

# Consulting Statement of Work

## REQUEST DETAILS

ENGAGEMENT #: 20161001ESS

TITLE: CLIMATE CHANGE RESILIENCY

SOW ISSUE DATE: 2016.09.29

RESPONSE DUE DATE: 2016.10.10 @ 08:00AM

CONSULTING CATEGORY OR CATEGORIES	SENIORITY LEVEL (**SEE BELOW)
Healthcare Strategy and Change Consultant	Senior

### Conditions applying to response:

1. No responses will be accepted after **08:00AM** on the Closing Date specified above.
2. 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 "Supplier").
3. All Consultants proposed MUST meet the requirements for the Seniority Level stated above.
4. Complete a Statement of Work for EACH Consultant in respect of the engagement hereunder. The maximum number of individuals each Supplier may put forward as a Consultant for this engagement is one. 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.
5. **Submit a one page cover letter with this Statement of Work.**
6. Reference the engagement number and title, as indicated above, in the subject line of the reply email. Send along a cover letter with the Statement of Work to:  
**Name:** Glen Garrick **Email:** [glen.garrick@fraserhealth.ca](mailto:glen.garrick@fraserhealth.ca)
7. Do not contact any employee of the Purchaser other than the individual named above regarding the status of submitted responses.
8. Submit any questions about the engagement or the process by email to the individual named above.
9. 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:**

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

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

# Consulting Statement of Work

## 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)

### 1. Purchaser:

BCCSS of 1795 Willingdon Avenue, British Columbia, V5C 6E3, is the contracting authority on behalf of:

- BC Clinical and Support Services Society ("BCCSS")  
 Fraser Health Authority ("FHA")  
 Interior Health Authority ("IHA")  
 Northern Health Authority ("NHA")  
 Provincial Health Services Authority ("PHSA")  
 Vancouver Coastal Health Authority ("VCH") or  VCH acting as agent for Providence Health Care Society (PHC)  
 Vancouver Island Health Authority ("VIHA")  
 (the "Purchaser")

### 2. Department:

Lower Mainland Facilities Management

### 3. Project Description:

#### The overall project scope:

- Climate Resiliency & Adaptation program: strategic development and implementation
- Strengthening Hospital Resilience project development and implementation
- 2020 Healthcare Climate Challenge reporting

#### Objectives:

- Develop and implement key strategic areas of the Roadmap to enable and leverage progress towards achieving the ideal state of climate preparedness in healthcare facilities.
- Develop, implement and expand the Strengthening Hospital Resilience project.
- Meet reporting requirements for the 2020 Healthcare Climate Challenge.

#### Timelines:

- Oct 15, 2016 - Mar 31, 2017

# Consulting Statement of Work

## 4. Reporting to:

**Glen Garrick**, MBA, LEED AP

Sustainability Manager, Transformation and Innovation

Facilities Management – Energy and Environmental Sustainability

Desk: 604.875.4466 ext.68288 | [glen.garrick@fraserhealth.ca](mailto:glen.garrick@fraserhealth.ca)

Suite 500, 520 W 6<sup>th</sup> Avenue, Vancouver, BC V5Z 4H5

### Lower Mainland Facilities Management

#### □ Services Required:

Detailed description of the consulting services and deliverables required include:

#### □ Climate Resiliency & Adaptation

- Climate Change Preparedness (i.e. FACILITIES' physical and social resilience)
  - Working with the lower mainland consolidated facilities management and HEM BC, refine and implement key strategies and tactics outlined in the Climate Change Resiliency roadmap
  - Integrate resiliency and adaptation into GreenCare's existing programs and initiatives in collaboration with key stakeholders
  - Collaborate with enabling partners to advance policies, guidelines and practices for improved physical and social resilience in healthcare
- Strengthening Hospital Resilience project
  - Develop and implement subsequent phases with the support of part-time project staff and in partnership with key risk and health emergency management staff
  - Seek additional support (e.g. Intern) to implement and expand project (e.g. cohort 2 - PHSA & PHC, early 2017)
- External engagement to enable & leverage GreenCare
  - Task Force on Adaptation for Public Sector Organizations: collaborate with members to develop approaches and guidelines for health sector
  - CCHPG's Green Health Care Working Group: explore out-of-scope emissions reduction potential in healthcare facilities
  - Pacific NorthWest Resilience in Healthcare: develop a community of practice among healthcare sites and municipalities (e.g. site adaptation plans vis a vis resilient city strategies)

# Consulting Statement of Work

- PETT: exchange information and lessons learned on conference calls
- Reporting to the 2020 Healthcare Climate Challenge
  - Fulfill the reporting obligations for Health Care Without Harm
  - Submit application for awards recognition, particularly in “Leadership” and “Resilience” categories (if applicable during SOW period)
- Project staff and intern
  - Mentor project staff and intern to deliver on the Strengthening Resilience Project.

## 5. Pricing Options Preferred:

The maximum value (upset limit) of this contract is: \$41,400.

