



**RETURN BIDS TO :**  
**RETOURNER LES SOUMISSIONS À :**  
 Bid Receiving - Réception des soumissions:

**Attn: Elise Salter**  
 Correctional Service Canada –  
 Service Correctionnel Canada  
 Regional Headquarters (Pacific)  
 Contracting and Materiel Services  
 PO Box 4500 Unit #100  
 33991 Gladys Ave., Abbotsford, BC V2S 2E8

**REQUEST FOR PROPOSAL**  
**DEMANDE DE PROPOSITION**

**Proposal to: Correctional Service Canada**

We hereby offer to sell to Her Majesty the Queen in right of Canada, in accordance with the terms and conditions set out herein, referred to herein or attached hereto, the goods, services, and construction listed herein and on any attached sheets at the price(s) set out thereof.

**Proposition à: Service Correctionnel du Canada**

Nous offrons par la présente de vendre à Sa Majesté la Reine du chef du Canada, aux conditions énoncées ou incluses par référence dans la présente et aux appendices ci-jointes, les biens, services et construction énumérés ici sur toute feuille ci-annexée, au(x) prix indiqué(s).

**Comments — Commentaires :**

**THIS DOCUMENT CONTAINS A SECURITY REQUIREMENT / LE PRÉSENT DOCUMENT COMPORTE UNE EXIGENCE RELATIVE À LA SÉCURITÉ**

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

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Telephone # — N° de Téléphone :

\_\_\_\_\_

Fax # — No de télécopieur :

\_\_\_\_\_

Email / Courriel : \_\_\_\_\_

GST # or SIN or Business # — N° de TPS  
 ou NAS ou N° d'entreprise :

\_\_\_\_\_

<b>Title — Sujet:</b> <b>Infectious Disease Specialist – Pacific Region</b>	
<b>Solicitation No. — N° de l'invitation</b>	<b>Date:</b>
<b>21807-21-0010</b>	<b>2021-01-25</b>
<b>Client Reference No. — N° de Référence du Client</b> <b>21807-21-0010</b>	
<b>GEIS Reference No. — N° de Référence de SEAG</b> <b>PW-21-00943419</b>	
<b>Solicitation Closes — L'invitation prend fin</b> <b>at / à : 2 :00pm (PST)</b> <b>on / le : February 12, 2021</b>	
<b>F.O.B. — F.A.B.</b> Plant – Usine:                      Destination:                      Other-Autre:	
<b>Address Enquiries to — Soumettre toutes questions à:</b>  Elise.Salter@csc-scc.gc.ca	
<b>Telephone No. – N° de téléphone:</b>	<b>Fax No. – N° de télécopieur:</b>
<b>Destination of Goods, Services and Construction:</b> <b>Destination des biens, services et construction:</b>	
<b>Instructions: See Herein</b> <b>Instructions : Voir aux présentes</b>	
<b>Delivery Required — Livraison exigée : See herein</b>	<b>Delivery Offered – Livraison proposée : Voir aux présentes</b>
<b>Name and title of person authorized to sign on behalf of Vendor/Firm</b> <b>Nom et titre du signataire autorisé du fournisseur/de l'entrepreneur</b>	
_____	
Name / Nom	Title / Titre
_____	
Signature	Date
(Sign and return cover page with bid proposal / Signer et retourner la page de couverture avec la proposition)	



## TABLE OF CONTENTS

### **PART 1 - GENERAL INFORMATION**

1. Security Requirement
2. Statement of Work
3. Revision of Departmental Name
4. Debriefings
5. Procurement Ombudsman

### **PART 2 - BIDDER INSTRUCTIONS**

1. Standard Instructions, Clauses and Conditions
2. Submission of Bids
3. Former Public Servant
4. Enquiries, Bid Solicitation
5. Applicable Laws

### **PART 3 - BID PREPARATION INSTRUCTIONS**

1. Bid Preparation Instructions
2. Section I: Technical Bid
3. Section II: Financial Bid
4. Section III: Certifications

### **PART 4 - EVALUATION PROCEDURES AND BASIS OF SELECTION**

1. Evaluation Procedures
2. Basis of Selection
3. Insurance Requirements

### **PART 5 – CERTIFICATIONS AND ADDITIONAL INFORMATION**

1. Certifications Precedent to Contract Award and Additional Information

### **PART 6 - RESULTING CONTRACT CLAUSES**

1. Security Requirement
2. Statement of Work
3. Standard Clauses and Conditions
4. Term of Contract
5. Authorities
6. Payment
7. Invoicing Instructions
8. Certifications and Additional Information
9. Applicable Laws
10. Priority of Documents
11. Termination on Thirty Days Notice
12. Insurance - Specific Requirements
13. Ownership Control
14. Closure of Government Facilities
15. Tuberculosis Testing
16. Compliance with CSC Policies
17. Health and Labour Conditions
18. Identification Protocol Responsibilities



19. Dispute Resolution Services
20. Contract Administration
21. Privacy
22. Proactive Disclosure of Contracts with Former Public Servants
23. Information Guide for Contractors

**List of Annexes:**

- Annex A – Statement of Work
- Annex B – Proposed Basis of Payment
- Annex C – Security Requirements Check List
- Annex D – Evaluation Criteria
- Annex E – Insurance Requirements
- Annex F – National Essential Health Care Framework



## **PART 1 - GENERAL INFORMATION**

### **1. Security Requirement**

1.1 Before award of a contract, the following conditions must be met:

- (a) the Bidder must hold a valid organization security clearance as indicated in Part 6 - Resulting Contract Clauses;
- (b) the Bidder's proposed individuals requiring access to classified or protected information, assets or sensitive work sites must meet the security requirement as indicated in Part 6 - Resulting Contract Clauses;
- (c) the Bidder must provide the name of all individuals who will require access to classified or protected information, assets or sensitive work sites.

1.2 Bidders are reminded to obtain the required security clearance promptly. Any delay in the award of a contract to allow the successful bidder to obtain the required clearance will be at the entire discretion of the Contracting Authority.

1.3 For additional information on security requirements, Bidders should refer to the [Contract Security Program](#) (CSP) of Public Works and Government Services Canada website.

### **2. Statement of Work**

The Contractor must perform the Work in accordance with the Statement of Work at Annex "A".

### **3. Revision of Departmental Name**

As this bid solicitation is issued by Correctional Service Canada (CSC), any reference to Public Works and Government Services Canada (PWGSC) or its Minister contained in full text or by reference in any term, condition or clause of this document, or any resulting contract, must be interpreted as a reference to CSC or its Minister.

### **4. Debriefings**

Bidders may request a debriefing on the results of the bid solicitation process. Bidders should make the request to the Contracting Authority within 15 working days of receipt of the results of the bid solicitation process. The debriefing may be in writing, by telephone or in person.

### **5. Procurement Ombudsman**

The Office of the Procurement Ombudsman (OPO) was established by the Government of Canada to provide an independent venue for Canadian bidders to raise complaints regarding the award of federal contracts under \$25,300 for goods and under \$101,100 for services. Should you have any issues or concerns regarding the award of a federal contract below these dollar amounts, contact OPO by e-mail at the [Office of the Procurement Ombudsman email address](#), by telephone at 1-866-734-5169, or by web at the [Office of the Procurement Ombudsman website](#). For more information about OPO, including the available services, please visit the OPO website.



## **PART 2 - BIDDER INSTRUCTIONS**

### **1. Standard Instructions, Clauses and Conditions**

All instructions, clauses and conditions identified in the bid solicitation by number, date and title are set out in the [Standard Acquisition Clauses and Conditions Manual](#) issued by Public Works and Government Services Canada.

Bidders who submit a bid agree to be bound by the instructions, clauses and conditions of the bid solicitation and accept the clauses and conditions of the resulting contract.

The 2003 (2020-05-28), Standard Instructions - Goods or Services - Competitive Requirements, are incorporated by reference into and form part of the bid solicitation.

#### **Subsection 5.4 of 2003, Standard Instructions - Goods or Services - Competitive Requirements, is amended as follows:**

Delete: sixty (60) days

Insert: one-hundred twenty (120) days

### **2. Submission of Bids**

Bids must be submitted only to Correctional Service of Canada (CSC) by the date, time and place indicated on page 1 of the bid solicitation.

**Due to the nature of the bid solicitation, bids transmitted by facsimile or email to CSC will not be accepted.**

### **3. Former Public Servants**

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 Bidder 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 Bidder a FPS in receipt of a pension? **Yes ( ) No ( )**

If so, the Bidder 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, Bidders agree that the successful Bidder'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: 2019-01](#) and the [Guidelines on the Proactive Disclosure of Contracts](#).

**Work Force Adjustment Directive**

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

If so, the Bidder 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.

**4. Enquiries – Bid Solicitation**

All enquiries must be submitted in writing to the Contracting Authority no later than **five (5)** business days before the bid closing date. Enquiries received after that time may not be answered.



Bidders should reference as accurately as possible the numbered item of the bid solicitation to which the enquiry relates. Care should be taken by bidders 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 the Bidder do so, so that the proprietary nature of the question(s) is eliminated, and the enquiry can be answered to all Bidders. Enquiries not submitted in a form that can be distributed to all Bidders may not be answered by Canada.

## **5. Applicable Laws**

Any resulting contract must be interpreted and governed, and the relations between the parties determined, by the laws in force in **British Columbia (BC)**.

Bidders may, at their discretion, substitute the applicable laws of a Canadian province or territory of their choice without affecting the validity of their bid, by deleting the name of the Canadian province or territory specified and inserting the name of the Canadian province or territory of their choice. If no change is made, it acknowledges that the applicable laws specified are acceptable to the bidders.



## **PART 3 - BID PREPARATION INSTRUCTIONS**

### **1. Bid Preparation Instructions**

CSC requests that bidders provide their bid in separately bound sections as follows:

Section I: Technical Bid: **three (3) hard copies**

Section II: Financial Bid: **one (1) hard copy**

Section III: Certifications: **one (1) hard copy**

Prices must appear in the financial bid only. No prices must be indicated in any other section of the bid.

**Bidders are requested to submit their Financial Bid in an envelope separate from their technical proposal.**

CSC requests that bidders follow the format instructions described below in the preparation of their bid:

- i. use 8.5 x 11 inch (216 x 279 mm) paper;
- ii. use a numbering system that corresponds to the bid solicitation.

In April 2006, Canada issued a policy directing federal departments and agencies to take the necessary steps to incorporate environmental considerations into the procurement process, the [Policy on Green Procurement](#). To assist Canada in reaching its objectives, bidders should:

- i. use 8.5 x 11 inch (216 x 279 mm) paper containing fibre certified as originating from a sustainably-managed forest and containing minimum 30% recycled content; and
- ii. use an environmentally-preferable format including black and white printing instead of colour printing, printing double sided/duplex, using staples or clips instead of cerlox, duo tangs or binders.

### **2. Section I: Technical Bid**

In their technical bid, Bidders should explain and demonstrate how they propose to meet the requirements and how they will carry out the work.

### **3. Section II: Financial Bid**

Bidders must submit their financial bid in accordance with the Basis of Payment detailed in Annex B - Proposed Basis of Payment. The total amount of Applicable Taxes must be shown separately.

See Annex B – Proposed Basis of Payment for the Pricing Schedule format.

#### **3.1 Exchange Rate Fluctuation**

SACC Manual clause C3011T (2013-11-06), Exchange Rate Fluctuation

### **4. Section III: Certifications**

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





## **PART 4 - EVALUATION PROCEDURES AND BASIS OF SELECTION**

### **1. Evaluation Procedures**

- (a) Bids will be assessed in accordance with the entire requirement of the bid solicitation including the technical and financial evaluation criteria.
- (b) An evaluation team composed of representatives of CSC will evaluate the bids.

#### **1.1 Technical Evaluation**

##### **1.1.1 Mandatory Technical Criteria**

Proposals will be evaluated to determine if they meet all mandatory requirements outlined in **Annex D – Evaluation Criteria**. Proposals not meeting all mandatory criteria will be declared non-responsive and will be given no further consideration.

#### **1.2 Financial Evaluation**

SACC Manual Clause A0220T (2014-06-26), Evaluation of Price - Bid

Proposals containing a financial bid other than the one requested at **Article 3. Section II: Financial Bid** of **PART 3 – BID PREPARATION INSTRUCTIONS** will be declared non-compliant.

**Note to Bidders:** Table Totals will be calculated using the formula(s) in the relevant table in **Annex B – Proposed Basis of Payment**.

### **2. Basis of Selection**

A bid must comply with the requirements of the bid solicitation and meet all mandatory technical evaluation criteria to be declared responsive. The responsive bid with the lowest evaluated price will be recommended for award of a contract.

### **3. Insurance Requirements**

The Bidder must provide a letter from an insurance broker or an insurance company licensed to operate in Canada stating that the Bidder, if awarded a contract as a result of the bid solicitation, can be insured in accordance with the Insurance Requirements specified in article 12 of **PART 6 – RESULTING CONTRACT CLAUSES**.

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



## **PART 5 - CERTIFICATIONS AND ADDITIONAL INFORMATION**

Bidders must provide the required certifications and additional information to be awarded a contract.

The certifications provided by Bidders to Canada are subject to verification by Canada at all times. Unless specified otherwise, Canada will declare a bid non-responsive or will declare a contractor in default if any certification made by the Bidder is found to be untrue whether made knowingly or unknowingly, during the bid evaluation period or during the contract period.

The Contracting Authority will have the right to ask for additional information to verify the Bidders' certifications. Failure to comply and to cooperate with any request or requirement imposed by the Contracting Authority may render the bid non-responsive or constitute a default under the Contract.

### **1. Certifications Precedent to Contract Award and Additional Information**

The certifications and additional information listed below should be submitted with the bid, but may be submitted afterwards. If any of these required certifications or additional information is not completed and submitted as requested, the Contracting Authority will inform the Bidder 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 bid non-responsive.

#### **1.1 Integrity Provisions – Declaration of Convicted Offenses**

- A) Subject to subsection B, by submitting a bid in response to this bid solicitation, the Bidder certifies that:
- i. it has read and understands the Ineligibility and Suspension Policy;
  - ii. it understands that certain domestic and foreign criminal charges and convictions, and other circumstances, as described in the Policy, will or may result in a determination of ineligibility or suspension under the Policy;
  - iii. it is aware that Canada may request additional information, certifications, and validations from the Bidder or a third party for purposes of making a determination of ineligibility or suspension;
  - iv. it has provided with its bid a complete list of all foreign criminal charges and convictions pertaining to itself, its affiliates and its proposed first tier subcontractors that, to the best of its knowledge and belief, may be similar to one of the listed offenses in the Policy;
  - v. none of the domestic criminal offenses, and other circumstances, described in the Policy that will or may result in a determination of ineligibility or suspension, apply to it, its affiliates and proposed first tier subcontractors; and
  - vi. it is not aware of a determination of ineligibility or suspension issued by PWGSC that applies to it.
- B) Where a Bidder is unable to provide any of the certifications required by subsection A, it must submit with its bid the completed [Integrity Declaration Form](#). Bidders must submit this form to Correctional Service of Canada with their bid.

#### **1.2 Integrity Provisions – Required documentation**



List of names: all Bidders, regardless of their status under the Ineligibility and Suspension Policy, must submit the following information:

- i. Bidders that are corporate entities, including those bidding as joint ventures, must provide a complete list of the names of all current directors or, for a privately owned corporation, the names of the owners of the corporation;
ii. Bidders bidding as sole proprietors, including sole proprietors bidding as joint ventures, must provide a complete list of the names of all owners; or
iii. Bidders that are a partnership do not need to provide a list of names.

List of Names:

Four sets of horizontal lines for listing names, arranged in two columns of two rows each.

OR

- [ ] The Bidder is a partnership

During the evaluation of bids, the Bidder must, within 10 working days, inform the Contracting Authority in writing of any changes affecting the list of names submitted with the bid.

1.3 Federal Contractors Program for Employment Equity - Bid Certification

By submitting a bid, the Bidder certifies that the Bidder, and any of the Bidder's members if the Bidder is a Joint Venture, 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 (ESDC) - Labour's website.

Canada will have the right to declare a bid non-responsive if the Bidder, or any member of the Bidder if the Bidder is a Joint Venture, appears on the "FCP Limited Eligibility to Bid" list at the time of contract award.

