

Request for Qualifications

The following list details of the Request for Qualifications:

- 1) *Corporate Services Development & Integration – Addendum 1*
- 2) *Human Resources – Addendum 2*
- 3) *Accommodations and Asset Management – Addendum 3*
- 4) *Capital Planning and Facilities Management – Addendum 4*
- 5) *Information Management – Addendum 5*
- 6) *Information Technology – Addendum 6*
- 7) *Finance – Addendum 7*
- 8) *Health Benefits – Addendum 8*
- 9) *Federal First Nations Health programs – Addendum 9*
- 10) *Clinical Practice – Addendum 10*
- 11) *Economic Opportunities – Addendum 11*
- 12) *Implementation/Transition Management and Support – Addendum 12*

Qualified respondents are invited to submit proposals based on the requirements contained herein.



Table of Contents

Page	Contents
3	Preface
4	Organization Overview
4	Requirements
5	Services Description
5	Knowledge Requirements
5	Assumptions and Agreements
6	Instructions to Proponents
8	Key Dates
9	Evaluation and Selection
11	General Terms and Conditions
13	Defined Terms
14	Addendum 1 – Service Description, Corporate Services Development and Integration
15	Addendum 2 – Service Description, Human Resources
16	Addendum 3 – Service Description, Accommodations and Asset Management
17	Addendum 4 – Service Description, Capital Planning and Facilities Management
18	Addendum 5 – Service Description, Information Management
19	Addendum 6 – Service Description, Information Technology
20	Addendum 7 – Service Description, Finance
21	Addendum 8 – Service Description, Health Benefits
22	Addendum 9 – Service Description, Federal First Nations Health programs
23	Addendum 10 – Service Description, Clinical Practice
24	Addendum 11 – Service Description, Economic Opportunities
25	Addendum 12 – Service Description, Implementation/Transition Management and Support
26	Appendix A – Required Response Format For Proposals

PREFACE

The sole purpose of the content contained in this document and all resulting responses are intended to assist the *interim* First Nations Health Authority (iFNHA) to identify potential suppliers for specific projects that the iFNHA may commission in the future. The responses will help the iFNHA find suitable parties who may be asked to submit proposals in the future for specific tasks.

Specific requirements outlined do not constitute the terms or agreement of an engagement.

The *interim* First Nations Health Authority (iFNHA) prides itself on its operating and management principles to be a professional, fair and diverse entity that cherish its privilege to serve British Columbia First Nations communities in the enhancement of health. With this in mind it seeks a fair and unbiased selection process and intends to uphold the qualification requirements outlined without prejudice.

Organization Overview

The First Nations Health Council (FNHC) works with British Columbia and Canadian Federal agencies, to narrow and close the gap in delivering and maintaining health standards between First Nations individuals and other British Columbians.

The fifteen member Health Council is mandated by three agreements, the Transformative Change Accord First Nations Health Plan (2006), the Tripartite First Nations Health Plan (2007), and the Framework Agreement (2011). The Council is composed of regional representatives from the Northern, Vancouver Coastal, Interior, Fraser and Vancouver Island Regions.

In April 2009 the Health Council enacted a business arm, the First Nations Health Society (FNHS). The FNHS is operated by a Board of Directors comprised of public and private health professionals, including community development experts. It is tasked with overseeing and managing Society staff and assets.

In May 2011, the FNHS convened a gathering of BC First Nations political and technical leaders, who passed a unanimous resolution to support a number of directives for the FNHS. During this gathering, First Nations leaders also supported the signing of an agreement (The Framework Agreement) with the Federal and Provincial Governments which provides for the transfer of the BC First Nations and Inuit Health (FNIH) office, and all of its resources and functions, from Health Canada to BC First Nations to govern and manage. This will be achieved through the establishment of a new First Nations Health Authority (FNHA) which will assume the FNIH resources and responsibilities over a two (2) to five (5) year transition period.

Directives under this Framework Agreement include:

1. Adopting Community-driven, Nation-based approaches;
2. Improving services;
3. Fostering collaboration and partnership;
4. Increasing First Nations decision-and control over health services;
5. Developing human and economic capacity;
6. Not interfering with First Nations rights, and the fiduciary responsibilities to First Nations of the Federal government;
7. Functioning at a high operational standard;

Further to the directives listed above and as per the commitments in the Framework Agreement, in January 2012, the First Nations Health Society legally became the interim First Nations Health Authority (iFNHA).

Additional information about the FNHC/iFNHA can be obtained from the website www.fnhc.ca

Requirements

Based on the review of the RFQ responses the iFNHA will establish a List of Qualified Contractors who, on an “as, if and when requested” basis, may be contacted directly, or asked to compete, to enter into one or multiple Contract(s) for provision of services in the future.

Services Description

The *interim* First Nations Health Authority (iFNHA) is requiring a variety of consultants to assist in the implementation of the TFNHP. The purpose of this Request for Qualifications is to qualify Consultants experienced in one or more of the following service areas:

- 1) Corporate Services Development & Integration – Addendum 1
- 2) Human Resources – Addendum 2
- 3) Accommodations and Asset Management – Addendum 3
- 4) Capital Planning and Facilities Management – Addendum 4
- 5) Information Management – Addendum 5
- 6) Information Technology – Addendum 6
- 7) Finance – Addendum 7
- 8) Health Benefits – Addendum 8
- 9) Federal First Nations Health programs – Addendum 9
- 10) Clinical Practice – Addendum 10
- 11) Economic Opportunities – Addendum 11
- 12) Implementation/Transition Management and Support – Addendum 12

For information pertaining to each of the RFQ's, please see the above noted Addendum's to this RFQ.

