



**RETURN BIDS TO:
RETOURNER LES SOUMISSIONS À:**

**Bid Receiving - PWGSC / Réception des
soumissions - TPSGC**
epost Connect/Serv Connexion poste
Bid Fax: (613) 997-9776

**Request For a Standing Offer
Demande d'offre à commandes**

Regional Individual Standing Offer (RISO)
Offre à commandes individuelle régionale (OCIR)

Canada, as represented by the Minister of Public Works and
Government Services Canada, hereby requests a Standing Offer
on behalf of the Identified Users herein.

Le Canada, représenté par le ministre des Travaux Publics et
Services Gouvernementaux Canada, autorise par la présente,
une offre à commandes au nom des utilisateurs identifiés
énumérés ci-après.

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)
Terrasses de la Chaudière 5th Floor
10 Wellington Street
Gatineau
Gatineau
K1A 0S5

Title - Sujet ISC Backup Nursing Services	
Solicitation No. - N° de l'invitation 5A090-192272/A	Date 2019-08-29
Client Reference No. - N° de référence du client 5A090-192272	GETS Ref. No. - N° de réf. de SEAG PW-\$\$XF-005-36760
File No. - N° de dossier 005xf.5A090-192272	CCC No./N° CCC - FMS No./N° VME
Solicitation Closes - L'invitation prend fin at - à 02:00 PM on - le 2019-10-08	
Time Zone Fuseau horaire Eastern Daylight Saving Time EDT	
Delivery Required - Livraison exigée See Herein	
Address Enquiries to: - Adresser toutes questions à: Chapple, Jeremy	Buyer Id - Id de l'acheteur 005xf
Telephone No. - N° de téléphone (873)354-5628 ()	FAX No. - N° de FAX () -
Destination - of Goods, Services, and Construction: Destination - des biens, services et construction: INDIGENOUS SERVICES CANADA AL1916C, JEANNE MANCE BLDG 200 EGLANTINE DR., TUNNEY'S PASTURE OTTAWA Ontario K1A0K9 Canada	
Security - Sécurité This request for a Standing Offer includes provisions for security. Cette Demande d'offre à commandes comprend des dispositions en matière de sécurité.	

Instructions: See Herein

Instructions: Voir aux présentes

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

TABLE OF CONTENTS

PART 1 - GENERAL INFORMATION	3
1.1 INTRODUCTION.....	3
1.2 SUMMARY.....	3
1.3 SECURITY REQUIREMENTS.....	5
1.4 DEBRIEFINGS	5
1.5 ANTICIPATED MIGRATION TO AN E-PROCUREMENT SOLUTION (EPS)	5
PART 2 - OFFEROR INSTRUCTIONS.....	6
2.1 STANDARD INSTRUCTIONS, CLAUSES AND CONDITIONS	6
2.2 SUBMISSION OF OFFERS	8
2.3 FORMER PUBLIC SERVANT.....	8
2.4 ENQUIRIES - REQUEST FOR STANDING OFFERS.....	10
2.5 APPLICABLE LAWS	10
2.6 VOLUMETRIC DATA.....	10
PART 3 - OFFER PREPARATION INSTRUCTIONS.....	11
3.1 OFFER PREPARATION INSTRUCTIONS.....	11
ATTACHMENT 1 TO PART 3	13
ATTACHMENT 2 TO PART 3	15
ATTACHMENT 3 TO PART 3	16
PART 4 - EVALUATION PROCEDURES AND BASIS OF SELECTION	18
4.1 EVALUATION PROCEDURES.....	18
4.2 BASIS OF SELECTION.....	20
ATTACHMENT 1 TO PART 4	25
ATTACHMENT 2 TO PART 4	26
PART 5 – CERTIFICATIONS AND ADDITIONAL INFORMATION	27
5.1 CERTIFICATIONS REQUIRED WITH THE OFFER.....	27
5.2 CERTIFICATIONS PRECEDENT TO THE ISSUANCE OF A STANDING OFFER AND ADDITIONAL INFORMATION	28
PART 6 - SECURITY, FINANCIAL AND INSURANCE REQUIREMENTS	30
6.1 SECURITY REQUIREMENTS.....	30
6.2 FINANCIAL CAPABILITY	30
6.3 INSURANCE REQUIREMENTS	30
PART 7 - STANDING OFFER AND RESULTING CONTRACT CLAUSES	31
A. STANDING OFFER	31
7.1 OFFER.....	31
7.2 SECURITY REQUIREMENTS.....	31
7.3 STANDARD CLAUSES AND CONDITIONS	31
7.4 TERM OF STANDING OFFER	32
7.5 AUTHORITIES	33
7.6 IDENTIFIED USERS	34
7.7 CALL-UP PROCEDURES	34
7.8 CALL-UP INSTRUMENT	34
7.9 LIMITATION OF CALL-UPS	35

7.10	PRIORITY OF DOCUMENTS.....	35
7.11	CERTIFICATIONS AND ADDITIONAL INFORMATION.....	35
7.12	SACC MANUAL CLAUSES	36
7.13	APPLICABLE LAWS	37
7.14	TRANSITION TO AN E-PROCUREMENT SOLUTION (EPS)	37
7.15	NON EXCLUSIVITY.....	37
7.16	PROACTIVE DISCLOSURE OF CONTRACTS WITH FORMER PUBLIC SERVANTS	37
B.	RESULTING CONTRACT CLAUSES	40
1.	STATEMENT OF WORK.....	40
2.	TASK AUTHORIZATION	40
3	STANDARD CLAUSES AND CONDITIONS.....	46
4	TERM OF CONTRACT	50
5	AUTHORITIES	50
6	PAYMENT	52
7	INVOICING INSTRUCTIONS.....	53
8	INSURANCE REQUIREMENTS	54
9	SAFEGUARDING ELECTRONIC MEDIA.....	54
10	REPRESENTATIONS AND WARRANTIES	54
11	IDENTIFICATION PROTOCOL RESPONSIBILITIES.....	55
12	REORGANIZATION OF CLIENT	55
13	REQUIREMENT FOR TRAINING AND FAMILIARIZATION.....	55
14	GOVERNMENT SITE REGULATIONS	56
15	PROACTIVE DISCLOSURE OF CONTRACTS WITH FORMER PUBLIC SERVANTS [IF APPLICABLE]	56
ANNEX A	57
	STATEMENT OF WORK.....	57
ANNEX B	58
	BASIS OF PAYMENT	58
ANNEX C	63
	SECURITY REQUIREMENTS CHECK LIST	63
ANNEX D	64
	INSURANCE REQUIREMENTS.....	64
ANNEX E	67
	SO RANKING SCORE.....	67
ANNEX F	68
	TASK AUTHORIZATION FORM.....	68
ANNEX G	69
	QUARTERLY SO REPORTING TEMPLATE	69

PART 1 - GENERAL INFORMATION

1.1 Introduction

The Request for Standing Offers (RFSO) is divided into seven parts plus attachments and annexes, as follows:

- Part 1 General Information: provides a general description of the requirement;
- Part 2 Offeror Instructions: provides the instructions applicable to the clauses and conditions of the RFSO;
- Part 3 Offer Preparation Instructions: provides Offerors with instructions on how to prepare their offer to address the evaluation criteria specified;
- Part 4 Evaluation Procedures and Basis of Selection: indicates how the evaluation will be conducted, the evaluation criteria which must be addressed in the offer, and the basis of selection;
- Part 5 Certifications and Additional Information: includes the certifications and additional information to be provided;
- Part 6 Security, Financial and Insurance Requirements: includes specific requirements that must be addressed by Offerors; and
- Part 7 7A, Standing Offer, and 7B, Resulting Contract Clauses:
 - 7A, includes the Standing Offer containing the offer from the Offeror and the applicable clauses and conditions;
 - 7B, includes the clauses and conditions which will apply to any contract resulting from a call-up made pursuant to the Standing Offer.

The Annexes include the Statement of Work, the Basis of Payment, the Security Requirements Check List, the Insurance Requirements, the SO Ranking Score, the Task Authorization Form and the Quarterly SO Reporting Template.

The Attachments include the Offer Submission Form, the Electronic Payment Instruments form, Volumetric Data, the Technical Criteria and the Pricing Schedule.

The Certifications include the Federal Contractors Program for Employment Equity - Standing Offer certification, Canadian Content certification, Integrity Provisions - Declaration of Convicted Offences, Aboriginal Business certifications, as well as certifications at the time of Task Authorization.

1.2 Summary

- 1.2.1 The Department of Indigenous Services Canada (ISC) has a requirement for nursing services to supplement internal ISC resources at different Remote, Isolated, and Semi-Isolated First Nations (FN) communities in the Regions of Alberta, Manitoba, Ontario and Quebec.

The services required include the care of patients and the provision of assistance to medical doctors in the treatment of illness, the conduct of programs designed to promote health and prevent diseases, and the provision of advice. The services may also include direct patient care to

individuals, families and groups in the home and community, and consultation, dependent upon the demands of the individual task authorization.

Services provided through the resulting Standing Offers will act as a backup instrument to supplement primary contracts for nursing services in each Region.

Canada intends on issuing multiple Standing Offers per Region and Category as a result of this RFSO.

- 1.2.2 The period of any resulting Standing Offer will be for one year from the date of Standing Offer issuance and will include four irrevocable one-year option periods to extend the terms and conditions of each Standing Offer.
- 1.2.3 The requirement is subject to a preference for Canadian services.
- 1.2.4 This procurement is not set aside under the federal government Procurement Strategy for Aboriginal Business (PSAB), but is subject to a preference for services from Aboriginal Businesses. Non-Aboriginal businesses may submit an offer in response to this Bid Solicitation, but priority will be given to Aboriginal Businesses when forming the SO Ranking Scores.

To be considered as an Aboriginal Business see Part 5 of this RFSO.

1.2.5 **Categories**

This RFSO covers the following Categories:

Category 1: Registered Nurse (RN)
Category 2: Nurse Practitioner (NP)

Refer to Appendix F to Annex A for further details and definitions of each Category.

Offers will be evaluated on a Category basis by Region. It is not necessary to submit an offer for both Categories in order to be issued a SO.

1.2.6 **Regions**

The following Regions may receive services under the SOs that result from this RFSO:

- Alberta;
- Manitoba;
- Ontario; and,
- Quebec (RN category only)

Refer to Appendix A to Annex A and Appendix E to Annex A for further details and definitions of each of Region.

In submitting an offer to this RFSO, Offerors will have the opportunity to select which Regions they will be eligible to provide services to, should their offer result in the issuance of a SO.

- 1.2.7 This RFSO allows Offerors to use the epost Connect service provided by Canada Post Corporation to transmit their offers electronically. Refer to Part 2 of the RFSO entitled Offeror Instructions and Part 3 of the RFSO entitled Offer Preparation Instructions, for further information on using this method.

- 1.2.8 This RFSO does not preclude Canada from using other methods of supply to fulfill the same or similar needs. The Offeror agrees that nothing in a resulting Standing Offer prevents Canada from arranging alternate services. Canada reserves the right to do so at its discretion whenever Canada is of the opinion that it would best serve the interest of Canada.
- 1.2.9 The intent is to award up to a maximum of 10 Standing Offers per Category in each Region to qualified Offerors as a result of this RFSO.
- 1.2.10 Contractors that were awarded a contract under Request for Proposal HT426-172611/C are precluded from being issued a Standing Offer, under this RFSO, to back up the delivery of nursing services to the specific Region in which they were awarded a contract.
- 1.2.11 Offers from Joint Ventures, as defined article 17 (2007-11-30) of the 2006 Standard Instructions - Request for Standing Offers - Goods or Services - Competitive Requirements (2019-03-04), are not permitted under this RFSO. If Canada receives an offer from an Offeror who is in Joint Venture, the offer will be rejected by Canada and given no further consideration.

1.3 Security Requirements

There are security requirements associated with the requirement of the Standing Offer. For additional information, see Part 6 - Security, Financial and Insurance Requirements, and Part 7 - Standing Offer and Resulting Contract Clauses. For more information on personnel and organization security screening or security clauses, Offerors should refer to the [Contract Security Program](http://www.tpsgc-pwgsc.gc.ca/esc-src/introduction-eng.html) of Public Works and Government Services Canada website (<http://www.tpsgc-pwgsc.gc.ca/esc-src/introduction-eng.html>).

1.4 Debriefings

Offerors may request a debriefing on the results of the request for standing offers process. Offerors should make the request to the Standing Offer Authority within 15 working days of receipt of the results of the request for standing offers process. The debriefing may be in writing, by telephone or in person.

1.5 Anticipated migration to an e-Procurement Solution (EPS)

Canada is currently developing an online EPS for faster and more convenient ordering of goods and services. In support of the anticipated transition to this system and how it may impact any resulting Standing Offer that is issued under this solicitation, refer to 7.15 Transition to an e-Procurement Solution (EPS).

The Government of Canada's [press release](#) provides additional information.

PART 2 - OFFEROR INSTRUCTIONS

2.1 Standard Instructions, Clauses and Conditions

All instructions, clauses and conditions identified in the Request for Standing Offers (RFSO) by number, date and title are set out in the [Standard Acquisition Clauses and Conditions Manual](https://buyandsell.gc.ca/policy-and-guidelines/standard-acquisition-clauses-and-conditions-manual) (<https://buyandsell.gc.ca/policy-and-guidelines/standard-acquisition-clauses-and-conditions-manual>) issued by Public Works and Government Services Canada.

Offerors who submit an offer agree to be bound by the instructions, clauses and conditions of the RFSO and accept the clauses and conditions of the Standing Offer and resulting contract(s).

The [2006](#) (2019-03-04) Standard Instructions - Request for Standing Offers - Goods or Services - Competitive Requirements, are incorporated by reference into and form part of the RFSO.

The 2006 standard instructions is amended as follows:

Subsection 5.4 of [2006](#), Standard Instructions - Request for Standing Offers - Goods or Services - Competitive Requirements, is amended as follows:

Delete: 60 days
Insert: 180 days

Section 08, entitled Transmission by facsimile or by epost Connect, is amended as follows:

Subsection 2. is deleted entirely and replaced with the following:

2. epost Connect

- a. Unless specified otherwise in the RFSO, offers may be submitted by using the [epost Connect service](#) provided by Canada Post Corporation.
The only acceptable email address to use with epost Connect for responses to this RFSO is:

tpsgc.dgareceptiondessoumissions-abbidreceiving.pwgsc@tpsgc-pwgsc.gc.ca

- b. To submit an offer using epost Connect service, the Offeror must either:
- i. send directly its offer only to the specified PWGSC Bid Receiving Unit using its own licensing agreement for epost Connect provided by Canada Post Corporation;
or
 - ii. send as early as possible, and in any case, at least six business days prior to the RFSO closing date and time, (in order to ensure a response), an email that includes the RFSO number to the specified PWGSC Bid Receiving Unit requesting to open an epost Connect conversation. Requests to open an epost Connect conversation received after that time may not be answered.
- c. If the Offeror sends an email requesting epost Connect service to the specified Bid Receiving Unit in the RFSO, an officer of the Bid Receiving Unit will then initiate an epost Connect conversation. The epost Connect conversation will create an email notification from Canada Post Corporation prompting the Offeror to access and action the message within the conversation. The Offeror will then be able to transmit its offer afterward at any

time prior to the RFSO closing date and time.

- d. If the Offeror is using its own licensing agreement to send its offer, the Offeror must keep the epost Connect conversation open until at least 30 business days after the RFSO closing date and time.
- e. The RFSO number should be identified in the epost Connect message field of all electronic transfers.
- f. It should be noted that the use of epost Connect service requires a Canadian mailing address. Should an offeror not have a Canadian mailing address, they may use the Bid Receiving Unit address specified in the RFSO in order to register for the epost Connect service.
- g. For offers transmitted by epost Connect service, Canada will not be responsible for any failure attributable to the transmission or receipt of the offer including, but not limited to, the following:
 - i. receipt of a garbled, corrupted or incomplete offer;
 - ii. availability or condition of the epost Connect service;
 - iii. incompatibility between the sending and receiving equipment;
 - iv. delay in transmission or receipt of the offer;
 - v. failure of the Offeror to properly identify the offer;
 - vi. illegibility of the offer;
 - vii. security of offer data; or,
 - viii. inability to create an electronic conversation through the epost Connect service.
- h. The Bid Receiving Unit will send an acknowledgement of the receipt of offer document(s) via the epost Connect conversation, regardless of whether the conversation was initiated by the supplier using its own license or the Bid Receiving Unit. This acknowledgement will confirm only the receipt of offer document(s) and will not confirm if the attachments may be opened nor if the content is readable.
- i. Offerors must ensure that that they are using the correct email address for the Bid Receiving Unit when initiating a conversation in epost Connect or communicating with the Bid Receiving Unit and should not rely on the accuracy of copying and pasting the email address into the epost Connect system.
- j. An offer transmitted by epost Connect service constitutes the formal offer of the Offeror and must be submitted in accordance with section 05.

2.2 Submission of Offers

Offers must be submitted only to Public Works and Government Services Canada (PWGSC) Bid Receiving Unit, electronically, by the date, time and place indicated in the RFSO.

Canada requests that all offers are submitted using epost Connect. For Offerors choosing to submit offers using epost Connect for offers closing at the Bid Receiving Unit in the National Capital Region (NCR) the email address is:

tpsgc.dgareceptiondessomissions-abbidreceiving.pwgsc@tpsgc-pwgsc.gc.ca

Note: Offers will not be considered if emailed directly to this email address. This email address is to be used to open an epost Connect conversation, as detailed in Standard Instructions [2006](#), or to send offers through an epost Connect message if the bidder is using its own licensing agreement for epost Connect.

Alternatively, Offerors may choose to submit their offer to the Bid Receiving Unit by fax using the following facsimile number: (819) 997-9776

2.3 Former Public Servant

Contracts awarded to former public servants (FPS) in receipt of a pension or of a lump sum payment must bear the closest public scrutiny, and reflect fairness in the spending of public funds. In order to comply with Treasury Board policies and directives on contracts awarded to FPS, Offerors must provide the information required below before the issuance of a standing offer. If the answer to the questions and, as applicable the information required have not been received by the time the evaluation of offers is completed, Canada will inform the Offeror of a time frame within which to provide the information. Failure to comply with Canada's request and meet the requirement within the prescribed time frame will render the offer non-responsive.

Definitions

For the purposes of this clause,

"former public servant" is any former member of a department as defined in the [Financial Administration Act](#) R.S., 1985, c. F-11, a former member of the Canadian Armed Forces or a former member of the Royal Canadian Mounted Police. A former public servant may be:

- a. an individual;
- b. an individual who has incorporated;
- c. a partnership made of former public servants; or
- d. a sole proprietorship or entity where the affected individual has a controlling or major interest in the entity.

"lump sum payment period" means the period measured in weeks of salary, for which payment has been made to facilitate the transition to retirement or to other employment as a result of the implementation of various programs to reduce the size of the Public Service. The lump sum payment period does not include the period of severance pay, which is measured in a like manner.

"pension" means a pension or annual allowance paid under the [Public Service Superannuation Act](#) (PSSA), R.S., 1985, c. P-36, and any increases paid pursuant to the [Supplementary Retirement Benefits Act](#), R.S., 1985, c. S-24 as it affects the PSSA. It does not include pensions payable pursuant

to the [Canadian Forces Superannuation Act](#), R.S., 1985, c. C-17, the [Defence Services Pension Continuation Act](#), 1970, c. D-3, the [Royal Canadian Mounted Police Pension Continuation Act](#), 1970, c. R-10, and the [Royal Canadian Mounted Police Superannuation Act](#), R.S., 1985, c. R-11, the [Members of Parliament Retiring Allowances Act](#), R.S. 1985, c. M-5, and that portion of pension payable to the [Canada Pension Plan Act](#), R.S., 1985, c. C-8.

Former Public Servant in Receipt of a Pension

As per the above definitions, is the Offeror a FPS in receipt of a pension? **YES () NO ()**

If so, the Offeror must provide the following information, for all FPS in receipt of a pension, as applicable:

- a. name of former public servant;
- b. date of termination of employment or retirement from the Public Service.

By providing this information, Offerors agree that the successful Offeror's status, with respect to being a former public servant in receipt of a pension, will be reported on departmental websites as part of the published proactive disclosure reports in accordance with [Contracting Policy Notice: 2012-2](#) and the [Guidelines on the Proactive Disclosure of Contracts](#).

Work Force Adjustment Directive

Is the Offeror a FPS who received a lump sum payment pursuant to the terms of the Work Force Adjustment Directive? **YES () NO ()**

If so, the Offeror must provide the following information:

- a. name of former public servant;
- b. conditions of the lump sum payment incentive;
- c. date of termination of employment;
- d. amount of lump sum payment;
- e. rate of pay on which lump sum payment is based;
- f. period of lump sum payment including start date, end date and number of weeks;
- g. number and amount (professional fees) of other contracts subject to the restrictions of a work force adjustment program.

For all contracts awarded during the lump sum payment period, the total amount of fees that may be paid to a FPS who received a lump sum payment is \$5,000, including Applicable Taxes.

2.4 Enquiries - Request for Standing Offers

All enquiries must be submitted in writing to the Standing Offer Authority no later than 10 calendar days before the Request for Standing Offers (RFSO) closing date. Enquiries received after that time may not be answered.

Offerors should reference as accurately as possible the numbered item of the RFSO to which the enquiry relates. Care should be taken by Offerors to explain each question in sufficient detail in order to enable Canada to provide an accurate answer. Technical enquiries that are of a proprietary nature must be clearly marked "proprietary" at each relevant item. Items identified as "proprietary" will be treated as such except where Canada determines that the enquiry is not of a proprietary nature. Canada may edit the question(s) or may request that Offerors do so, so that the proprietary nature of the question(s) is eliminated, and the enquiry can be answered to all Offerors. Enquiries not submitted in a form that can be distributed to all Offerors may not be answered by Canada.

2.5 Applicable Laws

The Standing Offer and any contract resulting from the Standing Offer must be interpreted and governed, and the relations between the parties determined, by the laws in force in Ontario.

Offerors may, at their discretion, substitute the applicable laws of a Canadian province or territory of their choice without affecting the validity of their offer, by deleting the name of the Canadian province or territory specified and inserting the name of the Canadian province or territory of their choice or by indicating the applicable Canadian province or territory of their choice in Attachment 1 to Part 3. If no change is made, or no Canadian province or territory is indicated in Attachment 1 to Part 3, it acknowledges that the applicable laws specified are acceptable to the Offerors.

2.6 Volumetric Data

The data described in Attachment 3 to Part 3 of this RFSO has been provided purely for information purposes. The inclusion of this data in the RFSO does not represent a commitment by Canada that Canada's future usage of the services will be consistent with this data.

PART 3 - OFFER PREPARATION INSTRUCTIONS

3.1 Offer Preparation Instructions

- a) The Offeror must submit its offer electronically. Canada requests that the Offeror submits its offer in accordance with section 08 of the 2006 standard instructions. The epost Connect system has a limit of 1GB per single message posted and a limit of 20GB per conversation. The offer must be gathered per section and separated as follows:

Section I: Technical Offer
Section II: Financial Offer
Section III: Certifications and Additional Information
Section IV: Security

- b) If the Offeror is simultaneously providing copies of its offer using multiple acceptable delivery methods, and if there is a discrepancy between the wording of any of these copies and the electronic copy provided through epost Connect service, the wording of the electronic copy provided through epost Connect service will have priority over the wording of the other copies.
- c) Prices must appear in the financial offer only. No prices must be indicated in any other section of the offer.

3.1.1 Joint Venture Offers

Canada will not consider offers from Joint Ventures, as defined article 17 (2007-11-30) of the 2006 Standard Instructions - Request for Standing Offers - Goods or Services - Competitive Requirements (2019-03-04), under this RFSO. Any offer submitted by a Joint Venture will be rejected and will not be evaluated.

Section I: Technical Offer

- A. A single offer may contain offers to be issued a SO in one or more Regions and Categories. However, an Offeror may not submit more than one offer for any given Region and Category.
- B. In their technical offer, Offerors should explain and demonstrate how they propose to meet the requirements and how they will carry out the Work.
- C. The technical offer should address clearly and in sufficient depth the points that are subject to the evaluation criteria against which the offer will be evaluated. Simply repeating the statement contained in the solicitation is not sufficient. In order to facilitate the evaluation of the offer, Canada requests that Offerors address and present topics in the order of the evaluation criteria under the same headings. To avoid duplication, Offerors may refer to different sections of their offer by identifying the specific paragraph and page number where the subject topic has already been addressed.
- D. **Offer Submission Form:** Offerors are requested to include the Offer Submission Form – Attachment 1 to Part 3 with their offers. It provides a common form in which Offerors can provide information required for evaluation and issuance of a Standing Offer, such as a contact name and the Offeror's Procurement Business Number, etc. Using the form to provide this information is not mandatory, but it is recommended. If Canada determines that the information required by the Offer Submission Form is incomplete or requires correction, Canada will provide the Offeror with an opportunity to do so.
- E. **Client Reference Contact Information:** The Offeror should provide client references. The client reference must each confirm, if requested by Canada, the facts identified in the Offeror's offer, as required by Attachment 1 to Part 4.

Client references should be entities that have an arm's length business relationship with the Offeror.

For each client reference submitted, the Offeror should, at a minimum, provide the name and e-mail address for a person who can be contacted as a client reference. Offerors are also requested to include a telephone number for each client reference, the name of the client organization that the reference worked for at the time that the services were delivered, and the title/role of the client reference during the project.

Refer to article 4.1.1.3 of this RFSO for a description of the Reference Check process.

Part 4, Evaluation Procedures and Basis of Selection, contains additional instructions that Offerors should consider when preparing their technical offer.

Section II: Financial Offer

Offerors must submit their financial offer in Canadian funds and in accordance with the Pricing Schedule at Attachment 2 to Part 4.

- A.** Offerors must submit their prices and rates FOB destination; Canadian customs duties and excise taxes included, as applicable; and applicable taxes excluded.
- B. All Costs to be Included:** The financial offer must include all costs for the requirement described in the solicitation for the entire period of the Standing Offer, including any option years.
- C.** The Offeror is required to submit firm prices, rates or both that will apply for the entire period of the Standing Offer.

3.1.2 Electronic Payment of Invoices - Offer

Offerors willing to accept payment of invoices by Electronic Payment Instruments are requested to complete Attachment 2 to Part 3, Electronic Payment Instruments, to identify which ones are accepted.

If Attachment 2 to Part 3, Electronic Payment Instruments, is not completed, it will be considered as if Electronic Payment Instruments are not being accepted for payment of invoices.

Acceptance of Electronic Payment Instruments will not be considered as an evaluation criterion.

3.1.3 Exchange Rate Fluctuation

The requirement does not offer exchange rate fluctuation risk mitigation. Requests for exchange rate fluctuation risk mitigation will not be considered. All offers including such provision will render the offer non-responsive.

Section III: Certifications and Additional Information

Offerors must submit the certifications and additional information required under Part 5.

Section IV: Security

- 3.1.4** The Company Security Officer must ensure through the [Contract Security Program](#) that the Offeror and proposed individual(s) hold a valid security clearance at the required level, as indicated in Part 6 – Security, Financial and Other Requirements.

ATTACHMENT 1 TO PART 3

OFFER SUBMISSION FORM		
Offeror's full legal name		
Authorized Representative of the Offeror for evaluation purposes (e.g. clarifications)	Name	
	Title	
	Address	
	Telephone #	
	Fax #	
	Email	
Categories and Region(s): Canada requests that the Offeror indicate which Categories and Regions they are submitting an offer for. A single offer may contain offers to be issued a Standing Offer in one or more Region and Category.	Registered Nurse Alberta ____ Manitoba ____ Ontario ____ Quebec ____	
	Nurse Practitioner Alberta ____ Manitoba ____ Ontario ____	
Offeror's Procurement Business Number (PBN) [see the Standard Instructions 2006] Please ensure that the PBN provided matches the Offeror's legal name.		
Aboriginal Business See Part 5, article 5.1.2	Is the Offeror an Aboriginal Business as defined in the solicitation? Yes ____ No ____ If yes, the Offeror is to provide the information required at Part 5, article 5.1.2	
Jurisdiction of Standing Offer: Province or territory in Canada the Offeror wishes to be the legal jurisdiction applicable to a Standing Offer and any contract resulting from the Standing Offer (if other than as specified in solicitation). If the Offeror is submitting an offer for more than one Region and Category please indicate Province or territory in Canada that the Offeror wishes to be the legal jurisdiction applicable to a Standing Offer and any contract resulting from the Standing Offer for each Region and Category submitted.		
Former Public Servants	Is the Offeror a FPS in receipt of a pension as	

<p>See Part 2, article 2.3 of the solicitation entitled Former Public Servant for a definition of "Former Public Servant".</p>	<p>defined in the solicitation? Yes ____ No ____</p> <p>If yes, the Offeror is to provide the information required at Part 2, article 2.3 entitled "Former Public Servant"</p> <hr/> <p>Is the Offeror a FPS who received a lump sum payment under the terms of the Work Force Adjustment Directive? Yes ____ No ____</p> <p>If yes, the Offeror is to provide the information required at Part 2, article 2.3 entitled "Former Public Servant"</p>
<p>Security Clearance Level of Offeror [include both the level and the date it was granted] Please ensure that the security clearance matches the legal name of the Offeror. If it does not, the security clearance is not valid for the Offeror.</p>	
<p>On behalf of the Offeror, by signing below, I confirm that I have read the entire Request for Standing Offers including the documents incorporated by reference into the Request for Standing Offers and I certify that:</p> <ol style="list-style-type: none"> 1. The Offeror considers itself and its proposed resources able to meet all the mandatory requirements described in the Request for Standing Offers; 2. This offer is valid for the period requested in the Request for Standing Offers; 3. All the information provided in the offer is complete, true and accurate; and 4. If the Offeror is issued a Standing Offer, it will accept all the terms and conditions set out in the resulting Standing Offer clauses included in the Request for Standing Offers. 	
<p>Signature of Authorized Representative of the Offeror:</p>	
<p>Date:</p>	

Solicitation No. - N° de l'invitation
5A090-192272/A
Client Ref. No. - N° de réf. du client
5A090-192272

Amd. No. - N° de la modif.
File No. - N° du dossier
005xf. 5A090-192272

Buyer ID - Id de l'acheteur
005xf
CCC No./N° CCC - FMS No./N° VME

ATTACHMENT 2 TO PART 3

ELECTRONIC PAYMENT INSTRUMENTS

The Offeror:

Accepts to be paid by Direct Deposit (Domestic and International);

OR

Does not accept to be paid by Direct Deposit (Domestic and International);

ATTACHMENT 3 TO PART 3

VOLUMETRIC DATA

ISC currently has one primary nursing services contract per Region (established under RFP# HT426-172611/C) in order to supplement their workforce with Contract Nurses at different Remote, Isolated, and Semi-Isolated First FN communities within a Region. Canada anticipates using any SOs that are established through this RFSO process to obtain backup nursing services when the primary contractor for a Region is unable to fill ISC's total demand for nursing services.

The following volumetric data below is provided for informational purposes only and summarizes ISC's total demand for Nursing Agency Services between September 1, 2015 and March 31, 2019.

Table 1:

Table 1 summarizes the total number of days, by province and community, when the services of a Contract Nurse, specific to Registered Nurses (RN) only, were required by between September 1, 2015 and March 31, 2019.

** data reflects a period between December 1, 2018 to March 31, 2019 only.*

Region	Community Location	Total Days Demanded
Alberta	Fox Lake	23*
	Garden River	47*
	John D'Or	15*
	Hay Lake	0*
	Alberta Total	85*
Manitoba	Bloodvein	439
	Brochet	1021
	Cross Lake	4349
	Garden Hill	3319
	God's Lake Narrows	1121
	God's River	1417
	Lac Brochet	861
	Little Grand Rapids	1455
	Nelson House	1536
	Oxford House	1017
	Pauingassi	737
	Poplar River	656
	Pukatawagan	2167
	Red Sucker Lake	1498
	Shamattawa	2075
South Indian Lake	1294	
Split Lake	1399	

Solicitation No. - N° de l'invitation
5A090-192272/A
Client Ref. No. - N° de réf. du client
5A090-192272

Amd. No. - N° de la modif.
File No. - N° du dossier
005xf. 5A090-192272

Buyer ID - Id de l'acheteur
005xf
CCC No./N° CCC - FMS No./N° VME

	St. Theresa Point	3565
	Tadoule Lake	574
	Wasagamack	2402
	York Landing	370
Manitoba Total		33272
Ontario	Bearskin Lake	718
	Big Trout Lake	2265
	Cat Lake	1001
	Deer Lake	666
	Fort Hope	2571
	Fort Severn	329
	Grassy Narrows	194
	Gull Bay	217
	Kasabonika	1311
	Kashechewan	4100
	Keewaywin	739
	Lansdowne House	319
	Muskrat Dam	352
	New Osnapurgh	2530
	North Spirit Lake	569
	Ogoki (Martin Falls)	523
	Peawanuck	932
	Pikangikum	4404
	Poplar Hill	1068
	Round Lake	2220
	Sachigo	1245
	Sandy Lake	5679
	Summer Beaver	539
	Webequie	942
	Whitedog (Wabaseemong)	362
Ontario Total		35795
Quebec	Lac Rapide (Barrier Lake)	843
	Winneway (Long Point First Nations)	822
Quebec Total		1665
Grand Total		70817

PART 4 - EVALUATION PROCEDURES AND BASIS OF SELECTION

4.1 Evaluation Procedures

- (a) Offers will be assessed in accordance with the entire requirement of the Request for Standing Offers including the technical and financial evaluation criteria.
- (b) An evaluation team composed of representatives of Canada will evaluate the offers. Canada may hire any independent consultant, or use any Government resources, to evaluate any offer. Not all members of the evaluation team will necessarily participate in all aspects of the evaluation.
- (c) Although the evaluation and selection will be conducted in steps, the fact that Canada has proceeded to a later step does not mean that Canada has conclusively determined that the Offeror has been successful in all the previous steps. Canada may conduct steps of the evaluation in parallel.
- (d) For each Category and Region, the evaluation team will determine first if there are two or more offers with a valid Canadian Content certification. In that event, the evaluation process will be limited to the offers with the certification; otherwise, all offers will be evaluated. If some of the offers with a valid certification are declared non-responsive, or are withdrawn, and less than two responsive offers with a valid certification remain, the evaluation will continue among those offers with a valid certification. If all offers with a valid certification are subsequently declared non-responsive, or are withdrawn, then all the other offers received will be evaluated.
- (e) In addition to any other time periods established in the Request for Standing Offers:
 - (i) **Requests for Clarifications:** If Canada seeks clarification or verification from the Offeror about its offer, the Offeror will have 2 working days (or a longer period if specified in writing by the Standing Offer Authority) to provide the necessary information to Canada. Failure to meet this deadline may result in the offer being declared non-responsive and given no further consideration.
 - (ii) **Extension of Time:** If the Offeror requires additional time, the Standing Offer Authority may grant an extension at his or her sole discretion.

4.1.1 Technical Evaluation

A separate technical evaluation will be conducted for each Category and Region.

4.1.1.1 Mandatory Technical Criteria

Each offer will be reviewed for compliance with the mandatory requirements of the RFSO. All elements of the RFSO that are mandatory requirements are identified specifically with the words "must" or "mandatory". Offers that do not comply with each and every mandatory requirement will be considered non-responsive and will be given no further consideration.

The Mandatory evaluation criteria specific to each Category and Region are described in Attachment 1 to Part 4.

4.1.1.2 Point Rated Technical Criteria

Where Point-Rated Technical Criteria are specified in the RFSO, each offer will be rated by assigning a score to the rated requirements, which are identified in the RFSO by the word "rated" or by reference to a score. Offerors who fail to submit a complete offer with all the information requested by this RFSO will be rated accordingly.

The Point-rated evaluation criteria specific to each Category and Region are described in Attachment 1 to Part 4.

4.1.1.3 Client Reference Checks

- (A) If any of the contact information required for a client reference is not provided with the offer, the Standing Offer Authority will provide the Offeror with 2 working days (or longer if specified in writing by the Standing Offer Authority) to provide the necessary information to Canada.
- (B) It is the sole responsibility of the Offeror to ensure that it provides a client reference who is willing to act as a client reference, has an arm's length business relationship with the Offeror, and is completely knowledgeable about the facts identified in the Offeror's offer, as required by Attachment 1 to Part 4. If there is no single client reference who has complete knowledge of the facts identified in the Offeror's offer, the Offeror must provide a client reference who is most knowledgeable of the facts identified in the Offeror's offer, and has the ability, and authority, to obtain accurate and complete information about the facts identified in the Offeror's offer. Crown client references will be accepted.
- (C) It is the responsibility of the Offeror to confirm in advance that the client reference submitted will be available to provide a response and is willing to act as a client reference.
- (D) The form of question to be used to request confirmation from client references is as follows:

Sample Question to a Reference:

"Did the Offeror provide your organization with RN nursing services during the period of time claimed above?

