

May 27, 2019

COR/2019/079373

Dear Applicant:

**Re: Your request for access to information under Part II of the *Access to Information and Protection of Privacy Act* [Our File #: HCS/078/2019]**

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On April 26, 2019, the Department of Health and Community Services (the Department) received your request for access to the following records:

*“On November 1, 2018 a request for proposals titled "Proposals from interested parties to complete a needs assessment for hospice care services" was published by the Government of Newfoundland and Labrador in which the Department of Health and Community Services (HCS) invited proposals from interested parties to complete a needs assessment for hospice care services within Newfoundland and Labrador. The request for proposals says "Please see attachment RFPHOSPICECARE-1 for more information." I request a copy of the afore mentioned attachment titled RFPHOSPICECARE-1 as well as any amendments or revisions of the original document and/or request for proposal tender. Additionally, if not expressly stated in the attachment or amendments/revisions, could you please provide the timeline for the completion and submission of the needs assessment to government. I also request the name of the person(s) or firm awarded the tender and the date the tender was awarded. Thank you for your attention in this matter”*

I am pleased to inform you that a decision has been made by the Department to provide access to the requested information. Please note that MQO Research was awarded this tender on December 4, 2018 and no amendments or revisions have been made. A timeline for completion has not yet been finalized.

Please be advised that you may ask the Information and Privacy Commissioner to review the processing of your access request, as set out in section 42 of the *Access to Information and Protection of Privacy Act* (the *Act*). A request to the Commissioner must be made in writing within 15 business days of the date of this letter or within a longer period that may be allowed by the Commissioner.

The address and contact information of the Information and Privacy Commissioner is as follows:

Office of the Information and Privacy Commissioner  
2 Canada Drive  
P. O. Box 13004, Stn. A  
St. John's, NL. A1B 3V8  
Telephone: (709) 729-6309  
Toll-Free: 1-877-729-6309  
Facsimile: (709) 729-6500

You may also appeal directly to the Supreme Court Trial Division within 15 business days after you receive the decision of the public body, pursuant to section 52 of the *Act*.

Please be advised that responsive records will be published following a 72 hour period after the response is sent electronically to you or five business days in the case where records are mailed to you. It is the goal to have the responsive records posted to the Completed Access to Information Requests website within one business day following the applicable period of time. Please note that requests for personal information will not be posted online.

If you have any further questions, please contact the undersigned by telephone at 709-729-7010 or by email at [MichaelCook@gov.nl.ca](mailto:MichaelCook@gov.nl.ca).

Sincerely,



Michael Cook  
ATIPP Coordinator  
/Enclosures

### Access or correction complaint

**42.** (1) A person who makes a request under this Act for access to a record or for correction of personal information may file a complaint with the commissioner respecting a decision, act or failure to act of the head of the public body that relates to the request.

(2) A complaint under subsection (1) shall be filed in writing not later than 15 business days

(a) after the applicant is notified of the decision of the head of the public body, or the date of the act or failure to act; or

(b) after the date the head of the public body is considered to have refused the request under subsection 16 (2).

(3) A third party informed under section 19 of a decision of the head of a public body to grant access to a record or part of a record in response to a request may file a complaint with the commissioner respecting that decision.

(4) A complaint under subsection (3) shall be filed in writing not later than 15 business days after the third party is informed of the decision of the head of the public body.

(5) The commissioner may allow a longer time period for the filing of a complaint under this section.

(6) A person or third party who has appealed directly to the Trial Division under subsection 52 (1) or 53 (1) shall not file a complaint with the commissioner.

(7) The commissioner shall refuse to investigate a complaint where an appeal has been commenced in the Trial Division.

(8) A complaint shall not be filed under this section with respect to

(a) a request that is disregarded under section 21 ;

(b) a decision respecting an extension of time under section 23 ;

(c) a variation of a procedure under section 24 ; or

(d) an estimate of costs or a decision not to waive a cost under section 26 .

(9) The commissioner shall provide a copy of the complaint to the head of the public body concerned.

**Direct appeal to Trial Division by an applicant**

**52.** (1) Where an applicant has made a request to a public body for access to a record or correction of personal information and has not filed a complaint with the commissioner under section 42 , the applicant may appeal the decision, act or failure to act of the head of the public body that relates to the request directly to the Trial Division.

(2) An appeal shall be commenced under subsection (1) not later than 15 business days

(a) after the applicant is notified of the decision of the head of the public body, or the date of the act or failure to act; or

(b) after the date the head of the public body is considered to have refused the request under subsection 16 (2).

(3) Where an applicant has filed a complaint with the commissioner under section 42 and the commissioner has refused to investigate the complaint, the applicant may commence an appeal in the Trial Division of the decision, act or failure to act of the head of the public body that relates to the request for access to a record or for correction of personal information.

