

Consulting Statement of Work

REQUEST DETAILS

ENGAGEMENT # (YYYY/MM/DD + INITIALS EG: 20110801RST): 2019/05/09CAG

TITLE: INTEGRATED INTERVENTIONAL SERVICE PLANNING *TITLE IS USED TO IDENTIFY THE PROJECT (OR PORTION) THE CONSULTANT WILL BE WORKING ON*

SOW ISSUE DATE 31 May 2019

RESPONSE DUE DATE: 20190615 @ 12PM

CONSULTING CATEGORY OR CATEGORIES	SENIORITY LEVEL (**SEE BELOW)
General healthcare	Senior

This Consulting Statement of Work may only be used to engage Service Providers on the Pre-Qualified Consultant List and only for Consulting Categories appearing on the Pre-Qualified Consultant List. Service Providers and Independent Contractors (aka Consultants) who are not on the Pre-Qualified Consultant List may not be considered for an engagement using this SOW.

Conditions applying to response:

- No responses will be accepted after 12:00pm on the Closing Date specified above.
- Statement of Work must be signed by an authorized signatory of the sole proprietor, firm, corporation or other entity submitting a proposal for purposes of this engagement (the "Service Provider").
- All Consultants proposed MUST meet the requirements for the Seniority Level stated above.
- Complete a Statement of Work for EACH Consultant in respect of the engagement hereunder. The maximum number of individuals each Service Provider may put forward as a Consultant for this engagement is three. Include a resume for each Consultant proposed and each individual Consultant forming part of a team proposed for this engagement. Each resume is to be a separate attachment.
- Submit a one page cover letter with this Statement of Work.
- Reference the engagement number and title, as indicated above, in the subject line of the reply email. E.g. "20110801RST Change Management for Project X" and send along a cover letter with the Statement of Work to:
Name: Carol Galte, Chief Clinical Planner **Email:** carol.galte@fraserhealth.ca
- Do not contact any employee of the Purchaser other than the individual named above regarding the status of submitted responses.
- Submit any questions about the engagement or the process by email to the individual named above.
- All capitalized terms shall have the same meaning as defined in the Statement of Work except as otherwise expressly defined in the Contract Terms and Conditions for General Health Care Consulting Services and IMIT Consulting Services (the "Terms and Conditions").

Failure to comply with any of the above requirements may result in rejection of your proposal at the sole discretion of the Purchaser

Following the Closing Date:

- Responses will be evaluated in the following areas:
 - Approach
 - Qualifications and Education
 - Value Adds
 - Price
- Interviews may be held with Consultants that have been short-listed in step 1.
- References of Consultants may be contacted by the Purchaser and the results of the reference checks used to determine the successful Consultant.

Consulting Statement of Work

****Please note: You may receive this Statement of Work more than once if you are pre-qualified in multiple categories.**

Seniority Level Descriptions

- **Intermediate**
 - A Degree in Consulting Category related disciplines and a minimum of two (2) years of related Consulting Category experience; or
 - A Diploma in Consulting Category related disciplines and a minimum of three (3) years of related Consulting Category experience; or
 - A Certificate in Consulting Category related disciplines and a minimum of four (4) years of related Consulting Category experience; or
 - An absolute minimum of six (6) years of directly related Consulting Category experience.
- **Senior**
 - A Degree in Consulting Category related disciplines and a minimum of four (4) years of related Consulting Category experience; or
 - A Diploma in Consulting Category related disciplines and a minimum of five (5) years of related Consulting Category experience; or
 - A Certificate in Consulting Category related disciplines and a minimum of six (6) years of related Consulting Category experience; or
 - An absolute minimum of eight (8) years of directly related Consulting Category experience.
- **Expert**
 - A Degree in Consulting Category related disciplines and a minimum of six (6) years of related Consulting Category experience; or
 - A Diploma in Consulting Category related disciplines and a minimum of seven (7) years of related Consulting Category experience; or
 - A Certificate in Consulting Category related disciplines and a minimum of eight (8) years of related Consulting Category experience; or
 - An absolute minimum of ten (10) years of directly related Consulting Category experience.
- **Specialist**
 - Multiple Degrees (or other qualifications) relevant to Consulting Category disciplines and a minimum of ten (10) years of related Consulting Category experience; or
 - An absolute minimum of fifteen (15) years directly related Consulting Category experience.