This assumes a \$48 (incl. taxes) / hr billing rate. (862.5 work hours; 115 days at 7.5 hrs / day)

## 6. Constraints and Special Considerations:

The vendor / contractor conducting this work will not be precluded from applying for and potentially accepting full time work for one of the health authorities. But due to a potential conflict of interest, this work is not to be conducted in addition to full time employment with one of the health authorities. This work will end on the starting date of full time employment with a health authority.

## 7. Specific Qualifications or Experience Required:

Qualifications required that are specific to this engagement.

- Health care experience at both frontline staff and senior management levels
- Climate change expertise, with emphasis on adaptation
- Extensive network within healthcare, government (i.e. municipal, provincial, federal), academic and non-government sectors
- Proven ability to create and foster cross-sector collaborations to advance common goals
- Demonstrated success in working at both strategic and technical levels
- An effective team player and mentor

## 8. Start Date of This Engagement:

October 15, 2016

## Consulting Statement of Work

**9. End Date of This Engagement:**

March 31, 2017

**10. Possible Future Extensions to This Engagement:**

**Number of Potential Extensions:** One (1)

**Duration of Each Potential Extension:** Six (6) months

**11. Terms and Conditions:**

**Terms and Conditions previously accepted in the pre-qualification application process will apply in respect of the engagement envisaged in terms hereof. (Appendix 1 will restate the terms and conditions)**

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

**(please check one)**

- General Health Care Consulting Services (Section 12 of the Terms and Conditions applies)  
 IMIT Consulting Services (Section 13 of the Terms and Conditions applies)

**12. Incumbent**

One incumbent is currently conducting this work and is scheduled to be completed by September 30, 2016. One part-time project staff supports current project scope until Dec 23, 2016. An intern may be brought on to support further project implementation or expansion in early 2017.

# Consulting Statement of Work

<b>Engagement Supplier Response (completed by the Supplier)</b>
<p><b>1. Supplier information:</b></p> <p>(The "Supplier") Supplier to provide their legal name and address (fields will expand as required).</p>
<p><b>2. Supplier Primary Contact:</b></p> <p>Supplier to provide their primary contact name, email address and phone number.</p>
<p><b>3. Supplier HST or GST number:</b></p> <p>Supplier to provide registered PST/GST number.</p>
<p><b>4. Consultant Proposed:</b></p> <p>Supplier to provide name(s) of Consultant(s) proposed for this engagement</p>
<p><b>5. Relationship:</b></p> <p>Supplier to disclose relationship of proposed Consultant(s) to the Supplier:</p> <p><input type="checkbox"/> Principal</p> <p><input type="checkbox"/> Employee</p> <p><input type="checkbox"/> Subcontractor (refer to definitions in Contract Terms and Conditions)</p> <p><b>NOTE: By completing this section the Supplier acknowledges that the Consultant(s) it is proposing is not a current employee of the Customer.</b></p>
<p><b>6. Summary response:</b></p> <p>Supplier to summarize their understanding of Purchaser's requirements.</p>
<p><b>7. Proposed Approach:</b></p> <p>Supplier to provide details on how they intend to meet the Purchaser's requirements.</p>
<p><b>8. Qualifications and Education of proposed Consultant:</b></p> <p>Supplier to provide details of the Consultant proposed for the assignment including related experience and skills</p>

## Consulting Statement of Work

### 9. Expected Effort:

*Supplier 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.*

### 10. Availability of Proposed Consultant:

*Supplier to indicate the ability of the proposed Consultant to commence work on the Start Date stated in Section 9 of the Engagement Definition.*

### 11. Proposed Pricing:

*Supplier 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.*

### 12. Value Added:

*Supplier to identify value added services offered for this specific assignment including tools to be applied, access to specialized no fee expertise etc.*

### 13. Insurance Coverage:

The Supplier selected by the Purchaser for the engagement set out herein will provide the Purchaser with a Certificate of Insurance from the Supplier's insurance company / broker indicating the types and amounts of insurance coverage held by the Supplier as evidence that the Supplier meets the Insurance requirements set forth in Section 12 of the Engagement Definition above and in compliance with the Terms and Conditions 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 Supplier whether it is a consulting firm or an independent individual (i.e. a sole proprietor).

## Consulting Statement of Work

### 14. Supplier Conflict of Interest Declaration

The Supplier 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 Supplier becomes aware of any reasonable possibility of any direct or indirect conflict, then the Supplier 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 Supplier entitling the Purchaser to immediately terminate this Contract without liability to the Supplier.

*Supplier to indicate its agreement to the foregoing No Conflict of Interest statement:*

**The Supplier agrees to the foregoing No Conflict of Interest statement.**

### 15. Special Considerations Response:

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

# Consulting Statement of Work

	Signed by an authorized representative of the Purchaser	Signed by an authorized signatory of the Supplier
Authorized Signature		
Name of Signatory (printed)		
Designation of Signatory		
Date signed		

**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.**

### Purchaser Conflict of Interest:

I, \_\_\_\_\_, 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	
Name of Signatory (printed)	
Designation of Signatory	
Date signed	