Knowledge Requirements

- (a) Knowledge of the Tripartite First Nations Health Plan and British Columbia Tripartite Framework Agreement on First Nations Health Governance;
- (b) Knowledge of First Nation's interests in BC, related to health governance, programs, services and operation;
- (c) Knowledge of Health Canada programs and services and Government of Canada operations to support the transition of First Nations and Inuit Health – BC Region transfer to First Nations control;
- (d) Knowledge and experience in provincial and/or federal health systems supporting First Nations people in BC;
- (e) Experience in significant health implementations, transitions or mergers.

Assumptions and Agreements

The successful proponent will:

1. have the full cooperation of *interim* First Nations Health Authority staff and access to information necessary to meet the accountabilities set out in this request for proposal and respond to reasonable inquiries upon the expiration or termination of the contract.

The iFNHA will:

1. Provide a reasonable level of resources (human and financial resources) to the successful proponent to meet the accountabilities set out in this request for proposal.

Instructions to Proponents

Notice of Intent to Submit a Proposal

Potential proponents are asked to send an email to the Contact Person confirming they intend to submit a proposal for this RFQ and providing a key contact person name and email address. This will enable the iFNHA to inform potential proponents of any questions and answers that are submitted and of any changes to the RFQ process should they occur. The iFNHA assumes no responsibility for ensuring that potential proponents are sent subsequent information about this RFQ if no Notice of Intent is received.

Format

Proponents should use the response template outlined in Appendix A. Electronic proposals should be submitted in (PC) Microsoft Word or PDF file formats. Proposals should be clearly labelled on the outside of the envelope, the front page of the fax or the title of the email.

Submissions of Proposals

Proposals must be submitted to location stated below by the Closing Time set out in the Key Date Table. Proposals may be emailed, delivered, faxed or posted by mail:

NAME: *Anita Finney, Contracts Administrator*

EMAIL: *afinney@fnhc.ca*

PHYSICAL ADDRESS: *501-100 Park Royal South, West Vancouver, BC V7T 1A2*

POSTAL ADDRESS: *501-100 Park Royal South, West Vancouver, BC V7T 1A2*

FAX: *604-913-2081*

IT IS THE PROPONENT'S SOLE RESPONSIBILITY TO ENSURE ITS PROPOSAL IS RECEIVED AT THE ADDRESS SET OUT ABOVE BY THE CLOSING TIME.

Proponents should note that it is their responsibility to ensure that email transmissions are free from all viruses. If the iFNHA receives an email transmission that is infected with a virus or other electronic code that, in the sole opinion of the iFNHA, is harmful to the iFNHA's computer systems, the iFNHA reserves the right to take any action as deemed necessary to disinfect the email transmission. The iFNHA will not be liable for any changes that may occur to the email transmission, including rendering the transmission unreadable, as a result of the disinfecting process.

Proponents should note that the iFNHA's e-mail system will not accept emails in excess of 7 MB. It is the responsibility of Proponents to ensure that e-mails are of a size that can be received by the iFNHA and in a format that can be read by the iFNHA.

Proposals received after the Closing Time will not be accepted and will not be considered. The proposal receipt time as recorded at the closing location shall prevail, whether accurate or not.

The iFNHA assumes no risk, makes no guarantee, warranty or representation whatsoever and shall have no responsibility or liability whatsoever for and in connection with the working order, functioning or malfunctioning of the iFNHA's fax or e-mail system or any computer used in connection with this RFQ.

Amendments to Proposals

Proposals may be amended, but any amendment to a Proposal must be made in writing and delivered to the closing location before the Closing Time.

Questions

Questions must be submitted in writing to the Contact Person by the date set out in the Key Date Table. Questions from all responding parties will be consolidated and responses may be generated and shared with all participants who have registered a Notice of Intent. Questions and answers will not amend this RFQ.

All questions and interaction with FNHS over the course of this proposal selection must be through the Contact Person as follows:

NAME: Anita Finney, Contracts Administrator
EMAIL: afinney@fnhc.ca

Information obtained from any other person or source is not official and may not be relied on. No oral conversations will affect or modify the terms of this RFQ and may not be relied on by potential proponents.

Any attempts to contact any member of the First Nations Health Council or the iFNHA with questions or comments about this project by a submitting participant (or individual(s) with business or personal links to the submitting participant), will be construed as an attempt to seek preferential or biased treatment. The iFNHA reserves the right to disqualify any related Proposal as a result of such contact.

Discrepancies, Omissions and Questions

Proponents finding discrepancies, omissions, ambiguities, or conflicts in this RFQ, or having doubts as to the meaning or intent of any provision, should immediately notify the Contact Person. The Contact Person will review such submissions and, if the iFNHA determines that an amendment is required to this RFQ, the Contact Person will issue an addendum.

Addenda

If the iFNHA determines that an amendment is required to this RFQ, the Contact Person will issue a written addendum to each Proponent who has delivered a Notice of Intent. Each addendum will be incorporated into and become part of the RFQ. No amendment of any kind to the RFQ is effective unless it is contained in a written addendum issued by the Contact Person.

Key Dates

KEY MILESTONES	DATES
Request for Qualifications of Interest issued	February 21, 2012
RFQ closes	March 5, 2012 at 4:00 p.m. (PST) Request for Qualifications received after this close time will not be considered and will be returned directly to bidders accordingly.
RFQ decisions made	March 19, 2012
Successful and unsuccessful RFQ's notified (successful RFQ will be advised that they have been short-listed for RFQ which will issue at a later date OR entered onto a database for future work. Unsuccessful RFQ will be notified that they are not considered suitable for either current or future potential work from the iFNHA and will therefore not be entered into the iFNHA supplier / contractor database)	March 23, 2012

Evaluation and Selection

Evaluation Committee

The evaluation of Proposals will be undertaken on behalf of the iFNHA by an evaluation committee (the “**Evaluation Committee**”) appointed by the iFNHA. The Evaluation Committee may consult with others as the Evaluation Committee may in its discretion decide is required; including iFNHA staff members and third party consultants. The Evaluation Committee will give a recommendation for the selection of a Preferred Proponent or Preferred Proponents to the iFNHA.

