacy Act*.

6.4 REQUEST FOR CLARIFICATION AND/OR PRESENTATION
To fully evaluate the Proposals received, the Authority may, in its absolute discretion, request clarification of all, or some sections in a particular response. A request for clarification will not entitle the Proponent to make any changes.
The Authority may request that the Proponent make a formal presentation to the Evaluation Committee. The format of the presentation will be at the discretion of the Authority.

6.5 DEBRIEFING

Proponents who are unsuccessful may request a debriefing from the Authority. The Authority may, at its absolute discretion, provide such a debriefing, at which time, the Authority may advise the Proponent, in a general manner, the reason for the non-acceptance of the Proposal.

6.6 CONTRACT TERM START

The contract start date is anticipated to be August 1, 2012.
APPENDIX 1 - INSURANCE REQUIREMENTS

INSURANCE

The Contractor shall, without limiting its obligations or liabilities herein and at its own expense, provide and maintain the following insurance policies with insurers licensed in British Columbia and in forms and amounts acceptable to the Authority:

1.0 Automobile Liability on all vehicles owned, operated or licensed in the name of the Contractor, in an amount not less than $2,000,000.00.

2.0 Comprehensive General Liability in an amount not less than $2,000,000.00 inclusive per occurrence, insuring against bodily injury, death and property damage in respect of the Services to be provided by the Contractor. The Authority is to be added as an additional insured under this policy. Such insurance shall be primary, non-contributing with and not in excess of any insurance maintained by the Authority, shall contain a cross-liability clause and shall include, but shall not be limited to, the following coverage:

   i. Products and Completed Operations Liability;
   ii. Owner's and Contractor's Protective Liability;
   iii. Blanket Written Contractual Liability;
   iv. Contingent Employer's Liability;
   v. Personal Injury Liability;
   vi. Non-Owned Automobile Liability;
   vii. Employees as Additional Insureds;
   viii. Broad Form Property Damage; and
   ix. if applicable, Tenant's Legal Liability in an amount adequate to cover a loss to Premises of the Authority occupied by the Contractor.

3.0 Professional Liability in an amount not less than $5,000,000.00 insuring the Contractor's liability resulting from errors and omissions in the performance of professional services under this Agreement.

4.0 The foregoing insurance shall be primary and not require the sharing of any loss by any insurer of the Authority.

5.0 All required insurance shall be endorsed to provide the Authority with 30 days advance written notice of cancellation or material change.

6.0 The Contractor hereby waives all rights of recourse against the Authority with regard to damage to the Contractor's property.

7.0 The Contractor will comply with the Workers' Compensation Act and in particular will obtain and maintain during the Term of this Agreement the necessary coverage for the Contractor’s employees, and will, upon request by the Authority, provide particulars of such coverage.
# APPENDIX 2 - EVALUATION CRITERIA AND SUBMISSION REQUIREMENTS

<table>
<thead>
<tr>
<th>SECTION</th>
<th>Focus Area</th>
<th>Evaluation Criteria</th>
<th>Submission Requirements</th>
</tr>
</thead>
</table>
| Mandatory Criteria (Pass/Fail)| To receive consideration the following mandatory criteria must be met.     | Documents Received by the Contact Person before the Closing time identified on the front cover. | ▪ Proposals must be received by the Contact Person at the Closing Time as noted on the front cover of this RFP.  
▪ Documents must be provided in a package which clearly identifies this RFP number, and the Proponent's name. |
<p>| Proposal Submission Deadline  |                                                                              |                                                                                      |                                                                                           |
| Declaration                  | The Declaration is provided, includes all relevant clauses as noted and outlined in the Appendix 5 (Declaration) and is signed by an authorized representative of the Proponent. |                                                                                      | ▪ A Declaration letter substantially the same as the templates provided in Appendix 5 (Declaration). |</p>
<table>
<thead>
<tr>
<th>SECTION</th>
<th>Focus Area</th>
<th>Evaluation Criteria</th>
<th>Submission Requirements</th>
</tr>
</thead>
</table>
| 1. Corporate Strength (15%) | 1.1 PROPONENT PROFILE       | Noted Not Scored          | i. State the name of the Aboriginal not-for-profit organization responsible for project completion.  
ii. Identify the Contact person, position, telephone and e-mail address;  
iii. Describe whether your project supports community health collaboration or community health education. |
|                             | 1.2 HISTORY AND EXPERIENCE  |                           | Provide a brief history of the organization including the number of years in business.  
The history should include  
i. Detail of any agreements with health funding bodies (i.e. Health Authority) during the past 5 years, including those currently in effect;  
ii. Experience in providing a service or project similar or relevant to the proposed project. |
| 2. Business Case (20%)     | 2.1 OPERATING BUDGET        |                           | Submit an operating budget using the template in Appendix 4 (Budget).  |
|                             |                             |                           | -                                                                                  |