Yes, the Offeror provided my organization with RN nursing services during the period of time claimed above.

No, the Offeror did not provide my organization with RN nursing services during the period of time claimed above.

I am unwilling or unable to provide any information about the RN nursing services described above.

- (E) If a reference check is performed, Canada will conduct the reference check in writing by e-mail. Canada will send the reference check questions to the Offeror 1 working day prior to sending the request to the client reference. The client reference will have 5 working days (or a longer period otherwise specified in writing by the Standing Offer Authority) from the date that Canada's e-mail was sent to the client reference to respond to Canada.
- (F) The client reference will be required, within 2 working days after Canada sends out the reference check request to the client reference, to acknowledge the receipt of the reference check request and identify his or her willingness and availability to conduct such reference check. If Canada has not received the required response from the client reference, Canada will notify the Offeror by e-mail, to allow the Offeror to contact its client reference directly to ensure that he or she responds to Canada within the allotted time. The client

reference's failure to respond to Canada's request within the allotted time will result in non-consideration of the Offeror claimed experience.

- (G) Notwithstanding section 4.1.1.3, subsection E, if the client reference is unavailable when required during the evaluation period, the Offeror will be requested to provide an alternate client reference who can confirm the facts identified in the Offeror's offer. Offerors will only be provided with this opportunity once for each experience claimed in their offer and only if the original client reference is unavailable to respond. The Offeror will not be provided with an opportunity to submit an alternate client reference if the original client reference indicates that he or she is unwilling or unable to respond. The process as described in E and F is applicable for the client reference check with the alternate client reference. The period to respond for either the original reference, or the alternate reference, will be a total of 5 working days (or a longer period otherwise specified in writing by the Contracting Authority) in accordance with 4.1.1.3, subsection E.
- (H) Wherever information provided by a client reference differs from the information supplied by the Offeror, the information supplied by the client reference will be the information evaluated.
- (I) Points will not be allocated and/or an Offeror will not meet the mandatory experience requirement (as applicable) if:
- 1) the client reference fails to respond to Canada's request within the allotted time;
 - 2) the client reference states he or she is unable or unwilling to respond; or
 - 3) the client reference listed is itself an affiliate or other entity that does not deal at arm's length with the Offeror.
- (J) Whether or not to conduct reference checks is discretionary. However, if Canada chooses to conduct reference checks for any given point rated or mandatory requirement, it will check the references for that requirement for all Offerors who have not, at that point, been found non-responsive.

4.1.2 Financial Evaluation

A separate financial evaluation will be conducted for each Category and Region.

The financial evaluation will be conducted using the financial evaluation criteria in Attachment 2 to Part 4 and firm hourly rates proposed in Attachment 2 to Part 4 by the technically responsive offer(s).

The price of the offer will be evaluated in Canadian dollars, Applicable Taxes excluded, FOB destination, Canadian customs duties and excise taxes included.

4.2 Basis of Selection

4.2.1 Responsiveness

1. To be declared responsive, an offer must:
 - a. comply with all the requirements of the Request for Standing Offers;
 - b. meet all mandatory technical evaluation criteria; and
 - c. meet all mandatory financial evaluation criteria.
2. Offers not meeting (a) or (b) or (c) will be declared non-responsive.

4.2.2 Evaluation Steps

A separate evaluation will be conducted for each Category and Region.

The evaluation steps are below:

Step 1 – Technical Evaluation:

Each offer will be evaluated in accordance with article 4.1.1 above.

The offer's Overall Technical Score will then be determined as the sum of the offer's score for all technical evaluation criteria which are subject to point rating for the Category and Region as determined by Attachment 1 to Part 4.

Step 2 – Financial Evaluation:

Each offer that meets the mandatory requirements set out in Attachment 1 to Part 4 for the specific Category and Region will be evaluated in accordance with article 4.1.2 above.

A Total Offer Price will be determined by adding together the offer's firm hourly rates for each Period of the Standing Offer, as detailed in Attachment 2 to Part 4 or the specific Category and Region. The sum of such rates will constitute the Total Offer Price for the Offeror in that Category and Region.

Step 3 – Establishing an Offer Score

Each technically and financially responsive offer will be assigned an Offer Score.

A separate Offer Score will be calculated for each Region and Category.

The Offer Score will be established based on a combined rating of technical merit and price. The ratio will be 50% for the technical merit and 50% for the price.

To calculate the Offer Score, the following approach will be used:

1. The Technical Merit Score for each responsive offer will be determined as follows, rounded to the nearest two decimal places:

The offer's Overall Technical Score / maximum number of points available multiplied by 50.

2. The Pricing Score for each responsive offer will be determined as follows, rounded to the nearest two decimal places:

The lowest Total Offer Price offered / The Offeror's Total Offer Price multiplied by 50.

3. For each responsive offer, the Technical Merit Score and the Pricing Score will be added to determine its Combined Rating. Neither the responsive offer obtaining the highest Overall Technical Score nor the one with the lowest Total Offer Price will necessarily be recommended for issuance of a Standing Offer.

The table below illustrates an example where all four offers are responsive and the Offer Scores are determined by a 50/50 ratio of technical merit and price, respectively.

The total available Technical points in the example is 100.

Basis of Selection - Highest Combined Rating of Technical Merit (50%) and Price (50%)				
	Offeror 1	Offeror 2	Offeror 3	Offeror 4
Overall Technical Score	80	90	95	70
Total Offer Price	\$1197.45	\$850	\$950	\$900.60

CALCULATIONS				
	Technical Merit Score (TMS)	Pricing Score (PS)	Combined Rating	Overall Ranking
Offeror 1	$80/100 \times 50 = 40$	$850/1197.45 \times 50 = 35.49$	75.49	4 th
Offeror 2	$90/100 \times 50 = 45$	$850 / 850 \times 50 = 50$	95	1 st
Offeror 3	$95/100 \times 50 = 47.5$	$850 / 950 \times 50 = 44.74$	92.24	2 nd
Offeror 4	$70/100 \times 50 = 35$	$850 / 900.6 \times 50 = 47.19$	82.19	3 rd

Step 4 – Offer Ranking

For each Category in each Region, the technically and financially responsive offers will be ranked in descending order using the offer's Combined Rating obtained under Step 3 above; the responsive offer with the highest Combined Rating being ranked first.

Priority of ranking will be given to Aboriginal Businesses. If there are 10 responsive offers from Aboriginal Businesses for a Region and Category, then responsive offers from non-Aboriginal businesses will not be considered.

If there are less than 10 responsive offers from Aboriginal Businesses for a Region and Category, then responsive offers from non-Aboriginal businesses will be considered. However, when there are less than 10 responsive offers from Aboriginal Businesses for a Region and Category, responsive offers from Aboriginal Businesses will first be ranked in descending order, using the offer's Combined Rating obtained under Step 3, and then responsive offers from non-Aboriginal business will be used to fill out the remaining rankings in descending order using the responsive offer's Combined Rating obtained under Step 3 above. No responsive offer from a non-Aboriginal Offeror will be ranked above a responsive offer from an Aboriginal Offeror.

Step 5 - Offeror Selection and Issuance of a SO

For each Category in each Region up to 10 technically and financially responsive offers will be recommended for the issuance of a SO, against the terms stated in Part 7 of this RFSO, based on their overall ranking under Step 4 above. If there are more than 10 technically and financially responsive offers in any given Region and Category then any Offeror's offer that was ranked 11th or greater under Step 4 may not be recommended for issuance of a SO.

Offerors should note that the issuance of all SOs is subject to Canada's internal approvals process. If such approval is not given, SOs will not be issued.

All Offerors will be notified in writing regarding the outcome of this RFSO.

Step 6 – Establishing a SO Ranking Score

Each SO issued under Step 5 will be assigned a SO Ranking Score. The SO Ranking Score will be used when issuing Task Authorizations under Call-ups (refer to Part 7 B, article 2 and Annex E).

The SO Ranking Score assigned to each SO will be established based on the offer's ranking obtained under Step 4 above. For each Category and each Region, points will be distributed amongst the SOs that are issued as follows to determine the SO Ranking Scores:

- 1) The lowest ranked Offeror will receive an SO Ranking Score of 5 points.
- 2) The SO Ranking Scores will then increase by 5 points, in ascending order in accordance with the rankings established at Step 4 above, with the sole exception that the SO Ranking Score assigned to the lowest ranked Offeror that is an Aboriginal Business will be 25 points higher than the SO Ranking Score assigned to the highest ranked Offeror that is not an Aboriginal Business.

Examples:

Scenario #1:

In this hypothetical scenario three offers were deemed technically and financially responsive and were recommended for issuance of a SO. Of these three offers, one of them was submitted by an Aboriginal Business.

Under this scenario, the resulting SO Ranking Scores would be as follows:

Company	Aboriginal Business	Offer's Ranking	SO Ranking Score
Company A Inc.	Yes	1 st	35 Points
Company B Inc.	No	2 nd	10 Points
Company C Inc.	No	3 rd	5 Points

Scenario #2:

In this hypothetical scenario six offers were deemed technically and financially responsive and were recommended for issuance of a SO. Of these six offers, two of them were submitted by Aboriginal Businesses.

Under this scenario, the resulting SO Ranking Scores would be as follows:

Company	Aboriginal Business	Offer's Ranking	SO Ranking Score
Company A Inc.	Yes	1 st	50 Points
Company B Inc.	Yes	2 nd	45 Points
Company C Inc.	No	3 rd	20 Points
Company D Inc.	No	4 th	15 Points
Company E Inc.	No	5 th	10 Points
Company F Inc.	No	6 th	5 Points

Scenario #3:

In this hypothetical scenario 10 offers were deemed technically and financially responsive and were recommended for issuance of a SO. Of these 10 offers, five of them were submitted by Aboriginal Businesses.

Under this scenario, the resulting SO Ranking Scores would be as follows:

Company	Aboriginal Business	Offer's Ranking	SO Ranking Score
Company A Inc.	Yes	1 st	70 Points
Company B Inc.	Yes	2 nd	65 Points
Company C Inc.	Yes	3 rd	60 Points
Company D Inc.	Yes	4 th	55 Points
Company E Inc.	Yes	5 th	50 Points
Company F Inc.	No	6 th	25 Points
Company G Inc.	No	7 th	20 Points
Company H Inc.	No	8 th	15 Points
Company I Inc.	No	9 th	10 Points
Company J Inc.	No	10 th	5 Points

Scenario #4:

In this hypothetical scenario five offers were deemed technically and financially responsive and were recommended for issuance of a SO. Of these five offers, none of them were submitted by Aboriginal Businesses.

Under this scenario, the resulting SO Ranking Scores would be as follows:

Company	Aboriginal Business	Offer's Ranking	SO Ranking Score
Company A Inc.	No	1 st	25 Points
Company B Inc.	No	2 nd	20 Points
Company C Inc.	No	3 rd	15 Points
Company D Inc.	No	4 th	10 Points
Company E Inc.	No	5 th	5 Points

Solicitation No. - N° de l'invitation
5A090-192272/A
Client Ref. No. - N° de réf. du client
5A090-192272

Amd. No. - N° de la modif.
File No. - N° du dossier
005xf. 5A090-192272

Buyer ID - Id de l'acheteur
005xf
CCC No./N° CCC - FMS No./N° VME

ATTACHMENT 1 TO PART 4

TECHNICAL CRITERIA

See attached in Microsoft Excel format.

The attachment contains a separate tab for each Region and Category.

Solicitation No. - N° de l'invitation
5A090-192272/A
Client Ref. No. - N° de réf. du client
5A090-192272

Amd. No. - N° de la modif.
File No. - N° du dossier
005xf. 5A090-192272

Buyer ID - Id de l'acheteur
005xf
CCC No./N° CCC - FMS No./N° VME

ATTACHMENT 2 TO PART 4

PRICING SCHEDULE

See attached in Microsoft Excel format.

The attachment contains a separate tab for each Region and Category.

PART 5 – CERTIFICATIONS AND ADDITIONAL INFORMATION

Offerors must provide the required certifications and additional information to be issued a standing offer.

The certifications provided by Offerors to Canada are subject to verification by Canada at all times. Unless specified otherwise, Canada will declare an offer non-responsive, will have the right to set-aside a standing offer, or will declare a contractor in default if any certification made by the Offeror is found to be untrue whether made knowingly or unknowingly during the offer evaluation period, during the Standing Offer period, or during the contract period.

The Standing Offer Authority will have the right to ask for additional information to verify the Offeror's certifications. Failure to comply and to cooperate with any request or requirement imposed by the Standing Offer Authority will render the offer non-responsive, result in the setting aside of the Standing Offer or constitute a default under the Contract.

5.1 Certifications Required with the Offer

Offerors must submit the following duly completed certifications as part of their offer.

5.1.1 Integrity Provisions - Declaration of Convicted Offences

In accordance with the Integrity Provisions of the Standard Instructions, all Offerors must provide with their offer, **if applicable**, the declaration form available on the [Forms for the Integrity Regime](http://www.tpsgc-pwgsc.gc.ca/ci-if/declaration-eng.html) website (<http://www.tpsgc-pwgsc.gc.ca/ci-if/declaration-eng.html>), to be given further consideration in the procurement process.

5.1.2 Aboriginal Business

Offerors seeking to qualify for an Aboriginal SO must complete the following certifications:

A) Offeror Certification - Aboriginal Business

1. The requirement is subject to a preference for services from Aboriginal Businesses. Although the requirement is not set-aside for Aboriginal business under the federal government Procurement Strategy for Aboriginal Business (PSAB), for the purposes of this RFSO, Aboriginal Businesses will remain as defined in the Set-aside Program under PSAB with the exception that an offer from a Joint Venture, as defined article 17 (2007-11-30) of the 2006 Standard Instructions - Request for Standing Offers - Goods or Services - Competitive Requirements (2019-03-04)₁, will not be considered. For more information on Aboriginal business requirements of the Set-aside Program for Aboriginal Business, see [Annex 9.4](#) of the *Supply Manual*.
2. The Offeror:
 - i. certifies that it meets, and will continue to meet throughout the duration of the Offer, the requirements described in the above-mentioned annex.
 - ii. agrees that any subcontractor it engages under the Offer must satisfy the requirements described in the above-mentioned annex.
 - iii. agrees to provide to Canada, immediately upon request, evidence supporting any subcontractor's compliance with the requirements described in the above-mentioned annex.

3. The Offeror must check the applicable box below:
- i. The Offeror is an Aboriginal business that is a sole proprietorship, band, limited company, co-operative, partnership or not-for-profit organization.
4. The Offeror must check the applicable box below:
- i. The Aboriginal business has fewer than six full-time employees.
- OR**
- ii. The Aboriginal business has six or more full-time employees.
5. The Offeror must, upon request by Canada, provide all information and evidence supporting this certification. The Offeror must ensure that this evidence will be available for audit during normal business hours by a representative of Canada, who may make copies and take extracts from the evidence. The Offeror must provide all reasonably required facilities for any audits.
6. By submitting an offer, the Offeror certifies that the information submitted by the Offeror in response to the above requirements is accurate and complete.

B) Owner/Employee Certification - Aboriginal Business

If requested by the Standing Offer Authority, the Offeror must provide the following certification for each owner and employee who is Aboriginal:

1. I am _____ (*insert "an owner" and/or "a full-time employee"*) of _____ (*insert name of business*), and an Aboriginal person, as defined in [Annex 9.4](#) of the *Supply Manual* entitled "Requirements for the Set-Aside Program for Aboriginal Business".
2. I certify that the above statement is true and consent to its verification upon request by Canada.

Printed name of owner and/or employee

Signature of owner and/or employee

Date

5.2 Certifications Precedent to the Issuance of a Standing Offer and Additional Information

The certifications and additional information listed below should be submitted with the offer, but may be submitted afterwards. If any of these required certifications or additional information is not completed and submitted as requested, the Standing Offer Authority will inform the Offeror of a time frame within which to provide the information. Failure to provide the certifications or the additional information listed below within the time frame provided will render the offer non-responsive.

5.2.1 Integrity Provisions – Required Documentation

In accordance with the section titled Information to be provided when bidding, contracting or entering into a real procurement agreement of the [Ineligibility and Suspension Policy](http://www.tpsgc-pwgsc.gc.ca/ci-if/politique-policy-eng.html) (<http://www.tpsgc-pwgsc.gc.ca/ci-if/politique-policy-eng.html>), the Offeror must provide the required documentation, as applicable, to be given further consideration in the procurement process.

5.2.2 Federal Contractors Program for Employment Equity - Standing Offer Certification

By submitting an offer, the Offeror certifies that the Offeror is not named on the Federal Contractors Program (FCP) for employment equity "FCP Limited Eligibility to Bid" list) available at the bottom of the page of the [Employment and Social Development Canada-Labour's](https://www.canada.ca/en/employment-social-development/programs/employment-equity/federal-contractor-program.html#s4) website (<https://www.canada.ca/en/employment-social-development/programs/employment-equity/federal-contractor-program.html#s4>).

Canada will have the right to declare an offer non-responsive, or to set-aside a Standing Offer, if the Offeror appears on the "FCP Limited Eligibility to Bid" list at the time of issuing of a Standing Offer or during the period of the Standing Offer.

5.2.3 Canadian Content Certification

This procurement is conditionally limited to Canadian services.

Subject to the evaluation procedures contained in the request for standing offer, Offerors acknowledge that only offers with a certification that the services offered are Canadian services, as defined in clause [A3050T](#), may be considered.

Failure to provide this certification with the offer, or within the time period requested by the Standing Offer Authority, will result in the services offered being treated as non-Canadian services.

The Offeror certifies that:

() the services offered are Canadian services as defined in paragraph 4 of clause [A3050T](#).

For more information on how to determine the Canadian content for a mix of goods, a mix of services or a mix of goods and services, consult [Annex 3.6](#).(9), Example 2, of the *Supply Manual*

5.2.3.1 SACC Manual clause [A3050T](#) (2018-12-06) Canadian Content Definition

PART 6 - SECURITY, FINANCIAL AND INSURANCE REQUIREMENTS

6.1 Security Requirements

1. Before issuance of a standing offer, the following conditions must be met:
 - (a) the Offeror must hold a valid organization security clearance as indicated in Part 7A - Standing Offer.
2. Offerors are reminded to obtain the required security clearance promptly. Any delay in the issuance of a standing offer to allow the successful Offeror to obtain the required clearance will be at the entire discretion of the Standing Offer Authority.
3. For additional information on security requirements, Offerors should refer to the [Contract Security Program](http://www.tpsgc-pwgsc.gc.ca/esc-src/introduction-eng.html) of Public Works and Government Services Canada (<http://www.tpsgc-pwgsc.gc.ca/esc-src/introduction-eng.html>) website.

6.2 Financial Capability

SACC Manual clause [M9033T](#) (2011-05-16) Financial Capability

6.3 Insurance Requirements

The Offeror must provide a letter from an insurance broker or an insurance company licensed to operate in Canada stating that the Offeror, if issued a standing offer as a result of the RFSO, can be insured in accordance with the Insurance Requirements specified in Annex D.

If the information is not provided in the offer, the Standing Offer Authority will so inform the Offeror and provide the Offeror with a time frame within which to meet the requirement. Failure to comply with the request of the Standing Offer Authority and meet the requirement within that time period will render the offer non-responsive.

PART 7 - STANDING OFFER AND RESULTING CONTRACT CLAUSES

A. STANDING OFFER

7.1 Offer

7.1.1 The Offeror offers to perform the Work in accordance with the Statement of Work at Annex A.

7.2 Security Requirements

7.2.1 The following security requirements (SRCL and related clauses provided by the Contract Security Program) apply and form part of the Standing Offer.

1. The Offeror must, at all times during the performance of the Standing Offer, hold a valid Designated Organization Screening (DOS), issued by the Canadian Industrial Security Directorate (CISD), Public Works and Government Services Canada (PWGSC).
2. The Offeror personnel requiring access to PROTECTED information, assets or sensitive work site(s) must EACH hold a valid RELIABILITY STATUS, granted or approved by CISD/PWGSC.
3. The Offeror MUST NOT remove any PROTECTED information or assets from the identified work site(s), and the Offeror must ensure that its personnel are made aware of and comply with this restriction.
4. Subcontracts which contain security requirements are NOT to be awarded without the prior written permission of CISD/PWGSC.
5. The Offeror must comply with the provisions of the:
 - a) Security Requirements Check List and security guide (if applicable), attached at Annex C; and,
 - b) Industrial Security Manual (Latest Edition).

7.3 Standard Clauses and Conditions

All clauses and conditions identified in the Standing Offer and resulting contract(s) by number, date and title are set out in the [Standard Acquisition Clauses and Conditions Manual](https://buyandsell.gc.ca/policy-and-guidelines/standard-acquisition-clauses-and-conditions-manual) (<https://buyandsell.gc.ca/policy-and-guidelines/standard-acquisition-clauses-and-conditions-manual>) issued by Public Works and Government Services Canada.

7.3.1 General Conditions

2005 (2017-06-21) General Conditions - Standing Offers - Goods or Services, apply to and form part of the Standing Offer.

7.3.2 Standing Offers Reporting

The Offeror must compile and maintain records on its provision of goods and services to Canada under contracts resulting from the Standing Offer. This data must include all purchases done by Canada, including those acquired and paid for by Canada acquisition cards.

The Offeror must provide this data in accordance with the reporting requirements detailed in Annex G. If some data is not available, the reason must be indicated in the report. If no goods or services is provided during a given period, the Offeror must provide a "nil" report.

The data must be submitted on a quarterly basis to the Standing Offer Authority.

The quarterly reporting periods are defined as follows:

- first quarter: April 1 to June 30
- second quarter: July 1 to September 30
- third quarter: October 1 to December 31
- fourth quarter: January 1 to March 31

The data must be submitted to the Standing Offer Authority no later than 30 calendar days after the end of the reporting period.

7.4 Term of Standing Offer

7.4.1 Period of the Standing Offer

The period for making call-ups against the Standing Offer is one year from the date of SO issuance.

7.4.2 Extension of Standing Offer

If the Standing Offer is authorized for use beyond the initial period, the Offeror offers to extend its offer for up to four additional one year periods, under the same conditions and at the rates or prices specified in the Standing Offer, or at the rates or prices calculated in accordance with the formula specified in the Standing Offer.

The Offeror will be advised of the decision to authorize the use of the Standing Offer for an extended period by the Standing Offer Authority at least 30 calendar days before the expiry date of the Standing Offer. A revision to the Standing Offer will be issued by the Standing Offer Authority.

7.4.3 Comprehensive Land Claims Agreements (CLCAs)

The Standing Offer (SO) is for the delivery of the requirement to each Region detailed in the SO to the Identified Users, excluding locations within Yukon, Northwest Territories, Nunavut, Quebec, and Labrador that are subject to Comprehensive Land Claims Agreements (CLCAs). Any requirement for deliveries within CLCAs areas within Yukon, Northwest Territories, Nunavut, Quebec, or Labrador will have to be treated as a separate procurement, outside the standing offer.

7.4.4 Delivery Points

Delivery of the requirement will be made to delivery point(s) specified at Annex A, Appendix E of the Standing Offer.

7.5 Authorities

7.5.1 Standing Offer Authority

The Standing Offer Authority is:

Name: Jeremy Chapple
Title: Supply Team Leader
Public Works and Government Services Canada
Acquisitions Program
Directorate: Major Project Procurement Directorate
Address: Terrasses de la Chaudière 5th Floor - 10 Wellington Street, Gatineau Quebec K1A 0S5

Telephone: 873-354-5628
E-mail address: TPSGC.PASACOCSI-APISCNSSO.PWGSC@tpsgc-pwgsc.gc.ca

The Standing Offer Authority is responsible for the establishment of the Standing Offer, its administration and its revision, if applicable.

7.5.2 Technical Authority

The Technical Authority for the Standing Offer is:

Name: _____
Title: _____
Organization: _____
Address: _____

Telephone: ____ - ____ - _____
Facsimile: ____ - ____ - _____
E-mail address: _____

The Technical Authority is the representative of the department or agency for whom the Work will be carried out pursuant to a call-up against the Standing Offer and is responsible for all the technical content of the Work under the resulting Contract.

7.5.3 Offeror's Representative

The Offeror's Representative for the Standing Offer is:

Name: _____
Title: _____
Organization: _____
Address: _____
Telephone: ____ - ____ - ____
Facsimile: ____ - ____ - ____
E-mail address: _____

This individual is the central point of contact within the Offeror for all matters pertaining to this SO. The Offeror confirms that this individual has the authority to bind the Offeror. It is the Offeror's sole responsibility to ensure that the information related to the Offeror Representative is correct. If a replacement or a new Offeror Representative is required, the Offeror will inform the Standing Offer Authority by e-mail and provide the following information:

Name:
Title:
Telephone:
Email:

The Offeror may designate another individual to represent the Offeror for administrative and technical purposes under any contract resulting from this Standing Offer.

7.6 Identified Users

The Identified User authorized to make call-ups against the Standing Offer is: Indigenous Services Canada, First Nations Inuit Health Branch. Upon the making of a call-up, the Identified User as Contracting Authority is responsible for any contractual issues relating to individual call-ups made against the Standing Offer.

7.7 Call-up Procedures

7.7.1 Multiple Standing Offers Exist

Multiple Standing Offers have been issued for this requirement.

7.7.2 Offeror Selection Methodology

The Identified User will issue a Call-up Form, or equivalent, to all Offerors whose SO has not been suspended or set-aside. All Offerors who hold a valid Standing Offer and respond to the Call-up Form in accordance with article 7.7.5 will be issued a Call-up. When accepted by Canada, each Call-up results in a separate contract between Canada and the Offeror.

7.7.3 Minimum Call-Up Details

In addition to the information stated at article 7.8, the Call-up form will identify details of the Identified User's requirement by describing the specific Work, including:

- a) the Call-up Period;
- b) the specific Category required;
- c) a proposed basis of payment in accordance with the firm hourly rates attached at Annex B of the SO;
- d) Location(s) of Work where the required Services will be delivered;
- e) Travel and Living requirements (if applicable);
- f) the contact information for the Identified User;
- g) the particulars of the Statement of Work; and
- h) the response due date.

7.7.4 The terms and conditions set out in the Call-up Form and the Resulting Contract Clauses that form part of this SO apply to the Call-up.

7.7.5 The Call-up must be signed by the Offeror or by an authorized representative of the Offeror.

7.8 Call-up Instrument

The Work will be authorized or confirmed by the Identified User(s) using the duly completed forms or their equivalents as identified in paragraphs 2 and 3 below.

1. Call-ups must be made by Identified Users' authorized representatives under the Standing Offer and must be for goods or services or combination of goods and services included in the Standing Offer at the prices and in accordance with the terms and conditions specified in the Standing Offer.

2. Any of the following forms could be used which are available through [PWGSC Forms Catalogue](#) website:

- PWGSC-TPSGC 942 Call-up Against a Standing Offer
- PWGSC-TPGSC 942-2 Call-up Against a Standing Offer - Multiple Delivery
- PWGSC-TPSGC 944 Call-up Against Multiple Standing Offers (English version)
- PWGSC-TPSGC 945 Commande subséquente à plusieurs offres à commandes (French version)

or

3. An equivalent form or electronic call-up document which contains at a minimum the following information:

- standing offer number;
- the call-up start and end date (Term of Contract);
- statement that incorporates the terms and conditions of the Standing Offer;
- description and unit price for each line item;
- total value of the call-up;
- point of delivery;
- confirmation that funds are available under section 32 of the Financial Administration Act;
- confirmation that the user is an Identified User under the Standing Offer with authority to enter into a contract.

7.9 Limitation of Call-ups

Individual call-ups against the Standing Offer must not exceed \$400,000.00 (Applicable Taxes included).

7.10 Priority of Documents

If there is a discrepancy between the wording of any documents that appear on the list, the wording of the document that first appears on the list has priority over the wording of any document that subsequently appears on the list.

- a) the call-up against the Standing Offer, including any annexes;
- b) the articles of the Standing Offer;
- c) the general conditions 2005 (2017-06-21), General Conditions - Standing Offers - Goods or Services;
- d) the supplemental general conditions 4008 (2008-12-12), Personal Information;
- e) the general conditions 2035 (2018-06-21), General Conditions - Higher Complexity - Services;
- f) Annex A, Statement of Work;
- g) Annex B, Basis of Payment;
- h) Annex C, Security Requirements Check List;
- i) Annex D, Insurance Requirements;
- j) Annex E, SO Ranking Score;
- k) An authorized Annex F, Task Authorization Form;
- l) Annex G, Quarterly SO Reporting Template, and
- m) the Offeror's offer dated _____ as clarified on _____ or as amended on _____

7.11 Certifications and Additional Information

7.11.1 Compliance

Unless specified otherwise, the continuous compliance with the certifications provided by the Offeror with its offer or precedent to issuance of the Standing Offer (SO), and the ongoing cooperation in providing additional information are conditions of issuance of the SO and failure to comply will constitute the Offeror

in default. Certifications are subject to verification by Canada during the entire period of the SO and of any resulting contract that would continue beyond the period of the SO.

7.11.2 Suspension or Set Aside of Qualification by Canada

- A. Once a qualified resource has been accepted by Canada as a Contract Nurse to perform Work on a Task Authorization issued under a Call-up, the Offeror must make that resource, or a replacement in accordance with article 08 of the 2035 General Conditions (as amended at article 3.1.1 of B. *Resulting Contract Clauses* below), available to complete the specified Work for the entire period as specified in the authorized Task Authorization.
- B. If the Offeror is in default in carrying out its obligation under 7.11.2 A., the Standing Offer Authority may, by giving written notice to the Offeror, set aside the Standing Offer (SO) as follows::
- i. If the Offeror fails to comply with the obligation stated in article 7.11.2 A, in three or more Task Authorizations authorized under a Call-up issued through the SO, then the Standing Offer Authority may set aside the SO for a period of 3 months;
 - ii. If, following the first set aside, the Offeror then fails to comply with the obligation stated in article 7.11.2 A, in two more Task Authorizations authorized under a Call-up issued through the SO, then the Standing Offer Authority may set aside the SO a second time for a period of 6 months; and,
 - iii. If, following the second set aside, the Offeror then fails to comply with the obligation stated in article 7.11.2 A, in two more Task Authorizations authorized under a Call-up issued through the SO, then the Standing Offer Authority may set aside the SO indefinitely.
- C. In addition to 7.11.2 B. above, Canada may, by sending written notice to the Offeror, set aside the SO under any of the following circumstances:
- i. the Offeror no longer meets any of the required qualifications of the SO;
 - ii. the Offeror has provided false or misleading information as part of their response to a TA Group Invitation as required under article 2.3.2 of a Call-up;
 - iii. the Offeror has made public any information that conflicts with the terms, conditions, pricing or availability of systems identified in this SO;
 - iv. the Offeror is in default in carrying out any of its obligations under any resulting call up and Canada has exercised its contractual right to terminate the contract for default;
 - v. the Offeror is in default in carrying out any of its obligations under this SO; or
 - vi. Canada has imposed measures on the Offeror under the Vendor Performance Corrective Measures Policy (or such similar policy that may be in place at that time).

A set aside of the SO will not affect the right of Canada to pursue other remedies or measures that may be available. It will not, on its own, affect any Call-up entered into before the issuance of the notice. The Standing Offer Authority will however remove the Offeror from the list of Offerors eligible to receive call ups under this SO.

7.12 SACC Manual Clauses

SACC Manual Clause A3000C (2014-11-27), Aboriginal Business Certification [if applicable]
SACC Manual Clause M3060C (2008-05-12), Canadian Content Certification
SACC Manual clause A2000C (2006-06-16), Foreign Nationals (Canadian Contractor)

OR

SACC Manual clause A2001C (2006-06-16), Foreign Nationals (Foreign Contractor)

7.13 Applicable Laws

The Standing Offer and any contract resulting from the Standing Offer must be interpreted and governed, and the relations between the parties determined, by the laws in force in Ontario.

7.14 Transition to an e-Procurement Solution (EPS)

During the period of the Standing Offer, Canada may transition to an EPS for more efficient processing and management of individual call-ups for any or all of the SO's applicable goods and services. Canada reserves the right, at its sole discretion, to make the use of the new e-procurement solution mandatory.

Canada agrees to provide the Offeror with at least a three-month notice to allow for any measures necessary for the integration of the Offer into the EPS. The notice will include a detailed information package indicating the requirements, as well as any applicable guidance and support.

If the Offeror chooses not to offer their goods or services through the e-procurement solution, the Standing Offer may be set aside by Canada.

7.15 Non Exclusivity

Nothing in the Standing Offer grants the Offeror the exclusive right to provide the Work. Canada shall at any time have the right to engage alternate or supplemental parties to perform the same or similar Work described in Annex A.

7.16 Proactive Disclosure of Contracts with Former Public Servants *(note: to be removed if not applicable)*

By providing information on its status, with respect to being a former public servant in receipt of a [Public Service Superannuation Act](#) (PSSA) pension, the Offeror has agreed that this information will be reported on departmental websites as part of the published proactive disclosure reports, in accordance with [Contracting Policy Notice: 2012-2](#) of the Treasury Board Secretariat of Canada.

Contracts awarded to former public servants (FPS) in receipt of a pension or of a lump sum payment must bear the closest public scrutiny, and reflect fairness in the spending of public funds. In order to comply with Treasury Board policies and directives on contracts awarded to FPSs, bidders must provide the information required below before contract award. If the answer to the questions and, as applicable the information required have not been received by the time the evaluation of bids is completed, Canada will inform the Offeror of a time frame within which to provide the information. Failure to comply with Canada's request and meet the requirement within the prescribed time frame will render the bid non-responsive.

Definitions

For the purposes of this clause, "former public servant" is any former member of a department as defined in the [Financial Administration Act](#), R.S., 1985, c. F-11, a former member of the Canadian Armed Forces or a former member of the Royal Canadian Mounted Police. A former public servant may be:

- a. an individual;
- b. an individual who has incorporated;
- c. a partnership made of former public servants; or

- d. a sole proprietorship or entity where the affected individual has a controlling or major interest in the entity.

"lump sum payment period" means the period measured in weeks of salary, for which payment has been made to facilitate the transition to retirement or to other employment as a result of the implementation of various programs to reduce the size of the Public Service. The lump sum payment period does not include the period of severance pay, which is measured in a like manner.

"pension" means a pension or annual allowance paid under the [Public Service Superannuation Act](#) (PSSA), R.S., 1985, c. P-36, and any increases paid pursuant to the [Supplementary Retirement Benefits Act](#), R.S., 1985, c. S-24 as it affects the PSSA. It does not include pensions payable pursuant to the [Canadian Forces Superannuation Act](#), R.S., 1985, c. C-17, the [Defence Services Pension Continuation Act](#), 1970, c. D-3, the [Royal Canadian Mounted Police Pension Continuation Act](#), 1970, c. R-10, and the [Royal Canadian Mounted Police Superannuation Act](#), R.S., 1985, c. R-11, the [Members of Parliament Retiring Allowances Act](#), R.S. 1985, c. M-5, and that portion of pension payable to the [Canada Pension Plan Act](#), R.S., 1985, c. C-8.

Former Public Servant in Receipt of a Pension

As per the above definitions, is the Offeror a FPS in receipt of a pension? **Yes () No ()**

If so, the Offeror must provide the following information, for all FPSs in receipt of a pension, as applicable:

- a. name of former public servant;
- b. date of termination of employment or retirement from the Public Service.

By providing this information, Offerors agree that the successful Offeror's status, with respect to being a former public servant in receipt of a pension, will be reported on departmental websites as part of the published proactive disclosure reports in accordance with [Contracting Policy Notice: 2012-2](#) and the [Guidelines on the Proactive Disclosure of Contracts](#).

Work Force Adjustment Directive

Is the Offeror a FPS who received a lump sum payment pursuant to the terms of the Work Force Adjustment Directive? **Yes () No ()**

If so, the Offeror must provide the following information:

- a. name of former public servant;
- b. conditions of the lump sum payment incentive;
- c. date of termination of employment;
- d. amount of lump sum payment;
- e. rate of pay on which lump sum payment is based;
- f. period of lump sum payment including start date, end date and number of weeks;
- g. number and amount (professional fees) of other contracts subject to the restrictions of a work force adjustment program.