1.4 Status and Availability of Resources

SACC Manual clause A3005T (2010-08-16), Status and Availability of Resources

1.5 Language Requirements - English Essential

By submitting a bid, the Bidder certifies that, should it be awarded a contract as result of the bid solicitation, every individual proposed in its bid will be fluent in English. The individual(s) proposed must be able to communicate orally and in writing in English without any assistance and with minimal errors.

1.6 Education and Experience

SACC Manual clause A3010T (2010-08-16), Education and Experience

1.7 Certification:



Correctional Service    Service correctionnel  
Canada                      Canada

By submitting a bid, the Bidder certifies that the information submitted by the Bidder in response to the above requirements is accurate and complete.



## **PART 6 - RESULTING CONTRACT CLAUSES**

The following clauses and conditions apply to and form part of any contract resulting from the bid solicitation.

### **1. Security Requirement**

1.1 The following security requirements (SRCL and related clauses provided by PWGSC CSP) apply to and form part of the Contract.

#### **SECURITY REQUIREMENT FOR CANADIAN SUPPLIER: PWGSC FILE No 21807-21-0010**

1. The Contractor/Offeror must, at all times during the performance of the Contract/Standing Offer, hold a valid Designated Organization Screening (DOS), issued by the Contract Security Program (CSP), Public Works and Government Services Canada (PWGSC).
2. The Contractor/Offeror personnel requiring access to PROTECTED information, assets or sensitive site(s) must EACH hold a valid RELIABILITY STATUS, granted or approved by the CSP, PWGSC.
3. The Contractor/Offeror MUST NOT remove any PROTECTED information or assets from the identified site(s), and the Contractor/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 the CSP, PWGSC.
5. The Contractor/Offeror must comply with the provisions of the:
  - a) Security Requirements Check List and security guide (if applicable), attached at Annex C;
  - b) Contract Security Manual (Latest Edition).

---

#### **CSC Approved Health Services Exemption for the Removal, Offsite Storage and Electronic Data Processing of Offender Personal Medical Information under CSC issued contracts.**

1. The Contractor/Offeror must practice and take measures to protect shared personal health information in accordance with the applicable legislation which governs the disclosure of personal and health information under federal and provincial laws, applicable provincial health information acts, and the provincial/territorial regulatory body's professional practice standards. This includes collection, receipt, transmission, storage, disposal, use and disclosure of information under its control among authorized persons of employees of the Contractor/Offeror.
2. In case of security breach or the unauthorized use of shared personal information, the Contractor/Offeror must notify the CSC Project Authority and implement all procedures and disclosure requirements as defined by their professional certifying body and those required of federal and provincial laws and regulations.

### **2. Statement of Work**

The Contractor must perform the Work in accordance with the Statement of Work at **Annex "A"**.



### 3. Standard Clauses and Conditions

All clauses and conditions identified in the Contract by number, date and title are set out in the [Standard Acquisition Clauses and Conditions Manual](#) issued by Public Works and Government Services Canada.

As this Contract is issued by Correctional Service Canada (CSC), any reference to Public Works and Government Services Canada (PWGSC) or its Minister contained in full text or by reference in any term, condition or clause of this document must be interpreted as a reference to CSC or its Minister.

#### 3.1 General Conditions

2010B (2020-05-28), General Conditions - Professional Services (Medium Complexity), apply to and form part of the Contract.

#### 3.2 Replacement of Specific Individuals

1. If specific individuals are identified in the Contract to perform the Work, the Contractor must provide the services of those individuals unless the Contractor is unable to do so for reasons beyond its control.
2. If the Contractor is unable to provide the services of any specific individual identified in the Contract, it must provide a replacement with similar qualifications and experience. The replacement must meet the criteria used in the selection of the Contractor and be acceptable to Canada. The Contractor must, as soon as possible, give notice to the Contracting Authority of the reason for replacing the individual and provide:
  - a. The name, qualifications and experience of the proposed replacement; and
  - b. Proof that the proposed replacement has the required security clearance granted by Canada, if applicable.
3. The Contractor must not, in any event, allow performance of the Work by unauthorized replacement persons. 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 subsection 2. The fact that the Contracting Authority does not order that a replacement stop performing the work does not release the Contractor from its responsibility to meet the requirements of the Contract.

### 4. Term of Contract

#### 4.1 Period of the Contract

The Work is to be performed during the period of **April 1, 2021 to March 31, 2022**.

#### 4.2 Option to Extend the Contract

The Contractor grants to Canada the irrevocable option to extend the term of the Contract by up to **three (3) additional one (1) year period(s)** under the same conditions. The Contractor agrees that, during the extended period of the Contract, it will be paid in accordance with the applicable provisions as set out in the Basis of Payment.

Canada may exercise this option at any time by sending a written notice to the Contractor at least thirty (30) calendar days before the expiry date of the Contract. The option may only be exercised by the Contracting Authority, and will be evidenced for administrative purposes only, through a contract amendment.



## 5. Authorities

### 5.1 Contracting Authority

The Contracting Authority for the Contract is:

Name: Elise Salter  
Title: Contracting & Procurement Specialist  
Correctional Service Canada  
Branch/Directorate: Regional Headquarters - Pacific  
Telephone: 604-870-2603  
Facsimile: 604-870-2444  
E-mail address: [Elise.Salter@csc-scc.gc.ca](mailto:Elise.Salter@csc-scc.gc.ca)

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

[Fill in at contract award only]

### 5.2 Project Authority

The Project Authority for the Contract is:

Name: (XXX)  
Title: (XXX)  
Correctional Service Canada  
Branch/Directorate: (XXX)  
Telephone: (XXX)  
Facsimile: (XXX)  
E-mail address: (XXX)

The Project Authority is the representative of the department or agency for whom the Work is being carried out under the Contract and is responsible for all matters concerning the technical content of the Work under the Contract. Technical matters may be discussed with the Project Authority, however the Project 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 contract amendment issued by the Contracting Authority.

[Fill in at contract award only.]

### 5.3 Contractor's Representative

The Authorized Contractor's Representative is:

Name:  
Title:  
Company:  
Address:  
Telephone:  
Facsimile:  
E-mail address:

## 6. Payment

### 6.1 Basis of Payment



The Contractor will be paid for its costs reasonably and properly incurred in the performance of the Work in accordance with the Basis of payment in **Annex B**, to a limitation of expenditure of \$ \_\_\_\_\_ [insert the amount at contract award]. Customs duties are excluded and Applicable Taxes are extra.

## 6.2 Limitation of Expenditure

1. Canada's total liability to the Contractor under the Contract must not exceed \$ \_\_\_\_\_ [insert the amount at contract award]. Customs duties are excluded and Applicable Taxes are extra.
2. No increase in the total liability of Canada or in the price of the Work 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 approved, in writing, by the Contracting Authority before their incorporation into the Work. The Contractor must not perform any work or provide any service that would result in Canada's total liability being exceeded before obtaining the written approval of the Contracting Authority. The Contractor must notify the Contracting Authority in writing as to the adequacy of this sum:
  - a. when it is 75% committed, or
  - b. four months before the contract expiry date, or
  - c. as soon as the Contractor considers that the contract funds provided are inadequate for the completion of the Work,whichever comes first.
3. 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 Multiple Payments

Canada will pay the Contractor upon completion and delivery of units 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.

## 6.4 SACC Manual Clauses

SACC Manual clause A9117C (2007-11-30), T1204 - Direct Request by Customer Department  
SACC Manual clause C0710C (2007-11-30), Time and Contract Price Verification  
SACC Manual clause C0705C (2010-01-11), Discretionary Audit

## 6.5 Travel and Living Expenses

There are no travel and living expenses associated with the Contract.

## 7. Invoicing Instructions





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.
2. Invoices must be distributed as follows:
  - a. The original must be forwarded to the following address for certification and payment:

**Matsqui Institution**  
**Attn: Chief of Health Services**  
PO Box 2500  
33344 King Road  
Abbotsford, BC V2S 4P3

**Pacific Institution**  
**Attn: Chief of Health Services**  
PO Box 3000  
33344 King Road  
Abbotsford, BC V2S 4P4

**Mountain Institution**  
**Attn: Chief of Health Services**  
PO Box 1600  
4732 Cemetery Road  
Agassiz, BC V0M 1A0

**Kent Institution**  
**Attn: Chief of Health Services**  
PO Box 1500  
4732 Cemetery Road  
Agassiz, BC V0M 1A0

**Kwìkwèxwelhp Healing Village**  
**Attn: Chief of Health Services**  
PO Box 110  
16255 Morris Valley Road  
Harrison Mills, BC V0M 1A0

**Mission Institution (Minimum)**  
**Attn: Chief of Health Services**  
33737 Dewdney Trunk Road  
Mission, BC V2V 4L8

**Mission Institution (Medium)**  
**Attn: Chief of Health Services**  
PO Box 60  
8751 Stave Lake Road  
Mission, BC V2V 4L8

**Fraser Valley Institution**  
**Attn: Chief of Health Services**  
PO Box 5000  
33344 King Road V2S 6J5

## 8. Certifications and Additional Information



## 8.1 Compliance

Unless specified otherwise, the continuous compliance with the certifications provided by the Contractor in its bid or precedent to contract award, and the ongoing cooperation in providing additional information are conditions of the Contract and failure to comply will constitute the Contractor in default. Certifications are subject to verification by Canada during the entire period of the Contract.

## 9. Applicable Laws

The Contract must be interpreted and governed, and the relations between the parties determined, by the laws in force in **British Columbia (BC)**.

## 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 Articles of Agreement;
- (b) the General Conditions 2010B (2020-05-28), General Conditions - Professional Services (Medium Complexity);
- (c) Annex A, Statement of Work;
- (d) Annex B, Basis of Payment;
- (e) Annex C, Security Requirements Check List;
- (f) the Contractor's bid dated \_\_\_\_\_ **[to be inserted at contract award]**.

## 11. Termination on Thirty Days Notice

11.1 Canada reserves the right to terminate the Contract at any time in whole or in part by giving thirty (30) calendar days written notice to the Contractor.

11.2 In the event of such termination, Canada will only pay for costs incurred for services rendered and accepted by Canada up to the date of the termination. Despite any other provision of the Contract, there will be no other costs that will be paid to the Contractor as a result of the termination.

## 12. Insurance – Specific Requirements

The Contractor must comply with the insurance requirements specified in **Annex E**. 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 ten (10) 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. Coverage must be placed with an Insurer licensed to carry out business in Canada. The Contractor must, if requested by the Contracting Authority, forward to Canada a certified true copy of all applicable insurance policies.

## 13. Ownership Control



Where the Contractor will have access to any and all personal and confidential information belonging to Canada, CSC staff or inmates for the performance of the work, the following will apply:

- (a) The Contractor warrants that it is not under ownership control of any non-resident entity (i.e. Individual, partnership, joint venture, corporation, limited liability company, parent company, affiliate or other).
- (b) The Contractor shall advise the Minister of any change in ownership control for the duration of the contract.
- (c) The Contractor acknowledges that the Minister has relied on this warranty in entering into this Contract and that, in the event of breach of such warranty, or in the event that the Contractor's ownership control becomes under a non-resident entity, the Minister shall have the right to treat this Contract as being in default and terminate the contract accordingly.
- (d) For the purposes of this clause, a non-resident entity is any individual, partnership, joint venture, corporation, limited liability company, parent company, affiliate or other residing outside of Canada.

#### **14. Closure of Government Facilities**

14.1 Contractor personnel are employees of the Contractor and are paid by the Contractor on the basis of services rendered. Where the Contractor or the Contractor's employees are providing services on government premises pursuant to this Contract and the said premises become non accessible due to evacuation or closure of government facilities, and consequently no Work is being performed as a result of the closure, Canada will not be liable for payment to the Contractor for the period of closure.

14.2 Contractors working at CSC sites should be aware that they may be faced with delay or refusal of entry to certain areas at certain times even if prior arrangements for access may have been made. Contractors are advised to call in advance of travel to ensure that planned access is still available.

#### **15. Tuberculosis Testing**

15.1 It is a condition of this contract that the Contractor or any employees of the Contractor who require entry into a Correctional Service of Canada Institution to fulfill the conditions of the contract may, at the sole discretion of the Warden, be required to provide proof of and results of a recent tuberculin test for the purpose of determining their TB infection status.

15.2 Failure to provide proof of and results of a tuberculin test may result in the termination of the contract.

15.3 All costs related to such testing will be at the sole expense of the Contractor.

#### **16. Compliance with CSC Policies**

16.1 The Contractor agrees that its officers, servants, agents and subcontractors will comply with all regulations and policies in force at the site where the work covered by this contract is to be performed.

16.2 Unless otherwise provided in the contract, the Contractor shall obtain all permits and hold all certificates and licenses required for the performance of the Work.

16.3 Details on existing CSC policies can be found on the [CSC website](#) or any other CSC web page designated for such purpose.



## **17. Health and Labour Conditions**

17.1 In this section, "Public Entity" means the municipal, provincial or federal government body authorized to enforce any laws concerning health and labour applicable to the performance of the Work or any part thereof.

17.2 The Contractor shall comply with all laws concerning health and labour conditions applicable to the performance of the Work or part thereof and shall also require compliance of same by all its subcontractors when applicable.

17.3 The Contractor upon any request for information or inspection dealing with the Work by an authorized representative of a Public Entity shall forthwith notify the Project Authority or Her Majesty.

17.4 Evidence of compliance with laws applicable to the performance of the Work or part thereof by either the Contractor or its subcontractor shall be furnished by the Contractor to the Project Authority or Her Majesty at such time as the Project Authority or Her Majesty may reasonably request."

## **18. Identification Protocol Responsibilities**

The Contractor must ensure that the Contractor and each of its agents, representatives or subcontractors (referred to as Contractor Representatives for the purposes of this clause) comply with the following self-identification requirements:

18.1 During the performance of any Work at a Government of Canada site, the Contractor and each Contractor Representative must be clearly identified as such at all times;

18.2 During attendance at any meeting, the Contractor or Contractor Representatives must identify themselves as such to all meeting participants;

18.3 If the Contractor or 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 himself as the Contractor or an agent or subcontractor of the Contractor in all electronic mail in the signature block as well as under the e-mail account Properties. This identification protocol must also be used in all other correspondence, communication, and documentation; and

18.4 If Canada determines that the Contractor is not complying with any of the obligations stated in this article, Canada will advise the Contractor and request that the Contractor implement, without delay, appropriate corrective measures to eliminate recurrence of the problem.

## **19. Dispute Resolution Services**

The Parties agree to make every reasonable effort, in good faith, to settle amicably all disputes or claims relating to or arising from the Contract, through negotiations between the Parties' representatives authorized to settle. If the Parties do not reach a settlement within 10 working days, each party hereby consents to fully participate in and bear the cost of mediation led by the Procurement Ombudsman pursuant to Subsection 22.1(3)(d) of the Department of Public Work and Government Services Act and Section 23 of the Procurement Ombudsman Regulations.

The Office of the Procurement Ombudsman may be contacted by telephone at 1-866-734-5169, by e-mail at [the Office of the Procurement Ombudsman email address](#), or by web at [the Office of the Procurement Ombudsman website](#).

## **20. Contract Administration**



The parties understand that the Procurement Ombudsman appointed pursuant to Subsection 22.1(1) of the Department of Public Works and Government Services Act will review a complaint filed by the complainant respecting the administration of the Contract if the requirements of Subsection 22.2(1) of the Department of Public Works and Government Services Act and Sections 15 and 16 of the Procurement Ombudsman Regulations have been met.

To file a complaint, the Office of the Procurement Ombudsman may be contacted by e-mail at [the Office of the Procurement Ombudsman email address](#), by telephone at 1-866-734-5169, or by web at the Office of the Procurement Ombudsman website.

## **21. Privacy**

21.1 The Contractor acknowledges that Canada is bound by the Privacy Act, R.S.C. 1985, c. P-21, with respect to the protection of personal information as defined in that Act. The Contractor shall keep private and confidential any such personal information collected, created or handled by the Contractor under the Contract, and shall not use, copy, disclose, dispose of or destroy such personal information except in accordance with this clause and the delivery provisions of the Contract.

21.2 All such personal information is the property of Canada, and the Contractor shall have no right in or to that information. The Contractor shall deliver to Canada all such personal information in whatever form, including all copies, drafts, working papers, notes, memoranda, reports, data in machine-readable format or otherwise, and documentation which have been made or obtained in relation to this Contract, upon the completion or termination of the Contract, or at such earlier time as the Minister may request. Upon delivery of the personal information to Canada, the Contractor shall have no right to retain that information in any form and shall ensure that no record of the personal information remains in the Contractor's possession.