Evaluation Criteria

The Evaluation Committee will compare and evaluate Proposals to determine the Proposals that are most advantageous to the iFNHA, using the following criteria:

- the approach and methodology the Proponent would employ to perform the Services;
- the qualifications and experience of the Proponent and its key personnel;
- the Proponent’s service capabilities;
- the Proponent’s financial proposal; and
- the overall quality of the Proposal, including completeness and compliance to requested format.

The Evaluation Committee may apply the evaluation criteria on a comparative basis, evaluating the Proposals by comparing one Proponent’s Proposal to another Proponent’s Proposal.

Additional Information

The Evaluation Committee may, at its discretion, request clarifications or additional information from a Proponent with respect to its Proposal, and the Evaluation Committee may make such requests to only selected Proponents. The Evaluation Committee may consider such clarifications or additional information in evaluating Proposals.

Interviews

The Evaluation Committee may, at its discretion, invite some or all of the Proponents to appear before the Evaluation Committee to provide clarifications of their Proposals. In such event, the Evaluation Committee will be entitled to consider the answers received in evaluating Proposals.

Conflict of Interest

The iFNHA retains the discretion to reject a Proposal from a Proponent whose current or past corporate or other interests may, in the opinion of the iFNHA, give rise to a conflict of interest in connection with this RFQ or the Services, or a Proposal from a Proponent who proposes to sub-contract or partner with any firm or individual whose current or past corporate or other interests may, in the opinion of the iFNHA, give rise to a conflict of interest in connection with this RFQ or the Services. A conflict of interest will include, but not be limited to, the involvement of the relevant person in the preparation of this RFQ. If a Proponent is in doubt as to whether there is a conflict of interest, the Proponent should consult the Contact Person prior to submitting a Proposal.

Contract Negotiation and Award

Following the evaluation and recommendation of the Evaluation Committee, and a List of Qualified Proponents are determined, the iFNHA may select one or more Proponents to enter into negotiations for a Contract or Contracts as follows:

- (a) the iFNHA may elect to divide the Services into more than one Contract and enter into negotiations with a Proponent with respect to a portion of the Services, and award more than one Contract with respect to the Services;

Proponents are asked to include a form of Contract with their Proposals. However, the iFNHA may negotiate modifications or variations to the Proponent's Proposal (including pricing and the form of Contract) and to the Services, specifications and contract terms, and award of a Contract is in all cases conditional on the Proponent executing a Contract with terms and conditions acceptable to the iFNHA;

if negotiations with any Proponent are not successful within such time period as the iFNHA may require, the iFNHA may at any time after the expiry of such time period discontinue further negotiation with that Proponent by written notice to the Proponent, and the iFNHA may at any time thereafter commence negotiations with another Proponent to finalize a Contract in accordance with the foregoing process with another Proponent. The foregoing process may be undertaken and /or repeated until either a Contract or Contracts are awarded by the iFNHA or until negotiations have been terminated by the iFNHA.

Good Faith Negotiations

By submission of its Proposal, the Proponent agrees that should it be determined to be a party with whom the iFNHA wishes to negotiate a Contract, the Proponent will negotiate in good faith to enter into a Contract in accordance with the procedures described in this RFQ.

Period of Offer

As at the Closing Time, each Proposal is irrevocable and will remain open as a basis for negotiating a Contract in accordance with the terms of this RFQ for a maximum period of three years from the Closing Time.

Debriefing

After the successful Proponents are selected as part of the List of Qualified Contractors, unsuccessful Proponents may request a debriefing at which the iFNHA will generally explain why the unsuccessful Proposal was not selected. If a Proponent requests a debriefing:

- (a) the debriefing will be solely between the iFNHA and the Proponent requesting the debriefing;
- (b) the debriefing will not include disclosure of any other Proponent's Proposal; and
- (c) all terms of this RFQ will apply to the debriefing including, for certainty, the requirement that Proponents will treat all information received at a debriefing as confidential.

General Terms And Conditions

Right of the iFNHA to Reject Proposals and Cancel RFQ

The iFNHA is not bound to select a preferred Proponent or accept any Proposal and reserves the right in its sole discretion to postpone or cancel this RFQ at any time for any reason whatsoever in accordance with the iFNHA's judgment of its best interests and to proceed with the Services in some other manner separate from this RFQ. Without limiting the foregoing, the iFNHA will not be bound to accept the lowest-priced Proposal. The iFNHA reserves the right to accept or reject any Proposal in whole or in part.

Waiver of Deficiencies

If a Proponent submits a Proposal which does not satisfy every request or requirement as described in this RFQ, the iFNHA at its sole discretion may, but is not required to waive such deficiency, may seek clarification or additional information from the Proponent, and may consider and treat the Proposal as compliant with the requirements of this RFQ.

Proponent's Expenses

Proponents are solely responsible for their own costs and expenses in relation to this RFQ and, including preparing and submitting a Proposal, attending information meetings with the iFNHA if applicable, attending interviews or meetings with the iFNHA during the evaluation of Proposals, and negotiation, finalization and execution of a Contract with the iFNHA if the Proponent is requested to negotiate a Contract.