Solicitation No. - N° de l'invitation
5A090-192272/A
Client Ref. No. - N° de réf. du client
5A090-192272

Amd. No. - N° de la modif.
File No. - N° du dossier
005xf. 5A090-192272

Buyer ID - Id de l'acheteur
005xf
CCC No./N° CCC - FMS No./N° VME

For all contracts awarded during the lump sum payment period, the total amount of fees that may be paid to a FPS who received a lump sum payment is \$5,000, including Applicable Taxes.

B. RESULTING CONTRACT CLAUSES

The following clauses and conditions apply to and form part of any contract resulting from a call-up against the Standing Offer.

1. Statement of Work

The Contractor must perform the Work described in the call-up against the Standing Offer.

2. Task Authorization

2.1 Work described at Annex A, Statement of Work, will be performed under the Contract on an "as and when requested basis".

2.2 With respect to the Work mentioned under article 2.1:

1. an obligation will come into force only when the Contractor receives a Task Authorization (TA), inclusive of any revisions, authorized and issued in accordance with this clause, and only to the extent designated in the authorized TA;
2. the TA limit is determined in accordance with article 2.3.5 below;
3. the Contractor must not commence Work until a TA, inclusive of any revisions, has been authorized and issued in accordance with the Contract. The Contractor acknowledges that Work performed before a TA, inclusive of any revisions, has been authorized and issued in accordance with the Contract will be done at the Contractor's own risk and expense;
4. the task description, inclusive of any revisions, included in an authorized TA must fall within the scope of the Statement of Work, in Annex A; and
5. the TA, inclusive of any revisions, will be authorized under the Contract through the use of Annex F, Task Authorization Form. An authorized TA is a completed Annex F signed by the TA Authority.

2.3 Task Authorization Process

2.3.1 TA Group Invitation

2.3.1.1 The Task Authorization Authority (TAA) will provide a description of the task by sending a TA Form to all Contractors that have been issued a Call-up under the 5A090-192272 series of Standing Offers whose SO is not, at that time, suspended or set aside under article 7.11.2 of the SO (hereby referred to as "Eligible Contractors"). The TA Form will be sent to all Eligible Contractors at once for a specific Category of service within a specific Region. This process is hereby referred to as a "TA Group Invitation".

2.3.1.2 The TA Form will include the applicable basis and methods of payment as specified in the Contract.

2.3.1.3 The CN Scoring Rubric (Appendix I to Annex A) applicable to the TA will be included as part of the TA Group Invitation.

2.3.1.4 TA Group Invitation responses received prior to the TA Group Invitation response deadline will be evaluated by ISC and allocated a TA Response Score. The TA Response Score will be calculated as follows, rounded to the nearest two decimal places:

TA Response Score =
$$\left(\frac{\text{The Offeror's SO Ranking Score}^1}{\text{The highest SO Ranking Score obtained by an Offeror for the Region and Category}} \times 35 \right) + \left(\frac{\text{The Offeror's proposed CN Score}^2}{\text{The maximum Total Points achievable in the CN Scoring Rubric}} \times 65 \right)$$

¹ as detailed at Annex E.

² see article 2.3.3 below.

2.3.1.5 If a TA is Authorized, it will be issued to the Contractor that meets the requirements stated in the TA Form, prior to the TA Group Invitation response deadline, and obtains the highest TA Response Score. In the event of a tied TA Response Score, the TA will be issued to the Contractor whose response contains the lowest proposed travel itinerary costs. In the event of tied TA Response Scores and identical proposed travel itinerary costs, the TA will be issued to the Contractor who submitted their TA Group Invitation response completed in full to the TAA first, as determined by the time stamp in the TAA's email inbox.

2.3.1.6 In the event that the TAA does not receive any responses to a TA Group Invitation from Eligible Contractors prior to the TA Group Invitation response deadline, then ISC reserves the right to issue an authorized TA to any Eligible Contractor whose response to a TA Group Invitation was received after the TA Group Invitation response deadline if it meets the mandatory requirements as stipulated in the CN Scoring Rubric for the TA Group Invitation, at the TAA's sole discretion.

2.3.1.7 Canada reserves the right to:

- a. cancel any requirement sent to Contractors through TA Group Invitation, at any time prior to authorization of the TA, at no cost to Canada; and,
- b. reissue a requirement that was previously sent to Contractors through a new TA Group Invitation.

2.3.2 Contractor Response

2.3.2.1 The Contractor must within 4 hours, or within a longer alternative TA Group Invitation response deadline specified in the TA Form, provide the TAA with a signed and dated response prepared and submitted using the TA Form received from the TAA, containing at a minimum the information listed below:

- (1) the name of the proposed resource;
- (2) the resume of the proposed resource;
- (3) the necessary information and documents required to demonstrate that the resource meets all the mandatory requirements specified in Annex A of the Contract;
- (4) a completed Appendix I to Annex A detailing the Contractor's anticipated proposed CN Score;
- (5) a completed Appendix J to Annex A (CN Consent to Release Form) for the proposed resource; and,

-
- (6) a proposed travel itinerary detailing all travel costs in accordance with Annex B of the Contract.

2.3.2.2 The Contractor must not propose more than one resource as part of its response to a TA Group Invitation. If the Contractor proposes more than one resource in response to a TA Group Invitation, then ISC will only assess one of the proposed resources chosen at the TAA's sole discretion.

2.3.2.3 The Contractor may propose a Nurse Practitioner in response to a TA Group Invitation made for a resource under the Registered Nurse category, however the Contractor must still demonstrate that the proposed resource meets all the mandatory requirements of a Registered Nurse as specified in Annex A of the Contract. In these instances, if the Contractor is issued an authorized TA, it must invoice ISC using the rates for a Registered Nurse as specified in Annex B and not those of a Nurse Practitioner.

(Note: applies to the RN category only. To be removed if not applicable)

2.3.2.4 A TA will not be authorized to any Contractor whose TA Group Invitation response does not meet the requirements of article 2.3.2.1.

2.3.2.5 Canada may reject a Contractor's TA Group Invitation response where any of the following circumstances are present:

- a. the Contractor is subject to a Vendor Performance Corrective Measure, under the Vendor Performance Corrective Measure Policy;
- b. an employee, or subcontractor included as part of the Contractor's TA Group Invitation response, is subject to a Vendor Performance Corrective Measure, under the Vendor Performance Corrective Measure Policy;
- c. evidence satisfactory to Canada that based on past conduct or behavior a person who is to perform the Work is unsuitable or has conducted himself/herself improperly;

2.3.2.6 TA Group Invitation Response Certification:

By submitting and signing a TA Group Invitation response, the Contractor certifies and warrants each of the following:

- a) The resource proposed will be available to perform the Work starting at the time specified in the TA Form or agreed to with the TAA; and,
- b) If the Contractor has proposed any resource in fulfillment of the requirement who is not an employee of the Contractor, the Contractor certifies that it has written permission from such person or the employer of such person to propose the services of such person in relation to the Work to be performed in fulfillment of the requirement. During the assessment of the proposed resource, the Contractor must upon the request of the TAA provide a copy of such written permission, in relation to any or all non-employees proposed. If the Contractor fails to comply with such a request, the Contractor's TA Group Invitation response will not be considered acceptable and the TAA will issue an authorized TA to the Contractor who obtained the next highest TA Group Invitation response Score.

2.3.2.7 Contractor Acknowledgment:

By submitting and signing a TA Group Invitation response, the Contractor acknowledges each of the following:

- (A) The TAA has the right but is not obliged to:
- i. Seek clarification or verify any or all information provided by the Contractor with respect to the TA Group Invitation response, either independently or by making a request of the Contractor. Where requested, the Contractor should respond to the clarification within 2 hours of a request by Canada or a longer period as is specified in writing by Canada; and,
 - ii. Contact any or all of the references supplied, at the sole cost of the Contractor, to validate any information or data submitted by the Contractor. The reference will have a minimum of two hours, or a longer period as specified in writing, to provide the requested information to the TAA. Wherever information provided by a reference differs from the information supplied by the Contractor, the information supplied by the reference will be the information taken as accurate.

In respect of (i) or (ii) above, if the Contractor does not provide the required information within the time limit requested, the TAA will consider the response not acceptable and proceed with the issuance of an authorized to the Contractor with the next highest TA Response Score.

- (B) The TAA will not delay the authorization of any TA to allow Contractors to obtain the required security clearance. It is the responsibility of Contractors to ensure that all information required concerning the security clearance necessary to fulfill the TA is provided in its TA Group Invitation response.

2.3.3 Assessment of Proposed Resources

The qualifications and experience of the proposed resource will be assessed against the requirements stated in the CN Scoring Rubric (Appendix I to Annex A) as stipulated at the time of the TA Group Invitation (or amended as part of the TA Group Invitation). The TAA, or their delegate, will use Appendix I to Annex A to determine the CN Score for the Contractor's proposed resource.

The TAA may request proof of successful completion of formal training, as well as reference information. Canada reserves the right to request references from a Contractor to conduct a reference check to verify the accuracy of the information provided. Should the reference(s) not confirm the required qualifications of the proposed resource to perform the required services, Canada will consider the Contractor's TA Group Invitation response as not acceptable and proceed with the issuance of an authorized TA to the Contractor who obtained the next highest TA Response Score.

Where the Contractor is requested to provide information regarding qualifications or experience of its proposed resources, Contractors should provide complete details as to where, when (month and year) and how (through which activities/responsibilities) the stated qualifications/experience were obtained.

Experience gained during formal education will not be considered work experience. All requirements for work experience must be obtained in a legitimate work environment as opposed to an educational setting. The hour(s) of experience listed for work whose time frame overlaps that of another referenced work experience will only be counted once.

Where the Contractor is requested to provide information about the education or proof about the education of the proposed individual, the Contractor must demonstrate that the individual has obtained its education from a recognized* Canadian university, or college or high school, or the equivalent as established by a recognized* Canadian academic credentials assessment service, if obtained outside Canada.

**The list of recognized organizations can be found under the Canadian Information Centre for International Credentials website, at the following Internet link: <http://www.cicic.ca/indexe.stm>*

Where the Contractor is requested to provide proof of certification of the proposed resource, the Contractor must submit a copy of the certification received or proof that the resources have completed the certification program.

2.3.4 TA Authorization

2.3.4.1 The TA Authority will authorize the TA based on:

1. the request submitted to the Contractor pursuant to paragraph 2.3.1 above;
2. the Contractor's response received, submitted pursuant to paragraph 2.3.2 above; and
3. the agreed total estimated cost for performing the task or, as applicable, revised total estimated cost.

The TA Authorities will authorize the TA provided the resource proposed by the Contractor for the performance of the Work required meets all the requirements specified in the Statement of Work and TA Form.

2.3.4.2 The authorized TA will be issued to the Contractor by e-mail as an attachment in PDF format.

2.3.4.3 The Contractor must, within 2 hours of receiving the authorized TA (or within any longer time period as specified by the TAA) provide the TAA with a copy of the confirmed travel itinerary, demonstrating that the travel has been booked consistent with the authorized TA.

2.3.5 Task Authorization Limit

The Task Authorization Authorities (TAAs) may authorize individual TAs, up to a limit of \$400,000.00, applicable taxes included, inclusive of any revisions.

2.3.6 Canada reserves its right to terminate for convenience part of the Contract specified in a TA, or decrease the period of services specified in a TA to reflect the actual Work required by Canada and completed by the Contractor. Any increase to the period of service of a TA will require a TA amendment authorized and issued by the TAA in accordance with the Contract.

Canada will compensate the Contractor for TAs that have been terminated for convenience or have had their period of services reduced in accordance with Annex B.

2.3.7 Minimum Work Guarantee - All the Work - Task Authorizations

1. In this clause,

"Maximum Contract Value" means the amount specified in the "Limitation of Expenditure" clause set out in the Contract; and

"Minimum Contract Value" means \$1,000.00 applicable taxes included.

2. Canada's obligation under the Contract is to request Work in the amount of the Minimum Contract Value or, at Canada's option, to pay the Contractor at the end of the Contract in accordance with paragraph 3. In consideration of such obligation, the Contractor agrees to stand in readiness throughout the Contract period to perform the Work described in the Contract. Canada's maximum liability for Work performed under the Contract must not exceed the Maximum Contract Value, unless an increase is authorized in writing by the Contracting Authority.

3. In the event that Canada does not issue a TA Group Invitation to the Contractor in the amount of the Minimum Contract Value during the period of the Contract, Canada must pay the Contractor the Minimum Contract Value.

4. Canada will have no obligation to the Contractor under this clause if Canada terminates the Contract in whole or in part for default.

2.3.8 Periodic Usage Reports - Contracts with Task Authorizations

2.3.8.1 The Contractor must compile and maintain records on its provision of services to the federal government under authorized Task Authorizations issued under the Contract.

2.3.8.2 The Contractor must provide this data in accordance with the reporting requirements detailed below. If some data is not available, the reason must be indicated. If services are not provided during a given period, the Contractor must still provide a "nil" report.

2.3.8.3 The data must be submitted on a quarterly basis to both the Technical Authority and Contracting Authority.

The quarterly periods are defined as follows:

1st quarter: April 1 to June 30;

2nd quarter: July 1 to September 30;

3rd quarter: October 1 to December 31; and

4th quarter: January 1 to March 31.

2.3.8.4 The data must be submitted to both the Technical Authority and the Contracting Authority no later than 15 calendar days after the end of the reporting period.

2.3.8.5 Reporting Requirement- Details

A detailed and current record of all authorized TAs must be kept for each contract with a task authorization process. This record must contain:

(a) For each authorized TA:

- (i) the TA number appearing on the TA form;
- (ii) the total estimated cost of the TA (applicable tax extra) before any revisions appearing on the TA form;
- (iii) the following information appearing on the TA form must be included for each authorized revision, starting with revision 1, then 2, etc:
 - the TA revision number;
 - the reason for the revision;
 - the date the revision to the TA was authorized;
 - the authorized increase or decrease (applicable tax extra);
 - the total estimated cost of the task (applicable tax extra) after authorization of the revision;
- (iv) the total cost incurred and invoiced for the TA (as last revised, as applicable), applicable tax extra;
- (v) the total applicable tax amount invoiced;
- (vi) the total amount paid, applicable tax included;
- (vii) the start and completion date of the TA (as last revised, as applicable); and,
- (viii) any additional data, as requested by the Technical Authority or Contracting Authority.

(b) For all authorized TAs:

- (i) the sum (applicable tax extra) specified in clause 6.2 of the Contract (as last amended, as applicable);
- (ii) the total cost incurred for all authorized TAs inclusive of any revisions, applicable tax extra;
- (iii) the total cost incurred and invoiced for all authorized TAs inclusive of any revisions, applicable tax extra;
- (iv) the total applicable tax amount invoiced for all authorized TAs inclusive of any revisions; and,
- (v) the total amount paid for all authorized TAs inclusive of any revisions, applicable tax extra.

3 Standard Clauses and Conditions

3.1 General Conditions

2035 (2018-06-21), General Conditions - Higher Complexity - Services, apply to and form part of the Contract.

3.1.1 Article 1 of 2035 (2018-06-21), General Conditions - Higher Complexity - Services, is amended as follows:

Delete:

"Canada", "Crown", "Her Majesty" or "the Government"

means Her Majesty the Queen in right of Canada as represented by the Minister of Public Works

and Government Services and any other person duly authorized to act on behalf of that minister or, if applicable, an appropriate minister to whom the Minister of Public Works and Government Services has delegated his or her powers, duties or functions and any other person duly authorized to act on behalf of that minister;

Insert:

"Canada", "Crown", "Her Majesty" or "the Government"

means Her Majesty the Queen in right of Canada as represented by the Minister of Indigenous Services and any other person duly authorized to act on behalf of that minister or, if applicable, an appropriate minister to whom the Minister of Indigenous Services has delegated his or her powers, duties or functions and any other person duly authorized to act on behalf of that minister;

3.1.2 Article 8 of 2035 (2018-06-21), General Conditions - Higher Complexity - Services, is amended as follows:

Delete Article 8 in its entirety and replace it with the following:

8. Replacement of specific resources

(a) Once a qualified resource has been accepted by Canada as a Contract Nurse to perform Work in accordance with article 2.3 of the Contract, the Contractor must make that resource available to complete the specified Work for the entire period as specified in the authorized Task Authorization, unless:

- (1) the TAA agrees, at its sole discretion, that the named resource may be replaced (in which case, the Contract Nurse must be replaced in accordance with section (b) below) or specifies that the services provided by the Contract Nurse are no longer required; or
- (2) the Work specified in the Task Authorization is terminated, by Canada, in accordance with the Contract; or
- (3) The Contract Nurse is unable to due to death, sickness to the Contract Nurse or their immediate family member only, resignation, dismissal for cause, in which case the Contract Nurse must be replaced in accordance with section (b) below.

(b) Procedures for the Replacement of a Contract Nurse

- i) The Contractor must provide the TAA and the Technical Authority with a minimum of three working days' notice of its intent to replace any Contract Nurse performing Work, or that has been accepted by Canada to perform Work under an authorized Task Authorization, pursuant to the Contract unless it is unable to do so for one of the reasons stated in section (a), (3) above, in which case the Contractor must provide the maximum notice possible.
- ii) As part of the notice, the Contractor must provide a replacement plan to the TAA and the Technical Authority for approval. The Contractor's replacement plan must contain:
 - a. The name of the proposed replacement Contract Nurse and information demonstrating that the qualifications and experience of the proposed replacement Contract Nurse meets all of the personnel requirements specified Annex A of the Contract;

-
- b. proof that the proposed replacement Contract Nurse has the required security clearance granted by Canada;
 - c. a travel itinerary demonstrating that the replacement Contract Nurse will start Work prior to departure of the original Contract Nurse, or if the Contractor is replacing the Contract Nurse due to one of the reasons stated in section, (a), (3) above, a travel itinerary demonstrating that the replacement Contract Nurse will start Work within 24 hours (or within any longer time period if specified in writing by the TAA); and
 - d. a description of the process that the Contractor will use to familiarize the proposed replacement Contract Nurse with respect to the Work being carried out by the incumbent Contract Nurse to minimize any learning curve.
- iii) The Contractor will not be reimbursed for any costs associated with replacement of a Contract Nurse, including any costs associated with travel.

(c) Removal of a Contract Nurse at the Sole Discretion of Canada

- i) In the event that the Technical Authority, in consultation with ISC nursing staff, identifies concerns that require the removal of a Contract Nurse, as detailed in article 8 of Annex A, then the Technical Authority, or their delegate, will provide the Contractor written notice of such indicating the date by which the services of the Contract Nurse must be withdrawn and specifying the reason.
- i) Based on such notice, the Contractor must cease providing the services of that Contract Nurse on the date specified.
- ii) The Contractor must provide a competent replacement Contract Nurse within 24 hours (or within any longer time period if specified in writing by the TAA) that meets all of the personnel requirements specified Annex A of the Contract. The requirement for the Contractor to provide any replacement Contract Nurse when requested by Canada will not result in any additional costs to Canada.

- (d)** The Contractor must not, in any event, allow performance of the Work by unauthorized replacement resources. The Contracting Authority may order that a replacement stop performing the Work. In such a case, the Contractor must immediately comply with the order and secure a further replacement in accordance with section (b) above. The fact that the Contracting Authority does not order that a replacement stop performing the Work does not relieve the Contractor from its responsibility to meet the requirements of the Contract.

3.1.3 Article 22, subsection 5., of 2035 (2018-06-21), General Conditions - Higher Complexity - Services, is amended as follows:

Delete:

Wherever possible, the Contractor must mark or identify any proprietary information delivered to Canada under the Contract as "Property of (Contractor's name), permitted Government uses defined under Public Works and Government Services (PWGSC) Contract No. (fill in Contract Number)". Canada will not be liable for any unauthorized use or disclosure of information that could have been so marked or identified and was not.

Insert:

Wherever possible, the Contractor must mark or identify any proprietary information delivered to Canada under the Contract as "Property of (Contractor's name), permitted Government uses defined under Department of Indigenous Services Contract No. (fill in Contract Number)". Canada will not be liable for any unauthorized use or disclosure of information that could have been so marked or identified and was not.

- 3.1.4** Article 24 of 2035 (2018-06-21), General Conditions - Higher Complexity - Services, is amended as follows:

Delete Article 24 in its entirety and replace it with the following:

24. Liability

1. The Contractor must indemnify, save harmless and, if requested by the Attorney General of Canada, defend Her Majesty the Queen in Right of Canada, any minister and their servants and agents from and against all claims, demands, liabilities, losses, damages, costs, expenses, legal fees and disbursements, actions and other proceedings, made, sustained, brought, prosecuted, threatened to be brought or prosecuted, in any manner based upon, occasioned by or attributable to any injury to or death of a person or damage to or loss of property arising from or related to any wilful or negligent act, omission or delay on the part of the Contractor, the Contractor's servants, agents or subcontractors in performing the Work or as a result of or in any way related to the Work.
2. The Contractor's liability to indemnify or reimburse Her Majesty the Queen in Right of Canada under the Contract must not affect or prejudice Her Majesty the Queen in Right of Canada from exercising any other rights under law.
3. The Contractor agrees that Her Majesty the Queen in Right of Canada is not and will not be liable for, and agrees to protect and indemnify Her Majesty the Queen in Right of Canada with respect to, any injury or damage (including death) to the Contractor or to the person of any officer, servant or agent of the Contractor or for the loss of or damage to the property of the Contractor or its officers, servants or agents in any manner based upon, occasioned by or in any way related to the performance of the Work unless the injury, loss or damage is caused by the negligence of an officer, servant or agent of Her Majesty the Queen in Right of Canada while acting within the scope of his or her employment.

- 3.1.5** Article 30 of 2035 (2018-06-21), General Conditions - Higher Complexity - Services, is amended as follows:

Add:

5. Subsection 2 does not apply to Task Authorizations which are terminated for convenience. Canada will compensate the Contractor for TAs that have been terminated for convenience in accordance with article 3 of Annex B.

3.2 Supplemental General Conditions

The supplemental general conditions 4008 (2008-12-12), Personal Information, apply to and form part of the Contract.

3.3 Foreign Nationals

SACC Manual clause A2000C (2006-06-16), Foreign Nationals (Canadian Contractor)

OR

SACC Manual clause A2001C (2006-06-16), Foreign Nationals (Foreign Contractor)

4 Term of Contract

The Work must be completed in accordance with the Call-up against the Standing Offer.

5 Authorities

5.1 Contracting Authority

The Contracting Authority for the Call-up is: [To be provided at the time of Call-up award]

Name: _____
Title: _____
Directorate: _____
Division: _____
Address: _____
Telephone: _____
Facsimile: _____
E-mail address: _____

The Contracting Authority is responsible for the management of the Call-up and any changes to the Call-up must be authorized in writing by the Contracting Authority. The Contractor must not perform work in excess of or outside the scope of the Call-up based on verbal or written requests or instructions from anybody other than the Contracting Authority.

5.2 Technical Authority [To be provided at the time of Call-up award]

The Technical Authority for the Call-up is:

Name: _____
Title: _____
Organization: _____
Address: _____
Telephone: _____
Facsimile: _____
E-mail address: _____

The Technical Authority is the representative of the department or agency for whom the Work is being carried out under the Call-up and is responsible for all matters concerning the technical content of the Work under the Call-up. Technical matters may be discussed with the Technical Authority; however, the Technical Authority has no authority to authorize changes to the scope of the Work. Changes to the scope of the Work can only be made through a Call-up amendment issued by the Contracting Authority.

5.3 Task Authorization Authorities (TAAs)

The TAAs (identified by position) for the Contract are:

Solicitation No. - N° de l'invitation
5A090-192272/A
Client Ref. No. - N° de réf. du client
5A090-192272

Amd. No. - N° de la modif.
File No. - N° du dossier
005xf. 5A090-192272

Buyer ID - Id de l'acheteur
005xf
CCC No./N° CCC - FMS No./N° VME

The Manager (or acting Manager)

Nurse Relief Coordination Unit
First Nations and Inuit Health Branch
Indigenous Services Canada

And

The Associate Manager (or acting Associated Manager)

Nurse Relief Coordination Unit
First Nations and Inuit Health Branch
Indigenous Services Canada

And

The Supervisor (or acting Supervisor)

Nurse Relief Coordination Unit
First Nations and Inuit Health Branch
Indigenous Services Canada

The Task Authorization Authorities are responsible for the issuance and management of all TA Group Invitations under this Contract. Only one TA Authority is required to issue any individual TA provided that the total TA value does not exceed the financial limitation specified in article 2.3.5 of the Contract. However, the Technical Authority is responsible for all other matters related to the TAs, including vendor performance and acceptance of Work.

5.4 Contractor's Representative [To be included at the time of Call-up award]

6 Payment

6.1 Basis of Payment – Limitation of Expenditure - Task Authorizations

- 6.1.1** The Contractor will be reimbursed for the costs reasonably and properly incurred in the performance of the Work specified in the authorized Task Authorization (TA), as determined in accordance with the Basis of Payment in Annex B, to the limitation of expenditure specified in the authorized TA.
- 6.1.2** Canada's liability to the Contractor under the authorized TA must not exceed the limitation of expenditure specified in the authorized TA. Customs duties and applicable taxes are included.
- 6.1.3** No increase in the liability of Canada or in the price of the Work specified in the authorized TA resulting from any design changes, modifications or interpretations of the Work will be authorized or paid to the Contractor unless these design changes, modifications or interpretations have been authorized, in writing, by the Contracting Authority before their incorporation into the Work.

6.2 Limitation of Expenditure - Cumulative Total of all Task Authorizations

- 6.2.1** Canada's total liability to the Contractor under the Contract for all authorized Task Authorizations (TAs), inclusive of any revisions, must not exceed the sum of \$_____. Customs duties are included and Applicable Taxes are extra.
- 6.2.2** No increase in the total liability of Canada will be authorized or paid to the Contractor unless an increase has been approved, in writing, by the Contracting Authority.
- 6.2.3** The Contractor must notify the Contracting Authority in writing as to the adequacy of this sum:
- a. when it is 75 percent committed, or
 - b. 4 months before the contract expiry date, or
 - c. as soon as the Contractor considers that the sum is inadequate for the completion of the Work required in all authorized TAs, inclusive of any revisions, whichever comes first.
- 6.2.4** If the notification is for inadequate contract funds, the Contractor must provide to the Contracting Authority, a written estimate for the additional funds required. Provision of such information by the Contractor does not increase Canada's liability.

6.3 Pre-Authorized Travel and Living Expenses

Canada will reimburse the Contractor for its pre-authorized travel and living expenses reasonably and properly incurred in the performance of the Work and in accordance with Annex B, Basis of Payment.

All payments are subject to government audit.

6.4 Method of Payment

One of the following methods will form part of the authorized TA:

A) Single Payment

For Work that does not exceed 30 calendar days, Canada will pay the Contractor upon completion and delivery of the Work in accordance with the payment provisions of the Contract if:

- a. an accurate and complete invoice and any other documents required by the Contract have been submitted in accordance with the invoicing instructions provided in the Contract;
- b. all such documents have been verified by Canada;
- c. the Work delivered has been accepted by Canada.

B) Monthly Payment

For Work that exceeds 30 calendar days, Canada will pay the Contractor on a monthly basis for work performed during the month covered by the invoice in accordance with the payment provisions of the Contract if:

- a. an accurate and complete invoice and any other documents required by the Contract have been submitted in accordance with the invoicing instructions provided in the Contract;
- b. all such documents have been verified by Canada;
- c. the Work performed has been accepted by Canada.

6.5 SACC Manual Clauses

SACC Manual clause A9117C (2007-11-30), T1204 - Direct Request by Customer Department
SACC Manual clause C0305C (2014-06-26), Cost Submission Limitation of Expenditure or Ceiling Price
SACC Manual clause C2000C (2007-11-30), Taxes – Foreign –based Contractor applies *[if applicable]*
SACC Manual clause C0705C (2010-01-11), Discretionary Audit

6.6 Electronic Payment of Invoices – Call-up

The Contractor accepts to be paid using any of the following Electronic Payment Instrument(s):

- a. Direct Deposit (Domestic and International);
[This clause will be removed from any resulting contract if not applicable]

7 Invoicing Instructions

7.1 The Contractor must submit invoices in accordance with the section entitled "Invoice Submission" of the general conditions. Invoices cannot be submitted until all Work identified in the invoice is completed.

The Contractor is requested to use Appendix G to Annex A, Invoice Template, when submitting invoices.

Each invoice must be supported by:

- a. a copy of time sheets including call-back forms and overtime authorization forms (if applicable) and any other documents as specified in the Contract, to support the time claimed; and,
- b. a copy of the invoices, receipts, and vouchers for all travel and living expenses claimed.

7.2 Invoices must be distributed as follows:

- a. One electronic copy must be forwarded to the following generic address: P2P.West.Invoices-Factures.Ouest@hc-sc.gc.ca;
- b. One electronic copy must be forwarded to the Technical Authority identified under the section entitled "Authorities" of the Contract for certification and payment at the following generic email address: agencynurseservices_servicedinfirmieresdagesces@hc-sc.gc.ca; and
- c. One electronic copy must be forwarded to the Contracting Authority identified under the section entitled "Authorities" of the Contract.

7.3 If Canada disputes an item on an invoice for any reason, the invoice will be returned to the Contractor. The invoice will only be considered to have been received for the purposes of Section 17 of General Conditions 2035 (interest on Overdue Accounts) once the item in dispute is resolved.

8 Insurance Requirements

The Contractor must comply with the insurance requirements specified in Annex D. The Contractor must maintain the required insurance coverage for the duration of the Contract. Compliance with the insurance requirements does not release the Contractor from or reduce its liability under the Contract.

The Contractor is responsible for deciding if additional insurance coverage is necessary to fulfill its obligation under the Contract and to ensure compliance with any applicable law. Any additional insurance coverage is at the Contractor's expense, and for its own benefit and protection.

The Contractor must forward to the Contracting Authority within 10 working days after the date of award of the Contract, a Certificate of Insurance evidencing the insurance coverage and confirming that the insurance policy complying with the requirements is in force. For Canadian-based Contractors, coverage must be placed with an Insurer licensed to carry out business in Canada, however, for Foreign-based Contractors, coverage must be placed with an Insurer with an A.M. Best Rating no less than "A-". The Contractor must, if requested by the Contracting Authority, forward to Canada a certified true copy of all applicable insurance policies.

9 Safeguarding Electronic Media

- (a) Before using them on Canada's equipment or sending them to Canada, the Contractor must use a regularly updated product to scan electronically all electronic media used to perform the Work for computer viruses and other coding intended to cause malfunctions. The Contractor must notify Canada if any electronic media used for the Work are found to contain computer viruses or other coding intended to cause malfunctions.
- (b) If magnetically recorded information or documentation is damaged or lost while in the Contractor's care or at any time before it is delivered to Canada in accordance with the Contract, including accidental erasure, the Contractor must immediately replace it at its own expense.

10 Representations and Warranties

The Contractor made statements regarding its own and its proposed resources' experience and expertise in its offer that resulted in the award of the Contract and the issuance of TAs. The Contractor represents and warrants that all those statements are true and acknowledges that Canada relied on those statements in awarding the Contract and adding Work to it through TAs. The Contractor also represents and warrants that it has, and all its resources and subcontractors that perform the Work have, and at all times during the

Contract Period they will have, the skills, qualifications, expertise and experience necessary to perform and manage the Work in accordance with the Contract, and that the Contractor (and any resources or subcontractors it uses) has previously performed similar services for other customers.

11 Identification Protocol Responsibilities

The Contractor will be responsible for ensuring that each of its agents, representatives or subcontractors (hereinafter referred to as Contractor Representatives) complies with the following self-identification requirements:

- (a) Contractor Representatives who attend a Government of Canada meeting (whether internal or external to Canada's offices) must identify as being a Contractor Representative. Contractor Representatives who attend a Government of Canada meeting (whether internal or external to Canada's offices) must also identify if an individual is not a permanent employee of the Contractor prior to the commencement of the meeting, to ensure that each meeting participant is aware of the fact that the individual is not a Contractor permanent employee.
- (b) If a Contractor Representative requires the use of the Government of Canada's e-mail system in the performance of the Work, then the individual must clearly identify him or herself as an agent or subcontractor of the Contractor in all electronic mail in the signature block as well as under "Properties." This identification protocol must also be used in all other correspondence, communication, and documentation.
- (c) If Canada determines that the Contractor is in breach of any obligation stated in this article, upon written notice from Canada the Contractor must submit a written action plan describing measures it will implement or actions it will undertake to eliminate the recurrence of the problem. If a written action plan is requested by Canada the Contractor must, within ten working days (or a longer period as indicated by the Contracting Authority), deliver the action plan to the Technical Authority and the Contracting Authority for review and approval. Once the action plan has been approved by both the Technical Authority and the Contracting Authority, the Contractor will have 40 working days to rectify the underlying problem. The Contractor must prepare and implement the action plan at its own expense.
- (d) In addition to any other rights it has under the Contract, Canada may terminate the Contract for default if the corrective measures required of the Contractor described above are not met.

12 Reorganization of Client

The "Client" for this Contract is the Department of Indigenous Services Canada. The Contractor's obligation to perform the Work will not be affected by (and no additional fees will be payable as a result of) the renaming, reorganization, reconfiguration, or restructuring of any Client (Identified User). The reorganization, reconfiguration and restructuring of the Client includes the privatization of the Client, its merger with another entity, or its dissolution, where that dissolution is followed by the creation of another entity or entities with mandates similar to the original Client. In connection with any form of reorganization, Canada may designate another department or government body as the Contracting Authority or Technical Authority, as required to reflect the new roles and responsibilities associated with the reorganization.

13 Requirement for Training and Familiarization

Any training required by personnel to perform specific assignments will be at the Contractor's own time and expense. Canada will not provide technology training. Canada will, wherever possible, provide standards, policies, guidelines and appropriate documentation to describe how the application systems are designed and configured, as well as other assistance needed to help the Contractor's personnel to work on application systems.

Solicitation No. - N° de l'invitation
5A090-192272/A
Client Ref. No. - N° de réf. du client
5A090-192272

Amd. No. - N° de la modif.
File No. - N° du dossier
005xf. 5A090-192272

Buyer ID - Id de l'acheteur
005xf
CCC No./N° CCC - FMS No./N° VME

14 Government Site Regulations

The Contractor must comply with all regulations, instructions and directives in force on the site where the Work is performed.

15 Proactive Disclosure of Contracts with Former Public Servants [If Applicable]

By providing information on its status, with respect to being a former public servant in receipt of a [Public Service Superannuation Act](#) (PSSA) pension, the Contractor has agreed that this information will be reported on departmental websites as part of the published proactive disclosure reports, in accordance with [Contracting Policy Notice: 2012-2](#) of the Treasury Board Secretariat of Canada.

Solicitation No. - N° de l'invitation
5A090-192272/A
Client Ref. No. - N° de réf. du client
5A090-192272

Amd. No. - N° de la modif.
File No. - N° du dossier
005xf. 5A090-192272

Buyer ID - Id de l'acheteur
005xf
CCC No./N° CCC - FMS No./N° VME

ANNEX A

STATEMENT OF WORK

See Attached

ANNEX A

STATEMENT OF WORK - ALBERTA

TABLE OF CONTENTS

1. Purpose.....	Page 2
2. Objective.....	Page 2
3. Background Information.....	Page 2
4. Scope of Work.....	Page 2
5. Offeror Responsibilities.....	Page 3
6. Requirements of Contract Nurses.....	Page 5
7. Location of Work.....	Page 7
8. Offeror's Contract Nurse Performance and Conduct of Work.....	Page 7
9. Use of Government Property	Page 8
10. Use of Government Telecommunications.....	Page 8
11. Glossary of Terminology.....	Page 8
12. Glossary of Acronyms.....	Page 10
13. Relevant Links.....	Page 11

Appendices to Annex A:

Appendix A:	Map of the Region
Appendix B:	Contract Nurse – Performance and Conduct of Work Report
Appendix C:	Time Sheet Template
Appendix D:	Overtime Authorization Form
Appendix E:	Locations of Work
Appendix F:	Contract Nurse Duties
Appendix G:	Invoice Template
Appendix H:	Call-back Form
Appendix I:	Contract Nurse Scoring Rubric
Appendix J:	Contract Nurse Consent to Release Form

1. PURPOSE

Indigenous Services Canada (ISC) has a requirement for an Offeror(s) to provide temporary nursing services in the Alberta Region through a Standing Offer(s) (SO) to supplement the services being provided by a primary contractor and to supplement ISC's workforce in delivering primary and public health nursing services.