Consulting Statement of Work

Engagement Definition (completed by Purchaser's representative)
<p>1. Purchaser:</p> <p>PHSA of 1795 Willingdon Avenue, British Columbia, V5C 6E3, is the contracting authority on behalf of:</p> <p>(double click the checkbox you want to use and choose "checked")</p> <p><input checked="" type="checkbox"/> Fraser Health Authority ("FHA") <input type="checkbox"/> Interior Health Authority ("IHA") <input type="checkbox"/> Northern Health Authority ("NHA") <input type="checkbox"/> Provincial Health Services Authority ("PHSA") <input type="checkbox"/> Vancouver Coastal Health Authority ("VCH") or <input type="checkbox"/> VCH acting as agent for Providence Health Care Society (PHC) <input type="checkbox"/> Vancouver Island Health Authority ("VIHA") (the "Purchaser")</p>
<p>2. Department: Royal Columbian Hospital Redevelopment Project</p> <p><i>Please indicate which department/division/agency of the Purchaser requires the Consultant (fields will expand as required).</i></p>
<p>3. Project Description: The Royal Columbian Hospital is one of BC's busiest and most specialized critical care hospitals. As well as being our local community hospital here in New Westminster, it provides tertiary (highly specialized) care for trauma, cardiac care, interventional radiology, neurosurgery and vascular/thoracic surgery to BC, the Lower Mainland and Fraser Health. Royal Columbian also provides quaternary (the MOST specialized care) for trauma care, heart attack, heart and lung life support, and clot removal in acute stroke patients. It performs more open heart surgeries than any other BC hospital. Royal Columbian is adding more capacity to help address the significant increase in patient volumes and congestion seen in recent years and expected by 2025 as our aging population grows.</p> <p>Redevelopment Plans:</p> <p><u>Phase 1 (2016 to 2020)</u></p> <p>➤ A new 75-bed Mental Health and Substance Use Wellness Centre with more outpatient clinics and Fraser Health's first Older Adult Psychiatric Unit for seniors, all to replace the aging Sherbrooke Centre. The building also includes:</p> <ul style="list-style-type: none"> ○ A new 450 stall underground parkade ○ A new Energy Centre to provide more power and utilities to our growing hospital ○ Relocation of the heliport to roof of Columbia Tower <p><u>Phase 2 (2020 to 2024)</u></p> <p>➤ A new acute care tower with:</p>

Consulting Statement of Work

- More beds for intensive care, cardiac intensive care, medicine and surgical patients, all in single-patient private rooms •A new, larger Emergency with a satellite medical imaging unit
- More operating rooms and interventional suites for cardiology and diagnostic radiology all on one large interventional and surgical 'super floor'
- More maternity beds and a maternity operating room
- An underground parkade, a new main entrance, and a rooftop helipad
- Replacement of some aging buildings with site enhancements

Phase 3 (2023 to 2026)

- The final phase upgrades and expands spaces within existing buildings.

Please provide a brief summary of the overall project scope, objectives, timelines and milestones.

4. Reporting to: Carol Galte, Chief Clinical Planner

Please identify the position/title to whom the Consultant will report.

5. Services Required: As part of the RCH Redevelopment work, the Hospital wishes to define and articulate a future "service delivery model" that results in the development of future state interventional service that is integrated across operating, interventional and procedural services. It is envisioned that this would include governance structures, standards and guidelines that will result in achievement of synergies in practice, efficiency in patient flow and a high quality environment for staff and physicians. The integrated model will articulate the future service delivery model for the RCH Interventional platform to be developed as a component of the RCH Redevelopment project (completion of Phase 2 – 2024) and will provide an opportunity for early implementation and change management activities.

Key Deliverables

- Contract Signed – Consultant to start on (or around) June 15, 2019
- Stakeholder Engagement Plan
- Review and validation of literature (internal and external), evidence-based, leading practices
- Assessment of Previous Service Model Planning and Current State
- Options Analysis
- Initial draft of the Service Model due Nov 15, 2019 and subsequent drafts as required submitted for review by sponsors
- Integrated Interventional Service Model due Dec 20, 2019 – FINAL, including:
 - Gap Analysis
 - Change Management Plan
 - Transition to Operations Plan

These milestones are approximate; project and invoicing to be completed prior to March 15 2020.

