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Bid Fax: (613) 997-9776

**SOLICITATION AMENDMENT
MODIFICATION DE L'INVITATION**

The referenced document is hereby revised; unless otherwise indicated, all other terms and conditions of the Solicitation remain the same.

Ce document est par la présente révisé; sauf indication contraire, les modalités de l'invitation demeurent les mêmes.

Comments - Commentaires

Vendor/Firm Name and Address

**Raison sociale et adresse du
fournisseur/de l'entrepreneur**

Issuing Office - Bureau de distribution

Health Services Project Division (XF)/Division des
projets de services de santé (XF)
Place du Portage, Phase III, 12C1
11 Laurier St./11 rue, Laurier
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Title - Sujet Nursing Agency Services	
Solicitation No. - N° de l'invitation HT426-172611/C	Amendment No. - N° modif. 006
Client Reference No. - N° de référence du client HT426-172611	Date 2017-12-06
GETS Reference No. - N° de référence de SEAG PW-\$\$XF-005-31945	
File No. - N° de dossier 005xf.HT426-172611	CCC No./N° CCC - FMS No./N° VME
Solicitation Closes - L'invitation prend fin at - à 02:00 PM on - le 2017-12-13	Time Zone Fuseau horaire Eastern Standard Time EST
F.O.B. - F.A.B. Plant-Usine: <input type="checkbox"/> Destination: <input type="checkbox"/> Other-Autre: <input type="checkbox"/>	
Address Enquiries to: - Adresser toutes questions à: Chapple, Jeremy	Buyer Id - Id de l'acheteur 005xf
Telephone No. - N° de téléphone (819) 420-2226 ()	FAX No. - N° de FAX () -
Destination - of Goods, Services, and Construction: Destination - des biens, services et construction:	

Instructions: See Herein

Instructions: Voir aux présentes

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Vendor/Firm Name and Address Raison sociale et adresse du fournisseur/de l'entrepreneur	
Telephone No. - N° de téléphone Facsimile No. - N° de télécopieur	
Name and title of person authorized to sign on behalf of Vendor/Firm (type or print) Nom et titre de la personne autorisée à signer au nom du fournisseur/ de l'entrepreneur (taper ou écrire en caractères d'imprimerie)	
Signature	Date

**NURSING AGENCY SERVICES TO REMOTE, ISOLATED, AND SEMI ISOLATED
FIRST NATION (FN) COMMUNITIES ON BEHALF OF HEALTH CANADA (HC)**

SOLICITATION NO. HT426-172611/C

AMENDMENT 006

This amendment contains the following section:

Section 1: Questions and Answers

Note: Questions are numerically sequenced upon arrival at PSPC. A question and its answer will be provided via BuyandSell as the response becomes available. Potential Bidders are therefore advised that questions and answers may be issued via BuyandSell out of sequence. The following questions have been received. In accordance with Article 13 of the 2003 Standard Instructions - Goods or Services - Competitive Requirements (2017-04-27), which has been incorporated into the RFP, the questions and corresponding answers are provided to all potential Bidders as set out below:

Question 33:

We have yet to receive a response to our questions that were submitted, and anticipate further questions to come based on the responses provided. We are requesting Canada extend the submission date to February 16, 2018 to allow all responses to be incorporated into all RFP submissions.

Answer 33:

Based on the content of the questions received, and the date of publication following receipt of the questions, the closing date of the RFP remains December 13, 2017.

Question 34:

Part 1 – Summary (page 4 of 72), Section 1.2.1 “Canada anticipates that one contract will be awarded per Region as a result of this RFP.”

- (a) Under what circumstance would Canada award more than one contract per Region as a result of the RFP?
- (b) Is there a maximum number of contracts that Canada will issue per Region?

Answer 34:

- (a) One contract will be awarded per Region subject to Canada receiving responsive bids that represent fair value for that Region and obtaining the necessary approvals.
- (b) Yes, a maximum of one contract will be awarded for each Region under this Request for Proposals (RFP).