## **22. Proactive Disclosure of Contracts with Former Public Servants**

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: 2019-01](#) of the Treasury Board Secretariat of Canada.

## **23. Information Guide for Contractors**

Prior to the commencement of any work, the Contractor certifies that its employees, or employees of its subcontractors, working under contract for CSC will complete the applicable Module(s) and retain the signed checklist(s) from the CSC "Information Guide for Contractors" website: [www.bit.do/CSC-EN](http://www.bit.do/CSC-EN).



## ANNEX A – Statement of Work

### 1. Introduction:

1.1 The Correctional Service of Canada (CSC) Health Services requires the services of an Infectious Disease Specialist for several institutions within the Pacific Region. This includes Matsqui, Pacific, Mountain, Kent, Kwikwèxwelhp, Mission (medium), Mission (minimum), and Fraser Valley Institutions.

### 2. Background:

- 2.1 CSC has a legal obligation, under the Corrections and Conditional Release Act (CCRA), Section 86, as follows: “The Service shall provide every inmate with essential health care and reasonable access to non-essential health care.”
- 2.2 The Commissioner’s Directives 800 series are the key references on essential health care services (physical health, mental health, health promotion).
- 2.3 The Health Services vision is “Providing quality integrated person-centered care.”
- 2.4 The mission of Health Services is to provide offenders with efficient and effective health care that: is patient/family/support-centered; Encourages individual responsibility and patient self-management; Promotes healthy reintegration at discharge; and Contributes to safe communities.
- 2.5 In broad terms health care means medical, dental, mental health care and public health services. During the period of incarceration, inmates are provided with a range of coordinated health services that are accessible, affordable, and appropriate to the correctional environment.
- 2.6 Health services are provided in: Primary Care Health Centers in Institutions; Regional Hospitals (inpatient medical care); and Regional Treatment / Psychiatric Centers (inpatient psychiatric care). Inmates may have to go to the community for emergency services, specialized health care services and for hospitalization that cannot be managed in CSC’s Regional Hospitals. In CSC, health care is provided by a wide range of regulated and non-regulated health professionals.

### 3. Objective:

3.1 The purpose of this contract is for the provision of essential infectious disease services (including Fibroscans) to inmates incarcerated in the various federal institutions located throughout the Pacific Region.

### 4. Performance standards:

4.1 The Contractor must take into account gender, cultural, religious and linguistic differences and be responsive to the special need of women and Aboriginal People.

#### 4.2. Medical Care:

The Contractor must provide services that are consistent with the standards set by the College of Physicians and Surgeons of BC and within the standards/policies of the Correctional Service of Canada.

The Contractor must provide all services in compliance with federal and provincial legislation. This includes standards, provincial and national guidelines, practice standards



and CSC policy/guidelines (such as Guidelines for Hepatitis C) and including but not limited to, the use of routine practice precautions as required in the performance of their duties.

#### 4.3. Compliance with provincial/national guidelines

The Contractor is expected to consult with the Project Authority to ensure that the services provided are consistent with the relevant and current legislation, practice standards and policies.

#### 4.4. The following is a list of key relevant legislation and CSC policy/guidelines but should not be considered an exhaustive list. CSC's policies and guidelines can be found on the CSC internet website at [www.CSC-SCC.GC.ca](http://www.CSC-SCC.GC.ca) or available in hard copy.

- Corrections and Conditional Release Act - Section 85 Health Care
- Commissioner's Directive 800, Health Services
- Guidelines 800-3, Consent to Health Service Assessment, Treatment and Release of Information
- Guidelines 800-8, Post Exposure Protocol (PEP) and Managing Significant Exposure to Blood and/or Body Fluids
- National Essential Health Services Framework
- CSC National Formulary
- Procedures to Obtain Nutritional Supplements
- Documentation for Health Services Professionals
- Abbreviations for Health Services
- Guidelines for Sharing Personal Health Information
- Tuberculosis Prevention and Control Guidelines for Federal Correctional Institutions
- Canadian Tuberculosis Standards (6th Edition)
- Management of Viral Hepatitis Guidelines
- CSC Sexually Transmitted Infections Clinical Practice Guidelines
- Health Canada – Canadian Guidelines on Sexually Transmitted Infections
- Accreditation Standards and Required Organization Practices
- Infection Prevention and Control Guidelines
- National Guidelines for Gastroenteritis Outbreaks Compatible with Norovirus
- CSC National Guidelines for the Immunization of Inmates

#### 4.5 Documentation in CSC 's Health Care Records:

- a) In addition to the above noted policies, guidelines and standards, the Contractor must document all assessment, treatment and consultations in the Inmates Health Care Records in compliance with relevant legislation, professional standards of practice, CSC's Documentation for Health Services Professionals guidelines. The Contractor must ensure that documentation is sufficient to communicate to other health care professionals the status of the patient (including special circumstances/requirements) and the next steps in treatment and follow-up.
- b) As an accountability and quality assurance measure, the Chief, Health Services will periodically review the Contractor's documentation for quality, consistency and completeness.
- c) All of the inmates' health care records, including all protected information, must remain at the institution.
- d) The Contractor must obtain prior approval, in writing, from the Regional Director Health Services before collecting any data on inmates. The Contractor must specify what data would be collected and for what purpose.



## **5. Tasks:**

### 5.1 Inmate care:

- a) The Contractor must provide essential infectious disease services, as requested by the Project Authority, in accordance with the National Essential Health Services Framework, including any amendment to this Framework issued by CSC during the contract period and any optional period if and when exercised by CSC.
- b) These services include, but are not limited to the following:
  - i. Assessment of all referred inmates;
  - ii. Consultation;
  - iii. Treatment;
  - iv. Urgent health services (any condition that is likely to deteriorate to an emergency or affect the inmate's ability to carry out their activities of daily living is considered to be "urgent") including referral to the appropriate community hospital for emergency medical services when required.

5.2 The Contractor must document health assessment, treatment, and consultations in the inmate's health care record. This includes making entries in the electronic health file (e.g. OSCAR).

### 5.3 Recommendations for non-formulary medication and Special Authorization items:

The Contractor must ensure that:

- a) Medications are prescribed according to CSC's National Drug Formulary;
- b) Requests for non-formulary medications are made in accordance with CSC's National Drug Formulary; and
- c) Requests for Special Authorization items that are being recommended by the Contractor are made in accordance with CSC's Essential Health Services Framework.

### 5.4 Call Back Services

In the rare event that the Contractor is recalled (called-back) to the institution to provide a service outside of their institutional clinic hours, the Contractor will be compensated as per the established hourly rate.

Telephone consultations are payable at a set rate per call, as outlined in the terms of payment.

## **6. Grievance and Investigation Processes:**

6.1 The Contractor may be required to participate in various CSC internal inmate grievance/investigation processes which may include a review of the Contractor's documentation on the Health Care Records. Upon request from the Project Authority, the Contractor may have to undergo interviews as a result of an inmate grievance/investigation process.

## **7. Services related to the provision of Health Services in CSC:**

7.1 At the request of the Project Authority, the Contractor must provide the following services:





- a) Participate in the review of policies and guidelines related to the provision infectious diseases services (such as TB guidelines, Management of Viral Hepatitis guidelines, etc.) in CSC; and
- b) Participate as required and/or as requested by the Project Authority in activities and committees related to Quality Improvement, Patient Safety and Accreditation within the Institution(s), Region and /or National Headquarters. Examples of activities may include, but are not limited to:
  - assisting to identify evidence for Accreditation Standards,
  - completion of surveys required by Accreditation Canada, and
  - participating in improvement opportunities identified as a result of quality improvement data collection and/or activities

## **8. Notification Requirements:**

- 8.1 The Contractor must notify the Project Authority of any issues that may call into question the Contractor's competency and any restrictions imposed by the licensing body affecting the Contractor's ability to provide medical services to inmates.
- 8.2 The Contractor must notify the Project Authority immediately of any significant complaints lodged against the Contractor.

## **9. Security:**

- 9.1 All equipment including communication devices the Contractor wishes to bring into the Institution must be approved by the Project Authority and CSC Security in advance.
- 9.2 As a visitor to a CSC correctional institution, the Contractor will be subject to local security requirements that can vary from moment to moment depending on inmate activities. The Contractor may be faced with delay or refusal of entry to certain areas at certain times although prior arrangements for access may have been made.

## **10. Language of work:**

- 10.1 The Contractor must perform all work in English.

## **11. Hours of work:**

- 11.1 The clinic dates for the various institutions will be determined by the Project Authority in consultation with the Contractor.
- 11.2 A clinic/session will be approximately three (3) hours each.
- 11.3 The Chief Health Services at each institution will establish the clinic hours. Currently, the clinics are held on an as and when required basis.
- 11.4 In the event of an unexpected cancellation of the clinic or portion thereof by CSC, with **less than 24 hours notice**, the Contractor will be paid the session fee for that applies to that zone.
- 11.5 The Project Authority may, at his/her discretion, change the clinic schedule and number of clinics held during the course of the contract, including any options if and when exercised by CSC.
- 11.6 If at any time the Contractor is unable to provide the services in the contract, they shall provide a replacement person with similar qualifications and experience at the Contractor's



sole expense for the clinic times where the Contractor is not available. Any replacement will be with the agreement of the Project Authority.

## **12. Meetings:**

- 12.1 At the discretion of the Project Authority, there will be an initial meeting at the beginning of the contract to finalize the scope of services to be provided under the contract.
- 12.2 At the request of the Project Authority, the Contractor may be required to attend meetings and/or provide training pertaining to CSC Health Service business.
- 12.3 At the request of the Regional Director Health Services or designate, the Contractor may be asked to participate on regional or national teleconferences/videoconferences. The Contractor may bill for their time spent attending teleconferences/videoconferences as per the established hourly rate.

## **13. Reporting Requirements:**

- 13.1 At any time, the Project Authority may request that the Contractor report data on the services that were provided to inmates. This may include the use of reporting templates as provided by the Project Authority.
- 13.2 At the request of the Project Authority, the Contractor must produce or contribute to regional reporting.
- 13.3 As part of CSC's accountability with respect to the delivery of health services, the Project Authority may request that the Contractor provide input into reports on health care delivery (including but not limited to: infectious diseases surveillance).

## **14. Constraints:**

- 14.1 Working within a correctional institutional environment:
  - a) In a correctional environment there is the possibility of diversion of high abuse potential medications and for security reasons there are restrictions with respect to prescribing that may not exist in the community. Issues surrounding potential diversion, high abuse potential of narcotics and other security issues may occur in CSC Institutions.
  - b) While the expectation is that medical practices in CSC institutions are generally consistent with community practice, because the care provided as part of this contract is within a prison setting, there are some differences with respect to practice. CSC policy and guidelines are developed in order to provide direction to health care professions regarding these differences.

## **15. Support to the Contractor:**

- 15.1 CSC will provide the supplies and equipment required for health services to inmates. The contractor will supply all equipment required to perform the Fibroscans.
- 15.2 For the Contractor to fulfill the obligations of the Contract, CSC will:
  - Provide the Contractor with office space;
  - Provide the Contractor with access to a computer/laptop while on site;
  - Provide the Contractor with access to a telephone while on site.
- 15.3 The Contractor shall be responsible for providing a cellular telephone, if so requested.

## **16. Location of Work:**



- a) The Contractor must provide health care services to offenders on-site at the following Institutions:

**Matsqui Institution**

33344 King Road, Abbotsford, BC

**Pacific Institution/Regional Treatment Centre**

33344 King Road, Abbotsford, BC

**Mountain Institution**

4732 Cemetery Road, Agassiz, BC

**Kent Institution**

4732 Cemetery Road, Agassiz, BC

**Mission Complex (Mission Minimum, Mission Medium, Kwikwèxwelhp Healing Village)**

8751 Stave Lake Road, Mission, BC

**Fraser Valley Institution**

33344 King Road, Abbotsford, BC

- b) The Contractor must visit incarcerated offenders in interview rooms in segregation or cell range areas, as requested by the Project Authority.

**c) Telehealth by Videoconferencing**

The Contractor must provide Telehealth sessions (services by videoconference from one of our sites) to offenders, if qualified and experienced, as requested and approved by the Project Authority. The Contractor must contact the Project Authority to obtain written approval prior to any work being done via videoconference. The Project Authority will grant approval, at his/her sole discretion, on a site-by-site basis. The Contractor must also provide a summary of any work being done, via videoconference to the Project Authority.



## ANNEX B – Proposed Basis of Payment

The Contractor will be paid in accordance with the following Basis of Payment for Work performed pursuant to the Contract. The inclusion of volumetric data in this document does not represent a commitment by Canada that Canada's future usage of the services described will be consistent with this data.

### 1.0 Contract Period (From April 1, 2021 to March 31, 2022)

#### 1.1 Professional Fees

- (a) For the provision of services as described in Annex A - Statement of Work, the Contractor shall be paid the all inclusive firm hourly rate(s) below in the performance of this Contract, HST or GST extra.

RESOURCE CATEGORY	QUOTED All-Inclusive Hourly Rate (in Cdn \$)	Estimated Level of Effort (hours)	Total (in Cdn \$)
	A	B	C = A x B
Infectious Disease Specialist – Zone 1		200 Hours	
Infectious Disease Specialist – Zone 2		200 Hours	
Infectious Disease Specialist – Zone 3		200 Hours	
RESOURCE CATEGORY	QUOTED Rate per Call (in Cdn \$)	Estimated Level of Effort (calls)	Total (in Cdn \$)
Phone Consultation (rate per call) – All Zones		150 Calls	

#### Zone 1

- Pacific Institution including RTC
- Matsqui Institution
- Fraser Valley Institution

#### Zone 2

- Mission Institution (Minimum) – KWI offenders will attend clinics at Mission Minimum
- Mission Institution (Medium)
- Mountain Institution

#### Zone 3

- Kent Institution
- Mountain Institution

#### 1.2 Attendance at Meetings:

For attendance at meetings as requested by the Chief Health Services, CSC will pay the Contractor an amount equal to 75% of the all-inclusive hourly rate of Infectious Disease Specialist – Zone 1.

#### 1.3 Telehealth by Videoconferencing:

For telehealth by videoconferencing as requested by the Chief Health Services, CSC will pay the Contractor the all-inclusive hourly rate of Infectious Disease Specialist – Zone 1.

### 2.0 Option to Extend the Term of the Contract



Subject to the exercise of the option to extend the Contract period in accordance with Article 4. Term of Contract, 4.2 Options to Extend Contract, the Contractor shall be paid the firm all inclusive hourly rate(s), in accordance with the following tables, GST or HST extra, to complete all Work and services required to be performed in relation to the Contract extension.

**2.1 Professional Fees, Option period 1 (From April 1, 2022 to March 31, 2023)**

RESOURCE CATEGORY	QUOTED All-Inclusive Hourly Rate (in Cdn \$)	Estimated Level of Effort (hours)	Total (in Cdn \$)
	<b>A</b>	<b>B</b>	<b>C = A x B</b>
Infectious Disease Specialist – Zone 1		200 Hours	
Infectious Disease Specialist – Zone 2		200 Hours	
Infectious Disease Specialist – Zone 3		200 Hours	
RESOURCE CATEGORY	QUOTED Rate per Call (in Cdn \$)	Estimated Level of Effort (calls)	Total (in Cdn \$)
Phone Consultation (rate per call) – All Zones		150 Calls	

**2.2 Professional Fees, Option period 2 (from April 1, 2023 to March 31, 2024)**

RESOURCE CATEGORY	QUOTED All-Inclusive Hourly Rate (in Cdn \$)	Estimated Level of Effort (hours)	Total (in Cdn \$)
	<b>A</b>	<b>B</b>	<b>C = A x B</b>
Infectious Disease Specialist – Zone 1		200 Hours	
Infectious Disease Specialist – Zone 2		200 Hours	
Infectious Disease Specialist – Zone 3		200 Hours	
RESOURCE CATEGORY	QUOTED Rate per Call (in Cdn \$)	Estimated Level of Effort (calls)	Total (in Cdn \$)
Phone Consultation (rate per call) – All Zones		150 Calls	

**2.3 Professional Fees, Option period 3 (from April 1, 2024 to March 31, 2025)**

RESOURCE CATEGORY	QUOTED All-Inclusive Hourly Rate (in Cdn \$)	Estimated Level of Effort (hours)	Total (in Cdn \$)
	<b>A</b>	<b>B</b>	<b>C = A x B</b>
Infectious Disease Specialist – Zone 1		200 Hours	
Infectious Disease Specialist – Zone 2		200 Hours	
Infectious Disease Specialist – Zone 3		200 Hours	



RESOURCE CATEGORY	QUOTED Rate per Call (in Cdn \$)	Estimated Level of Effort (calls)	Total (in Cdn \$)
Phone Consultation (rate per call) – All Zones		150 Calls	

**3.0 Cost Reimbursable Expenses**

3.1 Canada will not accept any travel and living expenses for:

- (a) Work performed at the Institution indicated under Annex A, Statement of Work, 3. Objective;
- (b) Any travel between the Contractor’s place of business and the Institution; and
- (c) Any relocation of resources required to satisfy the terms of the Contract. These expenses are included in the all-inclusive hourly rates specified in this annex.