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<th>SECTION</th>
<th>Focus Area</th>
<th>Evaluation Criteria</th>
<th>Submission Requirements</th>
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<tbody>
<tr>
<td>3. Project Activities</td>
<td></td>
<td></td>
<td>1. Describe the Project and highlight how the Project activities relate to the Project Goals and Objectives. Describe key events and milestones including number of clients served per event (where applicable).</td>
</tr>
<tr>
<td></td>
<td>3.1 SERVICES</td>
<td>The extent to which the proposed project meets the funding goals and objectives and is attainable within the time and funding available.</td>
<td>2. Describe where the project will be provided and how it will be accessible to the target population</td>
</tr>
<tr>
<td></td>
<td>3.2 GOALS</td>
<td>The extent to which the Project goals match the funding goals.</td>
<td>3. Describe project delivery times / schedule (i.e. dates/times/weekly schedules).</td>
</tr>
<tr>
<td></td>
<td>3.3 OBJECTIVES</td>
<td>The extent to which the objectives match the funding objectives.</td>
<td>4. Describe the target population</td>
</tr>
<tr>
<td></td>
<td>3.4 PROJECT SUPPORTS</td>
<td>The extent to which the project activities support the goals and objectives.</td>
<td>5. Estimate the number of individuals to be served directly by the project.</td>
</tr>
<tr>
<td></td>
<td>GOALS AND OBJECTIVES</td>
<td></td>
<td>6. Estimate the number of individuals who will benefit from this program (indirectly served).</td>
</tr>
</tbody>
</table>

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<table>
<thead>
<tr>
<th>SECTION</th>
<th>Focus Area</th>
<th>Evaluation Criteria</th>
<th>Submission Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.5</td>
<td>CULTURALLY APPROPRIATE</td>
<td>The extent to which the project providers services in a cultural appropriate way.</td>
<td>Describe and highlight unique cultural elements of the project activities.</td>
</tr>
<tr>
<td>3.6</td>
<td>STAFFING</td>
<td>The extent to which the proposed staff model supports the project proposed.</td>
<td>Using the table provided in Appendix 3 (Staff Schedule) describe the staffing model.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>The extent to which the staff providing services are appropriately qualified to perform the Services.</td>
<td>In a narrative format of not more than 500 words describe the qualifications of each staff member described in the staff schedule. If individuals are not identified for each position, include the job description stating minimum qualifications.</td>
</tr>
</tbody>
</table>
| 3.7     | PROJECT REPORTING | The extent to which the proposed reporting structures meets Authority requirements. | i. Describe which outcomes you will measure.  
ii. Describe how the outcomes will be measured.  
iii. Describe any baseline currently available or describe if a baseline will be established.  
iv. Describe what the outcomes will show if the project is successful. |
| 4.       | Community Capacity Development (25%) | | |
| 4.1     | NEEDS ASSESSMENT | The extent to which the proposed needs assessment supports the need for this service in the community | Describe the community that will receive services including information on:  
i. geographic location. Please specify if the area served is rural or remote.  
ii. demographics of the target |
<table>
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<tr>
<th>SECTION</th>
<th>Focus Area</th>
<th>Evaluation Criteria</th>
<th>Submission Requirements</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>population</td>
<td></td>
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<td>iii. size (numbers) of the target population</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>iv. environmental scan describing a gap in services and other similar or complementary services offered in the area</td>
<td></td>
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<td></td>
<td></td>
<td>v. estimated number of clients to receive direct service</td>
<td></td>
</tr>
<tr>
<td>4.2</td>
<td>CAPACITY BUILDING (CONTRACTOR)</td>
<td>The extent to which providing the services will develop the capacity of the contractor and their staff.</td>
<td>Describe the number of staff employed by the organization. Describe how the project will develop or increase the organizations capacity through increased skills, increased infrastructure (items etc).</td>
</tr>
<tr>
<td>4.3</td>
<td>CAPACITY BUILDING (COMMUNITY)</td>
<td>The extent to which providing the services will develop the capacity of the Community.</td>
<td>Describe how the project will develop capacity of the community (i.e. tangible items left after the project, skills or knowledge development, local champion development).</td>
</tr>
</tbody>
</table>
APPENDIX 3 - STAFF SCHEDULE

☐ This is a one-time project  ☐ This funding will be used to augment and existing project

Please list all staff required to complete the project.