Specialized skills: expertise in interventional/surgical clinical operations, engagement of

Consulting Statement of Work

physicians and health care administrative staff are required.

6. Pricing Options Preferred:

Phased rate tied to deliverables including

- 1) Stakeholder engagement & literature review
- 2) Initial draft issuance
- 3) Final document issuance; project completion.

Please indicate total cost and whether you would like the Service Provider to quote an hourly rate, daily rate, flat rate, or phased rate tied to deliverables.

7. Constraints and Special Considerations:

This project will expose the vendor to aspects of the RCH Redevelopment project which may preclude their involvement in the Phase 2 RFP submission. A confidentiality agreement will be required prior to information being shared.

It is expected that the scope of this work will be informed by and aligned with previous service planning for the RCH Redevelopment, and tools, templates and methods will be consistent with Fraser Health standards, structures and values.

Please identify special circumstances that may influence the selection of or preclude a Service Provider from responding (e. g. is there conflict of interest constraints) or if by accepting this engagement they may be excluded from related projects.

8. Specific Qualifications or Experience Required:

Experience in the development of complex service delivery and/or care models required. *Please indicate any qualifications required that are specific to this engagement. As an example, you may require previous Health Care experience, certain certifications, or membership in a professional organization.*

9. Start Date of This Engagement:

June 15, 2019

10. End Date of This Engagement:

No later than March 15, 2020

11. Possible Future Extensions to This Engagement:

Number of Potential Extensions: 0

Duration of Each Potential Extension: N/A

Please indicate the number and duration of any extensions that may be required. For example, Number of Potential Extensions: Two (2)

Duration of Each Potential Extension: Six (6) months

If no extensions are listed or if all of the extensions are used, then a new procurement

Consulting Statement of Work

process will be required. If Process A was run, then Potential Extensions may not be entered if the Estimated Total Value of the engagement will exceed \$50K.

12. Terms and Conditions:

Contract Terms and Conditions for General Health Care Consulting Services and IMIT Consulting Services previously accepted in the pre-qualification application process are non-negotiable and will apply in respect of the engagement envisaged in terms hereof.

The Indemnity, Liability and Insurance clause applicable for this engagement is:

(please check one)

- General Health Care Consulting Services (Article 11 of the Terms and Conditions applies)
 IMIT Consulting Services (Article 12 of the Terms and Conditions applies)

13. Incumbent - none

Please indicate whether or not there is an incumbent currently providing the services relevant under this engagement.

Engagement Service Provider Response (completed by the Service Provider)

1. Service Provider information:

(The "Service Provider")

Service Provider to provide their legal name and address.

2. Service Provider Primary Contact:

Service Provider to provide their primary contact name, email address and phone number.

3. Service Provider registered sales tax number (GST/PST/HST):

Service Provider to provide sales tax number.

4. Consultant Proposed:

Service Provider to provide name(s) of Consultant(s) proposed for this engagement

5. Relationship:

Service Provider to disclose relationship of proposed Consultant(s) to the Service Provider:

Consulting Statement of Work

<input type="checkbox"/> Principal <input type="checkbox"/> Employee <input type="checkbox"/> Subcontractor (refer to definitions in Contract Terms and Conditions)
<p>NOTE: By completing this section the Service Provider acknowledges that the Consultant(s) it is proposing is not a current employee of the Customer.</p>
<p>6. Summary response:</p> <p><i>Service Provider to summarize their understanding of Purchaser's requirements.</i></p>
<p>7. Proposed Approach:</p> <p><i>Service Provider to provide details on how they intend to meet the Purchaser's requirements.</i></p>
<p>8. Qualifications and Education of proposed Consultant:</p> <p><i>Service Provider to provide details of the Consultant proposed for the assignment including related experience and skills</i></p>
<p>9. Expected Effort:</p> <p><i>Service Provider to estimate the number of effort hours or days by Consultant. (NOTE** number of effort hour or days and duration of work effort is NOT predicated by the start and end date of the engagement.</i></p>
<p>10. Availability of Proposed Consultant:</p> <p><i>Service Provider to indicate the ability of the proposed Consultant to commence work on the Start Date stated in Section 9 of the Engagement Definition.</i></p>
<p>11. Proposed Pricing:</p> <p><i>Service Provider to provide detailed pricing for this assignment which aligns to the pricing option preferred by the Purchaser as described in Section 6 of the Engagement Definition. Estimated out of pocket expenses must be listed separately. Payment of such expenses must be pre-approved by the Purchaser in accordance with existing travel expense policy.</i></p>
<p>12. Value Added:</p> <p><i>Service Provider to identify value added services offered for this specific assignment including tools to be applied, access to specialized no fee expertise etc.</i></p>
<p>13. Insurance Coverage:</p> <p>The Service Provider selected by the Purchaser for the engagement set out herein will</p>

Consulting Statement of Work

provide the Purchaser with a Certificate of Insurance from the Service Provider's insurance company / broker indicating the types and amounts of insurance coverage held by the Service Provider as evidence that the Service Provider meets the Insurance requirements set forth in Section 12 of the Engagement Definition above and in compliance with the Contract Terms and Conditions for General Health Care Consulting and IMIT Consulting agreed to as a condition of being accepted on the Consulting Pre-Qualification List. The Certificate of Insurance is required before a Purchase Order will be issued by Supply Chain. For clarity, this requirement applies to the Service Provider whether it is a consulting firm or a sole proprietor (e.g. independent contractor).

14. Service Provider Conflict of Interest Declaration


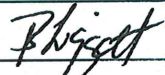
The Service Provider and its shareholders, directors, officers, agents, servants or employees will take all reasonable steps to ensure avoidance of all direct or indirect conflicts of interest (either actual or potential) between any of their individual interests and those of the Purchaser. If the Service Provider becomes aware of any reasonable possibility of any direct or indirect conflict, then the Service Provider will promptly disclose to the Purchaser the applicable facts and circumstances. Failure to resolve a conflict to the satisfaction of the Purchaser will constitute a material default by the Service Provider entitling the Purchaser to immediately terminate this Contract without liability to the Service Provider.

Service Provider to indicate its agreement to the foregoing No Conflict of Interest statement:

The Service Provider agrees to the foregoing No Conflict of Interest statement.

15. Special Considerations Response:

In addition, Service Provider to describe how you will mitigate any constraints or special considerations identified by the Purchaser in Section 7 of the Engagement Definition.

	Signed by an authorized representative of the Purchaser	Signed by an authorized signatory of the Service Provider
Authorized Signature		
Name of Signatory (printed)	Tom Sparrow	Brenda Liggett
Designation of Signatory	CHIEF PROJECT OFFICER	VP Facilities Mgmt. CFO
Date signed	2019.05.21	May 24, 2019

Parties agree that the requirements and the response provided above are mutually acceptable. No contract is formed until such time as Supply Chain issues a valid purchase order for this Statement of Work.



Consulting Statement of Work

Purchaser Conflict of Interest:

I, Carol Galt, Tom Sparrow, as authorized signatory on behalf of the Purchaser do hereby declare and confirm that I have no direct or indirect conflict of interest, whether pecuniary, non-pecuniary or some other form (either actual or potential) between any duty owed to or interest of the Purchaser in respect of the matter of this engagement request or process.

I understand and agree that a conflict of interest could arise in relation to:


- directorships or other employment;
- interests in business enterprises or professional practices;
- share ownership;
- beneficial interests in trusts;
- existing professional or personal associations with any proposed Supplier and/or Consultant (whether an individual, team or a firm);
- professional associations or relationships with other organizations; and
- personal associations with other groups or organizations, or family relationships.

I agree I must and confirm I will immediately disclose any obligation, commitment, relationship or interest that could conflict or may be perceived to conflict with my duties to or interests of the Purchaser.

	Signed by an authorized representative of the Purchaser
Authorized Signature 	<i>i</i>



Consulting Statement of Work

Name of Signatory (printed) Tom Sparrow	
Designation of Signatory Chief Project Officer	
Date signed MAY 21, 2019	