Limitation of Liability

By submitting a Proposal a Proponent expressly acknowledges and agrees that:

- (a) the iFNHA, and its respective employees, contractors, consultants and agents, will not under any circumstances, including without limitation, whether pursuant to contract, tort, statutory duty, law, equity, any actual or implied duty of fairness, or otherwise, be responsible or liable for any costs, expenses, claims, losses, damages or liabilities (collectively and individually all of the foregoing referred to as "**Claims**") incurred or suffered by any Proponent as a result of or related to the RFQ, the preparation of a Proposal, the evaluation of Proposals, acceptance or rejection of any compliant or non-compliant Proposal, breach of any obligations arising under this RFQ, negotiations for a Contract or the cancellation, suspension or termination of the RFQ process;
- (b) the Proponent will be conclusively deemed to waive and release the iFNHA and its employees, contractors, consultants and agents, from and against any and all such Claims; and
- (c) the Proponent will indemnify and hold the iFNHA and its employees, contractors, consultants and agents harmless against any and all Claims brought against them by third parties arising out of or relating to the Proponent's receipt of this RFQ, or the preparation and negotiation of any Proposal submitted by the Proponent, where such third parties were directly or indirectly engaged by or through the Proponent in connection with any of the foregoing.

Liability for Errors

While the iFNHA has attempted to ensure an accurate presentation of information in this RFQ, the information contained in this RFQ is supplied solely as a guideline for all Proponents. The information is not guaranteed or warranted to be accurate by the iFNHA, nor is it necessarily comprehensive or exhaustive. Nothing in this RFQ is intended to relieve all Proponents from forming their own opinions and conclusions with respect to the matters addressed in this RFQ.

Confidentiality

Proposals will be treated in confidence. The iFNHA will not release to the public any specific information regarding any Proposal except as may be required by law. Proponents will treat all information received through the RFQ process as confidential.

All data collected in support of this project, regardless if they are reproduced or referred to in the final, interim reports or communication (written or verbal), between the respondent and FNHC/iFNHA personnel and all First Nation People shall be the sole property of the iFNHA. All notes, diagrams, and information in any electronic media must be returned to the iFNHA. Duplicates or replications of these contents in any form must be destroyed. A Certification of Destruction will be required on the conclusion of this engagement. Any report, its contents and all information described in the Service Description will be considered confidential, proprietary, intellectual Property of the iFNHA.

Ownership of Proposals

All Proposals submitted become the property of the iFNHA.

Working Language

The working language of the iFNHA is English and all Proposals must be in English.

Defined Terms

In this RFQ the following definitions apply:

“**Closing Time**” means the date and time set out in the Key Dates Table.

“**Contact Person**” means the person identified as such in this RFQ.

“**Contract**” means a formal written agreement between the successful Proponent and the iFNHA for performance of the Services.

“**Contractor**” means a Proponent that enters into a Contract.

“**Evaluation Committee**” means the committee appointed by the iFNHA to evaluate Proposals.

“**FNHC**”, “**the Council**” or “**the Health Council**” means the First Nations Health Council.

“**FNHS**” means the First Nations Health Society.

“**iFNHA**” means the interim First Nations Health Authority.

“**Key Date Table**” means the table of that name included in this RFQ.

“**Notice of Intent**” means a notice submitted by a potential proponent of its intent to submit a Proposal.

“**Proponent**” means an entity that submits a Proposal.

“**Proposal**” means a proposal submitted in response to this RFQ.

“**RFQ**” means this request for qualifications.

“**Services**” means the services for which Proposals are sought pursuant to this RFQ.

Addendum 1

SERVICE DESCRIPTION
Corporate Services Development & Integration

REQUIRED COMPONENT	DESCRIPTION
Expected Start Date	RFQ list will start April 1, 2012
Expected End Date	RFQ list will end March 31, 2014
Definition	A Contractor is needed to support the iFNHA for the transition of First Nations and Inuit Health Branch (Government of Canada) to the (interim) First Nations Health Authority.
Scope of the Service to be Provided	Work will focus primarily on Corporate Services Development and Integration; including expertise in business planning, strategic planning and development, and business process mapping and integration.
Service Components	<p>Deliverable / Milestones</p> <p>Advice & Recommendations to support transition of First Nations & Inuit Health Branch to the interim First Nations Health Authority</p> <p>Planning and implementation of specific components of transition identified and directed by the iFNHA.</p> <p>Information may be relayed in a variety of ways, as directed and required by the iFNHA, including summaries, charts, graphs, diagrams and any other written or visual product documenting information pertaining to knowledge translation activities.</p>
Service Coverage Area	This is for all of BC; it is expected that periodic visits to the iFNHA offices will be expected, with a possibility of visits to Ottawa, and as determined by the iFNHA.
Key Linkages	Federal (including FNIH BC region, FNIH headquarters, and Health Canada), Provincial (Ministry of Health) and Provincial Health authorities, First Nations Health Council, iFNHA, and any other relationships/partnerships/stakeholders/agencies that relate to the implementation of the Framework Agreement and the transition of First Nation & Inuit Health Branch to the (interim) First Nations Health Authority.
Outputs / Deliverables –	Surveys, graphs, charts, diagrams, reports, summaries, briefing notes, or any other deliverable as required by the iFNHA
Reporting Requirements	Contractor will be required to report to the iFNHA on a monthly basis. Monthly reports will include progress on deliverables achieved in the reporting period, activities planned for the upcoming month and any issues that are important to the iFNHA work going forward.