<table>
<thead>
<tr>
<th>STAFF</th>
<th>Admin Hrs/Wk</th>
<th>Clerical Hrs/Wk</th>
<th>Direct Service Hrs/Wk</th>
<th>Subtotal Hours</th>
<th>#Wks</th>
<th>TOTAL HOURS</th>
<th>Wage Rate</th>
<th>Salary Total Hours x Wage Rate</th>
<th>Benefits</th>
<th>TOTAL SALARY $Amount</th>
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APPENDIX 4 - BUDGET

Please include in the budget all items and costs necessary to complete your Project. Add additional lines if necessary.

<table>
<thead>
<tr>
<th>EXPENSES</th>
<th>Budget $ Value</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Direct Services Costs:</strong></td>
<td></td>
</tr>
<tr>
<td>Direct Service – SALARIES (from staff schedule)</td>
<td>-</td>
</tr>
<tr>
<td>Direct Service – BENEFITS (from staff schedule)</td>
<td>-</td>
</tr>
<tr>
<td>Project Supplies (if applicable)</td>
<td>-</td>
</tr>
<tr>
<td>Travel (if applicable)</td>
<td>-</td>
</tr>
<tr>
<td>Other (please describe)</td>
<td>-</td>
</tr>
<tr>
<td><strong>Subtotal</strong></td>
<td>$ -</td>
</tr>
<tr>
<td><strong>Administration Costs:</strong></td>
<td></td>
</tr>
<tr>
<td>Admin/Clerical – SALARIES (from staff schedule)</td>
<td>-</td>
</tr>
<tr>
<td>Admin/Clerical – BENEFITS (from staff schedule)</td>
<td>-</td>
</tr>
<tr>
<td>Other (please describe)</td>
<td>-</td>
</tr>
<tr>
<td><strong>Subtotal</strong></td>
<td>$ -</td>
</tr>
<tr>
<td><strong>Occupancy Costs:</strong></td>
<td></td>
</tr>
<tr>
<td>Rent (if applicable)</td>
<td>-</td>
</tr>
<tr>
<td>Utilities (if applicable)</td>
<td>-</td>
</tr>
<tr>
<td>Other (please describe)</td>
<td>-</td>
</tr>
<tr>
<td><strong>Subtotal</strong></td>
<td>$ -</td>
</tr>
<tr>
<td><strong>TOTAL Expenses</strong></td>
<td>$ -</td>
</tr>
<tr>
<td><strong>Less (SPECIFY):</strong></td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL-Contract Amount</strong></td>
<td>$ -</td>
</tr>
</tbody>
</table>
APPENDIX 5 - DECLARATION

Date:

I, Name _______________________________ am the Position of _____________________________ Society/Organization's full legal name _____________, the Offeror. I have the authority to submit this offer and bind and make representations for the Society/Organization. Through this offer, we agree to be bound by statements and representations made in this offer.

We understand that our offer is subject to the Freedom of Information and Protection of Privacy Act under which applicants can request that provincially funded bodies such as Interior Health release information on the allocation of provincial program funds. Records can be withheld if their disclosure would be harmful to the business interests of the provincial body or the party with which it is doing business; however, in the case of a dispute, the final decision is made by the Information and Privacy Commissioner.

We certify that the officers, directors, or band council members do not have any actual or potential conflict of interest between our interests and the interests of Interior Health under this process. We acknowledge that if a conflict exists, Interior Health may, at its sole and absolute discretion, withhold consideration of our offer.

We authorize and consent to Interior Health receiving and exchanging with others information about our organization, including any references provided in the offer, and with other persons with whom we have had dealings. We understand that such information may be a factor in the decision of Interior Health to enter into agreements for these funding opportunities.