2. OBJECTIVE

The objective of the SO is to ensure that ISC obtains the required number of qualified Contract Nurses (Registered Nurses or Nurse Practitioners) needed to supplement its existing workforce in delivering primary and public health nursing services to Remote, Isolated and Semi-Isolated First Nations (FN) communities in Alberta (AB) (see Appendices A & F). In addition, situations may arise where the services provided by the Offeror will be required as part of a surge capacity response to provide nursing services to support "regional health authorities" (federal, provincial, territorial and/or Indigenous) in urgent and critical situations, of a temporary nature.

3. BACKGROUND INFORMATION

ISC currently funds and/or delivers primary care services, accessible on a twenty-four hours a day, seven days a week basis in over 79 health facilities serving 111,000 FN clients in Remote, Isolated and Semi-Isolated FN communities, where access to provincial services is limited or non-existent. As of January 2019, this care is provided by approximately 225 full time equivalent positions and delivered by approximately 350 First Nations and Inuit Health Branch-employed (FNIHB) nursing personnel.

Primary care is considered a mandatory or "essential" service under ISC's program mandate, as it has a direct impact on the health and safety of individuals and the population. In these communities, nurses working out of Nursing Stations or other health facilities are often the only health service providers. Nurses work in pairs or small groups, often with little to no support from other health care professionals, providing services to respond to urgent community health care needs and medical emergencies whenever they arise.

ISC employs Registered Nurses (RN) and Nurse Practitioners (NP) to provide the health services in 21 FN communities in Manitoba (MB), 24 FN communities in Ontario (ON), 2 FN communities in Quebec (QC), 4 FN communities in AB, plus 2 hospitals in MB. ISC currently has contracts with nursing agencies to provide Contract Nurses on a temporary basis to backfill for vacant positions, vacation and sick leave.

4. SCOPE OF WORK

Nursing services provided by the Contractor through its Contract Nurses are required on a twenty-four hours a day, seven days a week basis and will encompass, but not be limited to, direct patient care and consultation, including the conduct of programs designed to promote health, and the provision of advice.

The Contractor should maintain a roster of Contract Nurses who are prepared to work in all the Locations of Work (see Appendix E) in the Alberta Region.

ISC reserves the right to request provision of a Contract Nurse of a specific sex in cases where it is warranted to do so based on a specific clinical requirement.

5. CONTRACTOR RESPONSIBILITIES

The Contractor must:

- a) provide the services of Contract Nurses on an "as and when requested" basis to supplement services obtained through ISC's primary nursing services contracts for the Alberta Region;
- b) provide proof of renewed certifications, licensure, and insurance for Contract Nurses (see Section 6), as is required to provide nursing services, in accordance with the applicable provincial regulatory and professional body. Proof must be delivered to the Technical Authority prior to the expiration date of any certification, licensure, or insurance;
- c) provide contact information for a primary coordinator. The primary coordinator must handle the administration of Nursing Services requests received from the Task Authorization Authorities (TAA), which involves timely delivery of Work and all communications concerning the Work. In the event that the primary coordinator is absent, or unavailable, the Contractor must provide contact information for an alternate coordinator to fill the role during the primary coordinator's absence;
- d) provide the Technical Authority with a twenty-four hours a day, seven days a week emergency telephone number, SMS (text) number and email address. The Offeror's primary coordinator, backup coordinator, or their delegate will be responsible for immediately responding to the emergency communications on a twenty-four hours a day, seven days a week basis;
- e) without delay, advise the Nursing Station location, (Zone) Nurse Manager, as well as Nurse Relief Coordination Unit (NRCU) of any travel delay(s) of a Contract Nurse assigned by a TA to that Nursing Station location;
- f) in the event of an investigation of nursing practice or conduct involving a Contractor's Contract Nurse, participate and aid in the investigative process including but not limited to, speaking with the Technical Authority and the ISC investigators, submitting written statements and appearing at any reviews. The cooperative participation of the Contractor and its Contract Nurse(s) will be at no cost to ISC;
- g) ensure that its Contract Nurses maintain and develop their knowledge, assessment skills, technical skills and professional performance standards as related to any new legislation, use of Electronic Medical Record systems, treatment protocols and practices, regulatory bodies requirements, and technologies or equipment that impact the delivery of health services in the Locations of Work. The Contractor must stay abreast of any provincial legislative changes that may result in changes to clinical practice, and as required, ensure its Contract Nurses develop and maintain competency as per changes to clinical practice;
- h) ensure that new or revised ISC policies and procedures, as provided or directed by the Technical Authority, are adopted in the delivery of the Work;
- i) validate that its Contract Nurses are qualified in accordance with the requirements stipulated in section 6 below, deliver care in accordance with the First Nations and Inuit Health Clinical Practice Guidelines for Nurses in Primary Care, and meet the requirements of the Call-up prior to the Contract Nurse being proposed for Work under a Task Authorization;
- j) provide Contract Nursing services, when required, throughout Devolution of a community while the transfer of the Nursing Station and nursing services occurs from Indigenous Services Canada to the

community; and,

k) ensure that its Contract Nurses:

- i.** are fit-tested for N-95 masks every two years or sooner, if a change in physiognomy occurs that may affect efficacy of determined size to wear;
- ii.** have the physical and mental capacity to perform the duties (as per Appendix F) required for the delivery of temporary nursing services to ISC;
- iii.** have the knowledge, training, experience and skill set to competently perform Work as per the Scope of Practice of the applicable provincial regulatory and professional body and the First Nations and Inuit Health Clinical Practice Guidelines for Nurses in Primary Care.
- iv.** conduct Work in a manner that respects Indigenous culture and safety;
- v.** provide nursing services and health guidance to individuals, families and groups in the Location of Work. The Contract Nurse's Work is directed toward the prevention of disease and the promotion and maintenance of health. Contract Nurses may also be involved in the delivery of primary care and emergency services (potentially participating in medevacs and medical evacuations) of a mental health, medical, obstetrical or trauma related nature. Based on operational requirements, Contract Nurses may also be required to assist with administrative duties associated with the daily operations at the Location of Work;

See Appendix F for the duties of the Contract Nurses required by ISC for this SO.

- vi.** comply with the established schedule for the Nursing Station which may be 8 hour or 12 hour shifts over a twenty-four hours a day, seven days a week basis;
- vii.** remain accessible by telephone or text while performing Work under a Task Authorization to be informed of urgent medical emergencies or changes to the Nursing Station schedule;
- viii.** be readily available (within 15 minutes) to return to the Location of Work while on Stand-by, and/or assigned by a TA to a Location of Work where nursing services are provided on a twenty-four hours a day, seven days a week basis;
- ix.** create, collect, receive, manage, access, use, retain and dispose of personal information only for the purposes relating to their duties under the Contract, and do so in accordance with the terms and conditions of the Contract and in accordance with the Privacy Act and Treasury Board Secretariat (TBS) privacy and security policies and directives;
- x.** in the event of an investigation of nursing practice or conduct, participate in the investigative process (as directed by the Technical Authority) including but not limited to, speaking with the Technical Authority and the FNIHB investigators, submitting written statements, and appearing at reviews;
- xi.** be willing and able to travel in small aircraft, off road vehicles, snowmobiles, and other similar modes of transportation including small watercraft, in varied weather conditions to communities in Remote, Isolated and Semi-Isolated areas;
- xii.** use communication devices (e.g. mobile phones, text pagers and other wireless devices) in an appropriate manner at all times while performing Work;
- xiii.** do not perform the duties of the Nurse in Charge (NIC), nor act as ISC's delegate; and,

xiv. perform additional Contract Nurse responsibilities including, but not limited to:

- reviewing the required Immunization schedules in advance of arriving at the Location of Work as per the TA;
- operating a Government of Canada owned vehicle to conduct Work, which may include travel to and from the Location of Work (as specified in the TA and authorized by the Technical Authority or their delegate); and,
- participating in Nursing Station programs (e.g. immunization, pre-natal, well-baby) as directed by the NIC. The participation of the Contract Nurse could involve planning, implementing, administering and carrying out activities related to these programs.

6. REQUIREMENTS OF CONTRACT NURSES

a) Requirements at Task Authorization stage

The specific Contract Nurse requirements including both mandatory and asset criteria, will be identified using a completed Contract Nurse (CN) Scoring Rubric (Appendix I) at the time of Task Authorization issuance and will be assessed, as presented by the Contractor, at the Task Authorization stage.

To be eligible for placement in FN communities, all Contract Nurses must meet the following minimum education, registration, licensure and insurance requirements for the Alberta Region:

Alberta Region	Registration / Licensing	Insurance	Education
Registered Nurses	Valid license with College and Association of Registered Nurses of Alberta (CARNA), with no restrictions.	Malpractice insurance (Refer to Annex D) through CARNA or Canadian Nurses Protective Society.	Bachelor's degree in nursing, or diploma in nursing from a recognized university or college.
Nurse Practitioners			Masters Degree in Advanced Practice Nursing – Family All Ages, or equivalent as determined by the College and Association of Registered Nurses of Alberta (CARNA).

b) Certification Requirements at Task Authorization stage

At the time of Task Authorization issuance, all proposed Contract Nurses must have valid certification (or an equivalent approved by the Technical Authority) in the following:

- Cardio Pulmonary Resuscitation (CPR) / Basic Life Support (BLS) for healthcare providers issued by the Heart and Stroke Foundation of Canada or the American Heart Association;

-
- Pediatric Advanced Life Support (PALS) issued by the Heart and Stroke Foundation of Canada or the American Heart Association;
 - Advanced Cardiovascular Life Support (ACLS) issued by the Heart and Stroke Foundation of Canada or the American Heart Association;
 - International Trauma Life Support (ITLS);
 - Workplace Hazardous Materials Information System (WHMIS);
 - Immunization:
 - Education Program for Immunization Competencies (EPIC) course - developed by the Canadian Pediatric Society.
 - Controlled Substances:
 - University of Ottawa Distance Education Portal - FNIHB Nursing Education Module on Controlled Substances in First Nations Health Facilities.
 - Transportation of Dangerous Goods (TDG); and
 - Privacy Basics and Privacy Impact Assessments – online course (publichealth.gc.ca/training)

Contract Nurses who do not have the valid certifications/requirements stated above must not be proposed for nursing services as per the CN Scoring Rubric (Appendix I).

The Contractor must ensure that all requirements of its Contract Nurses as per the CN Scoring Rubric (Appendix I) are met and maintained throughout the duration of any Task Authorization.

OPTIONAL CERTIFICATIONS AND ASSET CRITERIA:

Based on operational needs, Canada may request additional asset criteria or certifications that will be identified in the CN Scoring Rubric (Appendix I), as a requirement of a Task Authorization. These may include, but are not limited to:

- Offeror confirmation of successful completion of FNIHB-specific Accuro Electronic Medical Records (EMR) training
- Work experience above the mandatory minimum
- Public Health or Mental Health experience

c) Language Requirements

All Contract Nurses working in the AB Region must be fluent in English (both written and spoken).

d) Work Experience

Each Contract Nurse must meet one of the following criteria:

- 1 year, defined as 1,500 Regular Working Hours of experience, in the past five years from the date of TA issuance, working in Remote, Isolated and/or Semi-Isolated communities;

Or

- 2 years, defined as 3,000 Regular Working Hours of experience, in the past five years from the date of TA issuance, performing nursing services in primary care and advanced clinical assessments. This experience must be obtained in the emergency, intensive care unit or in community settings such as health care centres (e.g. urgent care centre, quick care centre).

e) Driver's License

All Contract Nurses must hold an unrestricted valid Alberta Class "5" Driver's License, or an equivalent approved by the province of Alberta.

f) Security Clearance

All Contract Nurses must obtain and keep current a Reliability Status level security clearance.

7. LOCATION OF WORK

The Location(s) of Work will be a Nursing Station or Health Centre (with Treatment) in a FN community; however nursing services may occur within other areas outside of a Nursing Station or Health Centre within the FN community, based on operational requirements.

While the Location of Work will be identified at the time of the initial Task Authorization, the Technical Authority or their delegate(s) reserves the right to change the location of the delivery of services at any point prior to, or during the Task Authorization due to operational requirements. In such circumstances, the Technical Authority or their delegate(s) will endeavor to provide the Contractor with as much notice as possible of the change in the Location of Work. Should a Contract Nurse refuse to change location, the Contract Nurse will be removed from the Location of Work and the Contractor must provide a replacement of personnel in accordance with article 3.1.1 of the Contract.

8. CONTRACT NURSE PERFORMANCE AND CONDUCT OF WORK

Concerns related to Contract Nurse performance and/or conduct may be identified at a number of junctures, and as such the process to resolve issues is situation dependent. In the event that concerns are identified while the Contract Nurse is onsite, it is expected that the Regional Manager, Nurse In Charge or the Nursing Supervisor, or their delegate, will address the concerns directly with the Contract Nurse with notification to the Technical Authority following the event. Concerns identified by ISC or its delegates following the departure of the Contract Nurse (ex. chart audit, practice issue, conduct issue, etc.) from the community will also be addressed directly to the Contractor by the Technical Authority or their delegate.

The Technical Authority or their delegate will advise the Contractor of any professional practice or conduct issues identified with the Contract Nurses delivering services, and will provide a completed Contract Nurse – Performance and Conduct of Work Report (see Appendix B) which outlines the details regarding the practice or conduct issue. The Contractor must immediately respond to and address the concerns, including reporting to Regulatory Authorities as appropriate.

Should the severity of the issue(s) require the removal of the Contract Nurse, the Technical Authority or their delegate will immediately notify the Contractor. In the event the incident occurs outside of regular business hours, the Regional Manager, Nurse In Charge or Nursing Supervisor will be delegated the authority to contact the Contractor directly. The Contractor's replacement responsibilities, as detailed in article 3.1.1., 8 of the Contract, will apply in such situations. The removed Contract Nurse will not be accepted under any future Task Authorizations until the issue is corrected to the satisfaction of ISC.

In order for the Contract Nurse to be accepted under future Task Authorizations, the Contractor must demonstrate, in a written communication to the Technical Authority, that sufficient corrective and/or remedial actions have taken place; in some cases remedial action may need to be made to the

Contractor's internal Contract Nurse screening or validation process. Written notification will be provided by ISC to the Contractor on whether the actions were deemed sufficient and if the Contract Nurse can be used under future Task Authorizations.

ISC reserves the right to refuse a Contract Nurse for future placements should the corrective actions be deemed insufficient. Additionally, ISC reserves the right to refuse a proposed Contract Nurse and/or demand a replacement (at no additional cost to ISC) prior to, and after authorization of a TA, based on any documented record of poor service or unacceptable conduct, including under this or any prior contract, under previous employment with ISC, or due to FN community requests or Band Council Resolutions.

9. USE OF GOVERNMENT PROPERTY

Contract Nurses will be provided with accommodations, at no cost to the Contractor, while performing Work under an approved TA. Excluding exceptional circumstances, Contract Nurses will have private bedrooms. Depending on the residence/accommodations, bathroom facilities will be either private or shared. Common areas will be shared with other nursing staff.

Government Property must be used by the Contract Nurse solely for the purpose of the Task Authorization and will remain the property of Canada. The Contract Nurse must take reasonable and proper care of all Government Property while the same is in, on, or about the premises of ISC or otherwise in its possession or subject to its control. The Contractor is responsible for any loss or damage resulting from the failure of the Contract Nurse to do so except for ordinary wear and tear.

Smoking is not permitted in Nursing Stations or residences supplied under the Contract.

Pets are not permitted in Nursing Stations or residences supplied under the Contract.

The Contractor must ensure that Contract Nurses keep living quarters clean and orderly, both inside and outside the building. The Contractor must notify ISC of any existing damage to accommodations and/or any missing assets upon a Contract Nurse's arrival and report any damage incurred throughout the Contract Nurse's stay.

10. USE OF GOVERNMENT TELECOMMUNICATIONS

Use of Government of Canada telecommunications for personal use is not permitted.

11. GLOSSARY OF TERMINOLOGY

- a) **Call-back:** means when the Contract Nurse is required to return to the Nursing Station or Health Centre (with Treatment) and perform patient care when the Contract Nurse was previously assigned to Stand-by, or in the event additional Contract Nurses are required beyond those that were assigned to Stand-by. (see Appendix H for Call-back Form).
- b) **Call-back Time:** means one continuous period of time commencing with the start time of the initial Call-back and ending either three hours later, or at the time of the conclusion of the initial Call-back or any subsequent Call-back that is initiated prior to the end of the 3 hour period, whichever is later. Any subsequent Call-back(s) initiated within a Call-back Time has the effect of extending the end of the Call-back Time to the time of the conclusion of the subsequent Call-back(s) and does not constitute a separate Call-back Time. If the Call-back Time overlaps with a Contract Nurse's scheduled Regular Working Hours, then the Call-back Time is considered concluded at the time that the Contract Nurse begins its scheduled Regular Working Hours, or three hours after the commencement of the initial Call-back, whichever is later.

- c) **Community Health Services or Nursing Services:** means a scope of practice which includes community health and/or treatment services using a holistic approach. It also includes health promotion (health education and community development strategies), illness and injury prevention and restoration of health in the FN community.
- d) **Contract Nurse (CN):** means the resource provided by the Contractor to deliver temporary nursing services.
- e) **Devolution:** means the transfer, or delegation of authority, of the Nursing Station and nursing services, from Indigenous Services Canada to a community or regional Indigenous authority.
- f) **Health Centre (with Treatment):** means a healthcare facility within which primary care and public health services are delivered on a twenty-four hours a day, five days a week basis . Dormitories are not considered part of a Health Centre with Treatment.
- g) **Isolated Community:** means a Community with scheduled flights, good telephone services, and no year-round road access.
- h) **Location of Work:** means the locations of First Nations health care facilities in the AB Region (see Appendix E). Also, see Appendix A for the Map of the Region.
- i) **Nurse In Charge (NIC):** means the ISC resource, or delegate(s) in situations of surge capacity requirement, who is the Nurse in Charge and provides professional nursing guidance, supervision and assistance in the delivery of health programs, to support the community leaders and health care team in acquiring the knowledge and skills necessary in the delivery of community health and treatment programs. A Contract Nurse must not perform the duties of the NIC.
- j) **Nursing Station:** means a healthcare facility within which primary care and public health services are delivered on a twenty-four hours a day, seven days a week basis. Dormitories are not considered part of a Nursing Station.
- k) **Overtime:** means any Work required to be performed in excess of the Regular Working Hours. No overtime Work is to be performed under the Task Authorization unless authorized in advance and in writing (see Appendix D - Overtime Authorization Form) by either the NIC, Technical Authority, TA Authority, or their delegate(s).
- l) **Regional Manager, Nursing Supervisor:** means an ISC resource who is responsible for providing professional nursing support, guidance and recommendations on policies and practices in the delivery of health programs.
- m) **Regular Working Hours:** means the ISC Nursing Station hours of work between 06:00 AM to 11:00 PM Monday to Sunday (subject to change and can vary based on Location of Work).
- n) **Remote Community:** means a community with no scheduled flights, minimal telephone or radio services, and no road access.
- o) **Semi-Isolated Community:** means a community with scheduled flights, good telephone services, and road access year-round greater than 90 KM to physician services.
- p) **Stand-by:** means any period of time duly authorized by either the NIC, Technical Authority, TA Authority, or their delegate(s), during which the Contract Nurse is required, during off-duty hours, to be available at a known telecommunication number and be readily able to return for duty, without undue delay, if called or contacted or both.

The Contract Nurse may be required to participate in Stand-by for up to 16 hours per day during the week, and up to 24 hours per day during weekends and statutory holidays. Contract Nurses must respond to calls during their period of Stand-by. In all Nursing Stations and Health Centres with Treatment, there are typically 2 nurses on Stand-by. If a Contract Nurse is the second nurse on Stand-by, they will be asked to stay in the community until a replacement arrives, however this is dependent on the Contract Nurse's availability (e.g. pre-planned transportation out of the community when their assignment is complete).

ISC nurses will be given preference over Contract Nurses in selection of hours and division of Stand-by responsibilities

- q) **Statutory Holidays:** means New Year's Day, Good Friday, Easter Monday, Victoria Day, Canada Day, Civic Holiday (Heritage Day), Labour Day, Thanksgiving, Remembrance Day, Christmas Day and Boxing Day.

12. GLOSSARY OF ACROYNMS

- FN** – First Nation(s)
- ISC** – Indigenous Services Canada
- NIC** – Nurse In Charge
- RN** – Registered Nurse
- NP** – Nurse Practitioner
- NRCU** – Nurse Relief Coordination Unit
- SO** – Standing Offer
- TA** – Task Authorization
- TAA** – Task Authorization Authority

13. RELEVANT LINKS

Policy of Privacy and Protection: <https://www.tbs-sct.gc.ca/pol/doc-eng.aspx?id=12510>

Directive on Privacy Practices: <https://www.tbs-sct.gc.ca/pol/doc-eng.aspx?id=18309>

Seven Grandfather Teachings Video:
<https://www.youtube.com/watch?v=z0tYMyVJ27A&feature=youtu.be>

ANNEX A

STATEMENT OF WORK - MANITOBA

TABLE OF CONTENTS

1. Purpose.....	Page 2
2. Objective.....	Page 2
3. Background Information.....	Page 2
4. Scope of Work.....	Page 2
5. Offeror Responsibilities.....	Page 3
6. Requirements of Contract Nurses.....	Page 5
7. Location of Work.....	Page 7
8. Offeror's Contract Nurse Performance and Conduct of Work.....	Page 7
9. Use of Government Property	Page 8
10. Use of Government Telecommunications.....	Page 8
11. Glossary of Terminology.....	Page 8
12. Glossary of Acronyms.....	Page 10
13. Relevant Links.....	Page 10

Appendices to Annex A:

Appendix A:	Map of the Region
Appendix B:	Contract Nurse – Performance and Conduct of Work Report
Appendix C:	Time Sheet Template
Appendix D:	Overtime Authorization Form
Appendix E:	Locations of Work
Appendix F:	Contract Nurse Duties
Appendix G:	Invoice Template
Appendix H:	Call-back Form
Appendix I:	Contract Nurse Scoring Rubric
Appendix J:	Contract Nurse Consent to Release Form

1. PURPOSE

Indigenous Services Canada (ISC) has a requirement for an Offeror(s) to provide temporary nursing services in the Manitoba Region through a Standing Offer(s) (SO) to supplement the services being provided by a primary contractor and to supplement ISC's workforce in delivering primary and public health nursing services.

2. OBJECTIVE

The objective of the SO is to ensure that ISC obtains the required number of qualified Contract Nurses (Registered Nurses or Nurse Practitioners) needed to supplement their existing workforce in delivering primary and public health nursing services to Remote, Isolated and Semi-Isolated First Nations (FN) communities in Manitoba (MB) (see Appendices A & F). In addition, situations may arise where the services provided by the Offeror will be required as part of a surge capacity response to provide nursing services to support "regional health authorities" (federal, provincial, territorial and/or Indigenous) in urgent and critical situations, of a temporary nature.

3. BACKGROUND INFORMATION

ISC currently funds and/or delivers primary care services, accessible on a twenty-four hours a day, seven days a week basis in over 79 health facilities serving 111,000 FN clients in Remote, Isolated and Semi-Isolated FN communities, where access to provincial services is limited or non-existent. As of January 2019, this care is provided by approximately 225 full time equivalent positions and delivered by approximately 350 First Nations and Inuit Health Branch-employed (FNIHB) nursing personnel.

Primary care is considered a mandatory or "essential" service under ISC's program mandate, as it has a direct impact on the health and safety of individuals and the population. In these communities, nurses working out of Nursing Stations or other health facilities are often the only health service providers. Nurses work in pairs or small groups, often with little to no support from other health care professionals, providing services to respond to urgent community health care needs and medical emergencies whenever they arise.

ISC employs Registered Nurses (RN) and Nurse Practitioners (NP) to provide the health services in 21 FN communities in Manitoba (MB), 24 FN communities in Ontario (ON), 2 FN communities in Quebec (QC), 4 FN communities in AB, plus 2 hospitals in MB. ISC currently has contracts with nursing agencies to provide Contract Nurses on a temporary basis to backfill for vacant positions, vacation and sick leave.

In December 2018, ISC began transitioning to the use of an Accuro-based Electronic Medical Records (EMR) system in its Manitoba Nursing Stations. Over time, ISC intends to transition each of the 21 MB stations to the exclusive use of EMR for medical charting.

4. SCOPE OF WORK

Nursing services provided by the Contractor through its Contract Nurses are required on a twenty-four hours a day, seven days a week basis and will encompass, but not be limited to, direct patient care and consultation, including the conduct of programs designed to promote health, and the provision of advice.

The Contractor should maintain a roster of Contract Nurses who are prepared to work in all the Locations of Work (see Appendix E) in the Manitoba Region.

ISC reserves the right to request provision of a Contract Nurse of a specific sex in cases where it is warranted to do so based on a specific clinical requirement.

5. CONTRACTOR RESPONSIBILITIES

The Contractor must:

- a) provide the services of Contract Nurses on an "as and when requested" basis to supplement services obtained through ISC's primary nursing services contracts for the Manitoba Region;
- b) provide proof of renewed certifications, licensure, and insurance for Contract Nurses (see Section 6), as is required to provide nursing services, in accordance with the applicable provincial regulatory and professional body. Proof must be delivered to the Technical Authority prior to the expiration date of any certification, licensure, or insurance;
- c) provide contact information for a primary coordinator. The primary coordinator must handle the administration of Nursing Services requests received from the Task Authorization Authorities (TAA), which involves timely delivery of Work and all communications concerning the Work. In the event that the primary coordinator is absent, or unavailable, the Contractor must provide contact information for an alternate coordinator to fill the role during the primary coordinator's absence;
- d) provide the Technical Authority with a twenty-four hours a day, seven days a week emergency telephone number, SMS (text) number and email address. The Offeror's primary coordinator, backup coordinator, or their delegate will be responsible for immediately responding to the emergency communications on a twenty-four hours a day, seven days a week basis;
- e) without delay, advise the Nursing Station location, (Zone) Nurse Manager, as well as Nurse Relief Coordination Unit (NRCU) of any travel delay(s) of a Contract Nurse, assigned by a TA to that Nursing Station location;
- f) in the event of an investigation of nursing practice or conduct involving a Contractor's Contract Nurse, participate and aid in the investigative process including but not limited to, speaking with the Technical Authority and the ISC investigators, submitting written statements and appearing at any reviews. The cooperative participation of the Contractor and its Contract Nurses will be at no cost to ISC;
- g) ensure that their Contract Nurses maintain and develop their knowledge, assessment skills, technical skills and professional performance standards as related to any new legislation, use of Electronic Medical Record systems, treatment protocols and practices, regulatory bodies requirements, and technologies or equipment that impact the delivery of health services in the Locations of Work. The Contractor must stay abreast of any provincial legislative changes that may result in changes to clinical practice, and as required, ensure their Contract Nurses develop and maintain competency as per changes to clinical practice;
- h) ensure that new or revised ISC policies and procedures, as provided or directed by the Technical Authority, are adopted in the delivery of the Work;
- i) validate that its Contract Nurses are qualified in accordance with the requirements stipulated in section 6 below, deliver care in accordance with the First Nations and Inuit Health Clinical Practice Guidelines for Nurses in Primary Care, and meet the requirements of the Call-up prior to the Contract Nurse being proposed for Work under a Task Authorization;
- j) provide Contract Nursing services, when required, throughout Devolution of a community while the transfer of the Nursing Station and nursing services occurs from Indigenous Services Canada to the

community; and,

k) ensure that its Contract Nurses:

- i. are fit-tested for N-95 masks every two years or sooner, if a change in physiognomy occurs that may affect efficacy of determined size to wear;
- ii. have the physical and mental capacity to perform the duties (as per Appendix F) required for the delivery of temporary nursing services to ISC;
- iii. have the knowledge, training, experience and skill set to competently perform Work as per the Scope of Practice of the applicable provincial regulatory and professional body and the First Nations and Inuit Health Clinical Practice Guidelines for Nurses in Primary Care.→
- iv. conduct Work in a manner that respects Indigenous culture and safety;
- v. are proficient* in the use of the FNIHB-specific Accuro EMR system, when required under a Task Authorization, prior to their arrival to an ISC Nursing Station;

ISC will provide the Contractor access to the most recent FNIHB-specific Accuro EMR user guides, training manual, validation exercises and practice tools.

**Proficient means that the CN is familiar with the system and can use it for its intended purpose with little or no help.*

- vi. provide nursing services and health guidance to individuals, families and groups in the Location of Work. The Contract Nurse's Work is directed toward the prevention of disease and the promotion and maintenance of health. Contract Nurses may also be involved in the delivery of primary care and emergency services (potentially participating in medevacs and medical evacuations) of a mental health, medical, obstetrical or trauma related nature. Based on operational requirements, Contract Nurses may also be required to assist with administrative duties associated with the daily operations at the Location of Work;

See Appendix F for the duties of the Contract Nurses required by ISC for this SO.

- vii. comply with the established schedule for the Nursing Station, which may be 8 hour or 12 hour shifts over a twenty-four hours a day, seven days a week basis;
- viii. remain accessible by telephone or text while performing Work under a Task Authorization to be informed of urgent medical emergencies or changes to the Nursing Station schedule;
- ix. be readily available (within 15 minutes) to return to the Location of Work while on Stand-by, and/or assigned by a TA to a Location of Work where nursing services are provided on a twenty-four hours a day, seven days a week basis;
- x. create, collect, receive, manage, access, use, retain and dispose of personal information only for the purposes relating to their duties under the Contract, and do so in accordance with the terms and conditions of the Contract and in accordance with the Privacy Act and Treasury Board Secretariat (TBS) privacy and security policies and directives;
- xi. in the event of an investigation of nursing practice or conduct, participate in the investigative process (as directed by the Technical Authority) including but not limited to, speaking with the Technical Authority and the FNIHB investigators, submitting written statements, and appearing at reviews;

- xii.** be willing and able to travel in small aircraft, off road vehicles, snowmobiles, and other similar modes of transportation including small watercraft, in varied weather conditions, to communities in Remote, Isolated and Semi-Isolated areas;
- xiii.** use communication devices (e.g. mobile phones, text pagers and other wireless devices) in an appropriate manner at all times while performing Work;
- xiv.** do not perform the duties of the Nurse in Charge (NIC), nor act as ISC's delegate; and,
- xv.** perform additional Contract Nurse responsibilities including, but not limited to:
 - reviewing the required Immunization schedules in advance of arriving on site of the Location of Work as per the TA;
 - operating a Government of Canada owned vehicle to conduct Work, which may include travel to and from the Location of Work (as specified in the TA and authorized by the Technical Authority or their delegate); and,
 - participating in Nursing Station programs (e.g. immunization, pre-natal, well-baby) as directed by the NIC. The participation of the Contract Nurse could involve planning, implementing, administering and carrying out activities related to these programs.

6. REQUIREMENTS OF CONTRACT NURSES

a) Requirements at Task Authorization stage

The specific Contract Nurse requirements including both mandatory and asset criteria, will be identified using a completed Contract Nurse (CN) Scoring Rubric (Appendix I) at the time of Task Authorization issuance and will be assessed, as presented by the Contractor, at the Task Authorization stage.

To be eligible for placement in FN communities, all Contract Nurses must meet the following minimum education, registration, licensure and insurance requirements for the Manitoba Region:

Manitoba Region	Registration / Licensing	Insurance	Education
Registered Nurses	Valid license with College of Registered Nurses of Manitoba (CRNM), with no restrictions.	Malpractice insurance (Refer to Annex D) through CRNM or Canadian Nurses Protective Society.	Bachelor's degree in nursing, or diploma in nursing from a recognized university or college.
Nurse Practitioners			Masters Degree (or has demonstrated substantially equivalent education and experience) and has passed an approved exam demonstrating extended practice competencies.

b) Certification Requirements at Task Authorization stage

At the time of Task Authorization issuance, all proposed Contract Nurses must have valid certification (or an equivalent approved by the Technical Authority) in the following:

- Cardio Pulmonary Resuscitation (CPR) / Basic Life Support (BLS) for healthcare providers issued by the Heart and Stroke Foundation of Canada or the American Heart Association;
- Pediatric Advanced Life Support (PALS) issued by the Heart and Stroke Foundation of Canada or the American Heart Association;
- Advanced Cardiovascular Life Support (ACLS) issued by the Heart and Stroke Foundation of Canada or the American Heart Association;
- International Trauma Life Support (ITLS);
- Workplace Hazardous Materials Information System (WHMIS);
- Immunization:
 - Education Program for Immunization Competencies (EPIC) course - developed by the Canadian Pediatric Society.
- Controlled Substances:
 - University of Ottawa Distance Education Portal - FNIHB Nursing Education Module on Controlled Substances in First Nations Health Facilities.
- Transportation of Dangerous Goods (TDG); and
- Privacy Basics and Privacy Impact Assessments – online course (publichealth.gc.ca/training)

Contract Nurses who do not have the valid certifications/requirements stated above cannot not be proposed for nursing services as per the CN Scoring Rubric (Appendix I).

The Contractor must ensure that all requirements of their Contract Nurses as per the CN Scoring Rubric (Appendix I) are met and maintained throughout the duration of any Task Authorization.

OPTIONAL CERTIFICATIONS AND ASSET CRITERIA

Based on operational needs, Canada may request additional asset criteria or certifications that will be identified in the CN Scoring Rubric (Appendix I), as a requirement of a Task Authorization. These may include, but are not limited to:

- Offeror confirmation of successful completion of FNIHB-specific Accuro Electronic Medical Records (EMR) training
- Work experience above the mandatory minimum
- Public Health or Mental Health experience

c) Language Requirements

All Contract Nurses working in the MB Region must be fluent in English (both written and spoken).

d) Work Experience

Each Contract Nurse must meet one of the following criteria:

- 1 year, defined as 1,500 Regular Working Hours of experience, in the past five years from the date of TA issuance, working in Remote, Isolated and/or Semi-Isolated communities;

Or

- 2 years, defined as 3,000 Regular Working Hours of experience, in the past five years from the date of TA issuance performing nursing services in primary care and advanced clinical assessments. This experience must be obtained in the emergency, intensive care unit or in community settings such as health care centres (e.g. urgent care centre, quick care centre).

e) Driver's License

All Contract Nurses must hold an unrestricted valid Manitoba Class "5" Driver's License, or an equivalent approved by the province of Manitoba.

f) Security Clearance

All Contract Nurses must obtain and keep current a Reliability Status level security clearance.

7. LOCATION OF WORK

The Location(s) of Work will be a Nursing Station or Health Centre (with Treatment) in a FN community; however nursing services may occur within other areas outside of a Nursing Station or Health Centre within the FN community based on operational requirements.

While the Location of Work will be identified at the time of the initial Task Authorization, the Technical Authority or their delegate reserves the right to change the location of the delivery of services at any point prior to, or during the Task Authorization due to operational requirements. In such circumstances, the Technical Authority or their delegate(s) will endeavor to provide the Contractor with as much notice as possible of the change in the Location of Work. Should a Contract Nurse refuse to change location, the Contract Nurse will be removed from the Location of Work and the Contractor must provide a replacement of personnel in accordance with article 3.1.1 of the Contract.

8. CONTRACT NURSE PERFORMANCE AND CONDUCT OF WORK

Concerns related to Contract Nurse performance and/or conduct may be identified at a number of junctures, and as such the process to resolve issues is situation dependent. In the event that concerns are identified while the Contract Nurse is onsite, it will be expected that the Regional Manager, Nurse In Charge or the Nursing Supervisor or their delegate, will address the concerns directly with the Contract Nurse with notification to Technical Authority following the event. Concerns identified by ISC or its delegates following the departure of the Contract Nurse (ex. chart audit, practice issue, conduct issue, etc.) from the community will also be addressed directly to the Contractor by the Technical Authority or their delegate.

The Technical Authority or their delegate will advise the Contractor of any professional practice or conduct issues identified with the Contract Nurses delivering services, and will provide a completed Contract Nurse – Performance and Conduct of Work Report (see Appendix B) which outlines the details regarding the practice or conduct issue. The Contractor must immediately respond to and address the concerns, including reporting to Regulatory Authorities as appropriate.