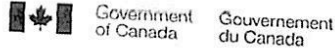
**4.0 HST or GST**

- 4.1 All prices and amounts of money in the contract are exclusive of Goods and Services Tax (GST) or Harmonized Sales Tax (HST), as applicable, unless otherwise indicated. The GST or HST, whichever is applicable, is extra to the price herein and will be paid by Canada.
- 4.2 The estimated HST or GST of \$\_\_\_\_\_ (to be completed at contract award) is included in the total estimated cost shown on page 1 of this Contract. The estimated GST or HST to the extent applicable will be incorporated into all invoices and progress claims and shown as a separate item on invoices and progress claims. All items that are zero-rated, exempt, or to which the GST or HST does not apply, are to be identified as such on all invoices. The Contractor agrees to remit to Canada Revenue Agency (CRA) any amounts of GST or HST paid or due.



Annex C – Security Requirements Check List

DSD-PAC4259-HSEx



Contract Number / Numéro du contrat
21807-21-0010
Security Classification / Classification de sécurité

**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  
 Correctional Service of Canada

2. Branch or Directorate / Direction générale ou Direction  
 Health Services

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  
 Providing specialized medical services in the area of Infectious Diseases to federally incarcerated inmates in the Pacific Region.

5. a) Will the supplier require access to Controlled Goods? / Le fournisseur aura-t-il accès à des marchandises contrôlées?  No / Non  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?  No / Non  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)  No / Non  Yes / Oui

6. b) Will the supplier and its employees (e.g. cleaners, maintenance personnel) require access to restricted access areas? / Le fournisseur et ses employés (p. ex. nettoyeurs, personnel d'entretien) auront-ils accès à des zones d'accès restreintes?  No / Non  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?  No / Non  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

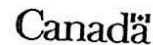
No release restrictions / Aucune restriction relative à la diffusion <input checked="" type="checkbox"/>	All NATO countries / Tous les pays de l'OTAN <input type="checkbox"/>	No release restrictions / Aucune restriction relative à la diffusion <input type="checkbox"/>
Not releasable / À ne pas diffuser <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:	Specify country(ies): / Préciser le(s) pays:

7. c) Level of information / Niveau d'information

PROTECTED A / PROTÉGÉ A <input checked="" 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 <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"/>

TBS/SCT 350-103(2004/12)

Security Classification / Classification de sécurité
--





DSD-PAC4259-HSEx

Government of Canada / Gouvernement du Canada

Contract Number / Numéro du contrat 21807-21-0010
Security Classification / Classification de sécurité

**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

TBS/SCT 350-103(2004/12)

Security Classification / Classification de sécurité







DSD-PAC4259-HSEX

Contract Number / Numéro du contrat 21807-21-0010
Security Classification / Classification de sécurité

**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 IT																
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?
- 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.
- No / Non       Yes / Oui
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?
- 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).
- No / Non       Yes / Oui



## Annex D Evaluation Criteria

### 1.0 Technical Evaluation:

#### 1.1 The following elements of the proposal will be evaluated and scored in accordance with the following evaluation criteria.

- Mandatory Technical Criteria

**It is imperative that the proposal address each of these criteria to demonstrate that the requirements are met.**

1.2 LISTING EXPERIENCE WITHOUT PROVIDING ANY SUBSTANTIATING DATA TO SUPPORT WHERE, WHEN AND HOW SUCH EXPERIENCE WAS OBTAINED WILL RESULT IN THE STATED EXPERIENCE NOT BEING CONSIDERED FOR EVALUATION PURPOSES.

1.3 All experience must be strictly work-related. Time spent during education and/or training will not be considered, unless otherwise indicated.

1.4 Experience must be demonstrated through a history of past projects, either completed or on-going.

1.5 References must be provided for each project/employment experience.

I. Where the stated experience was acquired within a Canadian Federal Government Department or Agency **as a Public Servant**, the reference must be a Public Servant who had a supervisory role over the proposed resource during the stated employment.

II. Where the stated experience was acquired within a Canadian Federal Government Department or Agency **as a consultant**, the reference must be the Public Servant who was identified as the Project Authority of the project on which the proposed resource acquired the experience.

III. References must be presented in this format:

- a. Name;
- b. Organization;
- c. Current Phone Number; and
- d. Email address if available

### 1.6 Response Format

I. In order to facilitate evaluation of proposals, it is recommended that bidders' proposals address the mandatory criteria in the order in which they appear in the Evaluation Criteria and using the numbering outlined.

II. Bidders are also advised that the month(s) of experience listed for a project or experience whose timeframe overlaps that of another referenced project or experience will only be counted once. For example: Project 1 timeframe is July 2001 to December 2001; Project 2 timeframe is October 2001 to January 2002; the total months of experience for these two project references is seven (7) months.

III. For any requirements that specify a particular time period (e.g., 2 years) of work experience, CSC will disregard any information about experience if the technical bid does not include the required month and year for the start date and end date of the experience claimed.



IV. CSC will also only evaluate the duration that the resource actually worked on a project or projects (from the start date to end date), instead of the overall start and end date of a project or a combination of projects in which a resource has participated.

**MANDATORY TECHNICAL CRITERIA – \_\_\_\_\_**

#	Mandatory Technical Criteria	Bidder Response Description (include location in bid)	Met/Not Met
M1	<p>The proposed individual(s) must hold a current license in good standing from the provincial licensing body for physicians and surgeons in the province where services at to be provided.</p> <p>Bidders must provide a copy of the license with their bid.</p>		
M2	<p>The proposed individual(s) must have a certification in specialty areas such as Infectious Diseases and/or Internal Medicine.</p> <p>Bidders must provide a copy of their certification(s) with their bid.</p>		
M3	<p>The proposed resource must have a minimum of six (6) months experience in providing primary care or in general practice in the last two (2) years.</p> <p>OR</p> <p>The proposed resource must have a minimum of six (6) months experience within the last two (2) years in providing Infectious Disease Treatment, specifically Hepatitis C and HIV/AIDS.</p> <p>OR</p> <p>The proposed resource must have a minimum of six (6) months experience within the last two (2) years in working with a multi-disciplinary treatment team.</p>		



#	Mandatory Technical Criteria	Bidder Response Description (include location in bid)	Met/Not Met
	Bidders must provide proof of experience with their bid.		



## ANNEX E - Insurance Requirements

### 1. Commercial General Liability Insurance:

1.1 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.

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

### 2. Litigation Rights:

2.1 Pursuant to subsection 5(d) of the Department of Justice Act, S.C. 1993, c. J-2, s.1, if a suit is instituted for or against Canada which the Insurer would, but for this clause, have the right to pursue or defend on behalf of



Canada as an Additional Named Insured under the insurance policy, the Insurer must promptly contact the Attorney General of Canada to agree on the legal strategies by sending a letter, by registered mail or by courier, with an acknowledgement of receipt.

For the province of Quebec, send to:

Director Business Law Directorate,  
Quebec Regional Office (Ottawa),  
Department of Justice,  
284 Wellington Street, Room SAT-6042,  
Ottawa, Ontario, K1A 0H8

For other provinces and territories, send to:

Senior General Counsel,  
Civil Litigation Section,  
Department of Justice  
234 Wellington Street, East Tower  
Ottawa, Ontario K1A 0H8

- 2.2 A copy of the letter must be sent to the Contracting Authority. Canada reserves the right to co-defend any action brought against Canada. All expenses incurred by Canada to co-defend such actions will be at Canada's expense. If Canada decides to co-defend any action brought against it, and Canada does not agree to a proposed settlement agreed to by the Contractor's insurer and the plaintiff(s) that would result in the settlement or dismissal of the action against Canada, then Canada will be responsible to the Contractor's insurer for any difference between the proposed settlement amount and the amount finally awarded or paid to the plaintiffs (inclusive of costs and interest) on behalf of Canada.

### **3. Medical Malpractice Liability Insurance:**

- 3.1 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.
- a) The Contractor must obtain Medical Malpractice Liability Insurance in an amount of \$5,000,000.00 if the Contractor, or the Contractor's resource, is a member of the Canadian Medical Protective Association (CMPA).
  - b) The Contractor must obtain Medical Malpractice Liability Insurance in an amount of \$10,000,000.00 if the Contractor, or the Contractor's resource, is not a member of the Canadian Medical Protective Association (CMPA).
- 3.2 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 goods and services.
- 3.3 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.
- 3.4 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.



## Annex F – National Essential Health Care Framework

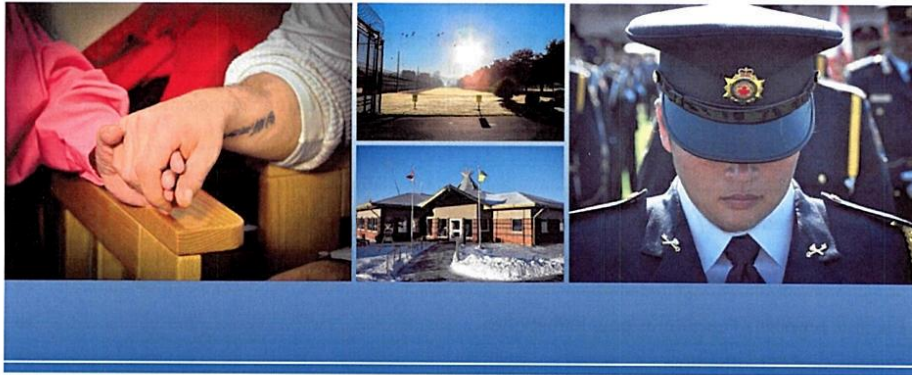


**CORRECTIONAL SERVICE CANADA**

CHANGING LIVES. PROTECTING CANADIANS.

**SERVICE CORRECTIONNEL CANADA**

TRANSFORMONS DES VIES. PROTÉGEONS LES CANADIENS.



# National Essential Health Care Framework Cadre national des services de santé essentiels

Revised September 2, 2020 – Révisé le 2 septembre 2020

Reviewed and approved by NMAC September 24, 2020 - Revue et approuvé par le CMCN le 24 septembre 2020

Reviewed and approved by HSET October 8, 2020 -

Revue et approuvé par l'EDSS le 8 octobre 2020





**Index / Table des matières**

1. Background / Contexte ..... 4

2. Health Services Executive Team (HSET) and National Medical Advisory Committee (NMAC) / L'équipe de direction des Services en santé (EDSS) et le Comité médical consultatif national (CMCN) ..... 5

3. Access to essential Health Services / Accès au services de santé essentiels ..... 6

4. Reasonable access to non essential health care / Accès raisonnable aux services de santé non essentiels ..... 8

5. Guiding considerations for decisions about essential and non-essential health care / Directives à considérer pour les décisions concernant les services de santé essentiels et non essentiels ..... 8

6. Approval Process / Processus d'approbation ..... 10

**Appendix A / Annexe A. List of Health Care, Medical Equipment and Supplies / Liste de soins de santé, équipement et matériel médical ..... 11**

    Assistive Devices and Mobility Aids / Aides à la mobilité et accessoires fonctionnels..... 12

    Foot Care / Soins des pieds..... 13

    Orthotics / Orthèses ..... 13

    Viscosupplementation / Viscosupplémentation..... 14

    Artificial limbs and specialty braces / Les membres artificiels et les appareils orthopédiques spéciaux ..... 14

    Diabetic supplies / Fournitures pour diabétiques ..... 14

    Cryotherapy / Cryothérapie ..... 14

    Hearing and Speech Impaired / Audition et troubles de la parole..... 14

    Respiratory / Système respiratoire..... 15

    Sinuplasty / Sinuplastie..... 16

    Gynecomastia / Gynécomastie ..... 17

    Gender Dysphoria / Dysphorie sexuelle ..... 18

    Cosmetic and Esthetic Services / Services de soins cosmétiques et esthétiques..... 19

    Physiotherapy / Physiothérapie..... 20

    Other Health Services / Autres services de santé..... 20

    Urinary Supplies / Fournitures relatives à l'appareil urinaire..... 21

    Vision Care / Soins de la vue ..... 21

    Occupational Health and Safety / Santé et sécurité au travail..... 22

    Allergies and Food Sensitivity Treatment / Traitement des allergies et de la sensibilité alimentaire ... 22

    Reproductive / Reproducteur ..... 23






---

Prostate Specific Antigen (PSA) / Test de dépistage de l'antigène prostatique spécifique (APS) .....	23
Breast Pumps / Pompes tire-lait .....	23
Nutritional Supplements / Suppléments alimentaires .....	23
Personal Hygiene Items / Articles d'hygiène personnelle .....	24
Clothing and Linen / Vêtements et linge de maison .....	24
<b>Appendix B. Dental Service Standards / Annexe B. Normes de services dentaires .....</b>	<b>25</b>
Emergency Services / Services d'urgence .....	26
Anaesthesia / Anesthésie .....	26
Preventive Services / Les services préventifs .....	26
Examinations / Examens .....	27
Radiographs / Radiographies .....	28
Restorative Services / Services de restauration .....	28
Endodontic Services / Services d'endodontie .....	29
Periodontal Services / Services parodontiques .....	29
Prosthodontic Services / Services de dentisterie prosthodontique .....	30
Surgical Services / Services chirurgicaux .....	32
Sedation and General Anaesthesia Policy / Politique concernant la sédation et l'anesthésie générale	33
Exceptions / Exceptions .....	35
Records / Dossiers .....	35
Review / Révision .....	36
<b>Appendix C. Criteria for Diagnostic Investigation / Annexe C. Critères de test diagnostique .....</b>	<b>37</b>
<b>Appendix D. Mental Health Services / Annexe D. Services de santé mentale .....</b>	<b>39</b>



## 1. Background / Contexte

Correctional Service Canada (CSC) is mandated, under the Corrections and Conditional Release Act (CCRA), to “provide every inmate with essential health care; and reasonable access to non essential health care”

When health care is provided to inmates, the Service shall

(a) support the professional autonomy and the clinical independence of registered health care professionals and their freedom to exercise, without undue influence, their professional judgment in the care and treatment of inmates;

(b) support those registered health care professionals in their promotion, in accordance with their respective professional code of ethics, of patient-centered care and patient advocacy; and

(c) promote decision-making that is based on the appropriate medical care, dental care and mental health care criteria

The Commissioner’s Directives 800 Health Services and its associated guidelines are the key references on essential health care.

Health care services must respect gender, cultural, religious and linguistic differences.

In order to support inmates in taking responsibility for proactively safeguarding their health, CSC provides:

- information and education on health promotion and disease prevention
- direct health care services

En vertu de la *Loi sur le système correctionnel et la mise en liberté sous condition* (LSCMLC), le Service correctionnel du Canada (SCC) est tenu de « fournir aux détenus les soins de santé essentiels et un accès raisonnable aux soins non essentiels ».

Lorsque des soins de santé doivent être dispensés à des détenus, le Service :

a) soutient l'autonomie professionnelle et l'indépendance clinique des professionnels de la santé agréés ainsi que la liberté qu'ils possèdent d'exercer, sans influence inopportune, un jugement professionnel dans le cadre du traitement des détenus;

b) soutient ces professionnels de la santé agréés dans la promotion, selon leur code de déontologie, des soins axés sur le patient et de la défense des droits des patients;

c) favorise la prise de décisions fondée sur les critères appropriés en matière de soins médicaux, dentaires ou de santé mentale.

La Directive du commissaire 800 – Services de santé et les lignes directrices connexes constituent les principaux documents de référence sur les soins de santé essentiels.

Les Services de santé doivent respecter les différences liées au sexe, à la culture, à la religion et à la langue.

Pour aider les détenus à assumer leurs responsabilités afin qu'ils prennent des mesures proactives pour protéger leur santé, le SCC fournit:

- des renseignements sur la promotion de la santé et la prévention des maladies;
- des soins de santé directs.