I hereby certify that:

A. I have read, understand and agree to all of the terms and conditions attached as Appendix 6;

B. I agree that this Offer is made subject to the Terms and Conditions attached as Appendix 6 to this the Request for Proposal;

C. I acknowledge that submission of this Offer does not constitute a Contract with the Authority, nor does it imply any commitment or obligation on the part of the Authority with respect to the Offer except in the event that the Offer is accepted, which acceptance is solely at the discretion of the Authority;

D. I agree that, should the Offer be accepted (as indicated by the signature of an authorized representative of the Authority in Section K, below), this Offer and the contents hereof (including Schedules, Appendices and attachments) shall be a binding agreement between the Offeror and the Authority.

E. If the Offer is accepted by the Authority, we agree to provide all the Services described in Sections D, E, F and G, above, for the Total Offered Price indicated in Section I.

F. If requested by the Authority, I agree to execute a separate agreement reflecting the terms of this Application.

G. EITHER (A) A resolution has been passed by the Applicant's Board of Directors or Band Council on Date, committing the Board of Directors or Band Council to the terms of this Offer (a copy of which is attached); OR, (B) We acknowledge that a copy of such a resolution must be provided upon request by the Authority, prior to Acceptance of this Offer.

Band or Society's legal name:

Authorized Officer's name: ___________________________ Signature: ___________________________

May 2, 2012
APPENDIX 6 - TERMS AND CONDITIONS

1. **Acceptance of Proposals** – This RFP must not be construed as an agreement to purchase goods or services and does not constitute an offer of any kind. The Authority is not bound to enter into a Contract with the Proponent who submits the lowest priced Proposal or with any Proponent. Proposals will be assessed in light of the Evaluation Criteria. The Authority will be under no obligation to receive further information, whether written or oral, from any Proponent.

   In order for the Authority to obtain the Proposal it deems most advantageous to it, the Authority reserves the right at its discretion to negotiate with any Proponent as it sees fit, or with one or more Proponent concurrently. In no event will the Authority be required to offer any modified terms to any other Proponent prior to entering into an Agreement. The Authority shall incur no liability to any Proponent as a result of such negotiations and modifications.

   Neither acceptance of a Proposal nor execution of an Agreement will constitute approval of any activity or development contemplated in any Proposal that requires any approval, permit or license pursuant to any federal, provincial, regional district or municipal statute, regulation or by-law.

2. **Advertisement** – The successful Proponent will not use the Authority's name or any of the individual Hospital/Facility site names or any contents of this document in any advertising or publications without prior written consent from the Authority.

3. **Alternative Solutions** – If alternative solutions are offered, information should be submitted in the same format, as a separate Proposal.

4. **Amendments to RFP** – The Authority reserves the right to modify the terms of the RFP prior to the Proposal closing date at its sole discretion. The Authority also reserves the right to cancel the RFP at any time prior to entering into a Contract with the successful Proponent(s).

   If a written addendum or amendment to the RFP is issued, such addendum or amendment must be incorporated in the RFP.

5. **Change in Ownership** – The Proponent is obligated to inform the Authority of any changes to key personnel, ownership, bonding capability, financial position, legal action or any other information which may affect its status with the Authority during the bidding or Contract periods within three days of the change.

6. **Clarifications** – Every Proponent who submits a Proposal and who is invited to an interview will be required to provide a formal presentation to the Evaluation Committee.

7. **Collusion** – There shall be no collusion or arrangement between the Proponent and other Proponents in connection with this Proposal.

8. **Completeness of Proposal** – By submission of a Proposal the Proponent warrants that, if this RFP is to design, create or provide a system or manage a program, all components required to run the system or manage the program have been identified in the Proposal or will be provided by the Proponent at no additional charge.

9. **Confidentiality of Information** – The Proponent shall treat all information that they become privy to as a result of this RFQ and the subsequent contract as confidential. The Authority is subject to the provisions of the Freedom of Information and Protection of Privacy Act (the Act). Proprietary information can be protected under the Act (Section 21), which protects for disclosure harmful to business interests of a third party. All information contained in the submitted responses will be treated as confidential by the Authority and will not be disclosed to any third party except as required by law or by order of the Office of the British Columbia Information and Privacy Commissioner.

10. **Conflict of Interest** – Any Proponent, or their sub-contractor, whose interests may in the opinion of the authority, give rise to conflict of interest may be excluded from competition. Examples of this include but are not limited to:

    • An association or familial relationship with an employee or official of the authority which could place the employee in a conflict;
    • Involvement by a Proponent in requirements definition or in preparation of the RFP or Proposal;
    • Involvement by the Proponent in the evaluation of bids; or
    • Actions by the Proponent which would have the effect of constraining or limiting the ability of other Proponents to prepare and submit a Proposal.