(4) An appeal shall be commenced under subsection (3) not later than 15 business days after the applicant is notified of the commissioner's refusal under subsection 45 (2).

## Request for Proposals

### Needs Assessment – Provincial Hospice Care Government of Newfoundland and Labrador Departments of Health and Community Services

Distribution Date: Wednesday October 31, 2018

#### **1.0 Introduction**

The Department of Health and Community Services (HCS) invites proposals from interested parties to complete a needs assessment for hospice care services within Newfoundland and Labrador (NL). The objective will be to determine gaps and/or needs for palliative end of life care (PEOLC) within the province and the potential for residential hospice services within the continuum of care.

The consultant will undertake a comprehensive population needs analysis within the province, in particular in relation to the end of life care needs of the population and the Province's current and future capacity to meet those needs. This analysis will also include a review of relevant data from other jurisdictions that can assist in determining the need. The needs assessment would benefit from a consultant who is aware and sensitive of the unique indigenous cultures and histories in NL. HCS will use the findings of this assessment to inform future decisions regarding a hospice care model and need for hospice facilities throughout the province.

#### **2.0 Background and Rationale**

An aging demographic, high incidence of chronic disease and a large rural population creates social and economic challenges in NL. Individuals in need of support services have indicated they would like to receive necessary supports at home. This combined with the growing evidence that community based care is often the most appropriate and cost effective approach, are compelling arguments to enhance community based health care services to meet the needs of individuals who are otherwise high users of acute and long term care facilities. A residential hospice is a home-like environment where individuals with life-limiting illnesses receive end-of-life care, as well as, other palliative symptom management services from a multidisciplinary team twenty-four hours a day, seven days a week. Hospices are generally non-profit and provide care at no cost to the client. Most other jurisdictions have community residential hospice facilities.

NL is currently implementing a Provincial Home First Initiative. Home First is a health care management philosophy that represents a shift from acute and institutional care to the enhancement of home and community based integrated care. The Provincial Home First Initiative is a person-centered, evidence informed initiative that supports individuals with complex care needs in their own homes and community as opposed to an acute care setting. Given the home-like environment that is characteristic of a residential hospice, exploring this area further is in support of Government's current direction.

There has been growing interest expressed across all regional health authorities (RHAs) in establishing residential hospice care options within their respective region. As a starting point and to inform any decisions relating to hospice care within NL, the focus of this RFP will be a needs assessment to begin to understand our current state and to provide recommendations on how best to implement these services within our communities. The objective of the request for proposals is to analyze the population within NL i.e., age, cancer rates, chronic disease rates etc., as well as review all of the appropriate data i.e. palliative care utilization data with a determination of the demand for end of life services within the Province and to understand its current and future capacity to provide these services. This review will look to other jurisdictions to determine best practices adopted by other provinces in relation to hospice care and identify opportunities for adopting models with proven success in other jurisdictions within NL. Consideration will be given to how residential hospice care will align with current and future capacity under development within the province.

### 3.0 Project Scope and Deliverables

The successful bidder will be expected to deliver both a hard copy and electronic version of a comprehensive, written final report including project methodology, results, and conclusions in Microsoft Word format, with recommendations that identify potential opportunities for residential hospice care, supported by the views and wishes of the people of the province. Specifically, the deliverables will include:

- a) Projection of demand for palliative end of life care, at present, at 10 years and at 20 years;
- b) Include an analysis of the population within NL i.e., age, cancer rates, chronic disease rates, other outcomes impacting the health of the population and other factors such as population demographics, migration patterns, geography and accessible transportation;
- c) Capacity of the current system, including new capacity planned for long-term care, personal care homes and advancement of the Home First initiative within NL, and its ability to meet the end of life care needs/wishes;
- d) Review of past palliative care utilization data and anticipated utilization of hospice care;
- e) Engagement with each RHA to provide a report on those palliative care services that are currently provided to residents of the province including Indigenous residents and gaps in end-of-life services;
- f) A client/family member survey to understand the end of life care needs/wishes of the target population;
- g) Jurisdictional scan to gain an understanding of how other jurisdictions are approaching hospice care, addressing gaps in services for end of life care and symptom management, as well as the impact on service delivery as measured by family/client satisfaction and impact on other health services i.e., acute care. This scan should also look at other factors that determine need such as rural vs urban factors, average length of stay etc.; and
- h) Opportunities for adopting hospice care models with proven success in other jurisdictions.