Should the severity of the issue(s) require the removal of the Contract Nurse, the Technical Authority or their delegate will immediately notify the Contractor. In the event the incident occurs outside of regular business hours, the Regional Manager, Nurse In Charge or Nursing Supervisor will be delegated the authority to contact the Contractor directly. The Contractor's replacement responsibilities, as detailed in

article 3.1.1, 8 of the Contract, will apply in such situations. The removed Contract Nurse will not be accepted under any future Task Authorizations until the issue is corrected to the satisfaction of ISC.

In order for the Contract Nurse to be accepted under future Task Authorizations, the Contractor must demonstrate, in a written communication to the Technical Authority, that sufficient corrective and/or remedial actions have taken place; in some cases remedial action may need to be made to the Contractor's internal Contract Nurse screening or validation process. Written notification will be provided by ISC to the Contractor on whether the actions were deemed sufficient and if the Contract Nurse can be used under future Task Authorizations.

ISC reserves the right to refuse the Contract Nurse for future placements should the corrective actions be deemed insufficient. In addition, ISC reserves the right to refuse a proposed Contract Nurse, and/or demand a replacement (at no additional cost to ISC) prior to, and after authorization of a TA, based on any documented record of poor service or unacceptable conduct, including under this or any prior contract, under previous employment with ISC, or due to FN community requests or Band Council Resolutions.

9. USE OF GOVERNMENT PROPERTY

Contract Nurses will be provided with accommodations, at no cost to the Offeror, while performing Work under an approved TA. Excluding exceptional circumstances, Contract Nurses will have private bedrooms. Depending on the residence/accommodations, bathroom facilities will be either private or shared. Common areas will be shared with other nursing staff.

Government Property must be used by the Contract Nurse solely for the purpose of the Task Authorization and will remain the property of Canada. The Contract Nurse must take reasonable and proper care of all Government Property while the same is in, on, or about the premises of ISC or otherwise in its possession or subject to its control. The Contractor is responsible for any loss or damage resulting from the failure of the Contract Nurse to do so except for ordinary wear and tear.

Smoking is not permitted in Nursing Stations or residences supplied under the Contract.

Pets are not permitted in Nursing Stations or residences supplied under the Contract.

The Contractor must ensure that Contract Nurses keep living quarters clean and orderly, both inside and outside the building. The Contractor must notify ISC of any existing damage to accommodations and/or any missing assets upon a Contract Nurse's arrival and report any damage incurred throughout the Contract Nurse's stay.

10. USE OF GOVERNMENT TELECOMMUNICATIONS

Use of Government of Canada telecommunications for personal use is not permitted.

11. GLOSSARY OF TERMINOLOGY

- a) **Call-back:** means when the Contract Nurse is required to return to the Nursing Station or Health Centre (with Treatment) and perform patient care when the Contract Nurse was previously assigned to Stand-by, or in the event additional Contract Nurses are required beyond those that were assigned to Stand-by. (see Appendix H for Call-back Form).
- b) **Call-back Time:** means one continuous period of time commencing with the start time of the initial Call-back and ending either three hours later, or at the time of the conclusion of the initial Call-back or any subsequent Call-back that is initiated prior to the end of the 3 hour period, whichever is later. Any subsequent Call-back(s) initiated within a Call-back Time has the effect of extending the end of the Call-back Time to the time of the conclusion of the subsequent Call-back(s) and does not

constitute a separate Call-back Time. If the Call-back Time overlaps with a Contract Nurse's scheduled Regular Working Hours, then the Call-back Time is considered concluded at the time that the Contract Nurse begins its scheduled Regular Working Hours, or three hours after the commencement of the initial Call-back, whichever is later.

- c) **Community Health Services or Nursing Services:** means a scope of practice which includes community health and/or treatment services using a holistic approach. It also includes health promotion (health education and community development strategies), illness and injury prevention and restoration of health in the FN community.
- d) **Contract Nurse (CN):** means the resource provided by the Contractor to deliver temporary nursing services.
- e) **Devolution:** means the transfer, or delegation of authority, of the Nursing Station and nursing services, from Indigenous Services Canada to a community or regional Indigenous authority.
- f) **Health Centre (with Treatment):** means a healthcare facility within which primary care and public health services are delivered on a twenty-four hours a day, five days a week basis. Dormitories are not considered part of a Health Centre with Treatment.
- g) **Isolated Community:** means a Community with scheduled flights, good telephone services, and no year-round road access.
- h) **Location of Work:** means the locations of First Nations health care facilities in the MB Region (see Appendix E). Also, see Appendix A for the Map of the Region.
- i) **Nurse In Charge (NIC):** means the ISC resource, or delegate(s) in situations of surge capacity requirement, who is the Nurse in Charge and provides professional nursing guidance, supervision and assistance in the delivery of health programs, to support the community leaders and health care team in acquiring the knowledge and skills necessary in the delivery of community health and treatment programs. A Contract Nurse must not perform the duties of the NIC.
- j) **Nursing Station:** means a healthcare facility within which primary care and public health services are delivered on a twenty-four hours a day, seven days a week basis . Dormitories are not considered part of a Nursing Station.
- k) **Overtime:** means any Work required to be performed in excess of the Regular Working Hours. No overtime Work is to be performed under the Task Authorization unless authorized in advance and in writing (see Appendix D - Overtime Authorization Form) by either the NIC, Technical Authority, TA Authority, or their delegate(s).
- l) **Regional Manager, Nursing Supervisor:** means an ISC resource who is responsible for providing professional nursing support, guidance and recommendations on policies and practices in the delivery of health programs.
- m) **Regular Working Hours:** means the ISC Nursing Station hours of work between 06:00 AM to 11:00 PM Monday to Sunday (subject to change and can vary based on Location of Work).
- n) **Remote Community:** means a community with no scheduled flights, minimal telephone or radio services, and no road access.
- o) **Semi-Isolated Community:** means a community with scheduled flights, good telephone services, and road access year-round greater than 90 KM to physician services.

- p) **Stand-by:** means any period of time duly authorized by either the NIC, Technical Authority, TA Authority, or their delegate(s), during which the Contract Nurse is required, during off-duty hours, to be available at a known telecommunication number and be readily able to return for duty, without undue delay, if called /or contacted or both.

The Contract Nurse may be required to participate in Stand-by for up to 16 hours per day during the week, and up to 24 hours per day during weekends and statutory holidays. Contract Nurses must respond to calls during their period of Stand-by. In all Nursing Stations and Health Centres with Treatment, there are typically 2 nurses on Stand-by. If a Contract Nurse is the second nurse on Stand-by, they will be asked to stay in the community until a replacement arrives, however this is dependent on the Contract Nurse's availability (e.g. pre-planned transportation out of the community when their assignment is complete).

ISC nurses will be given preference over Contract Nurses in selection of hours and division of Stand-by responsibilities

- q) **Statutory Holidays:** means New Year's Day, Good Friday, Easter Monday, Victoria Day, Canada Day, Civic Holiday, Labour Day, Thanksgiving, Remembrance Day, Christmas Day and Boxing Day.

12. GLOSSARY OF ACROYNMS

FN – First Nation(s)

ISC – Indigenous Services Canada

NIC – Nurse In Charge

RN – Registered Nurse

NP – Nurse Practitioner

NRCU – Nurse Relief Coordination Unit

SO – Standing Offer

TA – Task Authorization

TAA – Task Authorization Authority

13. RELEVANT LINKS

Policy of Privacy and Protection: <https://www.tbs-sct.gc.ca/pol/doc-eng.aspx?id=12510>

Directive on Privacy Practices: <https://www.tbs-sct.gc.ca/pol/doc-eng.aspx?id=18309>

Seven Grandfather Teachings Video:

<https://www.youtube.com/watch?v=z0tYMyVJ27A&feature=youtu.be>

ANNEX A
STATEMENT OF WORK - ONTARIO
TABLE OF CONTENTS

1. Purpose.....	Page 2
2. Objective.....	Page 2
3. Background Information.....	Page 2
4. Scope of Work.....	Page 2
5. Offeror Responsibilities.....	Page 3
6. Requirements of Contract Nurses.....	Page 5
7. Location of Work.....	Page 7
8. Offeror's Contract Nurse Performance and Conduct of Work.....	Page 7
9. Use of Government Property	Page 8
10. Use of Government Telecommunications.....	Page 8
11. Glossary of Terminology.....	Page 9
12. Glossary of Acronyms.....	Page 10
13. Relevant Links.....	Page 11

Appendices to Annex A:

Appendix A:	Map of the Region
Appendix B:	Contract Nurse – Performance and Conduct of Work Report
Appendix C:	Time Sheet Template
Appendix D:	Overtime Authorization Form
Appendix E:	Locations of Work
Appendix F:	Contract Nurse Duties
Appendix G:	Invoice Template
Appendix H:	Call-back Form
Appendix I:	Contract Nurse Scoring Rubric
Appendix J:	Contract Nurse Consent to Release Form

1. PURPOSE

Indigenous Services Canada (ISC) has a requirement for an Offeror(s) to provide temporary nursing services in the Ontario Region through a Standing Offer(s) (SO) to supplement the services being provided by a primary contractor and to supplement ISC's workforce in delivering primary and public health nursing services.

2. OBJECTIVE

The objective of the SO is to ensure that ISC obtains the required number of qualified Contract Nurses (Registered Nurses or Nurse Practitioners) needed to supplement their existing workforce in delivering primary and public health nursing services to Remote, Isolated and Semi-Isolated First Nations (FN) communities in Ontario (ON) (see Appendices A & F). In addition, situations may arise where the services provided by the Offeror will be required as part of a surge capacity response to provide nursing services to support "regional health authorities" (federal, provincial, territorial and/or Indigenous) in urgent and critical situations, of a temporary nature.

3. BACKGROUND INFORMATION

ISC currently funds and/or delivers primary care services, accessible on a twenty-four hours a day, seven days a week basis in over 79 health facilities serving 111,000 FN clients in Remote, Isolated and Semi-Isolated FN communities, where access to provincial services is limited or non-existent. As of January 2019, this care is provided by approximately 225 full time equivalent positions and delivered by approximately 350 First Nations and Inuit Health Branch-employed (FNIHB) nursing personnel.

Primary care is considered a mandatory or "essential" service under ISC's program mandate, as it has a direct impact on the health and safety of individuals and the population. In these communities, nurses working out of Nursing Stations or other health facilities are often the only health service providers. Nurses work in pairs or small groups, often with little to no support from other health care professionals, providing services to respond to urgent community health care needs and medical emergencies whenever they arise.

ISC employs Registered Nurses (RN) and Nurse Practitioners (NP) to provide the health services in 21 FN communities in Manitoba (MB), 24 FN communities in Ontario (ON), 2 FN communities in Quebec (QC), 4 FN communities in AB, plus 2 hospitals in MB. ISC currently has contracts with nursing agencies to provide Contract Nurses on a temporary basis to backfill for vacant positions, vacation and sick leave.

4. SCOPE OF WORK

Nursing services provided by the Contractor through its Contract Nurses are required on a twenty-four hours a day, seven days a week basis and will encompass, but not be limited to, direct patient care and consultation, including the conduct of programs designed to promote health, and the provision of advice.

The Contractor should maintain a roster of Contract Nurses who are prepared to work in all the Locations of Work (see Appendix E) in the Ontario Region.

ISC reserves the right to request provision of a Contract Nurse of a specific sex in cases where it is warranted to do so based on a specific clinical requirement.

5. CONTRACTOR RESPONSIBILITIES

The Contractor must:

- a) provide the services of Contract Nurses on an "as and when requested" basis to supplement services obtained through ISC's primary nursing services contracts for the Ontario Region;
- b) provide proof of renewed certifications, licensure, and insurance for Contract Nurses (see Section 6), as is required to provide nursing services, in accordance with the applicable provincial regulatory and professional body. Proof must be delivered to the Technical Authority prior to the expiration date of any certification, licensure, or insurance;
- c) provide contact information for a primary coordinator. The primary coordinator must handle the administration of Nursing Services requests received from the Task Authorization Authorities (TAA), which involves timely delivery of Work and all communications concerning the Work. In the event that the primary coordinator is absent, or unavailable, the Offeror must provide contact information for an alternate coordinator to fill the role during the primary coordinator's absence;
- d) provide the Technical Authority with a twenty-four hours a day, seven days a week emergency telephone number, SMS (text) number and email address. The Offeror's primary coordinator, backup coordinator, or their delegate will be responsible for immediately responding to the emergency communications on a twenty-four hours a day, seven days a week basis;
- e) without delay, advise the Nursing Station location, (Zone) Nurse Manager, as well as Nurse Relief Coordination Unit (NRCU) of any travel delay(s) of a Contract Nurse assigned by a TA to that Nursing Station location;
- f) in the event of an investigation of nursing practice or conduct involving a Contractor's Contract Nurse, participate and aid in the investigative process including but not limited to, speaking with the Technical Authority and the ISC investigators, submitting written statements and appearing at any reviews. The cooperative participation of the Contractor and its Contract Nurses will be at no cost to ISC;
- g) ensure that their Contract Nurses maintain and develop their knowledge, assessment skills, technical skills and professional performance standards as related to any new legislation, use of Electronic Medical Record systems, treatment protocols and practices, regulatory bodies requirements, and technologies or equipment that impact the delivery of health services in the Locations of Work. The Contractor must stay abreast of any provincial legislative changes that may result in changes to clinical practice, and as required, ensure their Contract Nurses develop and maintain competency as per changes to clinical practice;
- h) ensure that new or revised ISC policies and procedures, as provided or directed by the Technical Authority, are adopted in the delivery of the Work;
- i) validate that its Contract Nurses are qualified in accordance with the requirements stipulated in section 6 below, deliver care in accordance with the First Nations and Inuit Health Clinical Practice Guidelines for Nurses in Primary Care, and meet the requirements of the Call-up prior to the Contract Nurse being proposed for Work under a Task Authorization;
- j) provide Contract Nursing services, when required, throughout Devolution of a community while the transfer of the Nursing Station and nursing services occurs from Indigenous Services Canada to the

community; and,

k) ensure that its Contract Nurses:

- i.** are fit-tested for N-95 masks every two years or sooner, if a change in physiognomy occurs that may affect efficacy of determined size to wear;
- ii.** have the physical and mental capacity to perform the duties (as per Appendix F) required for the delivery of temporary nursing services to ISC;
- iii.** have the knowledge, training, experience and skill set to competently perform Work as per the Scope of Practice of the applicable provincial regulatory and professional body and the First Nations and Inuit Health Clinical Practice Guidelines for Nurses in Primary Care.
- iv.** conduct Work in a manner that respects Indigenous culture and safety;
- v.** provide nursing services and health guidance to individuals, families and groups in the Location of Work. The Contract Nurse's Work is directed toward the prevention of disease and the promotion and maintenance of health. Contract Nurses may also be involved in the delivery of primary care and emergency services (potentially participating in medevacs and medical evacuations) of a mental health, medical, obstetrical or trauma related nature. Based on operational requirements, Contract Nurses may also be required to assist with administrative duties associated with the daily operations at the Location of Work;

See Appendix F for the duties of the Contract Nurses required by ISC for this SO.

- vi.** comply with the established schedule for the Nursing Station, which may be 8 hour or 12 hour shifts over a twenty-four hours a day, seven days a week basis;
- vii.** remain accessible by telephone or text while performing Work under a Task Authorization to be informed of urgent medical emergencies or changes to the Nursing Station schedule;
- viii.** be readily available (within 15 minutes) to return to the Location of Work while on Stand-by, and/or assigned by a TA to a Location of Work where nursing services are provided on a twenty-four hours a day, seven days a week basis;
- ix.** create, collect, receive, manage, access, use, retain and dispose of personal information only for the purposes relating to their duties under the Contract, and do so in accordance with the terms and conditions of the Contract and in accordance with the Privacy Act and TBS privacy and security policies and directives;
- x.** in the event of an investigation of nursing practice or conduct, participate in the investigative process (as directed by the Technical Authority) including but not limited to, speaking with the Technical Authority and the FNIHB investigators, submitting written statements, and appearing at reviews;
- xi.** be willing and able to travel in small aircraft, off road vehicles, snowmobiles, and other similar modes of transportation including small watercraft, in varied weather conditions to communities in Remote, Isolated and Semi-Isolated areas;
- xii.** use communication devices (e.g. mobile phones, text pagers and other wireless devices) in an appropriate manner at all times while performing Work;
- xiii.** do not perform the duties of the Nurse in Charge (NIC), nor act as ISC's delegate; and,

xiv. perform additional Contract Nurse responsibilities including, but not limited to:

- reviewing the required Immunization schedules in advance of arriving on site of the Location of Work as per the TA;
- operating a Government of Canada owned vehicle to conduct Work, which may include travel to and from the Location of Work (as specified in the TA and authorized by the Technical Authority or their delegate); and,
- participating in Nursing Station programs (e.g. immunization, pre-natal, well-baby) as directed by the NIC. The participation of the Contract Nurse could involve planning, implementing, administering and carrying out activities related to these programs.

6. REQUIREMENTS OF CONTRACT NURSES

a) Requirements at Task Authorization stage

The specific Contract Nurse requirements including both mandatory and asset criteria, will be identified using a completed Contract Nurse (CN) Scoring Rubric (Appendix I) at the time of Task Authorization issuance and will be assessed, as presented by the Contractor, at the Task Authorization stage.

To be eligible for placement in FN communities, all Contract Nurses must meet the following minimum education, registration, licensure and insurance requirements for the Ontario Region:

Ontario Region	Registration / Licensing	Insurance	Education
Registered Nurses	Valid registration with the College of Nurses of Ontario as a Registered Nurse, with no restrictions.	Malpractice insurance (refer to Annex D) through Registered Nurses' Association of Ontario or Canadian Nurses Protective Society.	Bachelor's degree in nursing.
Nurse Practitioners	Valid registration with the College of Nurses of Ontario as a Nurse Practitioner, with no restrictions.	Malpractice insurance (refer to Annex D) through Registered Nurses' Association of Ontario, Nurse Practitioners Association of Ontario or Canadian Nurses Protective Society.	Approved Ontario university NP program - Primary Care or equivalent as determined by the the College of Nurses of Ontario (CNO).

b) Certification Requirements at Task Authorization stage

At the time of Task Authorization issuance, all proposed Contract Nurses must have valid certification (or an equivalent approved by the Technical Authority) in the following:

- Cardio Pulmonary Resuscitation (CPR) / Basic Life Support (BLS) for healthcare providers issued by the Heart and Stroke Foundation of Canada or the American Heart Association;

-
- Pediatric Advanced Life Support (PALS) issued by the Heart and Stroke Foundation of Canada or the American Heart Association;
 - Advanced Cardiovascular Life Support (ACLS) issued by the Heart and Stroke Foundation of Canada or the American Heart Association;
 - International Trauma Life Support (ITLS);
 - Workplace Hazardous Materials Information System (WHMIS);
 - Immunization:
 - Education Program for Immunization Competencies (EPIC) course - developed by the Canadian Pediatric Society.
 - Controlled Substances:
 - University of Ottawa Distance Education Portal - FNIHB Nursing Education Module on Controlled Substances in First Nations Health Facilities.
 - Transportation of Dangerous Goods (TDG); and
 - Privacy Basics and Privacy Impact Assessments – online course (publichealth.gc.ca/training)

Contract Nurses who do not have the valid certifications/requirements stated above cannot be proposed for nursing services as per the CN Scoring Rubric (Appendix I).

The Contractor must ensure that all requirements of their Contract Nurses as per the CN Scoring Rubric (Appendix I) are met and maintained throughout the duration of any Task Authorization.

OPTIONAL CERTIFICATIONS AND ASSET CRITERIA

Based on operational needs, Canada may request additional asset criteria or certifications that will be identified in the CN Scoring Rubric (Appendix I), as a requirement of a Task Authorization. These may include, but are not limited to:

- Offeror confirmation of successful completion of FNIHB-specific Accuro Electronic Medical Records (EMR) training
- Work experience above the mandatory minimum
- Public Health or Mental Health experience

c) Language Requirements

All Contract Nurses working in the ON Region must be fluent in English (both written and spoken).

d) Work Experience

Each Contract Nurse must meet one of the following criteria:

- 1 year, defined as 1,500 Regular Working Hours of experience, in the past five years from the date of TA issuance, working in Remote, Isolated and/or Semi-Isolated communities;

Or

- 2 years, defined as 3,000 Regular Working Hours of experience, in the past five years from the date of TA issuance performing nursing services in primary care and advanced clinical assessments. This experience must be within the emergency, intensive care unit or within community settings such as health care centres (e.g. urgent care centre, quick care centre).

e) Driver's License

All Contract Nurses must hold an unrestricted valid Ontario Class "G" Driver's License, or an equivalent approved by the province of Ontario.

f) Security Clearance

All Contract Nurses must obtain and keep current a Reliability Status level security clearance.

7. LOCATION OF WORK

The Location(s) of Work will be a Nursing Station or Health Centre (with Treatment) in a FN community; however, nursing services, based on operational requirements, may occur within other areas outside of a Nursing Station or Health Centre within the FN community.

While the location of the requirement will be identified at the time of the initial Task Authorization, the Technical Authority or their delegate(s) reserves the right to change the location of the delivery of services at any point prior to, or during the Task Authorization due to operational requirements. In such circumstances, the Technical Authority or their delegate(s) will endeavor to provide the Contractor with as much notice as possible of the change in the Location of Work. Should a Contract Nurse refuse to change location, the Contract Nurse will be removed from the Location of Work and the Contractor must provide a replacement of personnel in accordance with article 3.1.1 of the Contract.

There are three Locations of Work (Health Centres (with Treatment)) in the Thunder Bay Zone (TBZ) that deliver health services from Monday to Friday only, and for which the nursing residences are closed on weekends and Statutory Holidays. For TAs where the Period of Service spans more than a week, CNs will not be scheduled to Work on weekends or Statutory Holidays or both (unless there is an emergency) and will be required to leave the community to stay in alternate accommodations provided by ISC. A CN's time spent at an alternate accommodation is not billable to Canada.

Location of Work	Location of Alternate Accommodations
Grassy Narrows	Kenora, Ontario
Gull Bay	Thunder Bay, Ontario
Whitedog	Kenora, Ontario

8. CONTRACT NURSE PERFORMANCE AND CONDUCT OF WORK

Concerns related to Contract Nurse performance and/or conduct may be identified at a number of junctures, and as such the process to resolve issues is situation dependent. In the event that concerns are identified while the Contract Nurse is onsite, it will be expected that the Regional Manager, Nurse In Charge or the Nursing Supervisor, or their delegate, will address the concerns directly with the Contract Nurse with notification to Technical Authority following the event. Concerns identified by ISC or its delegates following the departure of the Contract Nurse (ex. chart audit, practice issue, conduct issue, etc.) from the community will also be addressed directly to the Contractor by the Technical Authority or their delegate.

The Technical Authority or their delegate will advise the Contractor of any professional practice or conduct issues identified with the Contract Nurses delivering services, and provide a completed Contract Nurse – Performance and Conduct of Work Report (see Appendix B) which outlines the details regarding the practice or conduct issue. It is the responsibility of the Contractor to immediately respond to and address the concerns, including reporting to Regulatory Authorities as appropriate.

Should the severity of the issue(s) require the removal of the Contract Nurse, the Technical Authority or their delegate will immediately notify the Contractor. In the event the incident occurs outside of regular business hours, the Regional Manager, Nurse In Charge or Nursing Supervisor will be delegated the authority to contact the Contractor directly. The Contractor 's replacement responsibilities, as detailed in article 3.1.1, 8 of the Contract will apply in such situations. The removed Contract Nurse will not be accepted under any future Task Authorizations until the issue is corrected to the satisfaction of ISC.

In order for the Contract Nurse to be accepted under future Task Authorizations, the Contractor must demonstrate, in a written communication to the Technical Authority, that sufficient corrective and/or remedial actions have taken place; in some cases remedial action may need to be made to the Contractor's internal Contract Nurse screening or validation process. Written notification will be provided by ISC to the Contractor on whether the actions were deemed sufficient and if the Contract Nurse can be used under future Task Authorizations.

ISC reserves the right to refuse the Contract Nurse for future placements should the corrective actions be deemed insufficient. In addition, ISC reserves the right to refuse a proposed Contract Nurse, and/or demand a replacement (at no additional cost to ISC) prior to, and after authorization of a TA, based on any documented record of poor service or unacceptable conduct, including under this or any prior contract, under previous employment with ISC, or due to FN community requests or Band Council Resolutions.

9. USE OF GOVERNMENT PROPERTY

Contract Nurses will be provided with accommodations, at no cost to the Offeror, while performing Work under an approved TA. Excluding exceptional circumstances, Contract Nurses will have private bedrooms. Depending on the residence/accommodations, bathroom facilities will be either private or shared. Common areas will be shared with other nursing staff.

Government Property must be used by the Contract Nurse solely for the purpose of the Task Authorization and will remain the property of Canada. The Contract Nurse must take reasonable and proper care of all Government Property while the same is in, on, or about the premises of ISC or otherwise in its possession or subject to its control. The Contractor is responsible for any loss or damage resulting from the failure of the Contract Nurse to do so except for ordinary wear and tear.

Smoking is not permitted in Nursing Stations or residences supplied under the Contract.

Pets are not permitted in Nursing Stations or residences supplied under the Contract.

The Contractor must ensure that Contract Nurses keep living quarters clean and orderly, both inside and outside the building. The Contractor must notify ISC of any existing damage to accommodations and/or any missing assets upon a Contract Nurse's arrival and report any damage incurred throughout the Contract Nurse's stay.

10. USE OF GOVERNMENT TELECOMMUNICATIONS

Use of Government of Canada telecommunications for personal use is not permitted.

11. GLOSSARY OF TERMINOLOGY

- a) **Call-back:** means when the Contract Nurse is required to return to the Nursing Station or Health Centre (with Treatment) and perform patient care when the Contract Nurse was previously assigned to Stand-by, or in the event additional Contract Nurses are required beyond those that were assigned to Stand-by (see Appendix H for Call-back Form).
- b) **Call-back Time:** means one continuous period of time commencing with the start time of the initial Call-back and ending either three hours later, or at the time of the conclusion of the initial Call-back or any subsequent Call-back that is initiated prior to the end of the 3 hour period, whichever is later. Any subsequent Call-back(s) initiated within a Call-back Time has the effect of extending the end of the Call-back Time to the time of the conclusion of the subsequent Call-back(s) and does not constitute a separate Call-back Time. If the Call-back Time overlaps with a Contract Nurse's scheduled Regular Working Hours, then the Call-back Time is considered concluded at the time that the Contract Nurse begins its scheduled Regular Working Hours, or three hours after the commencement of the initial Call-back, whichever is later.
- c) **Community Health Services or Nursing Services:** means a scope of practice which includes community health and/or treatment services using a holistic approach. It also includes health promotion (health education and community development strategies), illness and injury prevention and restoration of health in the FN community.
- d) **Contract Nurse (CN):** means the resource provided by the Contractor to deliver temporary nursing services.
- e) **Devolution:** means the transfer, or delegation of authority, of the Nursing Station and nursing services, from Indigenous Services Canada to a community or regional Indigenous authority.
- f) **Health Centre (with Treatment):** means a healthcare facility within which primary care and public health services are delivered on a twenty-four hours a day, five days a week basis . Dormitories are not considered part of a Health Centre with Treatment.
- g) **Isolated Community:** means a Community with scheduled flights, good telephone services, and no year-round road access.
- h) **Location of Work:** means the locations of First Nations health care facilities in the ON Region (see Appendix E). Also, see Appendix A for the Map of the Region.
- i) **Nurse In Charge (NIC):** means the ISC resource, or delegate(s) in situations of surge capacity requirement, who is the Nurse in Charge and provides professional nursing guidance, supervision and assistance in the delivery of health programs, to support the community leaders and health care team in acquiring the knowledge and skills necessary in the delivery of community health and treatment programs. A Contract Nurse must not perform the duties of the NIC.
- j) **Nursing Station:** means a healthcare facility within which primary care and public health services are delivered on a twenty-four hours a day, seven days a week basis . Dormitories are not considered part of a Nursing Station.
- k) **Overtime:** means any Work required to be performed in excess of the Regular Working Hours. No overtime Work is to be performed under the Task Authorization unless authorized in advance and in writing (see Appendix D - Overtime Authorization Form) by either the NIC, Technical Authority, TA Authority, or their delegate(s).

-
- l) **Regional Manager, Nursing Supervisor:** means an ISC resource who is responsible for providing professional nursing support, guidance and recommendations on policies and practices in the delivery of health programs.
- m) **Regular Working Hours:** means the ISC Nursing Station hours of work between 06:00 AM to 11:00 PM Monday to Sunday (subject to change and can vary based on Location of Work).
- n) **Remote Community:** means a community with no scheduled flights, minimal telephone or radio services, and no road access.
- o) **Semi-Isolated Community:** means a community with scheduled flights, good telephone services, and road access year-round greater than 90 KM to physician services.
- p) **Stand-by:** means any period of time duly authorized by either the NIC, Technical Authority, TA Authority, or their delegate(s), during which the Contract Nurse is required, during off-duty hours, to be available at a known telecommunication number and be readily able to return for duty, without undue delay, if called or contacted or both.

The Contract Nurse may be required to participate in Stand-by for up to 16 hours per day during the week, and up to 24 hours per day during weekends and statutory holidays. Contract Nurses must respond to calls during their period of Stand-by. In all Nursing Stations and Health Centres with Treatment, there are typically 2 nurses on Stand-by. If a Contract Nurse is the second nurse on Stand-by, they will be asked to stay in the community until a replacement arrives, however this is dependent on the Contract Nurse's availability (e.g. pre-planned transportation out of the community when their assignment is complete).

ISC nurses will be given preference over Contract Nurses in selection of hours and division of Stand-by responsibilities

- q) **Statutory Holidays:** means New Year's Day, Good Friday, Easter Monday, Victoria Day, Canada Day, Civic Holiday, Labour Day, Thanksgiving, Remembrance Day, Christmas Day and Boxing Day.

12. GLOSSARY OF ACRONYMS

FN – First Nation(s)

ISC – Indigenous Services Canada

NIC – Nurse In Charge

RN – Registered Nurse

NP – Nurse Practitioner

NRCU – Nurse Relief Coordination Unit

SO – Standing Offer

TA – Task Authorization

TAA – Task Authorization Authority

Solicitation No. - N° de l'invitation
5A090-192272/A
Client Ref. No. - N° de réf. du client
5A090-192272

Amd. No. - N° de la modif.
File No. - N° du dossier
005xf. 5A090-192272

Buyer ID - Id de l'acheteur
005xf
CCC No./N° CCC - FMS No./N° VME

13. RELEVANT LINKS

Policy of Privacy and Protection: <https://www.tbs-sct.gc.ca/pol/doc-eng.aspx?id=12510>

Directive on Privacy Practices: <https://www.tbs-sct.gc.ca/pol/doc-eng.aspx?id=18309>

Seven Grandfather Teachings Video:

<https://www.youtube.com/watch?v=z0tYMyVJ27A&feature=youtu.be>

ANNEX A

STATEMENT OF WORK - QUEBEC

TABLE OF CONTENTS

1. Purpose.....	Page 2
2. Objective.....	Page 2
3. Background Information.....	Page 2
4. Scope of Work.....	Page 2
5. Offeror Responsibilities.....	Page 3
6. Requirements of Contract Nurses.....	Page 5
7. Location of Work.....	Page 7
8. Offeror's Contract Nurse Performance and Conduct of Work.....	Page 7
9. Use of Government Property	Page 8
10. Use of Government Telecommunications.....	Page 8
11. Glossary of Terminology.....	Page 8
12. Glossary of Acronyms.....	Page 10
13. Relevant Links.....	Page 10

Appendices to Annex A:

Appendix A:	Map of the Region
Appendix B:	Contract Nurse – Performance and Conduct of Work Report
Appendix C:	Time Sheet Template
Appendix D:	Overtime Authorization Form
Appendix E:	Locations of Work
Appendix F:	Contract Nurse Duties
Appendix G:	Invoice Template
Appendix H:	Call-back Form
Appendix I:	Contract Nurse Scoring Rubric
Appendix J:	Contract Nurse Consent to Release Form

1. PURPOSE

Indigenous Services Canada (ISC) has a requirement for an Offeror(s) to provide temporary nursing services in the Quebec Region through a Standing Offer(s) (SO) to supplement the services being provided by a primary contractor and to supplement ISC's workforce in delivering primary and public health nursing services.

2. OBJECTIVE

The objective of the SO is to ensure that ISC obtains the required number of qualified Contract Nurses (Registered Nurses) needed to supplement their existing workforce in delivering primary and public health nursing services to Remote, Isolated and Semi-Isolated First Nations (FN) communities in Quebec (QC) (see Appendices A & F). In addition, situations may arise where the services provided by the Offeror will be required as part of a surge capacity response to provide nursing services to support "regional health authorities" (federal, provincial, territorial and/or Indigenous) in urgent and critical situations, of a temporary nature.

3. BACKGROUND INFORMATION

ISC currently funds and/or delivers primary care services, accessible on a twenty-four hours a day, seven days a week basis in over 79 health facilities serving 111,000 FN clients in Remote, Isolated and Semi-Isolated FN communities, where access to provincial services is limited or non-existent. As of January 2019, this care is provided by approximately 225 full time equivalent positions and delivered by approximately 350 First Nations and Inuit Health Branch-employed (FNIHB) nursing personnel.

Primary care is considered a mandatory or "essential" service under ISC's program mandate, as it has a direct impact on the health and safety of individuals and the population. In these communities, nurses working out of Nursing Stations or other health facilities are often the only health service providers. Nurses work in pairs or small groups, often with little to no support from other health care professionals, providing services to respond to urgent community health care needs and medical emergencies whenever they arise.

ISC employs Registered Nurses (RN) and Nurse Practitioners (NP) to provide the health services in 21 FN communities in Manitoba (MB), 24 FN communities in Ontario (ON), 2 FN communities in Quebec (QC), 4 FN communities in AB, plus 2 hospitals in MB. ISC currently has contracts with nursing agencies to provide Contract Nurses on a temporary basis to backfill for vacant positions, vacation and sick leave.

4. SCOPE OF WORK

Nursing services provided by the Contractor through its Contract Nurses are required on a twenty-four hours a day, seven days a week basis and will encompass, but not be limited to, direct patient care and consultation, including the conduct of programs designed to promote health, and the provision of advice.

The Contractor should maintain a roster of Contract Nurses that are prepared to work in all the Locations of Work (see Appendix E) in the Quebec Region.

ISC reserves the right to request provision of a Contract Nurse of a specific sex in cases where it is warranted to do so based on a specific clinical requirement.