Within CSC Institutions, health care is provided in Primary Care Health Centres (PCHC), Intermediate Mental Health Care Units, Regional Continuing Care Centres (RCCC), and Regional Treatment / Psychiatric Centres and other health care units as designated by the Commissioner.

Au sein des établissements du SCC, les soins de santé sont offerts dans des centres de soins de santé primaires (CSSP), des unités de soins intermédiaires de santé mentale, des centres régionaux de continuité de soins (CRCS), des centres psychiatriques/de traitement régionaux et d'autres unités de soins de santé désignées par le commissaire.

Inmates may have to go to the community for emergency health care, specialized health care, hospitalizations, and other essential health care that cannot be accommodated within CSC.

Il se peut que les détenus aient à se rendre dans la collectivité pour recevoir des soins d'urgence, des soins spécialisés ou d'autres soins de santé essentiels ou pour être hospitalisés lorsque ces soins ne peuvent être offerts dans un établissement du SCC.

Health care means medical care, dental care and mental health care, provided by registered health care professionals or by persons acting under the supervision of registered health care professionals.

On entend par soins de santé les soins médicaux, dentaires et de santé mentale fournis par des professionnels de la santé agréés ou par des personnes agissant sous la supervision de professionnels de la santé agréés.

The purpose of this Framework and the National Formulary is to promote consistency in the provision of health care across CSC.

Le présent Cadre et le Formulaire national ont pour but de favoriser l'uniformité dans la prestation des soins de santé à l'échelle du SCC.

## **2. Health Services Executive Team (HSET) and National Medical Advisory Committee (NMAC) / L'équipe de direction des Services de santé (EDSS) et Comité médical consultatif national (CMCN)**

The Health Services Executive Team (HSET), based on the advice of the National Medical Advisory Committee, approves the essential health care framework, provides ongoing oversight of the delivery of health care, and ensures accountability, consistency, cost effectiveness, and best practices specific to the needs of CSC's population.

L'Équipe de direction des Services de santé (EDSS), selon les conseils du Comité médical consultatif national (CMCN), approuve le cadre relatif aux soins de santé essentiels, assure la surveillance continue de la prestation des soins de santé et veille à la responsabilisation, l'uniformité, la rentabilité et l'établissement de pratiques exemplaires propres aux besoins de la population du SCC.



The essential health care guidance document is reviewed by the NMAC and approved by HSET annually.

Le document d'orientation sur les soins de santé essentiels est examiné par le CMCN et approuvé annuellement par l'EDSS.

### 3. Access to essential Health Services / Accès aux services de santé essentiels

**Self-referral:** Inmates may initiate access by submitting, in confidence, a request for health care services, indicating the reason for the request. The requests are reviewed, prioritized according to urgency.

**Aiguillage effectué à la demande d'un détenu :** Les détenus peuvent présenter, à titre confidentiel, une demande de services de santé en précisant le motif de leur demande. Les demandes sont examinées et classées en ordre de priorité en fonction de leur niveau d'urgence.

**Staff referral:** Staff may make a referral on behalf of an inmate.

**Aiguillage effectué à la demande d'un membre du personnel :** Un membre du personnel peut effectuer un aiguillage au nom d'un détenu.

**Walk-in:** Some Primary Care Health Centres (PCHC) have "drop in hours" where inmates can be seen by showing up at the Centre.

**Sans rendez-vous :** Certains centres de soins de santé primaires (CSSP) ont des « cliniques sans rendez-vous » durant lesquelles les détenus peuvent être vus par un médecin lorsqu'ils se présentent.

**Visits with Physicians/Specialists (including Psychiatrists) and other health care professionals** are pre-booked according to need.

**Les visites avec des médecins ou des spécialistes (y compris des psychiatres) et d'autres professionnels de la santé** sont réservées à l'avance en fonction des besoins.

When inmates are referred to community medical/psychiatric services, they are subject to the same waiting periods as community members.

Lorsque des détenus sont aiguillés vers des services médicaux/psychiatriques dans la collectivité, ils sont assujettis au même délai d'attente que les membres de la collectivité.

**The use of private clinics for the provision of essential health care is not permitted in CSC.**

**Au SCC, il est interdit d'avoir recours à des cliniques privées en vue de la prestation de soins de santé essentiels.**

**Accessing community services may be impacted by the operational requirements of the institution.**

**Les exigences opérationnelles de l'établissement peuvent avoir une incidence sur l'accès aux services dans la collectivité.**



### Provincial/Territorial Identification Card

As part of the discharge/release planning, the Institutional Parole Officer is responsible for assisting the offender in obtaining Provincial/Territorial Identification such as Birth Certificate, Health Insurance, Disability Benefits, Social Insurance Number etc. in the province of release.

### Community Correctional Centres (CCC)

Offenders in CCC's are entitled to receive provincial Health Insurance and Disability Benefits consistent with the criteria applicable to others residing in the Province/Territory. However, in the interest of public safety where there are gaps, or delays, in provincial health services coverage, CSC will provide, **on an interim basis**, essential health care to offenders residing in CCCs.

Health care for offenders in Community Residential Facilities (CRF) is the responsibility of provinces and territories.

In exceptional circumstances, where there is a documented public safety interest, with the approval of the Regional Director Health Services (RDHS), CSC will provide, on an interim basis, essential health care to address delays in provincial/territorial health care coverage.

### Cartes d'identité provinciales/territoriales

Dans le cadre du processus de planification de la continuité des soins/de la mise en liberté, l'agent de libération conditionnelle en établissement est responsable d'aider le délinquant à obtenir des cartes d'identité provinciales/territoriales, notamment un certificat de naissance, une assurance maladie, des prestations d'invalidité, un numéro d'assurance sociale, etc., dans la province de libération.

### Centres correctionnels communautaires (CCC)

Les délinquants dans les CCC ont le droit de recevoir des prestations d'assurance-maladie et d'invalidité conformément aux critères applicables aux autres résidents de la province ou du territoire. Cependant, pour assurer la sécurité publique, lorsqu'il existe des lacunes ou des retards liés à la couverture provinciale des services de santé, le SCC fournira, **à titre provisoire**, des soins de santé essentiels aux délinquants qui résident dans les CCC.

Les soins de santé des délinquants dans les établissements résidentiels communautaires (ERC) sont la responsabilité des provinces et des territoires.

Dans des circonstances exceptionnelles où il est consigné qu'il faut assurer la sécurité publique, sous réserve de l'approbation du directeur régional, Services de santé (DRSS), le SCC fournira, à titre provisoire, des soins de santé essentiels pour combler les retards dans la couverture provinciale/territoriale des soins de santé.



**Reducing/Removing barriers to Provincial Health Insurance and Disability Benefits**

The RDHS is responsible for communicating with provincial and territorial partners to assist in reducing/removing barriers to offenders obtaining full entitlement to provincial/territorial Health Insurance and Disability Benefits.

**Réduction/élimination des obstacles aux prestations provinciales d'assurance-maladie et d'invalidité**

Le DRSS est responsable de communiquer avec les partenaires provinciaux et territoriaux afin d'aider à réduire/éliminer les obstacles qui empêchent les délinquants d'obtenir toutes les prestations provinciales/territoriales d'assurance-maladie et d'invalidité auxquelles ils ont droit.

**4. Reasonable access to non essential health care / Accès raisonnable aux services non essentiels**

Non-essential health care will be at the inmate's complete expense including consultation fees, and at the discretion of the Institutional Head, any associated escort costs. Health Services will assist with the coordination of arrangements for inmate requested services<sup>1</sup>. Inmate access to non-essential health care will be in accordance with:

Protocol: Requests for Non-Essential Health Services: Paid by the Inmate

Le détenu devra assumer tous les frais associés aux soins de santé non essentiels, y compris les frais de consultation, et, à la discrétion du directeur de l'établissement, tous les coûts associés aux escortes connexes. Les Services de santé contribueront à la coordination des dispositions requises pour les services demandés par le détenu<sup>2</sup>. L'accès du détenu aux soins de santé non essentiels sera accordé conformément au :

Protocole : Demandes de services de santé non essentiels : Payés par le détenu

**5. Guiding considerations for decisions about essential and non-essential health care / Principes directeurs relatifs aux décisions sur les services essentiels et non essentiels**

The following guiding principles were considered in the development of the list (and exclusions) of funded health care and are in accordance with relevant legislation, CSC Policy.

Les principes directeurs suivants ont été pris en compte dans l'élaboration de la liste (et les exclusions) des services de santé financés et sont conformes aux lois et aux politiques pertinentes du SCC.

<sup>1</sup> Form 532 (Inmate Request to Encumber/Disburse Funds) is completed by the inmate with the assistance of health services staff

<sup>2</sup> Form 532 (Inmate Request to Encumber/Disburse Funds) is completed by the inmate with the assistance of health services staff



Health outcomes are a shared responsibility between service providers and inmates.

Inmates are expected to assume responsibility for safeguarding their health.

In meeting its mandate to provide essential health care, CSC should not normally exceed the level of health care available through provincially public-funded health and social services programs.

In developing the essential health care framework, CSC considers the nature and level of health care coverage provided by provincial/territorial publicly funded health care systems.

Incarceration presents an important public health opportunity to promote and protect the health of a population with a high comorbidity of diseases at high risk of contracting and spreading infectious diseases.

These principles recognize that the determination about which service is required for an inmate relies on the judgement of the healthcare professionals, based on a sound clinical assessment guided by professionally accepted standards of practice.

Les prestataires de soins et les détenus sont conjointement responsables des résultats dans le domaine de la santé.

Les détenus devraient assumer la responsabilité de la protection de leur santé.

Normalement, dans l'exécution de son mandat relatif à la prestation de services essentiels, le SCC ne doit pas dépasser le niveau des services de santé disponibles dans les réseaux de santé publics et de services sociaux provinciaux.

Dans le cadre de l'élaboration du cadre des soins de santé essentiels, le SCC tient compte de la nature et du niveau de la couverture des soins de santé fournis par les réseaux de santé publics provinciaux/territoriaux.

Sur le plan de la santé publique, l'incarcération est une occasion de favoriser et de protéger la santé d'une population ayant un taux de comorbidité élevé, ainsi qu'un risque élevé de contracter et de propager des maladies infectieuses.

Ces principes reconnaissent qu'il appartient aux professionnels de la santé de décider des services à dispenser aux détenus, en fonction de l'évaluation clinique effectuée, et conformément aux normes professionnelles acceptées.



## 6. Approval Process / Processus d'approbation

In order to assist with making a determination about essential health care and non-essential health care and achieve consistency across regions, refer to:

[Appendix A – List of Health Services, Medical Equipment and Supplies](#)

[Appendix B – CSC's Dental Service Standards](#)

[Appendix C – Criteria for Diagnostic Investigation](#)

[Appendix D – Mental Health Services](#)

Afin d'aider à prendre une décision concernant les soins de santé essentiels et les soins de santé non essentiels et assurer l'uniformité à l'échelle des régions, consultez :

[Annexe A – Liste des services de santé, du matériel et des fournitures médicaux](#)

[Annexe B – Normes des services dentaires du SCC](#)

[Annexe C – Critères relatifs à l'évaluation diagnostique](#)

[Annexe D – Services de santé mentale](#)





**Appendix A. List of Health Care, Medical Equipment and Supplies /  
Liste des services de santé, équipement et matériel médical**

*(some items that Health Services does not provide may be provided by other departments)*

The approved list identifies items/services according to "approved", "not approved", and "by special authorization".

Items/services listed as "approved" can be implemented routinely at the institutional level.

Items/services listed as "by special authorization" require regional approval by the Manager, Clinical Services; and,

The determination about the health care requirements for a particular inmate relies on the judgement of the healthcare professionals, based on clinical assessment guided by professionally accepted standards of practice. The requested special authorization must be recommended by the Institutional Physician/Nurse Practitioner or Dentist along with the medical justification for the request.

Gender Dysphoria specialized services require endorsement by a health care professional in gender identity, as well as approval by the surgeon to perform certain surgical interventions (e.g., gender-affirming surgery).

*(certains articles que les Services de santé ne fournissent pas peuvent être fournis par d'autres services)*

La liste approuvée précise les articles/services classés selon les catégories « approuvé », « non approuvé » et « sur autorisation spéciale ».

Les articles/services « approuvés » peuvent être mis en œuvre régulièrement à l'échelle de l'établissement.

Les articles/services « sur autorisation spéciale » exigent l'approbation régionale du gestionnaire, Services cliniques; et,

Il appartient aux professionnels de la santé de décider des besoins en soins de santé d'un détenu particulier, en fonction de l'évaluation clinique effectuée, et conformément aux normes professionnelles acceptées. L'autorisation spéciale demandée doit être recommandée par le médecin/l'infirmier praticien ou le dentiste en établissement, lequel doit fournir une justification médicale de la demande.

Les services spécialisés en dysphorie sexuelle doivent être approuvés par un professionnel de la santé dans le domaine de l'identité de genre, ainsi que par le chirurgien en vue de la réalisation de certaines interventions chirurgicales (p. ex. opération d'affirmation du genre).

Legend / Légende	
Y / O	Approved / Approuvé
N	No / Non
SA / AS	Approved by Special Authorization / Approuvé par suite d'une autorisation spéciale



A. Assistive Devices and Mobility Aids / Aides à la mobilité et accessoires fonctionnels			
1.	Pillows	N	Oreillers
2.	Mattresses	N	Matelas
3.	Wheelchairs		Fauteuils roulants
3-a	Electric	SA / AS	Électrique
3-b	Manual	Y / O	Manuel
4.	Motorized scooters	SA / AS	Scooters motorisés
5.	Walkers	Y / O	Déambulateurs
6.	Canes	Y / O	Cannes
7.	Crutches	Y / O	Béquilles
8.	Fibreglass casts	N	Plâtres en fibre de verre
9.	Back brace	Y / O	Corset lombaire
10.	Knee braces	Y / O	Attelles de genou
11.	Ankle braces	Y / O	Attelles de cheville
12.	Elbow supports	Y / O	Protège-coude
13.	Wrist supports	Y / O	Protège-poignet
14.	Tensor bandages	Y / O	Bandages de contention
15.	Heating pads	N	Coussins chauffants
16.	Hot water bottles	N	Bouillottes



17.	Support stockings	Y / O	Bas de contention
18.	Stump stockings	Y / O	Bonnets couvre-moignon
19.	Slings		Attelles
19-a	bandage type	Y / O	de type bandage
19-b	orthopedic type	Y / O	de type orthopédique
20.	Shoes	N	Souliers
21.	Corn pads	N	Coussinets pour les cors
B.	<b>Foot Care / Soins des pieds</b>		
1.	<p>Provided by nurses trained in foot care with the following criteria:</p> <ul style="list-style-type: none"> <li>• Diabetes</li> </ul>	Y/O	<p>Fournis par les membres du personnel infirmier formés pour effectuer des soins des pieds dans les cas suivants :</p> <ul style="list-style-type: none"> <li>• Diabète</li> </ul>
2.	<p>Provided by a podiatrist or other specialist with the following criteria:</p> <ul style="list-style-type: none"> <li>• Complex care required (e.g. nail removal, surgical intervention)</li> </ul>	Y/O	<p>Fournis par un podiatre ou un autre spécialiste dans les cas suivants :</p> <ul style="list-style-type: none"> <li>• Soins complexes requis (p. ex. extraction d'un ongle, intervention chirurgicale)</li> </ul>
C.	<b>Orthotics / Orthèses</b>		
1.	<p>Orthotics i.e. custom shoe inserts, over the counter orthotics</p>	N	<p>Orthèses c.-à-d: semelles faites sur mesure, orthèses qu'on peut obtenir sans ordonnance</p>