Addendum 2

SERVICE DESCRIPTION Human Resources

REQUIRED COMPONENT	DESCRIPTION
Expected Start Date	RFQ list will start April 1, 2012
Expected End Date	RFQ list will end March 31, 2014
Definition	A Contractor is needed to support the iFNHA for the transition of First Nations and Inuit Health Branch (Government of Canada) to the (interim) First Nations Health Authority.
Scope of the Service to be Provided	Work will focus primarily on Human Resources, including expertise in strategic planning, development t of corporate HR Frameworks, organizational design and development, pension and benefits, compensation, classification, BC Labor Relations, training and development
Service Components	<p>Deliverable / Milestones</p> <p>Advice & Recommendations to support transition of First Nations & Inuit Health Branch to the interim First Nations Health Authority</p> <p>Planning and implementation of specific components of transition identified and directed by the iFNHA.</p> <p>Information may be relayed in a variety of ways, as directed and required by the iFNHA, including summaries, charts, graphs, diagrams and any other written or visual product documenting information pertaining to knowledge translation activities.</p>
Service Coverage Area	This is for all of BC; it is expected that periodic visits to the iFNHA offices will be expected, with a possibility of visits to Ottawa, and as determined by the iFNHA.
Key Linkages	Federal (including FNIH BC region, FNIH headquarters, and Health Canada), Provincial (Ministry of Health) and Provincial Health authorities, First Nations Health Council, iFNHA, and any other relationships/partnerships/stakeholders/agencies that relate to the implementation of the Framework Agreement and the transition of First Nation & Inuit Health Branch to the (interim) First Nations Health Authority.
Outputs / Deliverables –	Surveys, graphs, charts, diagrams, reports, summaries, briefing notes, or any other deliverable as required by the iFNHA
Reporting Requirements	Contractor will be required to report to the iFNHA on a monthly basis. Monthly reports will include progress on deliverables achieved in the reporting period, activities planned for the upcoming month and any issues that are important to the iFNHA work going forward.

Addendum 3

SERVICE DESCRIPTION Accommodations and Asset Management

REQUIRED COMPONENT	DESCRIPTION
Expected Start Date	RFQ list will start April 1, 2012
Expected End Date	RFQ list will end March 31, 2014
Definition	A Contractor is needed to support the iFNHA for the transition of First Nations and Inuit Health Branch (Government of Canada) to the (interim) First Nations Health Authority.
Scope of the Service to be Provided	Work will focus primarily on accommodations and asset management, including expertise in strategic planning, commercial leasing, facilities management and accommodation and asset management systems and processes.
Service Components	<p>Deliverable / Milestones</p> <p>Advice & Recommendations to support transition of First Nations & Inuit Health Branch to the interim First Nations Health Authority</p> <p>Planning and implementation of specific components of transition identified and directed by the iFNHA.</p> <p>Information may be relayed in a variety of ways, as directed and required by the iFNHA, including summaries, charts, graphs, diagrams and any other written or visual product documenting information pertaining to knowledge translation activities.</p>
Service Coverage Area	This is for all of BC; it is expected that periodic visits to the iFNHA offices will be expected, with a possibility of visits to Ottawa, and as determined by the iFNHA.
Key Linkages	Federal (including FNIH BC region, FNIH headquarters, and Health Canada), Provincial (Ministry of Health) and Provincial Health authorities, First Nations Health Council, iFNHA, and any other relationships/partnerships/stakeholders/agencies that relate to the implementation of the Framework Agreement and the transition of First Nation & Inuit Health Branch to the (interim) First Nations Health Authority.
Outputs / Deliverables –	Surveys, graphs, charts, diagrams, reports, summaries, briefing notes, or any other deliverable as required by the iFNHA
Reporting Requirements	Contractor will be required to report to the iFNHA on a monthly basis. Monthly reports will include progress on deliverables achieved in the reporting period, activities planned for the upcoming month and any issues that are important to the iFNHA work going forward.

Addendum 4

SERVICE DESCRIPTION Capital Planning and Facilities Management

REQUIRED COMPONENT	DESCRIPTION
Expected Start Date	RFQ list will start April 1, 2012
Expected End Date	RFQ list will end March 31, 2014
Definition	A Contractor is needed to support the iFNHA for the transition of First Nations and Inuit Health Branch (Government of Canada) to the (interim) First Nations Health Authority.
Scope of the Service to be Provided	Work will focus primarily on Capital Planning and Facilities Management, including expertise in strategic planning, health facilities, planning, construction and maintenance.
Service Components	<p>Deliverable / Milestones</p> <p>Advice & Recommendations to support transition of First Nations & Inuit Health Branch to the interim First Nations Health Authority</p> <p>Planning and implementation of specific components of transition identified and directed by the iFNHA.</p> <p>Information may be relayed in a variety of ways, as directed and required by the iFNHA, including summaries, charts, graphs, diagrams and any other written or visual product documenting information pertaining to knowledge translation activities.</p>
Service Coverage Area	This is for all of BC; it is expected that periodic visits to the iFNHA offices will be expected, with a possibility of visits to Ottawa, and as determined by the iFNHA.
Key Linkages	Federal (including FNIH BC region, FNIH headquarters, and Health Canada), Provincial (Ministry of Health) and Provincial Health authorities, First Nations Health Council, iFNHA, and any other relationships/partnerships/stakeholders/agencies that relate to the implementation of the Framework Agreement and the transition of First Nation & Inuit Health Branch to the (interim) First Nations Health Authority.
Outputs / Deliverables –	Surveys, graphs, charts, diagrams, reports, summaries, briefing notes, or any other deliverable as required by the iFNHA
Reporting Requirements	Contractor will be required to report to the iFNHA on a monthly basis. Monthly reports will include progress on deliverables achieved in the reporting period, activities planned for the upcoming month and any issues that are important to the iFNHA work going forward.