11. **Currency and Taxes** – Prices quoted are to be in Canadian dollars, inclusive of taxes.
12. Debriefing – At the conclusion of the RFP process, all Proponents will be notified. Unsuccessful Proponents may request a debriefing meeting with the Authority. Requests for debriefing sessions must be made in writing to the RFP contact within five business days of receipt of their status notification. A debriefing meeting will be at the sole discretion of the Authority. Only the Proponent’s submission will be reviewed.

13. Dispute Process – If a Proponent is not satisfied with the written response from the debriefing process and they wish further explanation or to initiate the dispute process, a request must be made in writing to the Director of Contracted Services Office within five business days of receiving the written response. All submissions must be dated and have an authorized signature.

At this point in the process, the following must be provided:
- Full contact information;
- The nature of the complaint;
- All background information relating to the complaint, including all relevant documents that substantiate the complaint; and
- The outcome that the Proponent is seeking.

In the event that the dispute remains unresolved, unless the parties otherwise agree, it will be referred to and finally resolved by arbitration and will be conducted as follows: Disputes shall in the first instance be referred to non-binding mediation, through the use of a mutually agreeable dispute resolution process. If the dispute is not resolved by mediation then the parties shall refer the dispute to arbitration, to a board of three arbitrators, one of whom will be appointed by each of the parties and the third, who will act as chairman, will be chosen by the first two named.

14. Division of Contract Award – The Authority reserves the right to divide the Contract between two or more bidders if applicable.

15. Evaluation – Evaluation of Proposals will be by a committee formed by the Authority. The evaluation committee will check Proposals against the evaluation criteria. Proposals not meeting the Mandatory Criteria will be rejected without further consideration. Proposals will be assessed and scored against the evaluation criteria.

Notwithstanding anything contained in the Authority’s RFP or any custom or usage that might otherwise apply, the Authority will not be limited as to its criteria for evaluation of Proposals. The Authority may take into account additional criteria and considerations in order to obtain the most advantageous Proposal to the Authority and the evaluation process will be conducted solely at the discretion of the Authority.

16. Firm Pricing – Prices will be firm for the entire Contract period unless this RFP specifically states otherwise.

17. Governing Law – Any Contract resulting from this RFP will be governed by and will be construed and interpreted by the laws and courts of the Province of British Columbia.

18. In-house bids – The Authority reserves the right to submit one or more Proposals on its own behalf in response to this Request for Proposals. Any Proposal or Proposals submitted by Interior Health Authority shall be assessed by an independent evaluator in accordance with the criteria set out in this Request for Proposals and in objective comparison to any private sector Proposal or Proposals received. The submission of a successful Proposal by Interior Health Authority shall give rise to no liability on the part of Interior Health Authority to any private sector Proponent with respect to compensation for costs incurred by such Proponent in the preparation of its Proposal or otherwise.

19. Irrevocability of Proposals – By submission of a clear and detailed written notice, the Proponent may amend or withdraw its response prior to the closing date and time. Upon closing, all responses become irrevocable. By submission of a response, the Proponent agrees that should its response be successful, the Proponent will enter into negotiations and at the sole discretion of the Authority into a Contract with the Authority.

The Proponent will not change the wording of its Proposal unless requested by the Authority for purposes of clarification.

20. Language – The working language of the Province of British Columbia is English and all responses to this RFP must be in English.

21. Late Proposals – Proposals that are received after the closing date and time specified will not be opened nor accepted for consideration. The Proponent’s unopened submission will be returned at the Proponent’s expense with a non-compliance letter. If a situation arises that is not in the Proponent’s control such as a Force Majeure incident, at its sole discretion the Authority will make an acceptance decision.

22. Law and Regulations – The Proponent shall comply with and, upon request of the Authority, furnish certificates of compliance with all applicable Provincial and Municipal laws and with all applicable rules, orders, regulations or requirements issued thereunder, and shall indemnify the Authority against any damages by reason of violations of this paragraph. Any Contract arising from this RFP will be governed in all respects by the laws of the Province of British Columbia.
23. **Liability for Errors** – While the Authority has used considerable effort to ensure an accurate representation of information in this RFP, the information contained in this RFP is supplied solely as a guideline for Proponents. The information is not guaranteed or warranted to be accurate by the Authority, nor is it necessarily comprehensive or exhaustive. Nothing in this RFP is intended to relieve Proponents from forming their own opinions and conclusions with respect to the matters addressed in this RFP.