D.	<b>Viscosupplementation</b>	<b>N</b>	Viscosupplémentation
E.	<b>Artificial limbs and specialty braces / Les membres artificiels et le appareils orthopédiques spéciaux</b>		
1.	Artificial limbs and specialty braces <ul style="list-style-type: none"> <li>Must be recommended by a specialist and approved by the Institutional Physician. Does not require approval by the Manager Clinical Services. The Chief Health Services can implement the order.</li> </ul>	<b>Y / O</b>	Les membres artificiels et les appareils orthopédiques spéciaux <ul style="list-style-type: none"> <li>Doivent avoir été recommandés par un spécialiste et approuvés par le médecin de l'établissement. L'autorisation du gestionnaire des Services cliniques n'est pas nécessaire. Le chef des Services de santé peut faire la commande.</li> </ul>
F.	<b>Diabetic supplies / Fournitures pour diabétiques</b>		
1.	Insulin pump and supplies <ul style="list-style-type: none"> <li>only in type I diabetics, when admitted to CSC with longstanding insulin pump use and is determined by the Institutional Physician as essential</li> </ul>	<b>SA/AS</b>	Pompe à insuline et fournitures <ul style="list-style-type: none"> <li>seulement s'il s'agit d'un diabète de type 1, si le détenu utilise déjà une pompe depuis longtemps à son admission au SCC et si le médecin de l'établissement juge la pompe essentielle</li> </ul>
G.	<b>Cryotherapy / Cryothérapie</b>		
1.	Liquid Nitrogen	<b>Y/O</b>	Azote liquide
2.	Commercially prepared cryotherapy	<b>Y/O</b>	Produits de cryothérapie préparés commercialement
H.	<b>Hearing and Speech Impaired / Audition et troubles de la parole</b>		
1.	Hearing aids (and how often)	<b>Y / O</b> (5 yrs / ans)	Appareils auditifs (à quelle fréquence)
2.	Hearing aid batteries	<b>Y / O</b>	Piles pour les appareils auditifs
3.	Repairs to hearing aids	<b>Y / O</b>	Réparations des appareils auditifs



4.	Cochlear implant processors	N	Processeurs d'implant cochléaire
I.	<b>Respiratory / Système respiratoire</b>		
1.	<p>Continuous Positive Airway Pressure (CPAP) or Auto Positive Airway Pressure (APAP) machines and related replacement parts for <b>mild</b> sleep apnea diagnosed following a sleep study:</p> <ul style="list-style-type: none"> <li>• CPAP for mild sleep apnea will not be provided.</li> <li>• CSC will provide education on lifestyle choices to treat inmates diagnosed with mild sleep apnea.</li> </ul>	N / N	<p>Appareil à ventilation spontanée en pression positive continue (VSPPC) ou appareil de ventilation spontanée en pression positive automatique (VSPPA) en cas d'apnée du sommeil <b>légère</b> diagnostiquée suite à un examen du sommeil :</p> <ul style="list-style-type: none"> <li>• Un appareil à VSPPC ne sera pas fourni pour l'apnée du sommeil légère.</li> <li>• SCC offrira de la formation sur les choix de mode de vie pour traiter les détenus qui ont reçu un diagnostic d'apnée du sommeil légère.</li> </ul>
2.	<p>Continuous Positive Airway Pressure (CPAP) or Auto Positive Airway Pressure (APAP) machines and related replacement parts for <b>moderate to severe sleep apnea</b> diagnosed following a sleep study and upon the recommendation of a sleep specialist:</p> <ul style="list-style-type: none"> <li>• CSC will provide CPAP to inmates diagnosed with moderate to severe sleep apnea.</li> <li>• Regions will rent or buy the above mentioned machines that will remain the property of CSC.</li> <li>• CSC will purchase tubing and masks once per year that "belong to the inmate".</li> </ul>	Y / O	<p>Appareil à ventilation spontanée en pression positive continue (VSPPC) ou appareil de ventilation spontanée en pression positive automatique (VSPPA) en cas d'<b>apnée du sommeil modérée ou sévère</b> diagnostiquée suite à un examen du sommeil et sur recommandation d'un spécialiste du sommeil :</p> <ul style="list-style-type: none"> <li>• Le SCC fournira l'appareil aux détenus qui ont reçu un diagnostic d'apnée du sommeil modérée ou sévère.</li> <li>• Les régions loueront ou achèteront les appareils mentionnés ci-haut qui appartiendront au SCC.</li> <li>• Le SCC achètera les tubes et les masques une fois par an, qui « appartiendront au détenu ».</li> </ul>
3.	Aerochamber	Y / O	Aérochambre



J.	Sinuplasty / Sinuplastie		
1.	<b>Chronic sinusitis :</b>		<b>Sinusite chronique :</b>
1-a	<ul style="list-style-type: none"> <li>Sinuplasty and osteomeatal complex surgical procedures for chronic sinusitis of fungal origin or in the presence of polyps.</li> </ul>	Y / O	<ul style="list-style-type: none"> <li>Sinuplastie et traitement chirurgical du complexe ostéoméatal si la sinusite chronique est d'origine fongique ou si des polypes sont présents.</li> </ul>
1-b	<ul style="list-style-type: none"> <li>The surgical treatment of chronic sinusitis in the absence of fungal infection or polyps</li> </ul>	SA / AS	<ul style="list-style-type: none"> <li>Traitement chirurgical de la sinusite chronique en l'absence d'une infection fongique ou de polypes.</li> </ul>
2.	<b>Nasal obstruction :</b>		<b>Obstruction nasale :</b>
2-a	<ul style="list-style-type: none"> <li>Chronic complete unilateral or bilateral nasal obstruction cases unsuccessfully treated by medical means</li> </ul>	Y / O	<ul style="list-style-type: none"> <li>Cas chroniques d'obstruction nasale complète d'une ou de deux narines où la gestion médicale n'a eu aucun succès</li> </ul>
2-b	<ul style="list-style-type: none"> <li>Partial or intermittent nasal obstruction may be covered depending on the potential for worsening of the condition, e.g., an evolutionary polyp or neoplasm.</li> </ul>	SA / AS	<ul style="list-style-type: none"> <li>Les cas d'obstruction nasale partielle ou intermittente peuvent être couverts s'il y a une possibilité que la condition se détériore (exemple, tumeur ou polype en phase évolutive).</li> </ul>
3.	<b>Septum perforation :</b>		<b>Perforation de la cloison nasale :</b>
3-a	<ul style="list-style-type: none"> <li>Correction of an asymptomatic nasal septum perforation</li> </ul>	N	<ul style="list-style-type: none"> <li>Correction d'une perforation asymptomatique de la cloison nasale</li> </ul>
3-b	<ul style="list-style-type: none"> <li>Symptomatic nasal septum perforation (pain, bleeding, nose discharge) provided that the causative agent has been addressed (cocaine use, underlying disease)</li> </ul>	Y / O	<ul style="list-style-type: none"> <li>Correction d'une perforation symptomatique de la cloison nasale (douleur, saignement, rhinorrhée), si l'agent causal a été réglé (consommation de cocaïne, maladie sous-jacente)</li> </ul>
4.	<b>Nose deviation and cosmetic procedures:</b>		<b>Déviaton du nez et chirurgie esthétique :</b>



4-a	<ul style="list-style-type: none"> <li>Surgical procedures solely for esthetic reasons including external nasal deviation (acquired or congenital)</li> </ul>	N	<ul style="list-style-type: none"> <li>Traitement chirurgical uniquement pour des raisons esthétiques, y compris pour une déviation externe du nez (acquise ou congénitale)</li> </ul>
4-b	<ul style="list-style-type: none"> <li>Conditions for which there is significant psychological distress for the patient, e.g. following removal of a nasal cutaneous malignant tumour</li> </ul>	SA / AS	<ul style="list-style-type: none"> <li>Conditions lors desquelles le patient souffre d'une détresse psychologique importante, p. ex. après s'être fait retirer une tumeur cutanée maligne au nez.</li> </ul>
K.	<b>Gynecomastia / Gynécomastie</b>		
1.	<p><b>Acute Gynecomastia*</b> (less than six months)</p> <ul style="list-style-type: none"> <li>Not treated surgically</li> <li>Acute cases with no identifiable cause may be treated with a trial of tamoxifen</li> </ul>	N	<p><b>Gynécomastie aiguë*</b> (moins de six mois)</p> <ul style="list-style-type: none"> <li>Aucun traitement chirurgical.</li> <li>S'il s'agit d'un cas aigu de cause inconnue, on peut faire l'essai de tamoxifène.</li> </ul>
2.	<p><b>Chronic Gynecomastia*</b> (greater than one-two years)</p> <ul style="list-style-type: none"> <li>There is significant pain refractory to analgesic medication;</li> <li>There is significant psychological distress refractory to medical and psychiatric therapy; and,</li> <li>Medical management has been unsuccessful</li> </ul>	SA / AS	<p><b>Gynécomastie chronique*</b> (plus d'un an ou deux)</p> <ul style="list-style-type: none"> <li>Douleur intense réfractaire aux analgésiques.</li> <li>Détresse psychologique importante réfractaire aux traitements médicaux et psychiatriques; et</li> <li>La gestion médicale n'a eu aucun succès</li> </ul>
	<p>*As a result of the higher incidence of breast cancer, screening for breast cancer and appropriate interventions will be undertaken in all cases of gynecomastia.</p> <p><b>Surgical treatment for gynecomastia for esthetic reasons is not an essential health service and is not funded by CSC.</b></p>		<p>*Compte tenu de l'incidence élevée du cancer du sein, tous les cas de gynécomastie feront l'objet d'un dépistage de cancer du sein et d'interventions appropriées.</p> <p><b>Le traitement chirurgical d'une gynécomastie pour des raisons esthétiques n'est pas considéré comme un service essentiel et n'est pas payé par le SCC.</b></p>



Gender Dysphoria / Dysphorie sexuelle			
1.	Vaginectomy	SA/AS	Vaginectomie
2.	Hysterectomy/ bilateral salpingo-oophorectomy	SA/AS	Hystérectomie / salpingo-oophorectomie bilatérale
3.	Mastectomy (with construction)	SA/AS	Mastectomie (avec construction)
4.	Phalloplasty	SA/AS	Phalloplastie
5.	Metoidioplasty / Clitoral Release	SA/AS	Métoidioplastie / Dégagement du clitoris
6.	Scrotoplasty / Testicular Implants	SA/AS	Scrotoplastie / Implants testiculaires
7.	Penectomy	SA/AS	Pénectomie
8.	Orchidectomy	SA/AS	Orchidectomie
9.	Vaginoplasty (including clitoroplasty and labiaplasty)	SA/AS	Vaginoplastie (y compris la clitoroplastie et la labiaplastie)
10.	<p>Breast Augmentation</p> <ul style="list-style-type: none"> <li>If following 12 months of continuous hormone replacement therapy there is evidence of one of the following, as determined by the physician and/or surgical team: <ul style="list-style-type: none"> <li>breast aplasia (i.e. no breast development); or</li> <li>significant asymmetric growth</li> </ul> </li> </ul> <p>Breast augmentation for esthetic reasons is not an essential health services and is not funded by CSC.</p>	SA/AS	<p>Augmentation mammaire</p> <ul style="list-style-type: none"> <li>Si, à la suite d'un traitement hormonal substitutif continu de 12 mois, il existe des preuves de l'une des conditions suivantes, selon ce qui a été établi par le médecin et/ou l'équipe chirurgicale : <ul style="list-style-type: none"> <li>aplasie mammaire (c.-à-d. aucun développement du sein);</li> <li>croissance asymétrique importante</li> </ul> </li> </ul> <p>Une augmentation mammaire pour des raisons esthétiques ne constitue pas un service de santé essentiel et n'est pas financé par le SCC.</p>
11.	Tracheal shaving	N	Chondrolaryngoplastie
12.	Facial feminization	N	Féminisation du visage





M.	Cosmetic and Esthetic Services / Services de soins cosmétiques et esthétiques		
1.	Reconstructive surgery	SA / AS	Reconstruction chirurgicale
2.	Cosmetic surgery	N	Chirurgie esthétique
3.	Lipoma Removal  Not an essential health service unless there is pain, bleeding or infection.	SA/AS	Ablation de lipomes  Elle n'est pas un service de santé essentiel sauf en cas de douleur, saignement ou infection.
4.	Tattoo removal	N	Détatouage
5.	Laser hair removal	N	Épilation au laser
6.	Esthetics	N	Esthétique
7.	Wigs  *While this is a non-essential service not funded by CSC, Health Services will make efforts to identify a community agency which may provide assistance to inmate*	N	Perruques  *Bien qu'il s'agisse d'un service non essentiel qui n'est pas financé par le SCC, les Services de santé tenteront de trouver, dans la collectivité, un organisme qui pourra aider le détenu*



N.	<b>Physiotherapy / Physiothérapie</b>	
	<p>In order to achieve clinical improvement, inmates are expected to participate in the physiotherapy treatment plan by doing the exercises, stretches, etc. that are recommended by the physiotherapist between sessions.</p> <p>Physiotherapy sessions may be discontinued by the physiotherapist, in consultation with the primary care physician/nurse practitioner, if the patient is not actively participating in their treatment plan. Discontinuation will occur in the context of documented attempts to engage the patient in participating in treatment.</p>	<p>Pour assurer l'amélioration clinique, on s'attend à ce que les détenus participent au plan de traitement en physiothérapie en faisant les exercices, les étirements, etc. qui sont recommandés par le physiothérapeute indépendamment entre les séances.</p> <p>Les séances de physiothérapie peuvent être interrompues par le physiothérapeute, en consultation avec le médecin traitant/infirmier praticien, si le patient ne participe pas activement à son plan de traitement. L'arrêt du traitement se fera dans le contexte de tentatives documentées pour inciter le patient à participer au traitement.</p>
1.	<p><b>Chronic Conditions :</b></p> <ul style="list-style-type: none"> <li>• A maximum of 2 sessions per week for 8 weeks, then reassess.</li> <li>• If there is clinical improvement, an additional 8 weeks may be provided.</li> <li>• If there is no clinical improvement after the initial 8 weeks, discontinue.</li> </ul>	<p><b>Conditions chroniques</b></p> <ul style="list-style-type: none"> <li>• Nombre maximal de deux séances par semaine pendant huit semaines, puis réévaluation.</li> <li>• S'il y a une amélioration clinique, huit semaines supplémentaires peuvent être accordées.</li> <li>• S'il n'y a aucune amélioration clinique après les huit semaines initiales, mettre fin au traitement.</li> </ul>
2.	<p><b>Acute Conditions :</b></p> <ul style="list-style-type: none"> <li>• A maximum of 10 sessions, then reassess.</li> <li>• If there is clinical improvement, but the condition has not fully resolved, an additional 10 sessions may be provided.</li> </ul>	<p><b>Conditions aiguës</b></p> <ul style="list-style-type: none"> <li>• Nombre maximal de dix séances, puis réévaluation.</li> <li>• S'il y a une amélioration clinique, mais que la situation n'est pas pleinement résolue, dix semaines supplémentaires peuvent être accordées.</li> </ul>
0.	<b>Other Health Services / Autres services de santé</b>	
1.	Chiropractic services	N Services chiropratiques



2.	Registered massage therapy	N	Massothérapie autorisée
3.	Naturopath consultation	N	Consultation en naturopathie
4.	Acupuncture	N	Acupuncture
5.	Physical exam and form completion for Class 1 operator's license	N	Examen physique et formulaire à remplir pour les détenteurs de permis de classe 1
6.	Speech Therapy		Orthophonie
	Swallowing Studies only with the following criteria: <ul style="list-style-type: none"> <li>In the acute phase</li> <li>In cases with a positive prognosis</li> </ul>	SA/AS	Tests de déglutition, seulement dans les cas suivants : <ul style="list-style-type: none"> <li>En phase aiguë</li> <li>Si le pronostic est favorable</li> </ul>
P.	<b>Urinary Supplies / Fournitures relatives à l'appareil urinaire</b>		
1.	Colostomy equipment	Y / O	Équipement de colostomie
2.	Catheterization supplies	Y / O	Matériel de cathétérisme
3.	Incontinence supplies	Y / O	Produits pour incontinence
Q.	<b>Vision Care / Soins de la vue</b>		
1.	<ul style="list-style-type: none"> <li>Refraction (2yrs)</li> <li>Frames and lenses (2 yrs)*</li> </ul> <p>*New frames and lenses will only be provided if there is a change in vision that requires a new prescription</p>	Y / O	<ul style="list-style-type: none"> <li>Examen de la vue (2 ans)*</li> <li>Montures et verres (2 ans)*</li> </ul> <p>* De nouvelles montures et de nouveaux verres ne seront fournis que s'il y a un changement de la vision qui exige une nouvelle ordonnance.</p>
2.	Foldable intraocular lenses indicated in cataract surgery	Y / O	Lentilles intraoculaires pliables indiquées dans les cas de chirurgie de la cataracte
3.	Laser eye surgery	N	Chirurgie des yeux au laser