Addendum 5

SERVICE DESCRIPTION Information Management

REQUIRED COMPONENT	DESCRIPTION
Expected Start Date	RFQ list will start April 1, 2012
Expected End Date	RFQ list will end March 31, 2014
Definition	A Contractor is needed to support the iFNHA for the transition of First Nations and Inuit Health Branch (Government of Canada) to the (interim) First Nations Health Authority.
Scope of the Service to be Provided	Work will focus primarily on Information Management including expertise in strategic planning, development of corporate information management frameworks, federal and provincial legislation relating to medical records, information privacy and security, electronic medical records and information management systems.
Service Components	<p>Deliverable / Milestones</p> <p>Advice & Recommendations to support transition of First Nations & Inuit Health Branch to the interim First Nations Health Authority</p> <p>Planning and implementation of specific components of transition identified and directed by the iFNHA.</p> <p>Information may be relayed in a variety of ways, as directed and required by the iFNHA, including summaries, charts, graphs, diagrams and any other written or visual product documenting information pertaining to knowledge translation activities.</p>
Service Coverage Area	This is for all of BC; it is expected that periodic visits to the iFNHA offices will be expected, with a possibility of visits to Ottawa, and as determined by the iFNHA.
Key Linkages	Federal (including FNIH BC region, FNIH headquarters, and Health Canada), Provincial (Ministry of Health) and Provincial Health authorities, First Nations Health Council, iFNHA, and any other relationships/partnerships/stakeholders/agencies that relate to the implementation of the Framework Agreement and the transition of First Nation & Inuit Health Branch to the (interim) First Nations Health Authority.
Outputs / Deliverables –	Surveys, graphs, charts, diagrams, reports, summaries, briefing notes, or any other deliverable as required by the iFNHA
Reporting Requirements	Contractor will be required to report to the iFNHA on a monthly basis. Monthly reports will include progress on deliverables achieved in the reporting period, activities planned for the upcoming month and any issues that are important to the iFNHA work going forward.

Addendum 6

SERVICE DESCRIPTION Information Technology

REQUIRED COMPONENT	DESCRIPTION
Expected Start Date	RFQ list will start April 1, 2012
Expected End Date	RFQ list will end March 31, 2014
Definition	A Contractor is needed to support the iFNHA for the transition of First Nations and Inuit Health Branch (Government of Canada) to the (interim) First Nations Health Authority.
Scope of the Service to be Provided	Work will focus primarily on Information Technology, including expertise in IT planning, development and implementation of integrated corporate and organizational systems related to health.
Service Components	<p>Deliverable / Milestones</p> <p>Advice & Recommendations to support transition of First Nations & Inuit Health Branch to the interim First Nations Health Authority</p> <p>Planning and implementation of specific components of transition identified and directed by the iFNHA.</p> <p>Information may be relayed in a variety of ways, as directed and required by the iFNHA, including summaries, charts, graphs, diagrams and any other written or visual product documenting information pertaining to knowledge translation activities.</p>
Service Coverage Area	This is for all of BC; it is expected that periodic visits to the iFNHA offices will be expected, with a possibility of visits to Ottawa, and as determined by the iFNHA.
Key Linkages	Federal (including FNIH BC region, FNIH headquarters, and Health Canada), Provincial (Ministry of Health) and Provincial Health authorities, First Nations Health Council, iFNHA, and any other relationships/partnerships/stakeholders/agencies that relate to the implementation of the Framework Agreement and the transition of First Nation & Inuit Health Branch to the (interim) First Nations Health Authority.
Outputs / Deliverables –	Surveys, graphs, charts, diagrams, reports, summaries, briefing notes, or any other deliverable as required by the iFNHA
Reporting Requirements	Contractor will be required to report to the iFNHA on a monthly basis. Monthly reports will include progress on deliverables achieved in the reporting period, activities planned for the upcoming month and any issues that are important to the iFNHA work going forward.

Addendum 7

SERVICE DESCRIPTION Finance

REQUIRED COMPONENT	DESCRIPTION
Expected Start Date	RFQ list will start April 1, 2012
Expected End Date	RFQ list will end March 31, 2014
Definition	A Contractor is needed to support the iFNHA for the transition of First Nations and Inuit Health Branch (Government of Canada) to the (interim) First Nations Health Authority.
Scope of the Service to be Provided	Work will focus primarily on Finance, including expertise in strategic planning, development of corporate financial management frameworks and financial management systems and processes.
Service Components	<p>Deliverable / Milestones</p> <p>Advice & Recommendations to support transition of First Nations & Inuit Health Branch to the interim First Nations Health Authority</p> <p>Planning and implementation of specific components of transition identified and directed by the iFNHA.</p> <p>Information may be relayed in a variety of ways, as directed and required by the iFNHA, including summaries, charts, graphs, diagrams and any other written or visual product documenting information pertaining to knowledge translation activities.</p>
Service Coverage Area	This is for all of BC; it is expected that periodic visits to the iFNHA offices will be expected, with a possibility of visits to Ottawa, and as determined by the iFNHA.
Key Linkages	Federal (including FNIH BC region, FNIH headquarters, and Health Canada), Provincial (Ministry of Health) and Provincial Health authorities, First Nations Health Council, iFNHA, and any other relationships/partnerships/stakeholders/agencies that relate to the implementation of the Framework Agreement and the transition of First Nation & Inuit Health Branch to the (interim) First Nations Health Authority.
Outputs / Deliverables –	Surveys, graphs, charts, diagrams, reports, summaries, briefing notes, or any other deliverable as required by the iFNHA
Reporting Requirements	Contractor will be required to report to the iFNHA on a monthly basis. Monthly reports will include progress on deliverables achieved in the reporting period, activities planned for the upcoming month and any issues that are important to the iFNHA work going forward.