Question 35:

- (a) Please explain in detail (timeframe and steps) how Canada intends to manage the distribution of Task Authorizations (TA) for each Region (AB, MB, ON and QC).
- (b) Will the awarded Contractor per Region receive all the TAs issued from Canada?
- (c) How long will Health Canada wait before seeking alternative providers to fill a TA? (i.e. hours /days)

Answer 35:

- (a) For each Region, Canada will issue Task Authorizations in accordance the process and timelines detailed at Part 7, page 54 of 72, sub-section 1.2 of the RFP.
- (b) Yes, the Contractor in each Region will receive the opportunity to respond to all TAs issued by Canada for that Region. Canada reserves the right to use other methods of supply to obtain the services described in Annex A of the contract at its discretion in accordance with Part 7, page 54 of 72, sub-section 1.2.7 of the RFP.
- (c) If the Contractor cannot meet the process and timelines detailed at Part 7, page 54 of 72, sub-section 1.2 of the RFP then Canada may exercise its right to use other methods of supply to obtain the services described in Annex A.

Question 36:

What is the process in the event that the awarded Contractor for the Region cannot fill its contractual obligation to fill 100% of all requests?

Answer 36:

As stated in answer 3, b) above, Canada may use other methods of supply to obtain the services described in Annex A of the Contract, at its discretion, in accordance with Part 7, page 54 of 72, sub-section 1.2.7 of the RFP.

Question 37:

Currently three service providers cannot fill 100% of the nursing TA requirements. How will Canada issue standing offers (SOs) to ensure 100% of the nursing needs are achieved in each Region?

Answer 37:

The final procurement strategy with respect to the Request for Standing Offers (RFSO), including the RFSO evaluation criteria and resulting call-up process, have yet to be determined. All questions with respect to the anticipated Standing Offers will be addressed through a published RFSO Process.

Question 38:

- (a) How will Canada determine who will receive Standing Offers?
- (b) Will the SOs be required to meet the same terms and conditions (i.e. statement of work) as the awarded Contractor in each Region?

Answer 38:

The final procurement strategy with respect to the Request for Standing Offers (RFSO), including the RFSO evaluation criteria and resulting call-up process, have yet to be determined. All questions with respect to the anticipated Standing Offers will be addressed through a published RFSO Process.

Question 39:

Within the Standing Offers issued for each Region, how will TAs be assigned?

Answer 39:

The final procurement strategy with respect to the Request for Standing Offers (RFSO), including the RFSO evaluation criteria and resulting call-up process, have yet to be determined. All questions with respect to the anticipated Standing Offers will be addressed through a published RFSO Process.

Question 40:

Will TAs be sent to all companies that are SO holders or will they be ranked (i.e. price, quality, experience, nurse availability, etc.)?

If they will be ranked, please advise how providers will be ranked (weighted criteria)?

Answer 40:

The final procurement strategy with respect to the Request for Standing Offers (RFSO), including the RFSO evaluation criteria and resulting call-up process, have yet to be determined. All questions with respect to the anticipated Standing Offers will be addressed through a published RFSO Process.

Question 41:

Page (5 of 72) Section 1.2.3, states: "The bid solicitation does not preclude Canada from using other methods of supply to fulfill the same or similar needs. The Bidder agrees that nothing in a resulting contract prevents Canada from arranging alternate services. Canada reserves the right to do so as its discretion whenever Canada is of the opinion that it would best serve the interest in Canada"

It is our understanding that Canada reserves the right to utilize the services of other vendors to fill their needs. Also, it is our understanding that the Contractor chosen will be responsible for filling all of the needs as is possible.

Please explain the circumstances and timeframes in which Canada will utilize other methods of supply to fulfill the same or similar needs (i.e. Task Authorization) for each region.

Answer 41:

If the Contractor cannot meet the process and timelines detailed at Part 7, page 54 of 72, sub-section 1.2 of the RFP then Canada may exercise its right to use other methods of supply to obtain the services described in Annex A.

Question 42:

In the event that Canada needs to seek an alternate supplier to fulfill the same or similar needs, how would Canada decide which supplier to be contracted? What criteria or variables will Canada take into consideration when finding an alternate service provider beyond the awarded contractor in each Region?

Answer 42:

Canada anticipates using Standing Offers or existing contracts in order to obtain services in the event that the Contractor is unable to meet the obligations of their Contract. The final procurement strategy with respect to the Request for Standing Offers (RFSO), including the RFSO evaluation criteria and resulting call-up process, have yet to be determined.