It is expected that the successful bidder will consult with key stakeholders throughout the province, including Indigenous governments and organizations across NL, as well as experts in the area of palliative care and other end of life services. Stakeholders would include community partners such as members of the Lionel Kelland Hospice Board from Central Health and other self identified advocates. Oversight will be provided by a Review Steering Committee chaired by the Director of Regional Services of HCS and will include representatives from the four regional health authorities across the province. The successful bidder will provide verbal updates on progress to the Steering Committee on a bi-weekly basis for the duration of their contract. The Steering Committee, through the chair, is accountable to the Deputy Minister as well as the Minister of HCS.

The successful bidder is expected to commence work on this project on or before **November 29, 2018**. The deliverable will be finalized on or before **January 31, 2019**. The successful bidder will provide an opportunity for the Steering Committee to review the draft report and provide feedback at least twice before submitting a final report.

Funds have been allocated to support this project in 2017-18 in the amount of \$50,000 plus HST. This allocated amount is the maximum amount allowable for this review and is non-negotiable. All travel costs (if travel is required) will be deducted from the total allocated amount of \$50,000 plus HST.

#### 4.0 Submission Requirements

HCS requires that proposals address the costs, methodology, and personnel that would be assigned to the review including their qualifications. Proposals may outline any additional information necessary to complete the project. All proposals must include a mailing address, phone number, and email address for the bidder.

One hand-delivered hard copy and one electronic proposal are required. Acceptable electronic proposal formats are limited to Microsoft Word or Adobe software. The bidder is responsible for all costs associated with the submission of proposals.

Hard copy proposals must be hand-delivered to:

**Dan Murphy**  
**Public Procurement Agency**  
**30 Strawberry Marsh Road**  
**St. John's, NL A1B 4R4**

Proposals shall be submitted no later than 1600h NDT on **Monday November 19, 2018**. Late proposals will not be accepted. All proposals become the property of HCS. RFP opening will take place at Public Procurement Agency on 30 Strawberry Marsh Road, St. John's, NL at 9:45 a.m. Tuesday, November 20, 2018.

Written Inquiries and requests for clarification shall be accepted up to 7 calendar days prior to the closing time. Inquiries and requests for clarification received after that time shall not be addressed. Address all inquiries in writing to the HCS contact at [JoanneCotter@gov.nl.ca](mailto:JoanneCotter@gov.nl.ca). HCS's response to all enquiries received will be posted on the Public Procurement Agency's website as an Addenda to the RFP. In addressing the substance of the enquiry, HCS will keep confidential the name of the Proponent submitting the question. Submissions must remain valid and open for acceptance for a period of 60 days after the RFP closing.

#### 5.0 Short List Presentation (Optional)

Should HCS deem it necessary, proponents may be invited to make a presentation. The presentation will afford an opportunity for proponents to elaborate on their written proposal submissions and for HCS to pose any questions relating to the same. Those participating in the presentation are responsible for covering all costs associated with the presentation.

#### 6.0 Evaluation Criteria

Proposals will be evaluated on the following criteria:

<b>Evaluation Criteria</b>	<b>Weight</b>
Methodology and work plan	15%
Project cost	25%
Relevant experience and qualifications	20%
Knowledge and understanding of project scope and objectives	20%
Knowledge of issues specific to end of life and palliative care as well as indigenous specific considerations	20%

The lowest cost, highest-ranking, of any proposal is not necessarily accepted. HCS may cancel the Request for Proposals without cost to Government.

HCS reserves the right to contact bidders as necessary to seek clarification on proposal content.

## **7.0 General Services Requirements**

Two payment terms are acceptable to HCS: (1) Payment in full upon receipt of the completed deliverable acceptable to HCS and with a vendor invoice; or (2) percentage down payment of no more than 20% with a vendor invoice, with holdback of the remaining 80% payment upon receipt of the completed deliverable acceptable to HCS and with a vendor invoice. All payments will be made by HCS within 30 days of receipt of invoice(s).

The successful bidder will be required to sign a contract. This contract may include components taken directly from the proposal of the successful bidder (e.g., costs, work plan).

## **8.0 Awarding of Contract**

The successful bidder will be notified by telephone or email once one has been identified based on a comprehensive evaluation of proposals.

## **9.0 Disclosure of Information**

The financial value of a contract resulting from this procurement process will be publicly released as part of the award notification process. This procurement process is subject to the Access to Information and Protection of Privacy Act, 2015. The bidder agrees that any specific information in its bid that may qualify for an exemption from disclosure under subsection 39(1) of the Access to Information and Protection of Privacy Act, 2015 has been identified. If no specific information has been identified it is assumed that, in the opinion of the bidder, there is no specific information that qualifies for an exemption under subsection 39(1) of the Access to Information and Protection of Privacy Act, 2015