5. CONTRACTOR RESPONSIBILITIES

The Contractor must:

- a) provide the services of Contract Nurses on an "as and when requested" basis to supplement services obtained through ISC's primary nursing services contracts for the Quebec Region.
- b) provide proof of renewed certifications, licensure, and insurance for Contract Nurses (see Section 6), as is required to provide nursing services, in accordance with the applicable provincial regulatory and professional body. Proof must be delivered to the Technical Authority prior to the expiration date of any certification, licensure, or insurance;
- c) provide contact information for a primary coordinator. The primary coordinator must handle the administration of Nursing Services requests received from the Task Authorization Authorities (TAA), which involves timely delivery of Work and all communications concerning the Work. In the event that the primary coordinator is absent, or unavailable, the Contractor must provide contact information for an alternate coordinator to fill the role during the primary coordinator's absence;
- d) provide the Technical Authority with a twenty-four hours a day, seven days a week emergency telephone number, SMS (text) number and email address. The Offeror's primary coordinator, backup coordinator, or their delegate will be responsible for immediately responding to the emergency communications on a twenty-four hours a day, seven days a week basis;
- e) without delay, advise the Nursing Station location, (Zone) Nurse Manager, as well as Nurse Relief Coordination Unit (NRCU) of any travel delay(s) of a Contract Nurse assigned by a TA to that Nursing Station location;
- f) in the event of an investigation of nursing practice or conduct involving a Contractor's Contract Nurse, participate and aid in the investigative process including but not limited to, speaking with the Technical Authority and the ISC investigators, submitting written statements and appearing at any reviews. The cooperative participation of the Contractor and its Contract Nurses will be at no cost to ISC;
- g) ensure that its Contract Nurses maintain and develop their knowledge, assessment skills, technical skills and professional performance standards as related to any new legislation, use of Electronic Medical Record systems, treatment protocols and practices, regulatory bodies requirements, and technologies or equipment that impact the delivery of health services in the Locations of Work. The Contractor must stay abreast of any provincial legislative changes that may result in changes to clinical practice, and as required, ensure their Contract Nurses develop and maintain competency as per changes to clinical practice;
- h) ensure that new or revised ISC policies and procedures, as provided or directed by the Technical Authority, are adopted in the delivery of the Work;
- i) validate that its Contract Nurses are qualified in accordance with the requirements stipulated in section 6 below, deliver care in accordance with the First Nations and Inuit Health Clinical Practice Guidelines for Nurses in Primary Care, and meet the requirements of the Call-up prior to the Contract Nurse being proposed for Work under a Task Authorization;
- j) provide Contract Nursing services, when required, throughout Devolution of a community while the transfer of the Nursing Station and nursing services occurs from Indigenous Services Canada to the community; and,

k) ensure that it's Contract Nurses:

- i.** are fit-tested for N-95 masks every two years or sooner, if a change in physiognomy occurs that may affect efficacy of determined size to wear;
- ii.** have the physical and mental capacity to perform the duties (as per Appendix F) required for the delivery of temporary nursing services to ISC;
- iii.** have the knowledge, training, experience and skill set to competently perform Work as per the Scope of Practice of the applicable provincial regulatory and professional body and the First Nations and Inuit Health Clinical Practice Guidelines for Nurses in Primary Care.
- iv.** conduct Work in a manner that respects Indigenous culture and safety;
- v.** provide nursing services and health guidance to individuals, families and groups in the Location of Work. The Contract Nurse's Work is directed toward the prevention of disease and the promotion and maintenance of health. Contract Nurses may also be involved in the delivery of primary care and emergency services (potentially participating in medevacs and medical evacuations) of a mental health, medical, obstetrical or trauma related nature. Based on operational requirements, Contract Nurses may also be required to assist with administrative duties associated with the daily operations at the Location of Work;

See Appendix F for the duties of the Contract Nurses required by ISC for this SO;

- vi.** comply with the established schedule for the Nursing Station, which may be 8 hour or 12 hour shifts over a twenty-four hours a day, seven days a week basis;
- vii.** remain accessible by telephone or text while performing Work under a Task Authorization to be informed of urgent medical emergencies or changes to the Nursing Station schedule;
- viii.** be readily available (within 15 minutes) to return to the Location of Work while on Stand-by, and/or assigned by a TA to a Location of Work where nursing services are provided on a twenty-four hours a day, seven days a week basis;
- ix.** create, collect, receive, manage, access, use, retain and dispose of personal information only for the purposes relating to their duties under the Contract, and do so in accordance with the terms and conditions of the Contract and in accordance with the Privacy Act and Treasury Board Secretariat (TBS) privacy and security policies and directives;
- x.** in the event of an investigation of nursing practice or conduct, participate in the investigative process (as directed by the Technical Authority) including but not limited to, speaking with the Technical Authority and the FNIHB investigators, submitting written statements, and appearing at reviews.
- xi.** be willing and able to travel in small aircraft, off road vehicles, snowmobiles, and other similar modes of transportation including small watercraft, in varied weather conditions to communities in Remote, Isolated and Semi-Isolated areas;
- xii.** use communication devices (e.g. mobile phones, text pagers and other wireless devices) in an appropriate manner at all times while performing Work;
- xiii.** do not perform the duties of the Nurse in Charge (NIC), nor act as ISC's delegate; and,
- xiv.** perform additional Contract Nurse responsibilities including, but not limited to:

- reviewing the required Immunization schedules in advance of arriving on site of the Location of Work as per the TA;
- operating a Government of Canada owned vehicle to conduct Work, which may include travel to and from the Location of Work (as specified in the TA and authorized by the Technical Authority or their delegate); and,
- participating in Nursing Station programs (e.g. immunization, pre-natal, well-baby) as directed by the NIC. The participation of the Contract Nurse could involve planning, implementing, administering and carrying out activities related to these programs.

6. REQUIREMENTS OF CONTRACT NURSES

a) Requirements at Task Authorization stage

The specific Contract Nurse requirements including both mandatory and asset criteria, will be identified using a completed Contract Nurse (CN) Scoring Rubric (Appendix I) at the time of Task Authorization issuance and will be assessed, as presented by the Contractor, at the Task Authorization stage.

To be eligible for placement in FN communities, all Contract Nurses must meet the following minimum education, registration, licensure and insurance requirements for the Quebec Region:

Quebec Region	Registration / Licensing	Insurance	Education
Registered Nurse	Valid license with the Ordre des infirmières et infirmiers du Québec (OIIQ), with no restrictions.	Malpractice insurance (Refer to Annex D) through OIIQ.	Bachelor's degree in nursing, or diploma in nursing from a recognized university or college

b) Certification Requirements at Task Authorization stage

At the time of Task Authorization issuance, all proposed Contract Nurses must have valid certification (or an equivalent approved by the Technical Authority) in the following:

- Cardio Pulmonary Resuscitation (CPR) / Basic Life Support (BLS) for healthcare providers issued by the Heart and Stroke Foundation of Canada or the American Heart Association;
- Pediatric Advanced Life Support (PALS) issued by the Heart and Stroke Foundation of Canada or the American Heart Association;
- Advanced Cardiovascular Life Support (ACLS) issued by the Heart and Stroke Foundation of Canada or the American Heart Association;
- International Trauma Life Support (ITLS) / Pre-Hospital Trauma Life Support (PHTLS);
- Workplace Hazardous Materials Information System (WHMIS);
- Immunization:

- Basic online training on the Quebec Immunization Protocol (PIQ) recommended by the OIIQ and offered by Laval University - Protocole d'immunisation du Québec (PIQ).
- Controlled Substances
 - University of Ottawa Distance Education Portal - FNIHB Nursing Education Module on Controlled Substances in First Nations Health Facilities.
- Transportation of Dangerous Goods (TDG); and,
- Privacy Basics and Privacy Impact Assessments – online course (publichealth.gc.ca/training)

Contract Nurses who do not have the valid certifications/requirements stated above cannot be proposed for nursing services as per the CN Scoring Rubric (Appendix I). The Contractor must ensure that all requirements of their Contract Nurses as per the CN Scoring Rubric (Appendix I) are met and maintained throughout the duration of any Task Authorization.

OPTIONAL CERTIFICATIONS AND ASSET CRITERIA

Based on operational needs, Canada may request additional asset criteria or certifications that will be identified in the CN Scoring Rubric (Appendix I), as a requirement of a Task Authorization. These may include, but are not limited to:

- Offeror confirmation of successful completion of FNIHB-specific Accuro Electronic Medical Records (EMR) training
- Work experience above the mandatory minimum
- Public Health or Mental Health experience

c) Language Requirements

All Contract Nurses working in the QC Region must be fluent in both French and English (both written and spoken).

d) Work Experience

Each Contract Nurse must meet one of the following criteria:

- 1 year, defined as 1,500 Regular Working Hours of experience, in the past five years from the date of TA issuance, working in Remote, Isolated and/or Semi-Isolated communities;

Or

- 2 years, defined as 3,000 Regular Working Hours of experience, in the past five years from the date of TA issuance, performing nursing services in primary care and advanced clinical assessments. This experience must be obtained in the emergency, intensive care unit or in community settings such as health care centres (e.g. urgent care centre, quick care centre).

e) Driver's License

All Contract Nurses must hold an unrestricted valid Quebec Category "5" Driver's License, or an equivalent approved by the province of Quebec.

f) Security Clearance

All Contract Nurses must obtain and keep current a Reliability Status level security clearance.

7. LOCATION OF WORK

The Location(s) of Work will be a Nursing Station or Health Centre (with Treatment) in a FN community; however nursing services may occur within other areas outside of a Nursing Station or Health Centre within the FN community based on operational requirements.

While the Location of Work will be identified at the time of the initial Task Authorization, the Technical Authority or their delegate reserves the right to change the location of the delivery of services at any point prior to or during the Task Authorization due to operational requirements. In such circumstances, the Technical Authority or their delegate will endeavor to provide the Contractor with as much notice as possible of the change in the Location of Work. Should a Contract Nurse refuse to change location, the Contract Nurse will be removed from the Location of Work and the Contractor must provide a replacement of personnel in accordance with article 3.1.1 of the Contract.

8. OFFEROR'S CONTRACT NURSE PERFORMANCE AND CONDUCT OF WORK

Concerns related to Contract Nurse performance and/or conduct may be identified at a number of junctures, and as such the process to resolve issues is situation dependent. In the event that concerns are identified while the Contract Nurse is onsite, it will be expected that the Regional Manager, Nurse In Charge or the Nursing Supervisor, or their delegate, will address the concerns directly with the Contract Nurse with notification to the Technical Authority following the event. Concerns identified by ISC or its delegates following the departure of the Contract Nurse (ex. chart audit, practice issue, conduct issue, etc.) from the community will also be addressed directly to the Contractor by the Technical Authority or their delegate.

The Technical Authority or their delegate will advise the Contractor of any professional practice or conduct issues identified with the Contract Nurses delivering services, and provide a completed Contract Nurse – Performance and Conduct of Work Report (see Appendix B) which outlines the details regarding the practice or conduct issue. The Contractor must immediately respond to and address the concerns, including reporting to Regulatory Authorities as appropriate.

Should the severity of the issue(s) require the removal of the Contract Nurse, the Technical Authority or their delegate will immediately notify the Contractor. In the event the incident occurs outside of regular business hours, the Regional Manager, Nurse In Charge or Nursing Supervisor will be delegated the authority to contact the Contractor directly. The Contractor's replacement responsibilities, as detailed in article 3.1.1., 8 of the Contract, will apply in such situations. The removed Contract Nurse will not be accepted under any future Task Authorizations until the issue is corrected to the satisfaction of ISC.

In order for the Contract Nurse to be accepted under future Task Authorizations, the Contractor must demonstrate, in a written communication to the Technical Authority, that sufficient corrective and/or remedial actions have taken place; in some cases remedial action may need to be made to the Contractor's internal Contract Nurse screening or validation process. Written notification will be provided by ISC to the Contractor on whether the actions were deemed sufficient and if the Contract Nurse can be used under future Task Authorizations.

ISC reserves the right to refuse the Contract Nurse for future placements should the corrective actions be deemed insufficient. In addition, ISC reserves the right to refuse a proposed Contract Nurse, and/or demand a replacement (at no additional cost to ISC) prior to and after authorization of a TA, based on any documented record of poor service or unacceptable conduct, including under this or any prior contract, under previous employment with ISC, or due to FN community requests or Band Council Resolutions.

9. USE OF GOVERNMENT PROPERTY

Contract Nurses will be provided with accommodations, at no cost to the Offeror, while performing Work under an approved TA. Excluding exceptional circumstances, Contract Nurses will have private bedrooms. Depending on the residence/accommodations, bathroom facilities will be either private or shared. Common areas will be shared with other nursing staff.

Government Property must be used by the Contract Nurse solely for the purpose of the Task Authorization and will remain the property of Canada. The Contract Nurse must take reasonable and proper care of all Government Property while the same is in, on, or about the premises of ISC or otherwise in its possession or subject to its control. The Contractor is responsible for any loss or damage resulting from the failure of the Contract Nurse to do so except for ordinary wear and tear.

Smoking is not permitted in Nursing Stations or residences supplied under the Contract.

Pets are not permitted in Nursing Stations or residences supplied under the Contract.

The Contractor must ensure that Contract Nurses keep living quarters clean and orderly, both inside and outside the building. The Contractor must notify ISC of any existing damage to accommodations and/or any missing assets upon a Contract Nurse's arrival and report any damage incurred throughout the Contract Nurse's stay.

10. USE OF GOVERNMENT TELECOMMUNICATIONS

Use of Government of Canada telecommunications for personal use is not permitted.

11. GLOSSARY OF TERMINOLOGY

- a) **Call-back:** means when the Contract Nurse is required to return to the Nursing Station or Health Centre (with Treatment) and perform patient care when the Contract Nurse was previously assigned to Stand-by, or in the event additional Contract Nurses are required beyond those that were assigned to Stand-by. (see Appendix H for Call-back Form).
- b) **Call-back Time:** means one continuous period of time commencing with the start time of the initial Call-back and ending either three hours later, or at the time of the conclusion of the initial Call-back or any subsequent Call-back that is initiated prior to the end of the 3 hour period, whichever is later. Any subsequent Call-back(s) initiated within a Call-back Time has the effect of extending the end of the Call-back Time to the time of the conclusion of the subsequent Call-back(s) and does not constitute a separate Call-back Time. If the Call-back Time overlaps with a Contract Nurse's scheduled Regular Working Hours, then the Call-back Time is considered concluded at the time that the Contract Nurse begins its scheduled Regular Working Hours, or three hours after the commencement of the initial Call-back, whichever is later.
- c) **Community Health Services or Nursing Services:** means a scope of practice which includes community health and/or treatment services using a holistic approach. It also includes health promotion (health education and community development strategies), illness and injury prevention and restoration of health in the FN community.
- d) **Contract Nurse (CN):** means the resource provided by the Contractor to deliver temporary nursing services.
- e) **Devolution:** means the transfer, or delegation of authority, of the Nursing Station and nursing services, from Indigenous Services Canada to a community or regional Indigenous authority.

-
- f) **Health Centre (with Treatment):** means a healthcare facility within which primary care and public health services are delivered on a twenty-four hours a day, five days a week basis . Dormitories are not considered part of a Health Centre with Treatment.
- g) **Isolated Community:** means a Community with scheduled flights, good telephone services, and no year-round road access.
- h) **Location of Work:** means the locations of First Nations health care facilities in the QC Region (see Appendix E). Also, see Appendix A for the Map of the Region.
- i) **Nurse In Charge (NIC):** means the ISC resource, or delegate(s) in situations of surge capacity requirement, who is the Nurse in Charge and provides professional nursing guidance, supervision and assistance in the delivery of health programs, to support the community leaders and health care team in acquiring the knowledge and skills necessary in the delivery of community health and treatment programs. A Contract Nurse must not perform the duties of the NIC.
- j) **Nursing Station:** means a healthcare facility within which primary care and public health services are delivered on a twenty-four hours a day, seven days a week basis . Dormitories are not considered part of a Nursing Station.
- k) **Overtime:** means any Work required to be performed in excess of the Regular Working Hours. No overtime Work is to be performed under the Task Authorization unless authorized in advance and in writing (see Appendix D - Overtime Authorization Form) by either the NIC, Technical Authority, TA Authority, or their delegate(s).
- l) **Regional Manager, Nursing Supervisor:** means an ISC resource who is responsible for providing professional nursing support, guidance and recommendations on policies and practices in the delivery of health programs.
- m) **Regular Working Hours:** means the ISC Nursing Station hours of work between 06:00 AM to 11:00 PM Monday to Sunday (subject to change and can vary based on Location of Work).
- n) **Remote Community:** means a community with no scheduled flights, minimal telephone or radio services, and no road access.
- o) **Semi-Isolated Community:** means a community with scheduled flights, good telephone services, and road access year-round greater than 90 KM to physician services.
- p) **Stand-by:** means any period of time duly authorized by either the NIC, Technical Authority, TA Authority, or their delegate(s), during which the Contract Nurse is required, during off-duty hours, to be available at a known telecommunication number and be readily able to return for duty, without undue delay, if called or contacted or both.

The Contract Nurse may be required to participate in Stand-by for up to 16 hours per day during the week, and up to 24 hours per day during weekends and statutory holidays. Contract Nurses must respond to calls during their period of Stand-by. In all Nursing Stations and Health Centres with Treatment, there are typically 2 nurses on Stand-by. If a Contract Nurse is the second nurse on Stand-by, they will be asked to stay in the community until a replacement arrives, however this is dependent on the Contract Nurse's availability (e.g. pre-planned transportation out of the community when their assignment is complete).

ISC nurses will be given preference over Contract Nurses in selection of hours and division of Stand-by responsibilities

- q) **Statutory Holidays:** means New Year's Day, Good Friday, Easter Monday, Victoria Day, Saint-Jean-Baptiste Day, Canada Day, Labour Day, Thanksgiving, Remembrance Day, Christmas Day and Boxing Day.

12. GLOSSARY OF ACROYNMS

FN – First Nation(s)

ISC – Indigenous Services Canada

NIC – Nurse In Charge

RN – Registered Nurse

NP – Nurse Practitioner

NRCU – Nurse Relief Coordination Unit

SO – Standing Offer

TA – Task Authorization

TAA – Task Authorization Authority

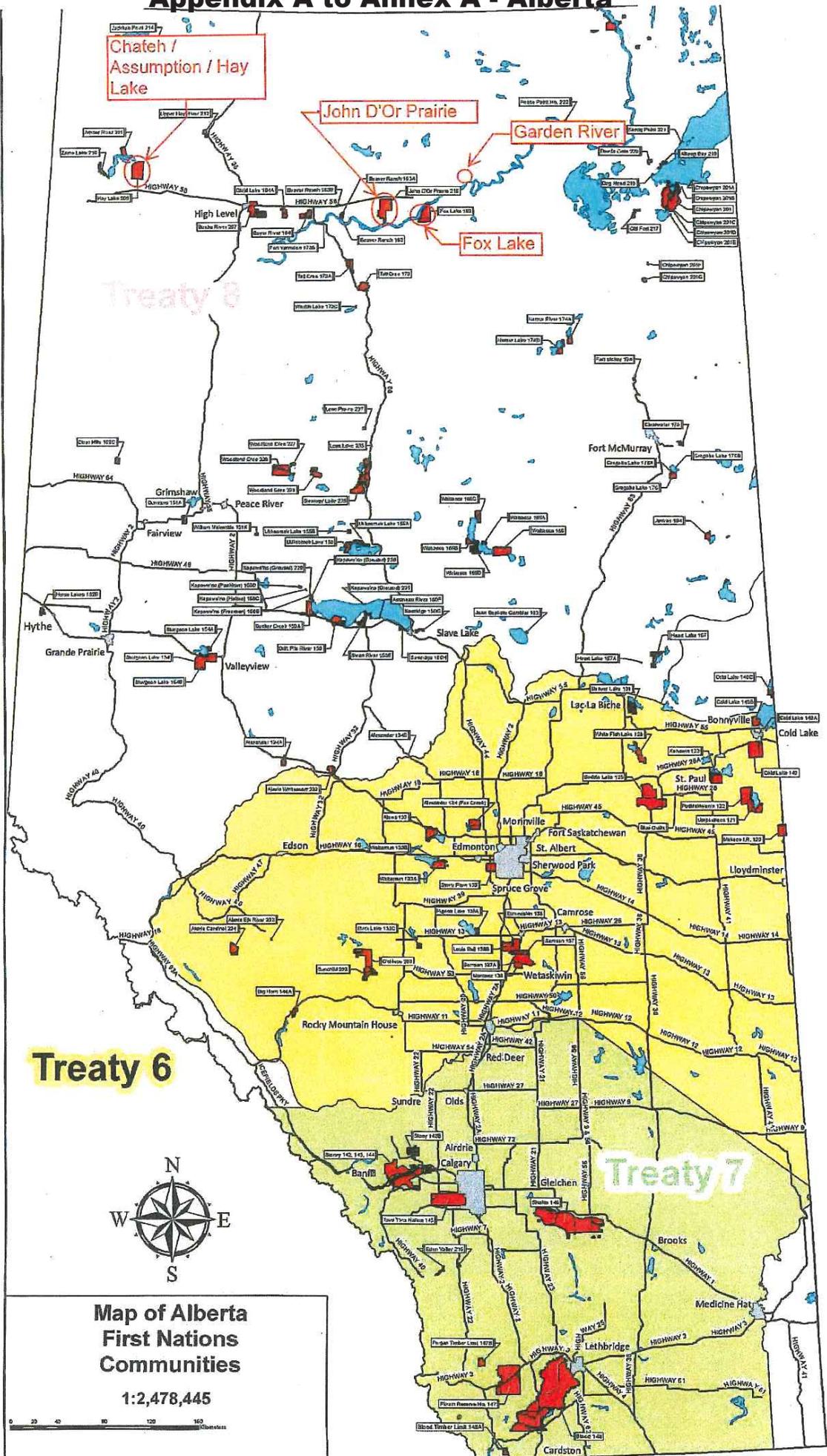
13. RELEVANT LINKS

Policy of Privacy and Protection: <https://www.tbs-sct.gc.ca/pol/doc-eng.aspx?id=12510>

Directive on Privacy Practices: <https://www.tbs-sct.gc.ca/pol/doc-eng.aspx?id=18309>

Seven Grandfather Teachings Video:
<https://www.youtube.com/watch?v=z0tYMyVJ27A&feature=youtu.be>

Appendix A to Annex A - Alberta



Chateh /
Assumption / Hay
Lake

John D'O'R Prairie

Garden River

Fox Lake

Treaty 8

Treaty 6

Treaty 7

Map of Alberta
First Nations
Communities

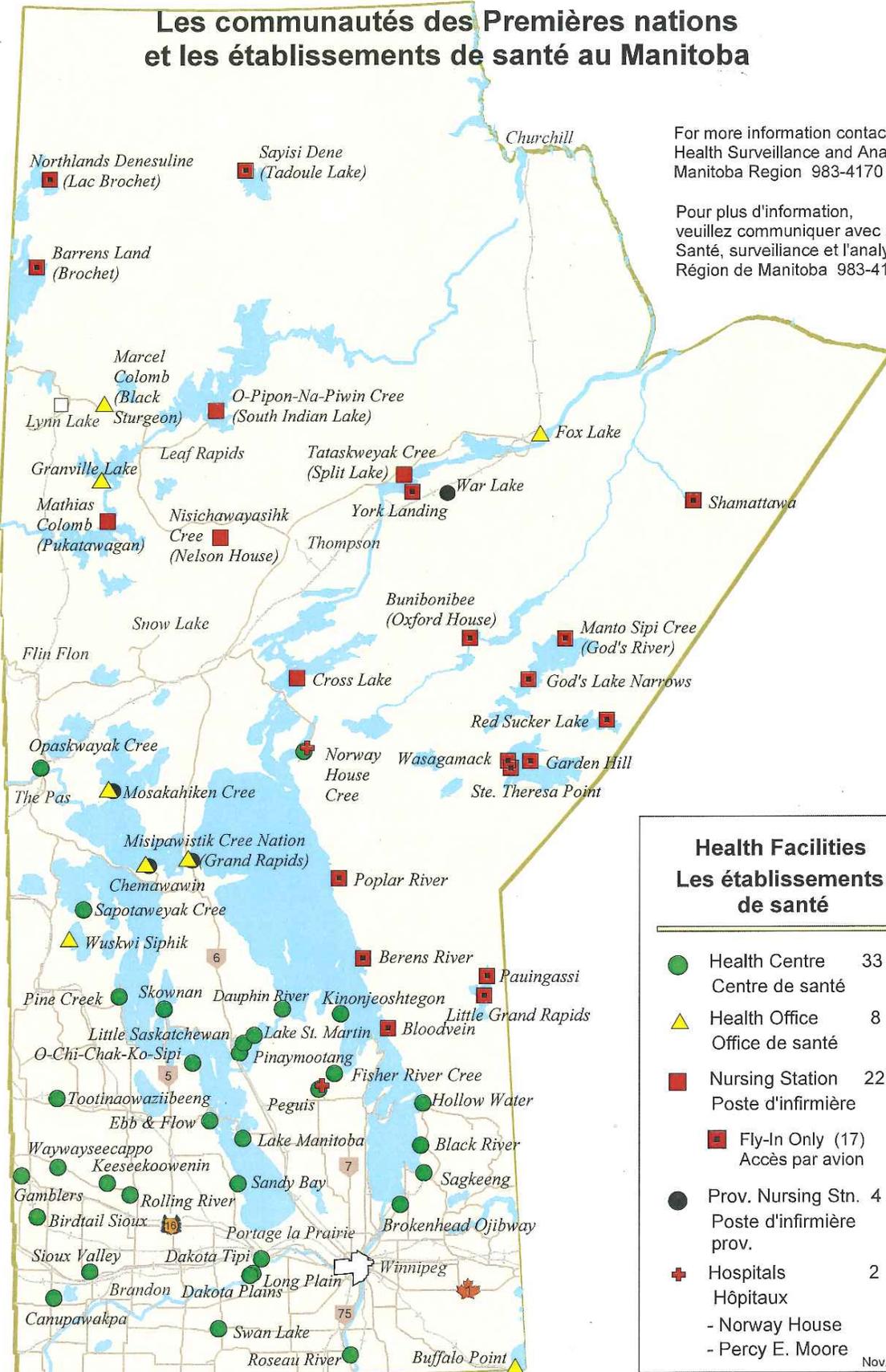
1:2,478,445



Appendix A to Annex A - Manitoba

Manitoba First Nations Communities and Health Facilities

Les communautés des Premières nations et les établissements de santé au Manitoba



For more information contact:
Health Surveillance and Analysis
Manitoba Region 983-4170

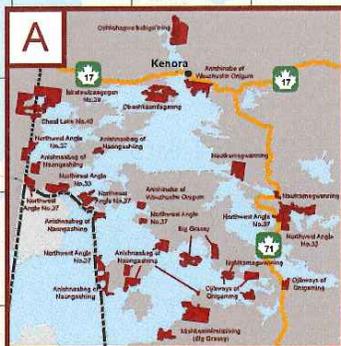
Pour plus d'information,
veuillez communiquer avec :
Santé, surveillance et l'analyse
Région de Manitoba 983-4170

Health Facilities Les établissements de santé

	Health Centre	33
	Centre de santé	
	Health Office	8
	Office de santé	
	Nursing Station	22
	Poste d'infirmière	
	Fly-In Only (17)	
	Accès par avion	
	Prov. Nursing Stn.	4
	Poste d'infirmière prov.	
	Hospitals	2
	Hôpitaux	
	- Norway House	
	- Percy E. Moore	

Nov. 2011

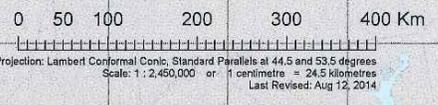
Appendix A to Annex A - Ontario Hudson Bay



First Nations - Grid Coordinates - Reserves or Settlements

- Aanishinaabeg - MB - Sarnia 45
- Alberville - L10 - Alberville First Nation, Sugar Island 37A
- Algonquins of Pikwaganan - J11 - Pikwaganan
- Anishinaabeg Zaagwan Anishinaabek - O6 - Lake Nipigon Reserve
- Anishinaabeg of Washwanikong - Inset A - Agency 30, Kenora 38B
- Anishinaabeg of Naongashling - Inset A - Agency 30, Big Island 31D, E, F, Big Island Mainland 93, Lake of the Woods 31B, C, G, H, Naongashling 31A, Saug-A-Gaw-Sing 1, Shoal Lake 31J
- Aroland - G2 - Aroland Indian Settlement
- Atikameshing Anishinaabek - JB - Whitefish Lake 6
- Atawapiskat - O6, D7 - Atawapiskat 51, 51A
- Aundeck-Ojibwa - Inset B - Sucker Creek 23
- Batchewana - JB - Coultas Bay 15A, Osojwan 15E, Rankin Location 15D, Whitefish Lake 15C
- Bay of Quinte Mohawk - MB - Globe Farm 40B, Six Nations 40
- Beaverfoot - Inset C - Globe Farm 40B, Six Nations 40
- Bearskin Lake - C2 - Bearskin Lake
- Binjilwibak Zaagwan Anishinaabek - GA - Rocky Bay 1
- Bingwi Neeyashu Anishinaabek - O4, O6 - Sand Point First Nation
- Branchwood House - Inset A - Dore Lake 76B, Mountbatten 76A
- Caldwell - MB, NB - Subject to settlement signed by Canada March 2, 2011
- Cat Lake - C3 - Cat Lake 63C
- Chapleau Cree - Inset C - Chapleau 75, Chapleau Cree Fox Lake
- Chapleau Ojibwa - Inset C - Chapleau 61A, 74A
- Chippewas of Georgian Island - K9, L9, L10 - Chippewas Island, Chippewas of Georgian Island First Nation, Chippewas of Georgian Island First Nation 35A
- Chippewas of Kettle and Stony Point - MB - Kettle Point 4
- Chippewas of Nawash - K8, K9 - Cape Croker Hunting Ground 60B, Neysayshingmunt 27, Saugan and Cape Croker Fishing Islands
- Chippewas of Rama - K9, K10 - Chippewas Island, Indian River, Makinajing First Nation 32
- Chippewas of the Thames - Inset D - Chippewas of the Thames First Nation 42
- Constance Lake - F6, F7, G7 - Constance Lake 92, English River 66
- Couchiching - H2 - Agency 1, Couchiching 18A
- Curve Lake - K10 - Curve Lake 35A, Curve Lake First Nation 35, Islands in the Trent Waters 30A
- Deer Lake - D2 - Deer Lake
- Delaware - MB - Globe Farm 40B, Six Nations 40
- Dokis - J9 - Dokis 9
- Eabametoong - E5 - Fort Hope 64
- Eagle Lake - O2 - Eagle Lake 27
- Flying Post - H2 - Flying Post 73
- Fort Albany - B9 - Fort Albany 67
- Fort Severn - B6 - Fort Severn Indian Settlement, Fort Severn 89
- Fort William - H4 - Fort William 52
- Garden River (Keteagauseebe) - J7 - Garden River 14
- Ginoogaming - O6 - Ginoogaming First Nation
- Grassy Narrows (Kaspegesheewagwan) - F1 - English River 21
- Henvey Inlet - J8 - French River 13, Henvey Inlet 2
- Hivawatha - K10, L10 - Hivawatha, Islands in the Trent Waters 36A
- Iskatewaagwan No.39 - Inset A - Agency 30, Shoal Lake 34B2, 39, 39A
- Kiasike Zaagwan Anishinaabek (Gull Bay) - O4 - Gull River 55
- Kasabonika Lake - D4 - Kasabonika Lake
- Kashechewan - E3 - Kashechewan 67
- Kee-Way-Win - O2 - Kee-Way-Win, Kee-Way-Win Indian Settlement
- Kingfisher - D4 - Kingfisher 2A, 3A, Kingfisher Lake 1
- Kitchenuhmaykoosib Inninuwag - C4, D4 - Kitchenuhmaykoosib 4A, 4B
- Konondash Seneca - MB - Globe Farm 40B, Six Nations 40
- Lac Des Milles Lacs - H3 - Lac Des Milles Lacs 22A1, Seine River 22A2
- Lac La Croix - H2 - Neogugugon Lake 25D
- Lac Seul - F8, G2 - Lac Seul 59
- Long Lake - O6 - Long Lake 59
- Lower Cayuga - MB - Globe Farm 40B, Six Nations 40
- Lower Mohawk - MB - Globe Farm 40B, Six Nations 40
- Magnawan - J8 - Magnawan 1
- Marten Falls - F5 - Marten Falls 63B, Six Nations 40
- Matichewan - H9 - Matichewan 72
- Mattagami - B8 - Mattagami 71
- McDowell Lake - E2 - McDowell Lake Settlement
- M'Chingung - Inset B - M'Chingung 22
- Michipicoten - H7, H8, J7 (Inset C) - Chapleau 61, Gros Cap 49, Gros Cap Indian Village 49A, Mississauga 62
- Mishkeegogaming - F3, F4 - Oranburg 63A, B
- Mishkeemiminzibing (Big Grassy) - Inset A - Agency 30, Assabaska, Big Grassy River 35G, Lake of the Woods 35J, Naongashling 35A, Oranburg 35B

- Misssissauga - Inset B - Mississauga River 9
- Mississaugas of Scoupp Island - K10, L10 - Islands in the Trent
- Mississaugas of Scoupp Island
- Mississaugas of the New Credit - Inset B - New Credit 40A
- Mitsingamung (Stajikoming) - H2 - Agency 1, Rainy Lake 18C
- Mohawks of Akwesasne - K12 - Akwesasne 59
- Mohawks of the Bay of Quinte - L11 - Tyendinaga Mohawk
- Moose Cree - F8, F9 - Factory Island 1, Moose Factory 68
- Moose Deer Point - K9 - Moose Point 79
- Moranville of the Thames - MB - Moranville 47
- Munsee-Delaware Nation - Inset D - Munsee-Delaware Nation 1
- Muskral Dam Lake - O3 - Muskral Dam Lake
- Naicatchewenin - H1, H2 - Agency 1, Rainy Lake 17A, B
- Niobrara - Inset B - Agency 30, Sabatong Bay 32C, Niobrara Bay 32A, Yellow Girl Bay 32B
- Neskantaga - E5 - Neskantaga, Summer Beaver Settlement
- Nipigon - Inset B - Agency 30, Sabatong Bay 32C
- Nipigon-Niobrara (Nickkousemenecaning) - H2 - Agency 1, Rainy Lake 26A, B, C
- Nihrandash Seneca - MB - Globe Farm 40B, Six Nations 40
- Nipissing - H1 - Nipissing 10
- North Caribou Lake - O2 - Wapagow Lake 87
- North Spirit Lake - D2 - North Spirit Lake
- Northwest Angle No.23 - Inset A - Agency 30, Northwest Angle 32B, Whitefish Bay 33A
- Northwest Angle No.27 - Inset A - Agency 30, Big Island 37, Lake of the Woods 34, 37, 37B, Northwest Angle 34C and 37B, Shoal Lake 34B1, 37A, Whitefish Bay 34A
- Obasikaandagwan - Inset A - Agency 30, Rat Portage 38A
- Ochichihagwe Sabigo Ining - Inset A - Agency 30, The Dalles 38C
- Ojibway Nation of Saugan - F3 - Ojibway Nation of Saugan
- Ojibways of Onigaming - Inset A - Agency 30, Assabaska, Sabatong Bay 32C, D, F, H
- Ojibways of the Pic River - H5 - Pic River 50
- Oneida - MB - Globe Farm 40B, Six Nations 40
- Oneida Nation of the Thames - Inset D - Oneida 41
- Onondaga Clear Sky - MB - Globe Farm 40B, Six Nations 40
- Pic Inlet - H5 - Pic Inlet 51
- Pic Robert - H5 - Pic Robert North, South
- Pikangikum - E2 - Pikangikum 14
- Poplar Hill - E1 - Poplar Hill
- Rainy River - H1 - Long Sault 12, Manitou Rapids 11
- Red Rock - H4 - Lake Helen 53A, Red Rock 53
- Sachigo Lake - C2, C3 - Sachigo Lake 1, 2, 3
- Sagamok Anishinaabek - MB - Sagamok
- Sandy Lake - D2 - Sandy Lake 88
- Saugan - K9, L9 - Chief's Point 29, Saugan and Cape Croker Fishing Islands 1, Saugan 29, Saugan Hunting Grounds 60A
- Seine River - H2 - Seine River 23A, B, Sturgeon Falls 23
- Serpent River - Inset B - Serpent River 7
- Shawanaga - J9, K9 - Nascauting 17A, Shawanaga 17, 17B
- Shegandah - Inset B - Shegandah 24
- Shesheganing - Inset B - Shesheganing 20
- Shoal Lake No.40 - Inset A - Agency 30, Shoal Lake 40B2, 40
- Six Nations of the Grand River - MB - Globe Farm 40B, Six Nations 40
- State Falls Nation - E3 - State Falls Indian Settlement
- Taykwa Tagamou Nation - G8, H8 - New Post 69, 69A
- Temagami - B9 - Bear Island 1
- Thessalon - Inset B - Thessalon 12
- Tuscarora - MB - Globe Farm 40B, Six Nations 40
- Upper Cayuga - MB - Globe Farm 40B, Six Nations 40
- Upper Mohawk - MB - Globe Farm 40B, Six Nations 40
- Wabasemoing Independent Nations - F1 - Agency 30, One Man Lake 28, Swan Lake 29, Wabasemoing
- Wabaukang - F5 - Wabaukang 21
- Wabigoon Lake Ojibwa Nation - G2 - Wabigoon Lake 27
- Wahgonish - H9 - Wahgonish 11
- White Lake - K9 - Indian River, White Lake Mohawk Territory
- White Lake Mohawk - MB - Globe Farm 40B, Six Nations 40
- Whitepole Island (Stelwengwan) - H8 - Whitepole Island 46
- Wapekeke - C4, D4 - Wapekeke 1, 2
- Wawakapewin - H9 - Ferry Island First Nation
- Wawakapewin - D4 - Wawakapewin
- Wesqueing - D5 - Wesqueing Indian Settlement
- Wenusk - C6, B6 - Wenusk 30, Peawanuk Indian Settlement
- Whitefish River - Inset B - Whitefish River
- Whitesand - Inset B - Whitesand 22
- Wikwemikong - Inset B - Point Grandine 3, Wikwemikong Unceded
- Wunnumin - O4 - Wunnumin 1, 2
- Zhilibaahaasing - Inset B - Zhilibaahaasing 19, 18A



Appendix A to Annex A - Quebec



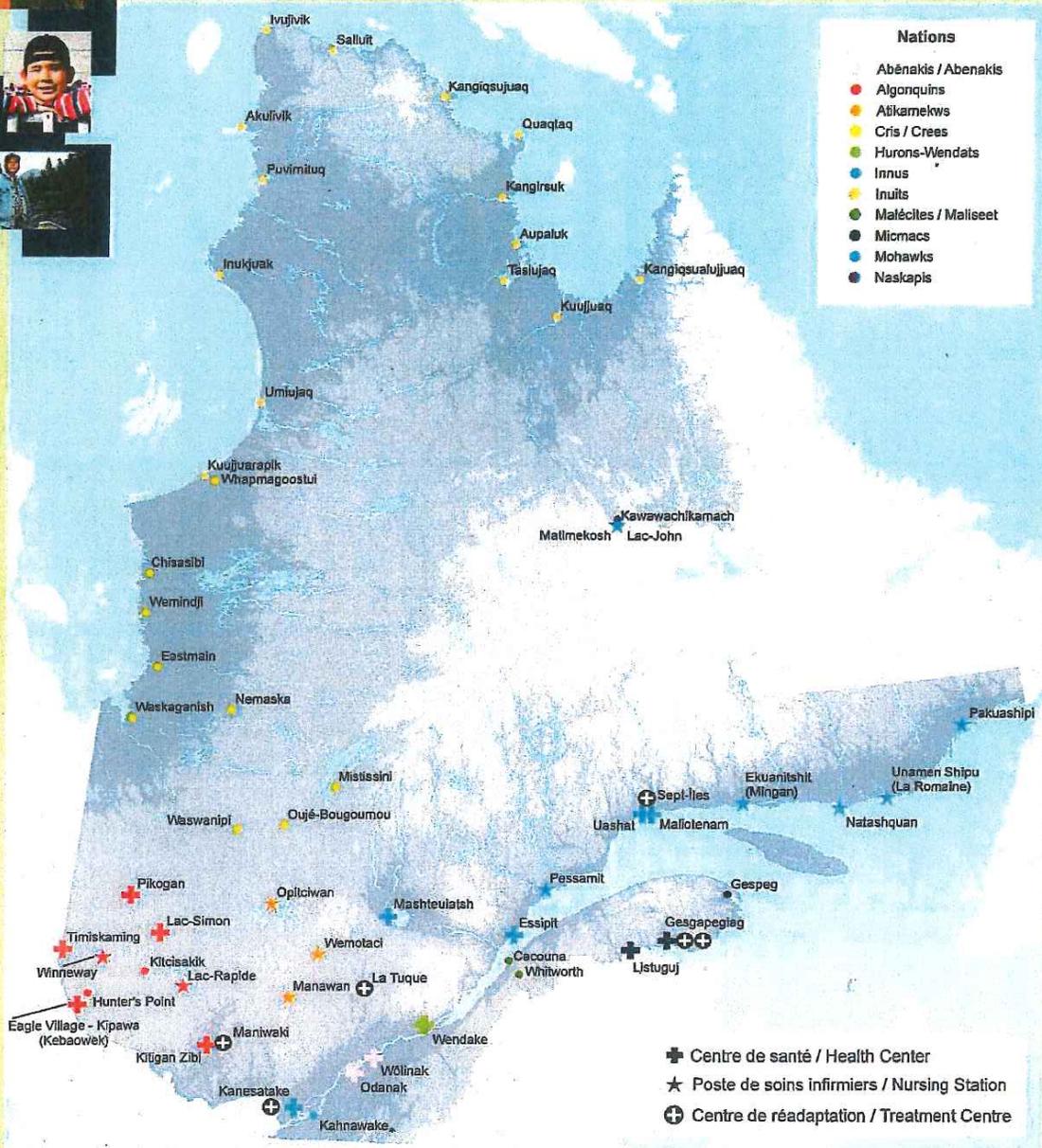
Santé Canada Health Canada

Votre santé et votre sécurité... notre priorité.

