



**RETURN BIDS TO:
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PWGSC/TPSGC Acquisitions Bid
Receiving/Réception des Soumissions
126 Prince William Street/
126, rue Prince William
Suite 14B
Saint John
New Brunswick
E2L 2B6
Bid Fax: (506) 636-4376

**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

All enquiries are to be submitted in writing to the Contracting Officer, Janine Donovan: Email - janine.donovan@pwgsc.gc.ca.

Vendor/Firm Name and Address
Raison sociale et adresse du
fournisseur/de l'entrepreneur

Issuing Office - Bureau de distribution

Saint John, NB (STJ)
126 Prince William Street/
126, rue Prince William
Suite 14B
Saint John
New Bruns
E2L 2B6

Title - Sujet Rehabilitation Services	
Solicitation No. - N° de l'invitation 51019-184018/A	Amendment No. - N° modif. 002
Client Reference No. - N° de référence du client 51019-184018	Date 2019-07-03
GETS Reference No. - N° de référence de SEAG PW-\$STJ-002-4448	
File No. - N° de dossier STJ-8-41048 (002)	CCC No./N° CCC - FMS No./N° VME
Solicitation Closes - L'invitation prend fin at - à 02:00 PM on - le 2019-09-30	Time Zone Fuseau horaire Atlantic Daylight Saving Time ADT
F.O.B. - F.A.B. Plant-Usine: <input type="checkbox"/> Destination: <input checked="" type="checkbox"/> Other-Autre: <input type="checkbox"/>	
Address Enquiries to: - Adresser toutes questions à: Donovan (STJ), Janine E.	Buyer Id - Id de l'acheteur stj002
Telephone No. - N° de téléphone (506) 639-0215 ()	FAX No. - N° de FAX (506) 636-4376
Destination - of Goods, Services, and Construction: Destination - des biens, services et construction:	

Instructions: See Herein

Instructions: Voir aux présentes

Delivery Required - Livraison exigée	Delivery Offered - Livraison proposée
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

Solicitation No. - N° de l'invitation

51019-184018/A

Client Ref. No. - N° de réf. du client

51019-184018

Amd. No. - N° de la modif.

002

File No. - N° du dossier

STJ-8-41048

Buyer ID - Id de l'acheteur

STJ002

CCC No./N° CCC - FMS No./N° VME

This amendment to the Letter of Interest (LOI) is to provide the questions that will be asked during the one-on-one sessions with suppliers who have confirmed their interest in having a meeting. The questions are as follows:

- 1) Describe how your organization delivers a best-practice based integrated program of care for medical, psycho-social and vocational rehabilitation services?
Note: An integrated program includes collaborative and coordinated approaches to program delivery and evaluation, using inter-disciplinary teams.
- 2) Describe how your organization plans, manages and improves their rehabilitation service delivery? Please address the following items in your response:
 - a. Performance measurement
 - b. Quality assurance
 - c. Quality control
 - d. Quality improvement
 - e. Evaluation
- 3) How does your organization address the following barriers or challenges in delivering equitable rehabilitation services:
 - a. Geographic:
 - i. National access (Canada-wide)
 - ii. Urban centres
 - iii. Rural / Remote
 - iv. International
 - b. Delivering rehabilitation services to persons(s) with physical, psychosocial and/or geographic limitations
 - c. Working with and managing sub-contracts and sub-contractors
 - d. Working as a joint venture or with partner organization(s)
 - e. Coordinating the provision of services in collaboration with unique provincial health authorities
 - f. Meeting standards for delivery of quality, timely rehabilitation services that meet outcomes, accessibility needs of clients and the provision of performance measurement and reports for VAC contract oversight
 - g. Financial capability to perform large dollar value contracts
- 4) Describe how your organization ensures the recruitment and retention of high quality, professionally regulated personnel delivering medical, psycho-social and vocational rehabilitation services.
- 5) Describe the tools and resources used by your organization to assess rehabilitation potential, establish goals, and evaluate progress and impact of clients' rehabilitation plans? How does your organization ensure consistency of these processes and measures?
- 6) What capacity does your organization have for an innovative IT system that can:
 - a. Do referrals
 - b. Make authorizations
 - c. Make Payments
 - d. Provide rehabilitation services
 - e. Report client progress and outcomes
 - f. Report program outputs
 - g. Report completion/disengagement
 - h. Provide reliable data, in compatible formats for VAC's further analysis

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- 7) VAC delivers the Rehabilitation and Vocational Services Program through a Case Management Framework. What barriers do you feel your organization would have working within this type of process? Are you aware of any best practices within industry where this type of process works well?
- 8) What additional information would you require from VAC to respond to a Request for Proposal?

One-on-one sessions with individual suppliers will be taking place during the afternoon and evening of July 16th, 2019 and all day Wednesday, July 17th, 2019. Suppliers who are interested in participating in a one-on-one session should contact the Contracting Authority noted below as soon as possible. Please note that we may not be able to accommodate a request for a session made after **July 9th, 2019**.

Contracting Authority

Name: Janine Donovan

Title: Supply Team Leader

Public Services and Procurement Canada

Acquisitions Branch

Atlantic Region

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Saint John, NB

E2L 2B6

Telephone: 506-636-0215

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