4.	Contact lenses and solution	N	Lentilles de contact et solution
5.	Ocular Prosthesis	Y / O* (5 yrs / ans)	Prothèse oculaire
R.	<b>Occupational Health and Safety / Santé et sécurité au travail</b>		
5.	Safety glasses	N	Lunettes de sécurité
6.	Gloves	N	Gants
7.	Earplugs	N	Protection auditive
S.	<b>Allergies and Food Sensitivity Treatment / Traitement des allergies et de la sensibilité alimentaire</b>		
1.	Allergy testing (other than for food allergies)	Y / O	Tests d'allergies (autres que les allergies alimentaires)
2.	Food allergy testing *As per the <a href="#">Food Allergy Testing Protocol</a>	*Y / O	Tests d'allergies alimentaires *Selon le <a href="#">Protocole relatif aux tests d'allergies alimentaires</a>
3.	Lactose Intolerance *As per <a href="#">Lactose Intolerance Management Protocol</a>	*Y / O	Intolérance au lactose *Selon le protocole de <a href="#">Gestion de l'intolérance au lactose</a>
4.	EpiPen®	Y / O	EpiPen®



T. Reproductive / Reproducteur			
1.	Copper Intra-uterine Device (IUD)	Y/O	Dispositif intra-utérin (DIU) en cuivre
2.	Tubal Ligation	Y/O	Ligature des trompes
U. Prostate Specific Antigen (PSA) / Test de dépistage de l'antigène prostatique spécifique (APS)			
	Targeted screening when clinically indicated	Y / O	Dépistage ciblé lorsque cela est indiqué sur le plan clinique
V. Breast Pumps / Pompes tire-lait			
1.	Machine (rented or purchased – property of CSC) <a href="#">Health Canada Recommendations</a>	*Y / O (2 yrs / ans)	L'appareil (loué ou acheté – propriété du SCC) <a href="#">Recommandations de Santé Canada</a>
2.	Tubing and equipment “belongs to inmate”	*Y / O (2 yrs / ans)	Les tubes et les pièces appartiennent à la détenue
	*2 yrs – then reassess		*2 ans – puis réévaluer
W. Nutritional Supplements / Suppléments alimentaires			
1.	Artificial sweeteners (provided to inmates with diabetes by Food Services)	N	Édulcorants artificiels (fourni aux détenus avec un diabète par les Services alimentaires)
2.	<a href="#">Nutritional Supplement drinks</a>	N	<a href="#">Boissons – suppléments alimentaires</a>
3.	Weight loss aids	N	Produits favorisant la perte de poids
4.	Protein supplements	N	Suppléments protéiques
5.	Herbal and naturopathic medicine	N	Herbes médicinales et les produits naturopathiques
6.	Organic food	N	Produits biologiques



7.	Vitamin/mineral supplements and digestive aid products. See Formulary for exceptions.	N	Vitamines/suppléments minéraux et aides digestifs. Consultez le formulaire pour les exceptions.
X.	<b>Personal Hygiene Items / Articles d'hygiène personnelle</b>		
1.	Soap	N	Savon
2.	Toothpaste	N	Dentifrice
3.	Deodorant	N	Déodorant
4.	Cologne/perfume	N	Eau de Cologne/parfum
5.	Hand/body lotion	N	Lotion pour les mains ou le corps
6.	Shampoo (non-prescription)	N	Shampooing (sans ordonnance)
7.	Dandruff Shampoo	N	Shampooing antipelliculaire
8.	Acne treatment (other than prescription)	N	Traitement contre l'acné (autre que sous ordonnance)
Y.	<b>Clothing and Linen / Vêtements et linge de maison</b>		
1.	Clothing	N	Vêtements
2.	Mattress covers	N	Couvre-matelas
3.	Towels	N	Serviettes
4.	Sheets, blankets and pillow cases	N	Draps, couvertures et taies d'oreiller
5.	Laundry detergent	N	Détergent à lessive



## Appendix B. Dental Service Standards / Annexe B. Normes de services dentaires

CSC's Dental Service Standards were reviewed and revised in 2012/2013 fiscal year in collaboration with a National Dental Working Group which was comprised of 5 CSC Institutional Dentists and Regional and National Health Services professionals and senior managers. A scan of provincial and federal dental plans was conducted and the information was utilized to help inform the working group during the revision.

For additional information related to the changes to dental services in CSC, please refer to the following:

[Changes to Dental Services: FAQs for Staff](#)

[Changes to Dental Services for Inmates](#)

Essential dental care focuses on relieving pain and infection, managing disease and providing education on preventative oral hygiene. Essential dental care will be guided by the following key features<sup>3</sup>:

- 1) It provides relief from pain and infection
- 2) It maintains or restores function, in particular, the ability to chew food
- 3) It relies on active participation and individual responsibility of the patient/inmate to:
  - a) practice good oral hygiene
  - b) attend scheduled appointments
- 4) It provides management of acute and chronic oral disease
- 5) It provides information and education on oral health hygiene and the prevention of oral disease

Les normes de services dentaires au SCC ont été révisées en 2012-2013 avec la collaboration d'un groupe de travail national composé de cinq dentistes travaillant dans des établissements ainsi que de professionnels des Services de santé et de hauts dirigeants des administrations régionales et nationale. Les régimes de soins dentaires du gouvernement fédéral et des provinces ont été examinés et ont guidé les membres du groupe de travail durant leur révision.

Pour de plus amples renseignements concernant les changements aux services dentaires du SCC, veuillez consulter les documents suivants :

[Changements aux services dentaires : QFP destinée au personnel](#)

[Changement aux services dentaires des détenus](#)

Les soins dentaires essentiels misent sur le soulagement de la douleur et de l'infection, le traitement de maladies et la sensibilisation à une bonne hygiène buccale (prévention). Les soins jugés essentiels satisfont aux critères suivants :

- 1) ils soulagent la douleur et l'infection;
- 2) ils préservent ou rétablissent une fonction, en particulier celle de mâcher;
- 3) ils dépendent de la participation active du patient ou du détenu, qui doit :
  - a) avoir de bonnes habitudes d'hygiène buccale;
  - b) se présenter aux rendez-vous prévus;
- 4) ils traitent une maladie buccale aiguë et chronique;
- 5) ils sensibilisent au maintien d'une bonne hygiène buccale et à la prévention des maladies connexes.

<sup>3</sup> Some aspects were taken from the "Report on Essential Dental Care" by the Committee on Clinical and Scientific Affairs, Canadian Dental Association, October 2012 / Certains aspects sont tirés du Rapport sur les soins dentaires essentiels préparé par le Comité des affaires cliniques et scientifiques, Association dentaire canadienne, octobre 2012



<b>Appendix B CSC's Dental Service Standards / Annexe B. Normes de services dentaires du SCC</b>			
<b>A. Emergency Services / Services d'urgence</b>			
1.	Tooth and root extractions	Y / O	Extraction de dents et de racines
2.	Opening of the pulp chamber once (1) per tooth/per lifetime	Y / O	Ouverture de la chambre pulpaire une fois par dent à vie
3.	Drainage of an abscess	Y / O	Drainage d'un abcès
4.	Hemorrhage control	Y / O	Maîtrise d'une hémorragie
5.	Repair of a laceration	Y / O	Réparation d'une lacération
6.	Immobilization of tooth/teeth loosened by trauma	Y / O	Immobilisation d'une dent branlante suite à un traumatisme
<b>B. Anaesthesia / Anesthésie</b>			
1.	Local anaesthesia only	Y / O	Anesthésie locale seulement
<b>C. Preventive Services / Les services préventifs</b>			
	<p>Services C 1 is <u>not</u> an essential health service.</p> <p>Preventive services will be authorized ONLY following an assessment and diagnosis of dental disease where these services are a necessary component to managing the condition.</p>		<p>Les services C 1 <u>ne</u> constituent <u>pas</u> des services de santé essentiels.</p> <p>Les services préventifs seront autorisés SEULEMENT à la suite d'une évaluation et d'un diagnostic de maladie dentaire, lorsque ces services sont essentiels à la gestion de la condition.</p>
1.	Dental scaling in combination with root planing to a maximum of 8 units @ 15 minutes per unit in any 12 month period* This allows 30 minutes of cleaning/dental hygiene every three months.	SA / AS	Détartrage dentaire, combine à un surfaçage radiculaire d'un maximum de 8 unités @ 15 minutes par unité au cours d'une période de 12 mois donnée* Cela donne 30 minutes de nettoyage/d'hygiène dentaire tous les trois mois.





<b>Appendix B CSC's Dental Service Standards / Annexe B. Normes de services dentaires du SCC</b>			
2.	Hygiene Procedure Teaching	Y/O	Enseignement des mesures d'hygiène
3.	Fluoride Treatments	N	Traitements au fluorure
	<p><b>* Eligibility for additional units of scaling and root planning in any 12 month period based on several factors including, but not limited to:</b></p> <ul style="list-style-type: none"> <li>• The severity of periodontal disease based on current (within the last 12 months) clinical notes, diagnosis and prognosis, complete periodontal charting, and radiographs;</li> <li>• Comprehensive treatment plan addressing all client oral health needs;</li> <li>• The date of the last visit for periodontal and preventive services;</li> <li>• The regularity and compliance of periodontal maintenance; and</li> <li>• Medical condition related to periodontal diseases including any prescribed medication.</li> </ul>		<p><b>* L'admissibilité à des unités additionnelles de détartrage et de surfaçage radiculaire par période de 12 mois repose sur plusieurs facteurs, notamment :</b></p> <ul style="list-style-type: none"> <li>• La gravité de la maladie parodontale fondée sur les éléments suivants (12 derniers mois) : notes cliniques, diagnostic et pronostic, charte parodontale complète et radiographies;</li> <li>• Le plan de traitement complet répondant à tous les besoins en matière de santé buccodentaire du bénéficiaire;</li> <li>• La date de la dernière consultation pour des services parodontaux ou des services de prévention;</li> <li>• La régularité et le respect de la maintenance parodontale;</li> <li>• La présence d'un problème de santé associé à des maladies parodontales, y compris la prise de tout médicament d'ordonnance.</li> </ul>
D.	<b>Examinations / Examens</b>		
1.	Emergency/specific oral examination and treatment planning as required	Y/O	Examen bucco-dentaire d'urgence ou particulier et planification de traitement au besoin.
2.	Screening for oral cancer using light based techniques	N	Dépistage du cancer buccal à l'aide de techniques utilisant la lumière



<b>Appendix B CSC's Dental Service Standards / Annexe B. Normes de services dentaires du SCC</b>			
<b>E.</b>	<b>Radiographs / Radiographies</b>		
1.	Bitewings, occlusal, and periapical radiographs (as required)	Y / O	Radiographies interproximales, occlusales et périapicales (au besoin)
2.	Complete radiographic series (as required)	Y / O	Série complète de radiographies (au besoin)
<b>F.</b>	<b>Restorative Services / Services de restauration</b>		
1.	Crowns, fixed bridges, implants, prefabricated crowns, and aesthetic services (e.g., veneers) are not covered	N	Les couronnes, les ponts fixes, les implants, les couronnes préfabriquées et les services esthétiques (p. ex., facettes) sont exclus
2.	Minor clinical processed repairs may be covered when recommended by the dentist. e.g. Minor repairs to porcelain crowns and/or re-cementing	Y / O	Les réparations mineures faites en laboratoire ou en clinique peuvent être incluses si elles sont recommandées par le dentiste. (p. ex: réparations mineures à les plombages en céramique et re-cimenter
3.	Dental caries/pain control with the use of sedative dressing and/or pulp caps	Y / O	Traitement de caries/douleur à l'aide d'un pansement sédatif et/ou d'une coiffe pulpaire
4.	Amalgam /Composite restorations for the posterior/anterior teeth **	Y / O	Restaurations en amalgame/composite des dents postérieures/anérieures **
5.	Prefabricated post/pin in restorations only when inadequate coronal tooth structure is remaining to retain a direct restoration	Y / O	Utilisation d'un tenon dentinaire et/ou d'un pivot préfabriqué uniquement lorsque la structure coronale restante de la dent est insuffisante pour servir de base à une restauration directe
	<i>** Final choice of restoration material is based on dentist judgement</i>		<i>**Le choix final des biomatériaux de restauration est à la discrétion du dentiste</i>



<b>Appendix B CSC's Dental Service Standards / Annexe B. Normes de services dentaires du SCC</b>			
G.	<b>Endodontic Services / Services d'endodontie</b>		
1.	<p>Root canal treatment:</p> <p>ALL the following criteria must be met for RCT:</p> <ul style="list-style-type: none"> <li>• <b>ONLY</b> Anterior 12 teeth are eligible for RCT (#13, 12, 11, 21, 22, 23, 33, 32, 31, 41, 42, 43)</li> <li>• Adequate periodontal support, based on alveolar bone levels (crown to root ratio of at least 1:1) visible on radiographs with absence of furcation involvement;</li> <li>• Absence of active periodontal disease;</li> <li>• Adequate remaining non-diseased tooth structure to ensure that biologic width can be maintained during restoration;</li> <li>• A mesio-distal width equivalent to that of the natural tooth with no loss of space due to caries or crowding; and</li> <li>• A tooth that does not require any additional dental treatment such as crown lengthening, root re-sectioning or orthodontic treatment.</li> </ul>	Y / O	<p>Traitement de canal :</p> <p>Pour qu'un TC soit autorisé, il faut respecter TOUS les critères suivants :</p> <ul style="list-style-type: none"> <li>• <b>SEULES</b> les 12 dents antérieures sont admissibles pour un TC (n<sup>os</sup> 13, 12, 11, 21, 22, 23, 33, 32, 31, 41, 42 et 43)</li> <li>• Support parodontal adéquat, comme en attestent les niveaux d'os alvéolaire (rapport couronne-racine d'au moins 1 :1) visibles sur les radiographies soumises et absence d'atteinte de furcation;</li> <li>• Absence de maladie parodontale active;</li> <li>• Structure dentaire restante saine capable d'assurer le maintien de la largeur biologique pendant la restauration;</li> <li>• Largeur mésiodistale équivalente à la largeur de la dent naturelle, sans perte d'espace en raison de caries ou de chevauchements;</li> <li>• Dent ne nécessitant aucun autre traitement dentaire, comme une élongation coronaire, une amputation de racine ou un traitement orthodontique.</li> </ul>
H.	<b>Periodontal Services / Services parodontaux</b>		
1.	<p>Management of acute periodontal infections</p>	Y / O	<p>Prise en charge d'infections parodontales aiguës</p>



<b>Appendix B CSC's Dental Service Standards / Annexe B. Normes de services dentaires du SCC</b>			
<b>I.</b>	<b>Prosthodontic Services / Service de dentisterie prosthodontique</b>		
1.	Supplemental prosthesis-Sports mouth guards	N	Prothèses amovibles (protège-dents de sport)
2.	Supplemental prosthesis-Lab processed night guards	N	Prothèses amovibles (gouttière de protection nocturne traitée en laboratoire)
3.	<p>Acrylic partials for teeth numbered 16 to 26 and 36 to 46 inclusive once every 5 years and with the following criteria:</p> <p><b>General Criteria:</b></p> <ul style="list-style-type: none"> <li>• All basic treatment must be completed including:               <ul style="list-style-type: none"> <li>a) control of caries and of periodontal and periapical disease for all teeth; and</li> <li>b) restoration of major structural defects in the abutment teeth;</li> </ul> </li> <li>• The space to be replaced is greater than or equal to the corresponding natural teeth;</li> <li>• All abutment teeth must have:               <ul style="list-style-type: none"> <li>a) adequate periodontal support, based on alveolar bone levels (crown to root ratio of at least 1:1) visible on submitted radiographs; and</li> <li>b) absence of active periodontal disease; and</li> </ul> </li> </ul>	Y / O (5 yrs / ans)	<p>Prothèses dentaires partielles en acrylique pour les dents 16 à 26 et 36 à 46 inclusivement tous les 5 ans, conformément aux critères suivants :</p> <p><b>Critères généraux :</b></p> <ul style="list-style-type: none"> <li>• Tous les traitements de base suivants doivent avoir été exécutés :               <ul style="list-style-type: none"> <li>a) contrôle des caries et des maladies parodontales et périapicales pour l'ensemble des dents; et</li> <li>b) restauration des défauts de structure majeurs dans les dents piliers;</li> </ul> </li> <li>• L'espace à remplacer est plus grand ou égal à l'espace correspondant à la dent naturelle;</li> <li>• Toutes les dents piliers doivent respecter les critères suivants :               <ul style="list-style-type: none"> <li>a) support parodontal adéquat, comme en attestent les niveaux d'os alvéolaire (rapport couronne-racine d'au moins 1:1) visibles sur les radiographies soumises; et</li> <li>b) absence de maladie parodontale active; et</li> </ul> </li> </ul>