Your health and safety... our priority.

ÉTABLISSEMENTS DE SANTÉ FINANCÉS PAR SANTÉ CANADA POUR LES PREMIÈRES NATIONS ET LES INUITS DU QUÉBEC

HEALTH FACILITIES FUNDED BY HEALTH CANADA FOR QUEBEC'S FIRST NATIONS AND INUIT



Appendix B to Annex A

Contract Nurse Performance and Conduct of Work Report

Section 1. Process Description:

- 1) The Nurse In Charge (NIC), or their delegate, identifies the performance and/or conduct issue(s) and discusses them with the appropriate ISC employee, in order to determine if the performance and/or conduct warrants immediate relief of duties or can be addressed by the NIC.
- 2) The NIC, or their delegate, investigates and completes the Contract Nurse Performance and Conduct of Work Report attached. The synopsis is to be written in plain language and is not to require interpretation by the Technical Authority. Opportunities for improvement can be outlined in additional comments. If the issue is not regarding professional practice or patient safety, it must be identified whether or not the Contract Nurse is able to continue to work in the current community (as per TA assignment) or is able to work in other Locations of Work.
- 3) Competencies that have been marked with an "X" reflect the area(s) of concern and must be clearly explained in *Section 4 - Synopsis and Additional Comments*. If the incident(s) is not a reflection of the competencies, skills or conduct identified in *Section 3 - Competencies / Skills / Conduct*, a description of the issue(s) must be clearly explained in Section 4. Reports that do not contain substantiation in Section 4 will be considered incomplete.
- 4) A copy of the completed report will be sent to the Technical Authority, or their delegate. The Technical Authority, or their delegate, will advise the Contractor of any professional performance or conduct issues identified with the Contract Nurse(s) delivering services, and provide a completed Contract Nurse Performance and Conduct of Work Report which outlines the details regarding the performance or conduct issue(s). Reports that are incomplete will be returned to the sender for completion.

Section 2. Reporting Information:

Name of Contract Nurse:		Date that incident(s) occurred:
Contractor:		
FN Community where incident(s) occurred:		
Incident(s) witnessed / reported by (name):		
Date:		
Signature:		
Name of NIC, or their delegate.		
Date:		
Signature:		

Section 3. Competencies / Skills / Conduct:

Skill Statement for Role and Scope	Indicate with an (X) the area(s) of concern:
1. Perform nursing services as per the Indigenous Services Canada (ISC) FNIHB Clinical Practice Guidelines for Nurses in Primary Care	

Skill Statement for Health Promotion & Illness/Injury Prevention	Indicate with an (X) the area(s) of concern:
1. Apply principles of teaching and learning in the implementation of community-based education (e.g., individuals, groups and aggregates)	
2. Identify client health promotion / prevention needs	
3. Participate in health promotion / prevention programs (e.g., school health, prenatal care, men / women health, and injury prevention)	
4. Participate in communicable disease programs, including community-based education regarding communicable disease control and immunization programs	

Skill Statement for Health Assessment	Indicate with an (X) the area(s) of concern:
1. Perform health and screening assessments, including relevant health history and physical examinations according to clients' condition and stage of development	
2. Analyse the findings from health assessments and recognize the deviations / variation from normal findings	
3. Synthesize data from multiple sources to establish a differential and working diagnosis	
4. Identify common health problems / conditions including urgent / emergent problems / conditions, communicable diseases, affecting clients across the lifespan	
5. Communicate verbally and in writing, concise and precise history and physical assessment findings on clients across the lifespan	
6. Consult with other health care providers regarding assessments in an appropriate and timely manner	
7. Determine the need for appropriate diagnostic tests	

8. Discuss health assessment findings with clients	
9. Recognize a psycho-social emergency	
10. Recognize the impact of community disasters	

Skill Statement for Interventions: (Within the context of the Scope of Practice in each Jurisdiction and ISC / FNIHB Clinical Practice Guidelines for Nurses in Primary Care	Indicate with an (X) the area(s) of concern:
1. Initiate, manage and evaluate care of common / urgent / emergent problems / conditions affecting clients across the lifespan	
2. Communicate verbally and in writing, clinical interventions on clients	
3. Initiate over the counter and prescription drugs and therapeutics based on assessment data and use of drug formulary	
4. Apply knowledge of pharmacology when prescribing drugs and dispense in accordance with National Nurses Drug Classification System and meet legal requirements for documentation of prescriptive therapy	
5. Assist and support clients in designing, following and assessing effectiveness of recommended therapeutic regimes	
6. Operate emergency equipment	
7. Initiate and maintain intravenous fluid therapy according to the needs of the client	
8. Apply principles of wound management including suturing	
9. Manage psycho-social emergencies	
10. Implement general principles of medical evacuation and manage as required	
11. Utilize safety precautions (e.g., client, equipment, and self)	
12. Perform venipuncture according to standards of practice	
13. Perform specimen collection appropriate to treatment settings (e.g. STD swabs, pap smears, gastric washings for TB, and microscopy for wet mount / clue cells)	
14. Interpret diagnostic laboratory results and respond appropriately	
15. Apply the knowledge and principles of radiology in order to safely perform x-rays of chest/limbs (where applicable)	
16. Provide basic interpretation of chest and limb films and respond appropriately (where applicable)	

17. Apply knowledge in order to accurately perform, interpret, and respond appropriately to basic electrocardiograms	
--	--

Skill Statement for Cultural Competency	Indicate with an (X) the area(s) of concern:
1. Demonstrate respect of Indigenous culture and Indigenous peoples	

FNHIB-specific Accuro EMR System <i>(Note: applicable only if FNHIB specific Accuro EMR is used at the Location of Work)</i>	Indicate with an (X) the area(s) of concern:
1. The Contract Nurse is Proficient at using the FNHIB-specific Accuro EMR system	

Use of Communication Devices	Indicate with an (X) the area(s) of concern:
1. Contract Nurses must use "communication devices" (e.g. mobile phones, text pagers and other wireless devices) in an appropriate manner at all times while performing Work	

Use of Government Property	Indicate with an (X) the area(s) of concern:
1. Smoking is not permitted in nursing stations or residences supplied under the TA	
2. Pets are not permitted in nursing stations or residences supplied under the TA	
3. The Contractor must ensure that Contract Nurses keep living quarters clean and orderly, both inside and outside the building	

****** The nature and / or severity of the issue(s) raised in this report warrant that this Contract Nurse be removed from the community and / or ISC approved Contract Nurse roster. ******

Yes ___ No ___

Section 4. Synopsis and Additional Comments:

Any competencies that have been marked with an "X" **must** be clearly explained (below), otherwise this Report will be considered incomplete:

Completed by (name): _____	Date: _____	Signature: _____
----------------------------	-------------	------------------

Appendix D to Annex A

Indigenous Services Canada

OVERTIME AUTHORIZATION FORM

This form is to be utilized to approve all Overtime for Contract Nurses, other than when they are "Called-back" or when assigned to be on "Stand-by".

INSTRUCTIONS:

NIC to fax a copy of the signed form to: Nurse Relief Coordination Unit @ 613-952-4622

Contract Nurses must attach the signed copy of this form to time sheets. Original signed record to be kept by the Contractor.

NAME OF THE CONTRACT NURSE:

NAME OF THE CONTRACTOR:

CALL-UP #:

REGION:

PO NUMBER:

COMMUNITY LOCATION:

TA NUMBER:

DATE(S):

REASON(S) FOR EXTRA DUTY:

APPROXIMATE HOURS REQUESTED:

COMMENTS:

APPROVED BY: _____

(PRINT NAME/SIGNATURE)

DATE: _____

Appendix E to Annex A
Locations of Work - First Nations Communities

Alberta Region

- Fox Lake Nursing Station
- Garden River Health Centre with treatment
- Hay Lake Health Centre with treatment
- John D'Or Prairie Health Centre with treatment
- Alternate locations as required by regional health authorities

Appendix E to Annex A

Locations of Work - First Nations Communities

Manitoba Region

- Bloodvein Nursing Station
- Brochet Nursing Station
- Cross Lake Nursing Station
- Garden Hill Nursing Station Regional Dialysis Unit
- God's Lake Narrows Nursing Station
- God's River Nursing Station
- Lac Brochet Nursing Station
- Little Grand Rapids Nursing Station
- Nelson House Nursing Station
- Oxford House Nursing Station
- Pauingassi Nursing Station
- Poplar River Nursing Station
- Pukatawagan Nursing Station
- Red Sucker Lake Nursing Station
- Shamattawa Nursing Station
- South Indian Lake Nursing Station
- Split Lake Nursing Station
- St. Theresa Point Nursing Station
- Tadoule Lake Nursing Station
- Wasagamack Nursing Station
- York Landing Nursing Station
- Alternate locations as required by regional health authorities

Appendix E to Annex A

Locations of Work - First Nations Communities

Ontario Region

- Bearskin Nursing Station
- Cat Lake Margaret Grey Nursing Station
- Fort Hope Nursing Station
- Fort Severn Nursing Station
- Grassy Narrows Health Center with Treatment
- Gull Bay Health Center with Treatment
- Kasabonika Nursing Station
- Kashechewan Nursing Station
- Keewaywin Nursing Station
- Kitchenuhmaykoosib Inninuwug Big Trout Lake Nursing Station
- Lansdowne House Nursing Station
- Marten Falls Ogoki Post Nursing Station
- Mishkeegogamang New Osnaburgh Nursing Station
- Muskrat Dam Nursing Station
- North Spirit Lake Nursing Station
- Pikangikum Nursing Station
- Poplar Hill Nursing Station
- Round Lake Sena Memorial Nursing Station
- Sachigo Lake Nursing Station
- Sandy Lake Nursing Station
- Summer Beaver Nursing Station
- Wabaseemoong WhiteDog Health Center with Treatment
- Webequie Nursing Station
- Weenusk Peawanuck Nursing Station
- Alternate locations as required by regional health authorities

Appendix E to Annex A

Locations of Work - First Nations Communities

Quebec Region

- Lac Rapide Nursing Station
- Winneway Nursing Station
- Alternate locations as required by regional health authorities

Appendix F to Annex A – Alberta

Contract Nurse Duties

Registered Nurse:

Registered Nurse duties may include, but are not limited to the following:

- Assess the patients physical, emotional and mental health
- Perform basic exams and take vital signs, blood pressure, draw blood samples
- Carry out treatment plans for patients which include giving medications, coordinating treatments, bandaging wounds and giving injections
- Operate and monitor technical equipment
- Assist with medical procedures or minor surgery
- Assess the needs of individuals, families and/or communities
- Instruct individuals, families and other groups on topics such as health education, disease prevention and childbirth, and developing health improvement programs
- Prepare rooms, and ensure that stock of supplies is maintained
- Provide prenatal and postpartum care
- Perform physical examinations, make tentative diagnoses, and treat patients preparing for medical evacuations
- Conduct specified laboratory tests
- Direct and coordinate infection control programs, advising and consulting with specified personnel about necessary precautions
- Perform administrative functions
- Maintain accurate, detailed reports and records
- Monitor, record and report symptoms and changes in patients' conditions
- Record patients' medical information and vital signs
- Modify patient treatment plans as indicated by patients' responses and conditions
- Consult and coordinate with health care team members to assess, plan, implement and evaluate patient care plans
- Inform and educate patients of different treatment options

***** Please refer to the following provincial nursing Colleges for the specific Standards, Guidelines and Scope of Practices that apply to the Region *****

- College and Association of Registered Nurses of Alberta (CARNA)

Nurse Practitioner:

Nurse Practitioner duties may include, but are not limited to the following:

- Interview patients to get a medical history
- Administer preventative care
- Conduct physical examinations
- Diagnose injuries, illnesses, and disorders
- Prescribe medications to treat chronic or acute illness
- Inform patients about illness prevention and a healthy lifestyle
- Communicate with other health care providers to achieve total health for patients
- Perform patient counselling (e.g., mental health, family planning, medication compliance)
- Promote health (e.g., smoking cessation, infection control)
- Immunize against disease, screen for diseases
- Treat short-term acute illnesses (e.g., infections, minor injuries) and critical / urgent illnesses
- Treat and monitor patients with chronic conditions (e.g., diabetes, heart disease)
- Refer patients to other health and social services (e.g., social work, dieticians, pharmacists, home care facilities)
- Counsel patients (e.g., understanding illness progression, treatments)
- Demonstrate / teach procedures

***** Please refer to the following provincial nursing Colleges for the specific Standards, Guidelines and Scope of Practices that apply to the province *****

- College and Association of Registered Nurses of Alberta (CARNA)

Appendix F to Annex A – Manitoba

Contract Nurse Duties

Registered Nurse:

Registered Nurse duties may include, but are not limited to the following:

- Assess the patients physical, emotional and mental health
- Perform basic exams and take vital signs, blood pressure, draw blood samples
- Carry out treatment plans for patients which include giving medications, coordinating treatments, bandaging wounds and giving injections
- Operate and monitor technical equipment
- Assist with medical procedures or minor surgery
- Assess the needs of individuals, families and/or communities
- Instruct individuals, families and other groups on topics such as health education, disease prevention and childbirth, and developing health improvement programs
- Prepare rooms, and ensure that stock of supplies is maintained
- Provide prenatal and postpartum care
- Perform physical examinations, make tentative diagnoses, and treat patients preparing for medical evacuations
- Conduct specified laboratory tests
- Direct and coordinate infection control programs, advising and consulting with specified personnel about necessary precautions
- Perform administrative functions
- Maintain accurate, detailed reports and records
- Monitor, record and report symptoms and changes in patients' conditions
- Record patients' medical information and vital signs
- Modify patient treatment plans as indicated by patients' responses and conditions
- Consult and coordinate with health care team members to assess, plan, implement and evaluate patient care plans
- Inform and educate patients of different treatment options

***** Please refer to the following provincial nursing Colleges for the specific Standards, Guidelines and Scope of Practices that apply to the Region *****

- College of Registered Nurses of Manitoba (CRNM)

Nurse Practitioner:

Nurse Practitioner duties may include, but are not limited to the following:

- Interview patients to get a medical history
- Administer preventative care
- Conduct physical examinations
- Diagnose injuries, illnesses, and disorders
- Prescribe medications to treat chronic or acute illness
- Inform patients about illness prevention and a healthy lifestyle
- Communicate with other health care providers to achieve total health for patients
- Perform patient counselling (e.g., mental health, family planning, medication compliance)
- Promote health (e.g., smoking cessation, infection control)
- Immunize against disease, screen for diseases
- Treat short-term acute illnesses (e.g., infections, minor injuries) and critical / urgent illnesses
- Treat and monitor patients with chronic conditions (e.g., diabetes, heart disease)
- Refer patients to other health and social services (e.g., social work, dieticians, pharmacists, home care facilities)
- Counsel patients (e.g., understanding illness progression, treatments)
- Demonstrate / teach procedures

***** Please refer to the following provincial nursing Colleges for the specific Standards, Guidelines and Scope of Practices that apply to the province *****

- College of Registered Nurses of Manitoba (CRNM)

Appendix F to Annex A – Ontario

Contract Nurse Duties

Registered Nurse:

Registered Nurse duties may include, but are not limited to the following:

- Assess the patients physical, emotional and mental health
- Perform basic exams and take vital signs, blood pressure, draw blood samples
- Carry out treatment plans for patients which include giving medications, coordinating treatments, bandaging wounds and giving injections
- Operate and monitor technical equipment
- Assist with medical procedures or minor surgery
- Assess the needs of individuals, families and/or communities
- Instruct individuals, families and other groups on topics such as health education, disease prevention and childbirth, and developing health improvement programs
- Prepare rooms, and ensure that stock of supplies is maintained
- Provide prenatal and postpartum care
- Perform physical examinations, make tentative diagnoses, and treat patients preparing for medical evacuations
- Conduct specified laboratory tests
- Direct and coordinate infection control programs, advising and consulting with specified personnel about necessary precautions
- Perform administrative functions
- Maintain accurate, detailed reports and records
- Monitor, record and report symptoms and changes in patients' conditions
- Record patients' medical information and vital signs
- Modify patient treatment plans as indicated by patients' responses and conditions
- Consult and coordinate with health care team members to assess, plan, implement and evaluate patient care plans
- Inform and educate patients of different treatment options

***** Please refer to the following provincial nursing Colleges for the specific Standards, Guidelines and Scope of Practices that apply to the Region *****

- College of Nurses of Ontario (CNO)

Nurse Practitioner:

Nurse Practitioner duties may include, but are not limited to the following:

- Interview patients to get a medical history
- Administer preventative care
- Conduct physical examinations
- Diagnose injuries, illnesses, and disorders
- Prescribe medications to treat chronic or acute illness
- Inform patients about illness prevention and a healthy lifestyle
- Communicate with other health care providers to achieve total health for patients
- Perform patient counselling (e.g., mental health, family planning, medication compliance)
- Promote health (e.g., smoking cessation, infection control)
- Immunize against disease, screen for diseases
- Treat short-term acute illnesses (e.g., infections, minor injuries) and critical / urgent illnesses
- Treat and monitor patients with chronic conditions (e.g., diabetes, heart disease)
- Refer patients to other health and social services (e.g., social work, dieticians, pharmacists, home care facilities)
- Counsel patients (e.g., understanding illness progression, treatments)
- Demonstrate / teach procedures

***** Please refer to the following provincial nursing Colleges for the specific Standards, Guidelines and Scope of Practices that apply to the province *****

- College of Nurses of Ontario (CNO)

Appendix F to Annex A – Quebec

Contract Nurse Duties

Registered Nurse:

Registered Nurse duties may include, but are not limited to the following:

- Assess the patients physical, emotional and mental health
- Perform basic exams and take vital signs, blood pressure, draw blood samples
- Carry out treatment plans for patients which include giving medications, coordinating treatments, bandaging wounds and giving injections
- Operate and monitor technical equipment
- Assist with medical procedures or minor surgery
- Assess the needs of individuals, families and/or communities
- Instruct individuals, families and other groups on topics such as health education, disease prevention and childbirth, and developing health improvement programs
- Prepare rooms, and ensure that stock of supplies is maintained
- Provide prenatal and postpartum care
- Perform physical examinations, make tentative diagnoses, and treat patients preparing for medical evacuations
- Conduct specified laboratory tests
- Direct and coordinate infection control programs, advising and consulting with specified personnel about necessary precautions
- Perform administrative functions
- Maintain accurate, detailed reports and records
- Monitor, record and report symptoms and changes in patients' conditions
- Record patients' medical information and vital signs
- Modify patient treatment plans as indicated by patients' responses and conditions
- Consult and coordinate with health care team members to assess, plan, implement and evaluate patient care plans
- Inform and educate patients of different treatment options

***** Please refer to the following provincial nursing Colleges for the specific Standards, Guidelines and Scope of Practices that apply to the Region *****

- Ordre des infirmières et infirmiers du Québec (OIIQ)

Appendix G to Annex A

Invoice Template				
Contractor Name: Contractor Address: Contractor Phone Number: GST#: _____		Invoice Number: Invoice Date: Final Invoice:		
Invoice Addressed to: ISC: hc.p2p.west.invoices-factures.ouest.sc@canada.ca ; and agencynurseservices_servicedinfirmieresdages@hc-sc.gc.ca Contracting Authority (via bcc): hc.contracts.west-ouest.contrats.sc@canada.ca *Original hard copy of invoice is kept by the Contractor.		TA #: Call-up #: TA Amend. #: PO #: Nurse's Name: Service Location:		
Service Start Date: YYYY-MM-DD	Service End Date: YYYY-MM-DD			
Description of Services	Time Sheet Attached	Number of Hours/ Quantity	Hourly Rate	Total
Regular/Standby Hours (GL 54506)				\$ -
Overtime/Call Back Hours (GL 54506)				\$ -
Statutory Hours - on Stand By (GL 54506)				\$ -
Statutory Hours - on Call Back (GL 54506)				\$ -
Travel Time While in Transit (GL 54506)				\$ -
TA Termination for Convenience Fee (GL 54506)				\$ -
Total Service Cost				\$ -
Travel and Allowable Accommodation and Miscellaneous Costs:	Receipt / Voucher Attached		Amount	Total
Air (GL 52510)				\$ -
Hotel (GL 52516)				\$ -
Taxi (GL 52514)				\$ -
Personal Motor Vehicle (GL 52513)				\$ -
Other costs (please specify as per Treasury Board of Canada Secretariat's Travel Directive and the approved TA)				\$ -
Total Travel Cost				\$ -
			Applicable taxes on travel and accommodation	\$ -
			Applicable taxes service fees	\$ -
			Total Taxes	\$ -
INVOICE TOTAL AMOUNT				\$ -
All supporting documents are provided with this invoice, including time sheets, invoices, receipts and vouchers for all direct expenses, travel and accommodations. In instances in which the Contractor is invoicing for multiple communities, please complete the "Hours by Community" tab and include the breakdown with the invoice.				

Appendix H to Annex A

INSTRUCTIONS

ISC NIC to send copy of signed Record to:
 Nurse Relief Coordination Unit
 Fax Number: 613-952-4622

Original Signed Record to be kept by the Contractor.

TA#: _____ PO#: _____
Call-up#: _____
Contractor: _____

RECORD OF CALL BACK

Contract Nurse: _____ Community: _____

Complete ONE Record of Call Back PER Week (Sunday to Saturday)

Day	Date	Time In	Time Out	Reason for Call Back	Total Hours	NIC Name (Print)	NIC Initials
Total Hours							

Week Ending: _____

NIC Name: _____

Signature: _____

Appendix I

Contract Nurse (CN) Scoring Rubric

The CN Scoring Rubric will be used by the TAA to indicate the minimum mandatory requirements needed for a CN being proposed under any given Task Authorization (TA) and outlines how asset elements (relevant to the work being performed under that TA) will be scored. The content of the CN Scoring Rubric will vary for each TA (based on the work requirements) and will be determined by ISC prior to issuance of a TA Group Invitation. At a minimum, the CN Scoring Rubric will include the mandatory CN requirements as stipulated in section 6 of Annex A, however ISC may include additional mandatory CN requirements or asset elements dependent on the specifics of the Task Authorization.

Points will be allocated to a Contractor's proposed CN for demonstrating the education, professional certification and experience elements that are indicated as assets in the CN Scoring Rubric (as circulated at the time of the TA Group Invitation).

The TAA, or their delegate, will use the CN Scoring Rubric (as circulated at the time of the TA Group Invitation) to determine the proposed resource's final CN Score.

Note: The mandatory and asset elements listed below have been included as examples only. The actual elements used in a CN Scoring Rubric will be established based on ISC's work requirement.

Scoring Rubric

Element	Scoring	Contractor Response	ISC Confirmation
Mandatory Elements			
Copy of Educational Degree(s) and/or Diploma(s) <i>(Refer to Annex A for the Educational requirements of RNs and NPs)</i>	Met/ Not Met	Documentation Attached <input type="checkbox"/>	
Copy of valid License (with no restrictions) for the Region (jurisdiction) the CN will be providing services in.	Met/ Not Met	License #: _____ Expiry Date: _____ Copy Attached <input type="checkbox"/>	
Copy/Proof of Malpractice Insurance	Met/ Not Met	Expiry Date: _____ Copy Attached <input type="checkbox"/>	
Copy of Driver's License	Met/ Not Met	Expiry Date: _____ Copy Attached <input type="checkbox"/>	

Copy of Security Clearance – Reliability Status	Met/ Not Met	CISD Clearance #: _____ Level of Clearance: _____ Expiry Date: _____ Copy Attached <input type="checkbox"/>	
Advanced Cardiac Life Support (ACLS) Certificate issued by the Heart and Stroke Foundation of Canada or the American Heart Association	Met/ Not Met	Expiry Date: _____ Copy Attached <input type="checkbox"/>	
International Trauma Life Support (ITLS) Certificate / Pre-Hospital Trauma Life Support (PHTLS) Certificate **In QC Region, both acceptable**	Met/ Not Met	Expiry Date: _____ Copy Attached <input type="checkbox"/>	
Paediatric Advanced Life Support (PALS) Certificate issued by the Heart and Stroke Foundation of Canada or the American Heart Association	Met/ Not Met	Expiry Date: _____ Copy Attached <input type="checkbox"/>	
Controlled Drugs and Substances Certificate	Met/ Not Met	Expiry Date: _____ Copy Attached <input type="checkbox"/>	
Immunization Certificate / Proof of Successful Completion	Met/ Not Met	Copy Attached <input type="checkbox"/>	
Basic Life Support (BLS) / Cardio Pulmonary Resuscitation (CPR) Certificate issued by the Heart and Stroke Foundation of Canada or the American Heart Association	Met/ Not Met	Expiry Date: _____ Copy Attached <input type="checkbox"/>	
WHMIS Certificate	Met/ Not Met	Copy Attached <input type="checkbox"/>	
TDG Certificate	Met/ Not Met	Expiry Date: _____ Copy Attached <input type="checkbox"/>	
Privacy Basics & Privacy Impact Assessments Certificate	Met/ Not Met	Copy Attached <input type="checkbox"/>	
Accuro Electronic Medical Records (EMR) Certificate and/or Proficiency in the use of Accuro EMR **MB Region**	Met/ Not Met	Copy of Certificate or Contractor Validation of CN Proficiency Attached <input type="checkbox"/>	

Resume	Met/ Not Met	Copy Attached <input type="checkbox"/>	
<p>Work Experience (Must be detailed on Resume)</p> <p>1 year, defined as 1,500 Regular Working Hours¹ of experience, in the past five years from the date of TA issuance, working in Remote, Isolated and/or Semi-isolated communities;</p> <p>OR</p> <p>2 years, defined as 3,000 Regular Working Hours¹ of experience, in the past five years from the date of TA issuance, performing nursing services in primary care and advanced clinical assessments.</p> <p>This experience must be obtained in the emergency, intensive care unit or in community settings such as health care centres (e.g. urgent care centre, quick care centre).</p>	Met/ Not Met	<p>Total Number of Hours or Year(s): _____</p> <p><u>Contractor Breakdown of Total Hours claimed above:</u></p>	
Copy of the CN Consent to Release Form	Met/ Not Met	Copy Attached <input type="checkbox"/>	
Asset Elements			
<p><i>Asset Element #1</i></p> <p>Total Regular Working Hours¹ experience in the past five years from the date of TA issuance, working in Remote, Isolated, and/or Semi-isolated communities.</p>	<p>Maximum 30 Points</p> <p>See notes below</p>	<p>Total Number of Hours: _____</p> <p><u>Contractor Breakdown of Total Hours claimed above:</u></p>	
<p><i>Asset Element #2</i></p> <p>Total Regular Working Hours¹ experience in the past five years from the date of TA issuance, working in intensive care units and/or emergency rooms.</p>	<p>Maximum 60 Points</p> <p>See notes below</p>	<p>Total Number of Hours: _____</p> <p><u>Contractor Breakdown of Total Hours claimed above:</u></p>	

<p><i>Asset Element #3</i></p> <ul style="list-style-type: none"> Experience Criteria 1: Previous experience in the Location of Work applicable to the Task Authorization <p>OR</p> <ul style="list-style-type: none"> Experience Criteria 2: Previous experience in other Location(s) of Work (in the Region in which services are to be provided) 	<p>15 Points²</p> <p>OR</p> <p>5 Points²</p> <p>Maximum 15 Points Total for Asset Element #3</p>	<p>Community: _____</p> <p><u>Contractor to provide previous assignment dates:</u> _____</p>	
<p>Total</p>			

RESPONSE CERTIFICATION

The following certification must be completed by the Contractor.

Failure to complete the certification will result in the Contractor's response being deemed non-responsive to the TA Group Invitation.

The Contractor is reminded that provision of false or misleading information in response to a TA Group Invitation may lead to suspension or set aside of the Contractor's Standing Offer (article 7.11.2, C, ii).

By initialing in the box to the right, the Contractor, certifies that the information submitted in response to the mandatory requirements and asset elements of this CN Scoring Rubric is accurate and complete.

X _____

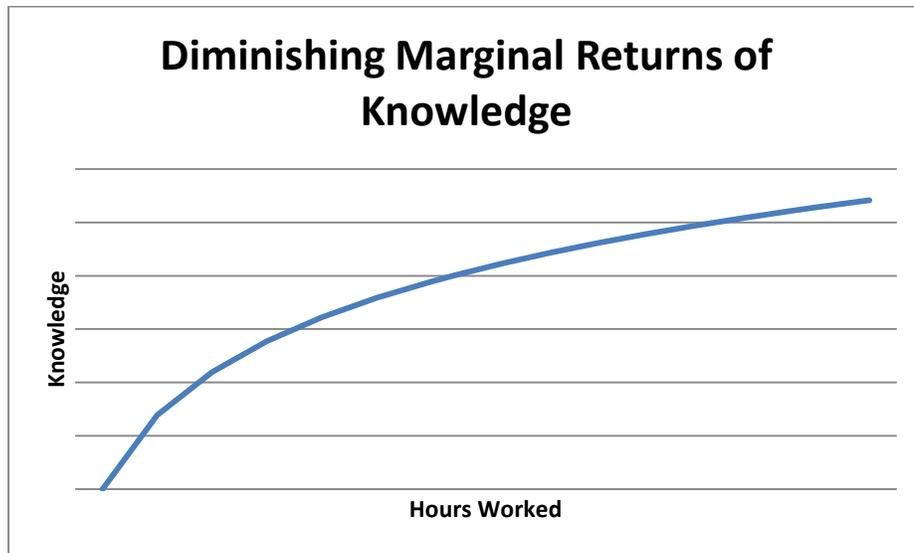
¹**Regular Working Hours:** means the hours billed by the Contractor to a client, excluding Call-back, Overtime and Stand-by.

²**Asset Element # 3:** the maximum total score that can be issued for this Element is 15 points. (e.g. if the CN meets Experience Criteria 1, they will not be eligible to score further points under Experience Criteria 2.

Regular Working Hours Experience Rationale and Scoring (Asset Elements #1 & #2)

The first and second asset elements in the Contract Nurse (CN) Scoring Rubric are called Regular Working Hours Experience. This criterion is meant to give preference to CNs with more experience by issuing points based on how many Regular Working Hours of experience they have achieved.

Figure 1



As you can see from the diagram above, the cumulative knowledge is always increasing, but the marginal knowledge for each additional hour worked becomes less and less. It is with this understanding that ISC will score Contract Nurses based on experience.

Scoring Methodology (Asset Element #1)

This asset will be applied when ISC determines that there is a need for a Contract Nurse with experience in the past five years from the date of TA issuance, working in Remote, Isolated and/or Semi-Isolated communities that are over and above the mandatory minimum requirement. As an asset, points will be awarded on a sliding scale, rounded to zero decimal points, as outlined below:

Regular Working Hours	Points
1500 (minimum mandatory)	0
1501 - 1547	1
1548 - 1647	2
1648 - 1753	3
1754 - 1866	4
1867 - 1986	5
1987 - 2114	6
2115 - 2251	7
2252 - 2396	8
2397 - 2550	9
2551 - 2715	10
2716 - 2890	11
2891 - 3076	12
3077 - 3274	13
3275 - 3486	14
3487 - 3710	15
3711 - 3950	16
3951 - 4204	17
4205 - 4475	18
4476 - 4764	19
4765 - 5071	20

5072 - 5398	21
5399 - 5746	22
5747 - 6117	23
6118 - 6512	24
6513 - 6931	25
6932 - 7378	26
7379 - 7854	27
7855 - 8361	28
8362 - 8900	29
8901 - 9474	30

Scoring Methodology (Asset Element #2)

This asset will be applied when ISC determines that there is a need for a Contract Nurse with greater than 3,000 hours experience in the past five years from the date of TA issuance, working in emergency, intensive care unit or within community settings such as health care centres (e.g. urgent care centre, quick care centre). As an asset, points will be awarded on a sliding scale, rounded to zero decimal points, as outlined below:

ICU/Emergency Room Experience (Hours)	Points
3000 (minimum mandatory)	0
3001 - 3155	1
3156 - 3217	2
3218 - 3281	3
3282 - 3346	4
3347 - 3412	5
3413 - 3479	6
3480 - 3547	7
3548 - 3617	8
3618 - 3689	9
3690 - 3761	10
3762 - 3836	11
3837 - 3911	12
3912 - 3988	13
3989 - 4067	14
4068 - 4147	15
4148 - 4229	16
4230 - 4312	17
4313 - 4397	18
4398 - 4484	19
4485 - 4573	20
4574 - 4663	21
4664 - 4755	22
4756 - 4849	23
4850 - 4944	24
4945 - 5042	25
5043 - 5141	26
5142 - 5242	27
5243 - 5346	28

5347 - 5451	29
5452 - 5559	30
5560 - 5668	31
5669 - 5780	32
5781 - 5894	33
5895 - 6010	34
6011 - 6129	35
6130 - 6250	36
6251 - 6373	37
6374 - 6499	38
6500 - 6627	39
6628 - 6758	40
6759 - 6891	41
6892 - 7027	42
7028 - 7165	43
7166 - 7307	44
7308 - 7451	45
7452 - 7598	46
7599 - 7748	47
7749 - 7900	48
7901 - 8056	49
8057 - 8215	50
8216 - 8377	51
8378 - 8542	52
8543 - 8711	53
8712 - 8883	54
8884 - 9058	55
9059 - 9236	56
9237 - 9419	57
9420 - 9604	58
9605 - 9794	59
9795 - 9987	60

Appendix J to Annex A

Contract Nurse Consent to Release Form

Provision of this form, by the Contractor, is required when responding to a TA Group Invitation in order to meet the Mandatory Elements of Appendix I – *Contract Nurse (CN) Scoring Rubric*.