Question 43:

We request anything that “applies to the French RFP only” be shared with all bidders and translated into English in an Addendum.

Answer 43:

All modifications that state “applies to the French RFP only” were administrative revisions to the French RFP issued in order to ensure that the French RFP accurately reflects the content of the English RFP. As a result, the requested information has already been provided in the English RFP.

Question 44:

Annex D: Insurance Requirement – Section B (Automobile Liability Insurance)

It is to our understanding that Agency Nurses are not permitted to use or drive Health Canada owned vehicles. Has this been changed? If not, please advise why automobile liability insurance is required.

Answer 44:

Contract Nurses will at times be required to drive Health Canada owned vehicles, or potentially rental vehicles, during the performance of their work which may include travel to and from the Location of Work (as specified in the TA).

Question 45:

The change in education requirements for Registered Nurses in Ontario from diploma or degree to degree only, may have the following consequences:

- Reduces the number of qualified resources for Ontario;
- Reduces portability of resources across all three Regions which eliminates the opportunity for greater efficiencies through the centralization of a national contract; and
- Increases competition and potentially resulting in different service levels among the three regions.

- (a) What is the rationale for changing the educational requirement for Registered Nurses in Ontario to degree only?
- (b) Are the job responsibilities for a Community Health Nurse in Ontario different than Manitoba and Quebec, therefore, requiring nurses to have a degree?

In the current FNIHB job ad (Reference number: SHC17J-016162-000004) the requirements for each Region appear to be the same. Please comment.

- (c) Why is HC requiring a more qualified nurse (i.e. degree only) to work in Ontario than in Manitoba or Quebec when the job postings, clinical guidelines/competencies, community health nurse role, etc. are the same?
- (d) Should Canada proceed with a higher educational standard in Ontario, this will result in a higher bill rate or premium pricing (in addition to Regional economic disparities).

Answer 45:

The educational requirement set for nurses working in the FNIHB Ontario Region under this RFP corresponds with the FNIHB Ontario Region's current internal staffing practice for nurses working in the FNIHB Ontario Region's Remote, Isolated and Semi-Isolated nursing stations. Please also see Amendment 005, Question and Answer 28.

The basic job responsibilities for a Community Health Nurse are standard across all FNIHB Regions. The national FNIHB recruitment process (reference number: SHC17J-016162-000004) referred to in this question, establishes a minimum educational requirement necessary to be considered within FNIHB's national requirement process; each FNIHB Region then has the option to set the educational requirement above this minimum in order to best meet their operational requirements.

Each FNIHB Region has the authority to set the educational requirements of nurses working in their nursing stations to best meet their operational requirements.

Canada has set the educational requirements of Contract Nurses working in Ontario consistent with the operational requirements as defined by the FNIHB Ontario Region.

Question 46:

Annex A: Statement of Work, Page 10 of 12, Section 10:

In the event that a Contract Nurse is removed from a community:

- (a) What is the identified time frame in which the Technical Authority would issue the Contract Nurse Performance Report (Appendix D to Annex A)?

In order to effectively ensure that future Task Authorizations do not get filled by the Contractor Nurse prior to the Contractor receiving the Performance Report, we suggest the Contractor is notified immediately by Canada of any performance issues, and the report is received by the Contractor within 24-48 hours.

- (b) In what time frame will the Contracting Authority respond with a Letter of Decision?

Answer 46:

The Technical Authority will release the report to the Contractor as soon as it has been reviewed and any necessary consultation /clarification with the applicable FNIHB Regional office has been completed.

HC will respond with a Letter of Decision as soon the Contractor's response has undergone the necessary review process and a decision has been communicated with the applicable FNIHB Regional office.

The suggested timeline for response has been considered, but due to operational realities of regional nursing management, is it not possible to commit to a timeline in all instances.

Question 47:

What is the budgeted total dollar amount of the contract for each Region, for each year? (i.e. Contract Year 1, 2, 3 and option years).

Answer 47:

Canada does not intend on disclosing its internal budgeting, or approval documentation, as part of the RFP process. The estimated level of effort for each period of the Contract is stated in Attachment 2 to Part 4 for each Region. The total cost of any resulting Contract(s) will be determined by the hourly rates as proposed by the winning Bidder and the actual level of effort that was required in each Region.