<b>Appendix B CSC's Dental Service Standards / Annexe B. Normes de services dentaires du SCC</b>			
Cont'd #3	<ul style="list-style-type: none"> <li>If there is an existing partial denture, it must be at least five (5) years old.</li> </ul> <p><b>Specific Criteria:</b></p> <ul style="list-style-type: none"> <li>There must be one or more missing teeth in the anterior sextant;</li> <li>or</li> <li>There must be two or more missing posterior teeth in a quadrant excluding second and third molars.</li> </ul> <p>*Acrylic partials may be upgraded to cast partials at the inmate's expense.</p>		<ul style="list-style-type: none"> <li>S'il y a déjà une prothèse dentaire partielle, celle-ci doit avoir au moins cinq (5) ans.</li> </ul> <p><b>Critères particuliers</b></p> <ul style="list-style-type: none"> <li>Il doit y avoir au moins une dent manquante dans le sextant antérieur;</li> <li>Ou</li> <li>Il doit y avoir deux ou plusieurs dents postérieures manquantes dans un quadrant, à l'exception des deuxièmes et troisièmes molaires.</li> </ul> <p>*Les prothèses en acryliques peuvent être remplacées par des prothèses en métal aux frais du détenu.</p>
4.	Complete dentures are covered once in any five (5) year period per arch if existing dentures cannot be repaired.	Y / O (5 yrs / ans)	Les prothèses complètes sont couvertes une fois aux cinq (5) ans par arcade si les prothèses existantes ne peuvent pas être réparées.
5.	Repairs and adjustments of removable complete and partial prosthesis as required (e.g., following surgery)	Y / O	Réparations et ajustements de prothèses complètes et partielles amovibles, au besoin (p. ex., à la suite d'une chirurgie)
6.	Re-lining of removable complete and partial prosthesis, as required	Y / O (5 yrs / ans)	Regarnissage des prothèses complètes et partielles amovibles au besoin
7.	Addition of a structure to the prosthesis (as required)	Y / O	Ajout de structure à la prothèse (au besoin)
8.	Minor repairs or re-cementation of fixed bridges	Y / O	Réparations mineures ou re cimentation de ponts fixes (au besoin)



<b>Appendix B CSC's Dental Service Standards / Annexe B. Normes de services dentaires du SCC</b>			
<b>J.</b>	<b>Surgical Services / Services chirurgicaux</b>		
1.	Non surgical and surgical tooth and root extraction (erupted teeth and symptomatic impaction)	Y / O	Extraction non chirurgicale et chirurgicale de dents et de racines (dents sorties et inclusion symptomatique)
2.	Alveoloplasty and gingivoplasty in conjunction with dental extractions, fabrication of prosthesis and/or periodontal disease	Y / O	Alvéoloplastie et gingivoplastie en conjonction avec des extractions dentaires, la fabrication d'une prothèse et/ou la présence d'une maladie parodontale
3.	Oral pathology biopsy	Y / O	Biopsie pour le dépistage des pathologies bucco-dentaires
4.	Drainage of an abscess	Y / O	Drainage d'un abcès
5.	Repair of a laceration	Y / O	Réparation d'une laceration
6.	Treatment of osteomyelitis	Y / O	Traitement de l'ostéomyélite
7.	Gingival Grafts, EXCEPT  gingival grafts on teeth that show chronic periodontal disease or to improve esthetics*	Y/O	Greffons gingivaux*  *Le SCC ne paye pas les greffons gingivaux pour les dents présentant une maladie parodontale chronique ni les greffons réalisés à des fins esthétiques*
8.	Extraction of asymptomatic impacted or un-erupted teeth, especially third molars	N	L'extraction de dents antérieures et postérieures incluses ou pas entièrement sorties asymptomatiques, spécialement les troisièmes molaires
9.	Dental Implants or any associated procedures	N	Implants dentaires ou toute autre procédure associée
10.	Ridge Augmentation	N	Augmentation de crête
11.	Cosmetic or elective services	N	Services cosmétiques ou services non urgents électifs



<b>Appendix B CSC's Dental Service Standards / Annexe B. Normes de services dentaires du SCC</b>			
<b>K.</b>	<b>Sedation and General Anaesthesia Policy / Politique concernant la sédation et l'anesthésie générale</b>		
1.	<p><b>Deep Sedation and General Anaesthesia Criteria:</b></p> <ul style="list-style-type: none"> <li>Once in any twelve (12) month period</li> <li>To limit the associated risks with repeat deep sedation and general anaesthesia, dental providers should ensure that whenever possible, all dental services performed under general anaesthesia and deep sedation are completed in one session</li> </ul>	Y / O	<p><b>Critères pour la sédation profonde et l'anesthésie générale</b></p> <ul style="list-style-type: none"> <li>Une fois par période de douze (12) mois;</li> <li>Afin de limiter les risques associés à l'anesthésie générale et à la sédation profonde administrée de façon répétée, les fournisseurs de soins dentaires doivent, dans la mesure du possible, faire en sorte que tous les soins dentaires fournis sous anesthésie générale et sédation profonde soient complétés en une seule séance</li> </ul>
	<ul style="list-style-type: none"> <li>Deep sedation and general anaesthesia is not covered for the management of dental anxiety</li> <li>Deep sedation and general anaesthesia may be considered for the management of a documented dental phobia (A letter from a physician, psychiatrist or psychologist must be submitted with the predetermination request)</li> </ul>	Y / O	<ul style="list-style-type: none"> <li>La sédation profonde et l'anesthésie générale utilisées pour calmer l'anxiété liée aux soins dentaires ne sont pas couvertes</li> <li>La sédation profonde et l'anesthésie générale peuvent être envisagées en cas de phobie confirmée des soins dentaires (la demande de prédétermination doit être accompagnée d'une lettre d'un médecin, d'un psychiatre ou d'un psychologue)</li> </ul>



<b>Appendix B CSC's Dental Service Standards / Annexe B. Normes de services dentaires du SCC</b>			
2.	<p><b>Moderate Sedation:</b></p> <p>Applies to:</p> <ul style="list-style-type: none"> <li>• Parenteral sedation</li> <li>• Combined technique of inhalation plus intravenous and/or intramuscular injection; and,</li> <li>• Nitrous oxide combined with oral sedative drugs</li> </ul> <p><b>Moderate Sedation Criteria:</b></p> <ul style="list-style-type: none"> <li>• Once in any twelve (12) month period</li> <li>• Minimal sedation must have been considered prior to considering use of moderate sedation.</li> <li>• Moderate sedation is not covered for the management of dental anxiety</li> <li>• Moderate sedation may be considered for the management of a documented dental phobia (A letter from a physician, psychiatrist or psychologist must be submitted with the predetermination request)</li> </ul>	Y / O	<p><b>Sédation modérée</b></p> <p>S'applique à ce qui suit :</p> <ul style="list-style-type: none"> <li>• Sédation administrée par voie parentérale;</li> <li>• Technique combinée d'inhalation et d'injection intraveineuse et/ou intramusculaire;</li> <li>• Oxyde d'azote associé à des sédatifs oraux.</li> </ul> <p><b>Critères pour la sédation modérée</b></p> <ul style="list-style-type: none"> <li>• Une fois par période de douze (12) mois;</li> <li>• Il faut avoir envisagé la sédation minimale avant de recourir à la sédation modérée.</li> <li>• La sédation modérée utilisée pour calmer l'anxiété liée aux soins dentaires n'est pas couverte.</li> <li>• La sédation modérée peut être envisagée en cas de phobie confirmée des soins dentaires (la demande de prédétermination doit être accompagnée d'une lettre d'un médecin, d'un psychiatre ou d'un psychologue).</li> </ul>





<b>Appendix B CSC's Dental Service Standards / Annexe B. Normes de services dentaires du SCC</b>			
3.	<p><b>Minimal Sedation:</b></p> <p>Applies to:</p> <ul style="list-style-type: none"> <li>• Oral sedation*,</li> <li>• Nitrous oxide; and,</li> <li>• Nitrous oxide with oral sedation (single sedative drug)</li> </ul> <p>*Oral sedation may be covered for the management of dental anxiety</p>	<b>Y/O</b>	<p><b>Sédation minimale</b></p> <p>S'applique à ce qui suit :</p> <ul style="list-style-type: none"> <li>• Sédation orale*;</li> <li>• Oxyde d'azote;</li> <li>• Oxyde d'azote avec sédation orale (un seul sédatif).</li> </ul> <p>*La sédation orale utilisée pour calmer l'anxiété liée aux soins dentaires peut être couverte</p>
L.	<b>Exceptions / Exceptions</b>		
1.	<p>An exception to the standard services may be requested where the dentist believes it is warranted:</p> <ul style="list-style-type: none"> <li>• The dentist must provide clear written rationale for any required exception</li> <li>• The decision and rationale must be entered on the patient's chart</li> </ul>	<b>SA / AS</b>	<p>Une exception par rapport aux services réguliers peut être requise si elles sont jugées nécessaires par le dentiste :</p> <ul style="list-style-type: none"> <li>• Le dentiste doit fournir une justification écrite pour toute exception requise</li> <li>• La décision et la justification doivent être documentées au dossier du patient</li> </ul>
M.	<b>Records / Dossiers</b>		
1.	<p>Delivery of dental services and of dental record maintenance, including radiographs must be in compliance with professional and provincial licensing authorities standards</p>		<p>La prestation des services dentaires, incluant les radiographies et la tenue des dossiers dentaires, doivent être conformes aux normes de pratique des autorités professionnelles et provinciales</p>



<b>Appendix B CSC's Dental Service Standards / Annexe B. Normes de services dentaires du SCC</b>			
2.	Records should show the detailed treatment recommendations directly related to the type of examination and treatment provided		Les dossiers devraient indiquer les traitements recommandés en détail selon le type d'examen et les traitements fournis
3.	Records may be used for further reference by CSC		Le SCC peut utiliser les dossiers à des fins de consultation ultérieure
4.	Records are confidential		Les dossiers sont confidentiels
<b>N.</b>	<b>Review / Révision</b>		
	<i><b>GENERAL NOTE:</b> All aspects of CSC dental services are subject to prioritization of requests and care delivery due to the requirement to meet the overall inmate population health needs. Final determination of treatment rendered is by the dentist and health care staff and would not necessarily be by chronological order of request but by priority of care order</i>		<i><b>REMARQUE GÉNÉRALE :</b> Tous les aspects des services dentaires du SCC sont assujettis à la priorité des demandes et des soins, qui est déterminée en fonction des besoins de santé de la population carcérale générale. La décision finale du traitement rendu sera déterminée par le dentiste et les professionnels de la santé et ne serait pas nécessairement basée sur l'ordre chronologique de la demande, mais bien sur l'ordre des soins prioritaires.</i>



**Appendix C. Criteria for Diagnostic Investigation / Annexe C. Critères de test diagnostique**

1.	The diagnostic test should be clinically indicated for the assessment and/or management of a disease state.		Le test diagnostique doit être indiqué d'un point de vue clinique pour l'évaluation ou la gestion d'un état pathologique.
2.	The use of a specific diagnostic test should be consistent with generally accepted clinical guidelines for the assessment and/or management of the disease state.		L'utilisation d'un test diagnostique particulier doit être conforme aux directives cliniques généralement acceptées pour l'évaluation et la gestion de l'état pathologique.
3.	The diagnostic test should provide the information required for assessment and/or management of a disease state and should generally be the least invasive and most readily available test.		Le test diagnostique doit fournir les renseignements nécessaires pour l'évaluation ou la gestion d'un état pathologique et doit généralement être le test le moins invasif et le plus facilement accessible.
4.	The following issues should be considered when ordering diagnostic tests:		Les questions suivantes doivent être prises en considération lorsque l'on commande des tests diagnostiques :
a.	The diagnostic test should contribute to the essential medical management of an inmate's health while incarcerated.		Le test diagnostique doit contribuer à la gestion médicale essentielle de la santé d'un détenu pendant son incarcération.
b.	The inmate's proposed release date and the proposed community and or province of final destination.		La date de mise en liberté proposée pour le détenu et la collectivité ou la province proposée comme destination finale.
i.	The urgency for acquiring the information generated by a diagnostic test;		L'urgence d'obtenir les renseignements fournis par un test diagnostique;
ii.	Requests for urgent and semi-urgent testing should be processed regardless of the inmate's proposed release date or geographic destination;		Les demandes d'examen urgent et semi-urgent doivent être traitées sans tenir compte de la date de mise en liberté proposée du détenu ou de leur destination géographique;



iii.	Depending on the inmate's release date and final destination, elective testing could be obtained by the inmate after release. In this situation, the inmate should be provided with the appropriate advice and information concerning the diagnostic test required.		Selon la date de mise en liberté et la destination finale du détenu, celui-ci peut obtenir un test électif après la mise en liberté. Dans ce cas, on doit leur fournir les conseils et les renseignements appropriés au sujet du test diagnostique nécessaire.
c.	The availability of local resources.		La disponibilité des ressources locales.
i.	If, for example, an MRI is requested and access to MRI is not locally available but CT is and the information obtained through computerized tomography would provide appropriate diagnostic information then CT should be an acceptable alternative;		Si, par exemple, on demande un test d'imagerie par résonance magnétique et que l'on n'y a pas accès à l'échelle locale, mais que l'on a accès à une tomodensitométrie et que les renseignements obtenus au moyen de celle-ci fourniraient des renseignements permettant de poser un diagnostic approprié, la tomodensitométrie doit être une solution acceptable;
ii.	Similarly, if CT abdomen is indicated but not locally available and Ultrasound is, if the information provided is appropriate to answer the diagnostic question then ultrasound should be considered an acceptable alternative;		De même, si une tomodensitométrie de l'abdomen est indiquée, mais n'est pas disponible à l'échelle locale, et que l'échographie est disponible, et que les renseignements fournis sont appropriés et permettent de poser un diagnostic, on doit alors considérer que l'échographie est une solution acceptable;
iii.	Consultation with the local radiologists may in some cases result in more timely investigation by utilizing an alternative and appropriate investigative modality.		La consultation avec les radiologistes locaux peut, dans certains cas, mener à un examen plus rapide grâce à l'utilisation d'une modalité d'évaluation de rechange appropriée.



**Appendix D. Mental Health Services / Annexe D. Services de santé mentale**

<p>I.</p>	<p>The provision of mental health services should be consistent with the individual's level of need. Need is defined as an ability to benefit from an intervention and is distinguished from both "use" and "demand".</p> <p>The level of need is assessed taking into account available mental health assessment information, clinical judgement and is based on signs and symptoms indicative of a mental health disorder and level of functioning. Triage should be conducted in accordance with professionally accepted standards and relevant <a href="#">CSC Mental Health policy and guidelines</a>.</p>		<p>La prestation de services de santé mentale devrait répondre au niveau de besoin de l'individu. Un besoin est défini comme la capacité de bénéficier d'une intervention et se distingue de l'« utilisation » et de la « demande ». Le niveau de besoin est évalué en tenant compte de l'information disponible tirée des évaluations de santé mentale et du jugement clinique, et il est fondé sur les symptômes et les signes de troubles mentaux et le niveau de fonctionnement. Le triage des besoins en santé mentale doit être conforme aux normes de pratique professionnelles ainsi qu'aux lignes directrices sur les soins de santé mentale du SCC.</p>
<p>II.</p>	<p><b>Essential Mental Health Care</b></p>		<p><b>Les services de santé mentale essentiels</b></p>
	<p>The following criteria are used to determine if a mental health service is essential:</p> <p>The inmate has significant mental health needs in the areas of emotion, cognition and/or behaviour indicative of a mental health disorder. These needs are, or are likely to,</p> <ul style="list-style-type: none"> <li>• Create significant impairment in the individual's functioning within his/her institution; and /or</li> <li>• Significantly impact the individual's successful reintegration into the community.</li> </ul>		<p>Les critères suivants servent à déterminer si un service de santé mentale est jugé essentiel:</p> <p>Le détenu a des besoins importants en santé mentale dans les domaines des émotions, des cognitions et/ou des comportements qui indiquent qu'il est atteint d'un trouble de santé mentale. Ces besoins sont ou sont probablement susceptibles :</p> <ul style="list-style-type: none"> <li>• de nuire considérablement au fonctionnement de l'individu au sein de son établissement; et/ou</li> <li>• d'avoir des répercussions importantes sur la réinsertion de l'individu en communauté.</li> </ul>