This form must be completed and submitted, by the Contractor, with all documentation as required by the CN Scoring Rubric. This form must be completed once by the Contract Nurse and can be submitted multiple times against a TA Group Invitation.

TO BE COMPLETED BY THE CONTRACT NURSE:

By signing below, the Contract Nurse provides their consent for copies of documentation related to their education, licensure, certification, training and experience to be provided by the Contractor to Indigenous Services Canada for validation in order to conduct Work under Nursing Services Standing Offer #5A090-192272/XXX/XF .

Contract Nurse's Name: _____

Contract Nurse's Signature: _____

Date: (year/month/day) _____

Contractor: _____

ANNEX B

BASIS OF PAYMENT

1.0 Travel and Living Expenses

- 1.1** All travel must have the prior authorization of the TA Authority in charge of submitting the TA form for a specific requirement.
- 1.2** Canada will reimburse authorized travel and living expenses reasonably and properly incurred in the performance of the Work, at cost, with no allowance for overhead, profit, travel agency fees or consulting fees to the Location of Work. Travel arrangements must be made in accordance with terms and conditions for travel herein and in accordance with the National Joint Council Travel Directive, and with the other provisions of the directive referring to "travellers", rather than those referring to "employees" excluding the reimbursement of meals, bottled water, parking, telephone calls and incidentals.
- 1.3** Travel originating from outside of Canada will not be reimbursed.
- 1.4** Canada will not mail belongings back and forth between nursing stations between assignments. All freight and excess baggage must be paid by the Contractor and only invoiced to Canada if approved under the terms of a specific Task Authorization.
- 1.5** The Contractor must ensure that all Contract Nurses, in normal circumstances, travel to the Location of Work the day before Work is to commence, and depart on the last flight out on the last day of the period of service, unless otherwise stated in the TA.
- 1.6** In situations where the Contract Nurse is assessed to not meet the minimum competencies, or in the opinion of Canada, is incapable of doing the required work, the Contractor will be responsible for the salary, travel, and accommodation costs associated with the removal of the Contract Nurse from the Location of Work. Also, in these instances, the Contractor must assume all costs for providing a qualified replacement to the Location of Work.
- 1.7** In the event that a Contract Nurse must be removed from the Location of Work as a result of performance and / or conduct issues, the Contractor must cover all costs associated with removing the Contract Nurse from the Location of Work.
- 1.8** Canada will be responsible for travel costs associated with removing a Contract Nurse from the community in circumstances of a natural disaster or emergency (e.g. fire, flood, oil spill etc.)
- 1.9** Canada will be responsible for travel costs associated with any change in the Location of Work that is initiated by Canada.
- 1.10** Where there are extenuating circumstances (e.g. poor weather) following successful departure which would delay the Contract Nurse's arrival to the Location of Work at commencement of period of service outlined in the TA, Canada will pay for accommodation and transportation at the economy rate. Such extenuating circumstances will need approval of the TAA.

1.11 Where there are extenuating circumstances (e.g. poor weather) disrupting travel from the Location of Work which would delay the Contract Nurse's return from a Location of Work at completion of period of service outlined in the TA, Canada will pay for accommodation and transportation at the economy rate. Such extenuating circumstances will need approval of the TAA.

1.12 The authorized travel and living expenses will be paid upon submission of an itemized statement and must be supported by receipt vouchers. All payments are subject to government audit.

2.0 Professional Fees

[to be completed for each Region and Category, as applicable, upon SO Issuance]

Region: *[to be completed upon SO Issuance]*

During the period of a Call-up, for Work performed by Contract Nurses in accordance with the Call-up and the authorized Task Authorization, the Contractor will be paid as specified below.

2.1 For Regular Working Hours and Stand-by Work:

(Refer to Annex A – Statement of Work for definitions of Regular Working Hours and Stand-by Work)

The Contractor will be paid the all-inclusive Regular Hourly Rate specified below for Regular Working Hours and Stand-by Work:

Resource Category	SO Year 1 (To be revised upon SO issuance)	SO Year 2 (To be revised upon SO issuance)	SO Year 3 (To be revised upon SO issuance)	SO Year 4 (To be revised upon SO issuance)	SO Year 5 (To be revised upon SO issuance)
Registered Nurse (RN) <i>[If Applicable]</i>	\$TBD as submitted by the Offeror in their offer.	The SO Year 2 RN Rate will be established as follows: SO Year 1 RN Rate multiplied by 1.02	The SO Year 3 RN Rate will be established as follows: SO Year 2 RN Rate multiplied by 1.02	The SO Year 4 RN Rate will be established as follows: SO Year 3 RN Rate multiplied by 1.02	The SO Year 5 RN Rate will be established as follows: SO Year 4 RN Rate multiplied by 1.02
Nurse Practitioner (NP) <i>[If Applicable]</i>	\$TBD as submitted by the Offeror in their offer.	The SO Year 2 NP Rate will be established as follows: SO Year 1 NP Rate multiplied by 1.02	The SO Year 2 NP Rate will be established as follows: SO Year 2 NP Rate multiplied by 1.02	The SO Year 3 NP Rate will be established as follows: SO Year 3 NP Rate multiplied by 1.02	The SO Year 4 NP Rate will be established as follows: SO Year 4 NP Rate multiplied by 1.02

Stand-by is payable at the rate of one hour of the Regular Hourly Rate for every eight hours of Stand-by.

2.2 Overtime, Call-back Time and Work performed on Statutory Holidays:
(Refer to Annex A – Statement of Work for definitions of Overtime, Call-back Time and Statutory Holidays)

The Contractor will be paid the same all-inclusive Overtime Hourly Rate for the Work performed on Overtime, Call-back Time and Statutory Holidays, as specified below:

Resource Category	SO Year 1 (To be revised upon SO issuance)	SO Year 2 (To be revised upon SO issuance)	SO Year 3 (To be revised upon SO issuance)	SO Year 4 (To be revised upon SO issuance)	SO Year 5 (To be revised upon SO issuance)
Registered Nurse (RN) <i>[If Applicable]</i>	\$TBD as submitted by the Offeror in their offer.	The SO Year 2 RN Rate will be established as follows: SO Year 1 RN Overtime Hourly Rate multiplied by 1.02	The SO Year 3 RN Rate will be established as follows: SO Year 2 RN Overtime Hourly Rate multiplied by 1.02	The SO Year 4 RN Rate will be established as follows: SO Year 3 RN Overtime Hourly Rate multiplied by 1.02	The SO Year 5 RN Rate will be established as follows: SO Year 4 RN Overtime Hourly Rate multiplied by 1.02
Nurse Practitioner (NP) <i>[If Applicable]</i>	\$TBD as submitted by the Offeror in their offer.	The SO Year 2 NP Rate will be established as follows: SO Year 1 NP Overtime Hourly Rate multiplied by 1.02	The SO Year 3 NP Rate will be established as follows: SO Year 2 NP Overtime Hourly Rate multiplied by 1.02	The SO Year 4 NP Rate will be established as follows: SO Year 3 NP Overtime Hourly Rate multiplied by 1.02	The SO Year 5 NP Rate will be established as follows: SO Year 4 NP Overtime Hourly Rate multiplied by 1.02

Multiple claims for the same Call-back Time, as defined in Annex A, will not be accepted by Canada.

2.3 The firm hourly rates specified in sections 2.1 and 2.2 above are inclusive of all costs associated with the delivery of the Work including, but not limited to:

- i. Management and oversight of the services;
- ii. Validating the qualifications and experience of Contract Nurses prior to their commencement of Work throughout the duration of the Standing Offer;
- iii. All expenses associated with ensuring competence of Contract Nurses during the period of the Standing Offer;
- iv. Repairing damage or replacing the loss of Government Property, by the Contract Nurse, during the period of the Task Authorization; and
- v. The cost of all travel and living expenses that may need to be incurred for the relocation of resources initiated by the Contractor.

Separate charges for any items related to the Contractor's overhead costs are not permitted.

2.4 Travel Time While in Transit

Following the authorized participation in a Medical Evacuation, or travel time as a result of a Canada initiated change of Location of Work, subsequent to the period of service start date, there may be periods of time in which a Contract Nurse is in transit, or layover, waiting to return to the Location of Work. In these instances time spent by a Contract Nurse travelling in transit may be invoiced at 50% of its Regular Hourly Rate, for hours in transit between 06:00am and 11:00pm, as per the Regular Working Hours defined in Annex A. Any such claim must be supported by an authorized time sheet (Appendix C to Annex A).

3.0 Termination or Reduction of the Period of Service of a Task Authorization

3.1 Professional Fees:

3.1.1 There will be no charge to Canada for a TA terminated for convenience, or a reduction to the period of services of a TA, if written notification is provided to the Contractor 14 or more calendar days prior to the period of service start date as indicated in an authorized TA.

3.1.2 Where a TA is terminated for convenience by Canada with less than 14 calendar days prior to the period of service start date, as indicated in an authorized TA, and an alternative assignment(s) of a total duration equivalent to at least 75% of the original period of service, and a period of service start date within 3 calendar days (before or after) the terminated TA, have not been offered to the Contractor within 48 hours of the TA termination notice, the Contractor may invoice Canada at an amount equal to 50% of the firm Regular Hourly Rate of the required Contract Nurse for each day of the TA period of service (up to a maximum of 8 hours per workday), up to a maximum of 10 days total.

3.1.3 Where the period of services of a TA is reduced by more than 5 days by Canada less than 14 calendar days prior to the period of service start date, as indicated in an authorized TA, and an alternative assignment(s) of at least the same duration and timeline to the period reduced have not been offered to the Contractor within 48 hours of the reduction notice, the Contractor may invoice Canada at an amount equal to 50% of the firm Regular Hourly Rate of the required Contract Nurse for each day of the reduction to the period of service (up to a maximum of 8 hours per workday), up to a maximum of 10 days total.

3.2 Travel Expenses:

3.2.1 Where a TA is terminated by Canada, and the Contractor has provided the TA Authority with a copy of the confirmed travel itinerary, demonstrating that the travel has been booked consistent with the approved TA, the Contractor will be reimbursed at cost for the amount committed by the Contractor for the travel arrangements made, subject to the following conditions:

- a. the Contractor must manage and apply any travel credits received due to the TA termination towards future TA requests under the Contract whenever it is possible to do so; and,
- b. Whenever travel credits exist, the Contractor must provide a detailed travel credit report to the Technical Authority and the Contracting Authority on the first day of each calendar month. The travel credit report must include the following information:
 - i. For each authorized TA terminated, the following data elements must be presented:
 - The TA number;
 - The total value of the credits generated by the termination;
 - Proof of any credit restrictions imposed by the issuer (i.e. the travel company) related to use of the resulting credits;

- Copies of receipts or vouchers demonstrating the travel credits;
 - The total value of all travel approved by Canada and purchased by the Contractor for the authorized TA;
 - The date of issuance of the original TA; and,
 - Professional fee(s), where applicable.
- ii. A table indicating total amounts for all authorized TAs terminated. The following data elements must be presented in the table:
- A breakdown of the total value of all travel credits accumulated under the Contract to date, including TA numbers for which the travel credits were originally granted;
 - A breakdown of the total of all travel credits that have been redeemed towards TAs under the Contract, including TA numbers for which the travel credits were redeemed;
 - The total value of the remaining travel credit balance for all TAs terminated under the Contract; and
 - The total value of all applicable professional fees.

3.2.2 Where the period of services of a TA is reduced or extended at the request of Canada, and the Contractor has previously provided the TAA with a copy of the confirmed travel itinerary demonstrating that the travel has been booked consistent with the approved TA, and travel related to the original return is no longer applicable, the Contractor will be reimbursed for any change fees incurred for rescheduling travel for the Contract Nurse.

3.3 No other charges to Canada will apply in relation to a termination.

3.4 Nothing in article 3 will affect Canada's rights to terminate the Contract as specified in the general terms and conditions.

Solicitation No. - N° de l'invitation
5A090-192272/A
Client Ref. No. - N° de réf. du client
5A090-192272

Amd. No. - N° de la modif.
File No. - N° du dossier
005xf. 5A090-192272

Buyer ID - Id de l'acheteur
005xf
CCC No./N° CCC - FMS No./N° VME

ANNEX C

SECURITY REQUIREMENTS CHECK LIST

See Attached



Contract Number / Numéro du contrat PR# 20183702
Security Classification / Classification de sécurité UNCLASSIFIED

**SECURITY REQUIREMENTS CHECK LIST (SRCL)
LISTE DE VÉRIFICATION DES EXIGENCES RELATIVES À LA SÉCURITÉ (LVERS)**

PART A - CONTRACT INFORMATION / PARTIE A - INFORMATION CONTRACTUELLE		
1. Originating Government Department or Organization / Ministère ou organisme gouvernemental d'origine Indigenous Services Canada	2. Branch or Directorate / Direction générale ou Direction FNIHB / PHPCD / OPHC	
3. a) Subcontract Number / Numéro du contrat de sous-traitance	3. b) Name and Address of Subcontractor / Nom et adresse du sous-traitant	
4. Brief Description of Work / Brève description du travail The services provided by the Contractor will encompass the care of patients and the provision of assistance to medical doctors in the treatment of illness, the conduct of programs designed to promote health and prevent diseases, and the provision of advice. The services will also include direct patient care, and consultation, to individuals and families within First Nation communities.		
5. a) Will the supplier require access to Controlled Goods? Le fournisseur aura-t-il accès à des marchandises contrôlées?	<input checked="" type="checkbox"/> No / Non <input type="checkbox"/> Yes / Oui	
5. b) Will the supplier require access to unclassified military technical data subject to the provisions of the Technical Data Control Regulations? Le fournisseur aura-t-il accès à des données techniques militaires non classifiées qui sont assujetties aux dispositions du Règlement sur le contrôle des données techniques?	<input checked="" type="checkbox"/> No / Non <input type="checkbox"/> Yes / Oui	
6. Indicate the type of access required / Indiquer le type d'accès requis		
6. a) Will the supplier and its employees require access to PROTECTED and/or CLASSIFIED information or assets? Le fournisseur ainsi que les employés auront-ils accès à des renseignements ou à des biens PROTÉGÉS et/ou CLASSIFIÉS? (Specify the level of access using the chart in Question 7. c) (Préciser le niveau d'accès en utilisant le tableau qui se trouve à la question 7. c)	<input type="checkbox"/> No / Non <input checked="" type="checkbox"/> Yes / Oui	
6. b) Will the supplier and its employees (e.g. cleaners, maintenance personnel) require access to restricted access areas? No access to PROTECTED and/or CLASSIFIED information or assets is permitted. Le fournisseur et ses employés (p. ex. nettoyeurs, personnel d'entretien) auront-ils accès à des zones d'accès restreintes? L'accès à des renseignements ou à des biens PROTÉGÉS et/ou CLASSIFIÉS n'est pas autorisé.	<input checked="" type="checkbox"/> No / Non <input type="checkbox"/> Yes / Oui	
6. c) Is this a commercial courier or delivery requirement with no overnight storage? S'agit-il d'un contrat de messagerie ou de livraison commerciale sans entreposage de nuit?	<input checked="" type="checkbox"/> No / Non <input type="checkbox"/> Yes / Oui	
7. a) Indicate the type of information that the supplier will be required to access / Indiquer le type d'information auquel le fournisseur devra avoir accès		
Canada <input checked="" type="checkbox"/>	NATO / OTAN <input type="checkbox"/>	
Foreign / Étranger <input type="checkbox"/>		
7. b) Release restrictions / Restrictions relatives à la diffusion		
No release restrictions / Aucune restriction relative à la diffusion <input checked="" type="checkbox"/>	All NATO countries / Tous les pays de l'OTAN <input type="checkbox"/>	
Not releasable / À ne pas diffuser <input type="checkbox"/>		
Restricted to: / Limité à: <input type="checkbox"/>	Restricted to: / Limité à: <input type="checkbox"/>	
Specify country(ies): / Préciser le(s) pays:	Specify country(ies): / Préciser le(s) pays:	
7. c) Level of Information / Niveau d'information		
PROTECTED A / PROTÉGÉ A <input type="checkbox"/>	NATO UNCLASSIFIED / NATO NON CLASSIFIÉ <input type="checkbox"/>	PROTECTED A / PROTÉGÉ A <input type="checkbox"/>
PROTECTED B / PROTÉGÉ B <input checked="" type="checkbox"/>	NATO RESTRICTED / NATO DIFFUSION RESTREINTE <input type="checkbox"/>	PROTECTED B / PROTÉGÉ B <input type="checkbox"/>
PROTECTED C / PROTÉGÉ C <input type="checkbox"/>	NATO CONFIDENTIAL / NATO CONFIDENTIEL <input type="checkbox"/>	PROTECTED C / PROTÉGÉ C <input type="checkbox"/>
CONFIDENTIAL / CONFIDENTIEL <input type="checkbox"/>	NATO SECRET / NATO SECRET <input type="checkbox"/>	CONFIDENTIAL / CONFIDENTIEL <input type="checkbox"/>
SECRET / SECRET <input type="checkbox"/>	COSMIC TOP SECRET / COSMIC TRÈS SECRET <input type="checkbox"/>	SECRET / SECRET <input type="checkbox"/>
TOP SECRET / TRÈS SECRET <input type="checkbox"/>		TOP SECRET / TRÈS SECRET <input type="checkbox"/>
TOP SECRET (SIGINT) / TRÈS SECRET (SIGINT) <input type="checkbox"/>		TOP SECRET (SIGINT) / TRÈS SECRET (SIGINT) <input type="checkbox"/>



PART A (continued) / PARTIE A (suite)

8. Will the supplier require access to PROTECTED and/or CLASSIFIED COMSEC information or assets?
 Le fournisseur aura-t-il accès à des renseignements ou à des biens COMSEC désignés PROTÉGÉS et/ou CLASSIFIÉS? No / Non Yes / Oui
 If Yes, indicate the level of sensitivity:
 Dans l'affirmative, indiquer le niveau de sensibilité :

9. Will the supplier require access to extremely sensitive INFOSEC information or assets?
 Le fournisseur aura-t-il accès à des renseignements ou à des biens INFOSEC de nature extrêmement délicate? No / Non Yes / Oui

Short Title(s) of material / Titre(s) abrégé(s) du matériel :
 Document Number / Numéro du document :

PART B - PERSONNEL (SUPPLIER) / PARTIE B - PERSONNEL (FOURNISSEUR)

10. a) Personnel security screening level required / Niveau de contrôle de la sécurité du personnel requis

<input checked="" type="checkbox"/> RELIABILITY STATUS COTE DE FIABILITÉ	<input type="checkbox"/> CONFIDENTIAL CONFIDENTIEL	<input type="checkbox"/> SECRET SECRET	<input type="checkbox"/> TOP SECRET TRÈS SECRET
<input type="checkbox"/> TOP SECRET - SIGINT TRÈS SECRET - SIGINT	<input type="checkbox"/> NATO CONFIDENTIAL NATO CONFIDENTIEL	<input type="checkbox"/> NATO SECRET NATO SECRET	<input type="checkbox"/> COSMIC TOP SECRET COSMIC TRÈS SECRET
<input type="checkbox"/> SITE ACCESS ACCÈS AUX EMPLACEMENTS			

Special comments:
 Commentaires spéciaux : _____

NOTE: If multiple levels of screening are identified, a Security Classification Guide must be provided.
 REMARQUE : Si plusieurs niveaux de contrôle de sécurité sont requis, un guide de classification de la sécurité doit être fourni.

10. b) May unscreened personnel be used for portions of the work?
 Du personnel sans autorisation sécuritaire peut-il se voir confier des parties du travail? No / Non Yes / Oui
 If Yes, will unscreened personnel be escorted?
 Dans l'affirmative, le personnel en question sera-t-il escorté? No / Non Yes / Oui

PART C - SAFEGUARDS (SUPPLIER) / PARTIE C - MESURES DE PROTECTION (FOURNISSEUR)

INFORMATION / ASSETS / RENSEIGNEMENTS / BIENS

11. a) Will the supplier be required to receive and store PROTECTED and/or CLASSIFIED information or assets on its site or premises?
 Le fournisseur sera-t-il tenu de recevoir et d'entreposer sur place des renseignements ou des biens PROTÉGÉS et/ou CLASSIFIÉS? No / Non Yes / Oui

11. b) Will the supplier be required to safeguard COMSEC information or assets?
 Le fournisseur sera-t-il tenu de protéger des renseignements ou des biens COMSEC? No / Non Yes / Oui

PRODUCTION

11. c) Will the production (manufacture, and/or repair and/or modification) of PROTECTED and/or CLASSIFIED material or equipment occur at the supplier's site or premises?
 Les installations du fournisseur serviront-elles à la production (fabrication et/ou réparation et/ou modification) de matériel PROTÉGÉ et/ou CLASSIFIÉ? No / Non Yes / Oui

INFORMATION TECHNOLOGY (IT) MEDIA / SUPPORT RELATIF À LA TECHNOLOGIE DE L'INFORMATION (TI)

11. d) Will the supplier be required to use its IT systems to electronically process, produce or store PROTECTED and/or CLASSIFIED information or data?
 Le fournisseur sera-t-il tenu d'utiliser ses propres systèmes informatiques pour traiter, produire ou stocker électroniquement des renseignements ou des données PROTÉGÉS et/ou CLASSIFIÉS? No / Non Yes / Oui

11. e) Will there be an electronic link between the supplier's IT systems and the government department or agency?
 Disposera-t-on d'un lien électronique entre le système informatique du fournisseur et celui du ministère ou de l'agence gouvernementale? No / Non Yes / Oui



Contract Number / Numéro du contrat PR # 20183702
Security Classification / Classification de sécurité UNCLASSIFIED

PART C - (continued) / PARTIE C - (suite)

For users completing the form manually use the summary chart below to indicate the category(ies) and level(s) of safeguarding required at the supplier's site(s) or premises.
Les utilisateurs qui remplissent le formulaire manuellement doivent utiliser le tableau récapitulatif ci-dessous pour indiquer, pour chaque catégorie, les niveaux de sauvegarde requis aux installations du fournisseur.

For users completing the form online (via the Internet), the summary chart is automatically populated by your responses to previous questions.
Dans le cas des utilisateurs qui remplissent le formulaire en ligne (par Internet), les réponses aux questions précédentes sont automatiquement saisies dans le tableau récapitulatif.

SUMMARY CHART / TABLEAU RÉCAPITULATIF

Category / Catégorie	PROTECTED / PROTÉGÉ			CLASSIFIED / CLASSIFIÉ			NATO				COMSEC					
	A	B	C	CONFIDENTIAL / CONFIDENTIEL	SECRET	TOP SECRET / TRÈS SECRET	NATO RESTRICTED / NATO DIFFUSION RESTREINTE	NATO CONFIDENTIAL / NATO CONFIDENTIEL	NATO SECRET	COSMIC TOP SECRET / COSMIC TRÈS SECRET	PROTECTED / PROTÉGÉ			CONFIDENTIAL / CONFIDENTIEL	SECRET	TOP SECRET / TRÈS SECRET
											A	B	C			
Information / Assets / Renseignements / Biens / Production																
IT Media / Support TI																
IT Link / Lien électronique																

12. a) Is the description of the work contained within this SRCL PROTECTED and/or CLASSIFIED?
La description du travail visé par la présente LVERS est-elle de nature PROTÉGÉE et/ou CLASSIFIÉE? No / Non Yes / Oui
- If Yes, classify this form by annotating the top and bottom in the area entitled "Security Classification".
Dans l'affirmative, classifiez le présent formulaire en indiquant le niveau de sécurité dans la case intitulée « Classification de sécurité » au haut et au bas du formulaire.
12. b) Will the documentation attached to this SRCL be PROTECTED and/or CLASSIFIED?
La documentation associée à la présente LVERS sera-t-elle PROTÉGÉE et/ou CLASSIFIÉE? No / Non Yes / Oui
- If Yes, classify this form by annotating the top and bottom in the area entitled "Security Classification" and indicate with attachments (e.g. SECRET with Attachments).
Dans l'affirmative, classifiez le présent formulaire en indiquant le niveau de sécurité dans la case intitulée « Classification de sécurité » au haut et au bas du formulaire et indiquez qu'il y a des pièces jointes (p. ex. SECRET avec des pièces jointes).



Contract Number / Numéro du contrat PR# 20183702
Security Classification / Classification de sécurité UNCLASSIFIED

PART D - AUTHORIZATION / PARTIE D - AUTORISATION

13. Organization Project Authority / Chargé de projet de l'organisme

Name (print) - Nom (en lettres moulées) Janice Tarlo	Title - Titre Manager - NRCU / CNR	Signature
Telephone No. - N° de téléphone (613) 222-5559	Facsimile No. - N° de télécopieur	E-mail address - Adresse courriel janice.tarlo@canada.ca
		Date 2018-11-01

14. Organization Security Authority / Responsable de la sécurité de l'organisme

Name (print) - Nom (en lettres moulées) Holly DeCoste	Title - Titre Security in Contracting	Signature
Telephone No. - N° de téléphone 902-403-5507	Facsimile No. - N° de télécopieur	E-mail address - Adresse courriel holly.decoste@canada.ca
		Date 2018-11-02

15. Are there additional instructions (e.g. Security Guide, Security Classification Guide) attached? / Des instructions supplémentaires (p. ex. Guide de sécurité, Guide de classification de la sécurité) sont-elles jointes? No / Non Yes / Oui

16. Procurement Officer / Agent d'approvisionnement

Name (print) - Nom (en lettres moulées)	Title - Titre	Signature
Telephone No. - N° de téléphone	Facsimile No. - N° de télécopieur	E-mail address - Adresse courriel
		Date

17. Contracting Security Authority / Autorité contractante en matière de sécurité

David Vrooman Contract Security Officer, Contract Security Division david.vrooman@tpsgc-pwpsc.gc.ca Tel/Tél 613-957-1261 / Fax/Télec 613-954-4171	Title - Titre	Signature
Telephone No. - N° de téléphone	Facsimile No. - N° de télécopieur	E-mail address - Adresse courriel
		Date

ANNEX D

INSURANCE REQUIREMENTS

A. Commercial General Liability Insurance

1. The Contractor must obtain Commercial General Liability Insurance, and maintain it in force throughout the duration of the Contract, in an amount usual for a contract of this nature, but for not less than \$2,000,000 per accident or occurrence and in the annual aggregate
2. The Commercial General Liability policy must include the following:
 - a. Additional Insured: Canada is added as an additional insured, but only with respect to liability arising out of the Contractor's performance of the Contract. The interest of Canada should read as follows: Canada, as represented by Public Works and Government Services Canada.
 - b. Bodily Injury and Property Damage to third parties arising out of the operations of the Contractor.
 - c. Products and Completed Operations: Coverage for bodily injury or property damage arising out of goods or products manufactured, sold, handled, or distributed by the Contractor and/or arising out of operations that have been completed by the Contractor.
 - d. Personal Injury: While not limited to, the coverage must include Violation of Privacy, Libel and Slander, False Arrest, Detention or Imprisonment and Defamation of Character.
 - e. Cross Liability/Separation of Insureds: Without increasing the limit of liability, the policy must protect all insured parties to the full extent of coverage provided. Further, the policy must apply to each Insured in the same manner and to the same extent as if a separate policy had been issued to each.
 - f. Blanket Contractual Liability: The policy must, on a blanket basis or by specific reference to the Contract, extend to assumed liabilities with respect to contractual provisions.
 - g. Employees and, if applicable, Volunteers must be included as Additional Insured.
 - h. Employers' Liability (or confirmation that all employees are covered by Worker's compensation (WSIB) or similar program)
 - i. Broad Form Property Damage including Completed Operations: Expands the Property Damage coverage to include certain losses that would otherwise be excluded by the standard care, custody or control exclusion found in a standard policy.
 - j. Notice of Cancellation: The Contractor will provide the Contracting Authority thirty (30) days prior written notice of policy cancellation or any changes to the insurance policy.
 - k. If the policy is written on a claims-made basis, coverage must be in place for a period of at least 12 months after the completion or termination of the Contract.

- I. Owners' or Contractors' Protective Liability: Covers the damages that the Contractor becomes legally obligated to pay arising out of the operations of a subcontractor.

B. Automobile Liability Insurance

1. The Contractor must obtain Automobile Liability Insurance, and maintain it in force throughout the duration of the Contract, in an amount usual for a contract of this nature, but for not less than \$2,000,000 per accident or occurrence.
2. The policy must include the following:
 - a. Third Party Liability - \$2,000,000 Minimum Limit per Accident or Occurrence.
 - b. Accident Benefits - all jurisdictional statutes.
 - c. Uninsured Motorist Protection.
 - d. Notice of Cancellation: The Contractor will provide the Contracting Authority thirty (30) days prior written notice of policy cancellation or any changes to the insurance policy.
 - e. OPCF/ SEF/ QEF #3 - Drive Government Automobiles Endorsement.

C. Medical Malpractice Liability Insurance

1. The Contractor must obtain Medical Malpractice Liability Insurance, and maintain it in force throughout the duration of the Contract, in an amount usual for a contract of this nature, but for not less than \$1,000,000 per loss and in the annual aggregate, inclusive of the defence costs.
2. Coverage is for what is standard in a Medical Malpractice policy and must be for claims arising out of the rendering or failure to render medical services resulting in injury, mental injury, illness, disease or death of any person caused by any negligent act, error or omission committed by the Contractor in or about the conduct of the Contractor's professional occupation or business of good samaritan acts.
3. If the policy is written on a claims-made basis, coverage must be in place for a period of at least 12 months after the completion or termination of the Contract.
4. Notice of Cancellation: The Contractor will provide the Contracting Authority thirty (30) days prior written notice of policy cancellation or any changes to the insurance policy.

D. Nursing Malpractice Liability Insurance

Throughout the duration of the Contract, the Contractor must maintain in full force and effect a policy of comprehensive general liability insurance to include coverage for any negligence, malpractice and medical professional liability by its resources, officers, servants, agents' representatives that could arise in the performance or non-performance of this Contract.

The Contractor must provide a duplicate of notices of any nature or kind relating to the policy, including but not limited to notices of:

- a. legal proceeding resulting from actions against the insured under the insurance coverage;
- b. cancellation;
- c. changes of material risk; or

Solicitation No. - N° de l'invitation
5A090-192272/A
Client Ref. No. - N° de réf. du client
5A090-192272

Amd. No. - N° de la modif.
File No. - N° du dossier
005xf. 5A090-192272

Buyer ID - Id de l'acheteur
005xf
CCC No./N° CCC - FMS No./N° VME

d. breached of statutory conditions,

be sent by registered mail by the Contractor or the Insurer to Canada.

The Contractor must ensure that the Contract Nurses delivering the services to be performed under this Contract maintain malpractice and liability insurance.

ANNEX E

SO RANKING SCORE

[To be completed for each Region and Category, as applicable, upon SO Issuance]

REGION	CATEGORY	OFFEROR'S SO RANKING SCORE	HIGHEST SO RANKING SCORE OBTAINED BY AN OFFEROR FOR THE REGION AND CATEGORY
Alberta	Registered Nurse	TBD	TBD
Alberta	Nurse Practitioner	TBD	TBD
Manitoba	Registered Nurse	TBD	TBD
Manitoba	Nurse Practitioner	TBD	TBD
Ontario	Registered Nurse	TBD	TBD
Ontario	Nurse Practitioner	TBD	TBD
Quebec	Registered Nurse	TBD	TBD

Solicitation No. - N° de l'invitation
5A090-192272/A
Client Ref. No. - N° de réf. du client
5A090-192272

Amd. No. - N° de la modif.
File No. - N° du dossier
005xf. 5A090-192272

Buyer ID - Id de l'acheteur
005xf
CCC No./N° CCC - FMS No./N° VME

ANNEX F

TASK AUTHORIZATION FORM

See Attached

Annex F

Indigenous Services Canada (ISC)			
Task Authorization (TA)			
Contractor response required by:		Type of Nurse Required: Registered Nurse	
Call-up No.:		PO No.:	
		Task Authorization No.:	
		Amendment No.:	
Contractor's name:		Task Authorization Contact:	
E-mail address:		E-mail address: hc.agency_nurse_services_service_dinfirmieres_dagences.sc@canada.ca	
Tel:		Fax: 613-952-4622	
Sent to Contractor Via E-mail: <input type="checkbox"/>		Task Authorization Period ^[1] :	
Date: 			
Start of Task Authorization: The work cannot commence until the Task Authorization has been authorized in accordance with the Call-up.			
Regional Description/Specifications: The TA requirement is for one nurse for the below service location.			
Community Location and Phone Number: (Nursing Station contact, in case of travel delays, weathered-in scenarios, etc.)		Period of Service ^[2] :	
Additional Instructions: This task includes security requirements. Refer to the Security Requirements Check List (SRCL) included in the Call-up.			
COST OF TASK			
			Sub-total (Applicable taxes excluded)
	Nursing Services (GL 54506)		\$ -
	TA Termination for Convenience Fee (GL 54506)		\$ -
	Travel Time (While in Transit) (GL 54506)	hrs \$	-
	SUB-TOTAL COST (applicable taxes excluded)		\$ -
	Applicable taxes (5%)		\$ -
Travel and Misc. Cost	Travel Cost (To be authorized)		
GRAND TOTAL - TA Limitation of Expenditure (applicable taxes included)			\$ -
<p>^[1] TA amendments should be processed within the time frame of the Task Authorization Period.</p> <p>^[2] Period of Service must be between the TA start date and the TA end date.</p>			
FOR COMPLETION BY THE CONTRACTOR			
Confirmation of the Contract Nurse assigned to the task:			
Name of the Contract Nurse: · Information and documents necessary to the evaluation of the Contract Nurse Attached to the TA Form <input type="checkbox"/>			
· Security clearance level:			
· Security clearance information:			
· Copy of the detailed itinerary.			
First Nations Inuit Health Branch stipulates that nurses, after travelling or working in a West African country identified as having transmission of Ebola Virus Disease (EVD), either localized or widespread and intense, shall refrain from entering a First Nations community until after 21 days have passed since re-entry into Canada, without developing EVD-compatible signs and symptoms.			
Contractor has confirmed that the above noted resource(s) is aware of this stipulation and is in conformity with it.			
YES <input type="checkbox"/> NO <input type="checkbox"/>			
NOTE: ISC will not accept resources(s) that are not in conformity with the above noted stipulation			
Confirmation of the Emergency 24/7 Coordinator assigned to the task:			

Annex F

Yes No

Name of Emergency 24/7 Resource:

Phone #:

TA APPROVAL

Contractor's Confirmation of the TA Limitation of Expenditure

The Contractor confirms:

- that the Total TA Limitation of Expenditure

(applicable taxes included) is:

correct

incorrect

Annex F

TA Limit - \$ 400K (including all amendments and applicable taxes).

Note: The cumulative total of all TAs issued under a Call-up must not exceed \$400K (including applicable taxes)

Signing Authorities

Contractor's Representative Name, Title and Signature of Individual Authorized to Sign on Behalf of Contractor (type or print)	Contractor (Name and Title)	Signature	Date

By signing the TA form, the Contractor hereby accepts the Task Authorization identified above.

ISC Task Authorization Authority Name, Title and Signature of the TA Authority (type or print)	ISC (Name and Title)	Signature	Date

Solicitation No. - N° de l'invitation
5A090-192272/A
Client Ref. No. - N° de réf. du client
5A090-192272

Amd. No. - N° de la modif.
File No. - N° du dossier
005xf. 5A090-192272

Buyer ID - Id de l'acheteur
005xf
CCC No./N° CCC - FMS No./N° VME

ANNEX G

QUARTERLY SO REPORTING TEMPLATE

See Attached