   Each Proponent acknowledges and agrees that the terms and conditions of this RFP will prevail over the Authority’s Expression of Interest or any obligation on the Authority that might otherwise be implied.

24. **License and Registration** – All Proponents must be incorporated and have obtained licenses where required by legislation. Corporations submitting Proposals shall be registered in the Province of British Columbia.

25. **Mandatory Criteria** – The Authority at its sole discretion reserves the right to evaluate Proposals that may not meet the mandatory criteria.

26. **Modification of Terms** – The Authority reserves the right to modify the terms of this RFP at any time in its sole discretion. This includes the right to cancel this RFP at any time prior to entering into a Contract with the successful Proponent.

27. **Negotiation Delay** – If a written Contract cannot be negotiated within thirty (30) days of notification of the successful Proponent, the Authority may at its sole discretion at any time thereafter, terminate negotiations with that Proponent and either negotiate a Contract with another Proponent or choose to terminate the RFP process and not enter into a Contract with any of the Proponents.

28. **Non-compliance** – Submission of this Proposal shall be construed by the Authority to mean that the Proponent agrees to carry out all of the conditions set forth in this document that may be pertinent for each requirement. Any proposed variation from these conditions must be clearly identified. Provide any details of any non-compliance with the stated terms and conditions including an explanation of the concern and suggested alternative.

29. **Ownership of Proposals** – All documents, including Proposals, submitted to the Authority become the property of the Authority. They will be received and held in confidence by the Authority, subject to the provisions of the Freedom of Information and Protection of Privacy Act.

30. **Proponents’ Expenses** – Proponents are solely responsible for their own expenses in preparing a Proposal and for subsequent negotiations with the Authority, if any. If the Authority elects to reject all Proposals, the Authority will not be liable to any Proponent for any claims, whether for costs or damages incurred by the Proponent in preparing the Proposal, loss of anticipated profit in connection with any final Contract, or any other matter whatsoever.

31. **Proposal Validity** – Proposals will be open for acceptance for at least 90 days after the closing date.

32. **References** - Any references that are included must have agreed to act as a referee. Referees should be able to supply objective opinion(s) of the Proponent and not have conflicting interest in the outcome of the RFP. Contact information for those who have agreed to act as references should also be included (name, designation, phone number and, if possible, e-mail address).

   The Proponent acknowledges that in providing references, it will be deemed to have irrevocably consented (a) to the Health Authority contacting any or all such references in such manner and at such times as the Health Authority deems appropriate without further notice to the Proponent and, (b) to any and all such references providing comments and information to the Health Authority regarding the Proponent, the business history and experience of the Proponent and such other matters as the Health Authority may reasonably require in connection with its evaluation of the Proposal.

33. **Rejection of Proposals** – Proposals which contain qualifying conditions or otherwise fail to conform to these instructions may be disqualified or rejected. Anything to the contrary herein notwithstanding, the Authority may, at its sole discretion, elect to retain for consideration Proposals which are non-conforming and may waive any irregularity, failure to comply or time stipulation required by these instructions.

   If the Authority elects to reject all Proposals, the Authority will not be liable to any Proponent for any claims, whether for costs or damages incurred by the Proponent in preparing the Proposal, loss of anticipated profit in connection with any final Agreement, or any other matter whatsoever.

   In requesting Proposals, the Authority is providing no assurance whatsoever to any Proponent that the terms of a previously submitted EOI are acceptable. The Authority will have no liability whatsoever to any Proponent whose Proposal is rejected on the basis of terms included both in a Proposal and a previously submitted EOI.

34. **Reliance on Oral Representations** - All representations on the scope of this Proposal or clarifications thereof must be in writing to be considered valid.
35. **Subcontracting** - Using a subcontractor (who should be clearly identified in the Proposal) is subject to negotiation with the Authority. Where applicable, the names of approved subcontractors listed in the Proposal will be included in the Contract. Additional subcontractors will be neither added, nor other changes made, to this list in the Contract without the written consent of the Authority.

36. **Timeframes** – The timetable outlined in this document represents the anticipated schedule for the RFP Timeline. The timing and the sequence of events resulting from this RFP may vary and shall ultimately be determined by the Authority.

37. **Use of RFP** - This document, or any portion thereof, may not be used for any purpose other than the submission of Proposals.