Addendum 8

**SERVICE DESCRIPTION
Health Benefits**

REQUIRED COMPONENT	DESCRIPTION
Expected Start Date	RFQ list will start April 1, 2012
Expected End Date	RFQ list will end March 31, 2014
Definition	A Contractor is needed to support the iFNHA for the transition of First Nations and Inuit Health Branch (Government of Canada) to the (interim) First Nations Health Authority.
Scope of the Service to be Provided	Work will focus primarily on Health Benefits, including expertise in federal Non-Insured Health Benefits program, province of BC health care system related to MSP and health benefits, evaluating health benefits plans and claims processing systems, developing and implementing health benefit plans, including management frameworks, monitoring and audit functions.
Service Components	<p>Deliverable / Milestones</p> <p>Advice & Recommendations to support transition of First Nations & Inuit Health Branch to the interim First Nations Health Authority</p> <p>Planning and implementation of specific components of transition identified and directed by the iFNHA.</p> <p>Information may be relayed in a variety of ways, as directed and required by the iFNHA, including summaries, charts, graphs, diagrams and any other written or visual product documenting information pertaining to knowledge translation activities.</p>
Service Coverage Area	This is for all of BC; it is expected that periodic visits to the iFNHA offices will be expected, with a possibility of visits to Ottawa, and as determined by the iFNHA.
Key Linkages	Federal (including FNIH BC region, FNIH headquarters, and Health Canada), Provincial (Ministry of Health) and Provincial Health authorities, First Nations Health Council, iFNHA, and any other relationships/partnerships/stakeholders/agencies that relate to the implementation of the Framework Agreement and the transition of First Nation & Inuit Health Branch to the (interim) First Nations Health Authority.
Outputs / Deliverables –	Surveys, graphs, charts, diagrams, reports, summaries, briefing notes, or any other deliverable as required by the iFNHA
Reporting Requirements	Contractor will be required to report to the iFNHA on a monthly basis. Monthly reports will include progress on deliverables achieved in the reporting period, activities planned for the upcoming month and any issues that are important to the iFNHA work going forward.

Addendum 9

SERVICE DESCRIPTION Federal First Nations Health Programs

REQUIRED COMPONENT	DESCRIPTION
Expected Start Date	RFQ list will start April 1, 2012
Expected End Date	RFQ list will end March 31, 2014
Definition	A Contractor is needed to support the iFNHA for the transition of First Nations and Inuit Health Branch (Government of Canada) to the (interim) First Nations Health Authority.
Scope of the Service to be Provided	Work will focus primarily on Federal First Nations Health programs, including expertise in program management frameworks, including design, monitoring and evaluation, program transfer and program and process improvement.
Service Components	<p>Deliverable / Milestones</p> <p>Advice & Recommendations to support transition of First Nations & Inuit Health Branch to the interim First Nations Health Authority</p> <p>Planning and implementation of specific components of transition identified and directed by the iFNHA.</p> <p>Information may be relayed in a variety of ways, as directed and required by the iFNHA, including summaries, charts, graphs, diagrams and any other written or visual product documenting information pertaining to knowledge translation activities.</p>
Service Coverage Area	This is for all of BC; it is expected that periodic visits to the iFNHA offices will be expected, with a possibility of visits to Ottawa, and as determined by the iFNHA.
Key Linkages	Federal (including FNIH BC region, FNIH headquarters, and Health Canada), Provincial (Ministry of Health) and Provincial Health authorities, First Nations Health Council, iFNHA, and any other relationships/partnerships/stakeholders/agencies that relate to the implementation of the Framework Agreement and the transition of First Nation & Inuit Health Branch to the (interim) First Nations Health Authority.
Outputs / Deliverables –	Surveys, graphs, charts, diagrams, reports, summaries, briefing notes, or any other deliverable as required by the iFNHA
Reporting Requirements	Contractor will be required to report to the iFNHA on a monthly basis. Monthly reports will include progress on deliverables achieved in the reporting period, activities planned for the upcoming month and any issues that are important to the iFNHA work going forward.

Addendum 10

**SERVICE DESCRIPTION
Clinical Practice**

REQUIRED COMPONENT	DESCRIPTION
Expected Start Date	RFQ list will start April 1, 2012
Expected End Date	RFQ list will end March 31, 2014
Definition	A Contractor is needed to support the iFNHA for the transition of First Nations and Inuit Health Branch (Government of Canada) to the (interim) First Nations Health Authority.
Scope of the Service to be Provided	Work will focus primarily on Clinical Practice, including expertise in federal and provincial standards, regulations and legislative authority related to provincial medical officers, dentists, nurses and environmental health officers, health system integration and transformation.
Service Components	<p>Deliverable / Milestones</p> <p>Advice & Recommendations to support transition of First Nations & Inuit Health Branch to the interim First Nations Health Authority</p> <p>Planning and implementation of specific components of transition identified and directed by the iFNHA.</p> <p>Information may be relayed in a variety of ways, as directed and required by the iFNHA, including summaries, charts, graphs, diagrams and any other written or visual product documenting information pertaining to knowledge translation activities.</p>
Service Coverage Area	This is for all of BC; it is expected that periodic visits to the iFNHA offices will be expected, with a possibility of visits to Ottawa, and as determined by the iFNHA.
Key Linkages	Federal (including FNIH BC region, FNIH headquarters, and Health Canada), Provincial (Ministry of Health) and Provincial Health authorities, First Nations Health Council, iFNHA, and any other relationships/partnerships/stakeholders/agencies that relate to the implementation of the Framework Agreement and the transition of First Nation & Inuit Health Branch to the (interim) First Nations Health Authority.
Outputs / Deliverables –	Surveys, graphs, charts, diagrams, reports, summaries, briefing notes, or any other deliverable as required by the iFNHA
Reporting Requirements	Contractor will be required to report to the iFNHA on a monthly basis. Monthly reports will include progress on deliverables achieved in the reporting period, activities planned for the upcoming month and any issues that are important to the iFNHA work going forward.

Addendum 11

SERVICE DESCRIPTION Economic Opportunities

REQUIRED COMPONENT	DESCRIPTION
Expected Start Date	RFQ list will start April 1, 2012
Expected End Date	RFQ list will end March 31, 2014
Definition	A Contractor is needed to support the iFNHA for the transition of First Nations and Inuit Health Branch (Government of Canada) to the (interim) First Nations Health Authority.
Scope of the Service to be Provided	Work will focus primarily on Economic Opportunities related to supporting the First Nation Health Systems and Health Benefit programs in BC.
Service Components	<p>Deliverable / Milestones</p> <p>Advice & Recommendations to support transition of First Nations & Inuit Health Branch to the interim First Nations Health Authority</p> <p>Planning and implementation of specific components of transition identified and directed by the iFNHA.</p> <p>Information may be relayed in a variety of ways, as directed and required by the iFNHA, including summaries, charts, graphs, diagrams and any other written or visual product documenting information pertaining to knowledge translation activities.</p>
Service Coverage Area	This is for all of BC; it is expected that periodic visits to the iFNHA offices will be expected, with a possibility of visits to Ottawa, and as determined by the iFNHA.
Key Linkages	Federal (including FNIH BC region, FNIH headquarters, and Health Canada), Provincial (Ministry of Health) and Provincial Health authorities, First Nations Health Council, iFNHA, and any other relationships/partnerships/stakeholders/agencies that relate to the implementation of the Framework Agreement and the transition of First Nation & Inuit Health Branch to the (interim) First Nations Health Authority.
Outputs / Deliverables –	Surveys, graphs, charts, diagrams, reports, summaries, briefing notes, or any other deliverable as required by the iFNHA
Reporting Requirements	Contractor will be required to report to the iFNHA on a monthly basis. Monthly reports will include progress on deliverables achieved in the reporting period, activities planned for the upcoming month and any issues that are important to the iFNHA work going forward.

Addendum 12

**SERVICE DESCRIPTION
Implementation/Transition Management and Support**

REQUIRED COMPONENT	DESCRIPTION
Expected Start Date	RFQ list will start April 1, 2012
Expected End Date	RFQ list will end March 31, 2014
Definition	A Contractor is needed to support the iFNHA for the transition of First Nations and Inuit Health Branch (Government of Canada) to the (interim) First Nations Health Authority.
Scope of the Service to be Provided	Work will focus primarily on Implementation/Transition Management and Support, including expertise in Government of Canada management frameworks and mechanisms, project management, multi-stakeholder coordination, corporate transition and merger.
Service Components	<p>Deliverable / Milestones</p> <p>Advice & Recommendations to support transition of First Nations & Inuit Health Branch to the interim First Nations Health Authority</p> <p>Planning, management, and implementation of specific components of transition identified and directed by the iFNHA.</p> <p>Information may be relayed in a variety of ways, as directed and required by the iFNHA, including summaries, charts, graphs, diagrams and any other written or visual product documenting information pertaining to knowledge translation activities.</p>
Service Coverage Area	This is for all of BC; it is expected that periodic visits to the iFNHA offices will be expected, with a possibility of visits to Ottawa, and as determined by the iFNHA.
Key Linkages	Federal (including FNIH BC region, FNIH headquarters, and Health Canada), Provincial (Ministry of Health) and Provincial Health authorities, First Nations Health Council, iFNHA, and any other relationships/partnerships/stakeholders/agencies that relate to the implementation of the Framework Agreement and the transition of First Nation & Inuit Health Branch to the (interim) First Nations Health Authority.
Outputs / Deliverables –	Surveys, graphs, charts, diagrams, reports, summaries, briefing notes, or any other deliverable as required by the iFNHA
Reporting Requirements	Contractor will be required to report to the iFNHA on a monthly basis. Monthly reports will include progress on deliverables achieved in the reporting period, activities planned for the upcoming month and any issues that are important to the iFNHA work going forward.

Appendix A

Required Response Format (proposals should aim to be no longer than 15 pages excluding any attachments)

REQUIREMENTS	RESPONSE	
1. RESPONDENT		
<i>Name of Individual / Entity (If the Proponent is a partnership or similar arrangement, one party should be named as the primary contact)</i>	<i>Registration No (if relevant), date & where registered. Attach copy of Articles of Association if applicable</i>	<i>General Description of Types of Services Provided</i>
<i>Respondent Key Contact Person: List relevant information (Name, Position, Address, Phone, Fax and eMail)</i>		
2. PREVIOUS RELEVANT EXPERIENCE FOR THIS TYPE OF WORK (in past 5 years only) – ensure you relate these projects to the Service Description attached.		
<i>Client/Project/Assignment/Task</i>	<i>Contact References</i>	<i>Date Completed</i>
3. Capacity <i>Describe the Proponent's capacity to meet the requirements specified in the Addendum the Proponent is</i>		

REQUIREMENTS	RESPONSE
<i>submitting the Proposal for.</i>	
<p>4. Methodology</p> <p>a. <i>Describe here how you intend to deliver the Services. Provide detailed information wherever possible including timelines for delivery of key milestones, service levels and reporting requirements</i></p>	
<p>b. <i>What support or resources do you expect of iFNHA or other entities, partners or vendors throughout the project?</i></p>	
<p>5. Quality Assurance and Risk Management Practices</p> <p>a. <i>Describe your approaches to quality assurance (including describing your QA practices) and risk</i></p>	
<p>b. <i>Describe your approaches to risk management for this project.</i></p>	
<p>6. Price / Costing</p> <p>a. <i>Total Price/value of Project</i></p>	
<p>b. <i>Detail key cost components as applicable</i></p> <p>i. <i>Hours / Fees</i></p>	

REQUIREMENTS	RESPONSE
<ul style="list-style-type: none"> <i>ii. Travel Expenses</i> <i>iii. Supplies & Materials</i> <i>iv. Third-Party Expenses</i> 	
<ul style="list-style-type: none"> <i>c. Proposed Payment Terms (Start, Interim and Final Payments according to milestones and deliverables)</i> <i>Please include a copy of the contract you would propose to use for this project.</i> 	
<p>7. Concluding/Final Comments</p> <ul style="list-style-type: none"> <i>a. Why are you the “best” supplier for this project?</i> 	
<ul style="list-style-type: none"> <i>b. What do you / does your company bring to the project that others do not or cannot?</i> 	

I am authorized to make this Proposal on behalf of the Proponent named above and this Proposal is valid for a period of 2 years after the Closing Time of this RFQ _____