REQUEST FOR PROPOSALS

Enhanced Care in a Personal Care Home Pilot Project

Department of Health and Community Services
Government of Newfoundland and Labrador

June 20, 2012
1.0 PURPOSE

The Newfoundland and Labrador Department of Health and Community Services is issuing this REQUEST FOR PROPOSALS (RFP) to invite personal care home (PCH) owners to participate in a pilot project to provide an enhanced level of care to residents.

2.0 BACKGROUND/RATIONALE

The PCHs in Newfoundland and Labrador are an integral component of the Department of Health and Community Services’ residential care system. The decision to propose an enhanced care in personal care homes pilot project responds to a variety of factors including the aging population and individuals’ desire to remain as close to or in the home of their choice when additional care is required.

Currently, the PCH sector is licensed to provide care to individuals requiring low-level residential care who can function independently with some degree of assistance.

The proposed pilot project will allow admission of up to eight, higher level of care residents in three selected PCHs with no greater than 25 per cent of their approved capacity being utilized for this project. The pilot project will be for an 18-month period. The distribution of participating PCHs will be as equitable as possible; however, decisions will be driven by a geographical need.

The project will have an ongoing and final evaluation component that will examine the feasibility, appropriateness and resident outcomes in terms of safety, quality of care and overall suitability.

3.0 MANDATORY REQUIREMENTS FOR PILOT PCHs

The personal care home that is deemed to be suitable for this pilot project must:

- Be currently licensed to provide level II care;
- Be in compliance with Provincial Personal Care Home Program Operational Standard;
- Meet all fire and life safety regulations and have a fully-automated sprinkler system;
- Meet the current provincial accessibility code;
- Have the ability to provide for up to eight residents assessed as requiring an enhanced level of care; and,
- Have no recent documented or demonstrated financial instability.
4.0 TARGET POPULATION

The individual that is deemed to be suitable for the project has the following attributes:

- Must be medically stable.
- May require up to 2.5 hours of personal care per day.
- Would not normally require more than two hours/week of visiting registered nurse intervention/services.
- No risk of elopement; however, may require some supervision related to mild cognitive impairment.
- Able to partially perform or direct his/her own care and may require incontinence care.
- Ambulatory or mobile with assistive devices (maximum one person assist).

5.0 PROJECT GOAL & OBJECTIVE

Goal:
Evaluate the potential for the PCH sector to:

- Enhance and expand the role of PCHs in the provision of seniors’ care close to home;
- Provide seniors with an opportunity to age in place; and,
- Expand seniors’ choices for residential care by offering a new placement option.

Objective:
To reinforce government’s commitment to seniors by exploring the most suitable type and level of support in the most appropriate living arrangement.

6.0 PROPOSAL REQUIREMENTS

Proposals must outline a model of service delivery for residents requiring enhanced care in a PCH incorporating the following requirements which will form part of the RFP evaluation:

Proposal Documentation
The submission must:

- Be clearly written, outlining a model of service delivery for individuals requiring enhanced care in a PCH; and,
- Contain a response to each requirement.

Structural Requirements
PCHs must have the following structural components:

- A private room of not less than 11.5 net square metres or a semi-private room of not less than 23 net square metres;
- Bathrooms with assistive devices that are private or shared between two residents; and,
- Bathing stations with assistive devices.

In addition, building amenities, space utilization, assistive devices, etc. that complement service delivery should be identified.

**Business Plan - Methodology and Approach**

A detailed business plan is to be submitted that includes:

- **Business concept:**
  - Description of enhanced care services that will be provided;
  - Staffing hours and skill mix;
  - Number of residents at enhanced level of care;
  - Operational improvements to support the pilot project;
  - Evidence of the need for this service in the geographical area; and,
  - Recreational services and community inclusion activities for the enhanced care residents.

- **Current business position:**
  - Include the correct legal business name and contact information;
  - Identify exact location of structure and current PCH name;
  - Include a letter of introduction which is signed by an authorized official(s) of the business;
  - Include current resident numbers and level of care required;
  - Include details on current staffing skill mix and staffing numbers; and,
  - Detail the history of the business.

- Focus on quality service provision and innovative approach to service delivery; and,

- Demonstrate creativity and incorporate best practices in the delivery of care to residents with high-care needs.

**Other**

The proponent may also add further relevant information to support their business plan, such as:

- Owner/operator qualifications and experience as it relates to this service sector;
- Structural and/or equipment enhancements to the PCH;
- Staff qualifications/past experience; and,
- In-service/staff training.

**Financial Requirements to Provide Service**

The proponent must provide a detailed breakdown of proposed costs of providing an enhanced level of care, including the individual resident rate.

**7.0 EVALUATION CRITERIA**

An evaluation committee comprised of representatives from the Department of Health and Community Services, and the regional health authorities in consultation with Service Newfoundland and Labrador will evaluate all proposals.
that meet the mandatory requirements. The initial screening process will include a review of standards compliance, information on structure and design appropriateness and validation of the information contained in the proposal. The proposal itself will then be evaluated. The intent is to select the proponents that achieve the highest overall score based on the following criteria. Other relevant information, as previously noted, will also be considered in the evaluation process.

<table>
<thead>
<tr>
<th>EVALUATION CRITERIA</th>
<th>Scoring</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proposal Documentation</td>
<td>5%</td>
</tr>
<tr>
<td>Structural Requirements</td>
<td>15%</td>
</tr>
<tr>
<td>Business Plan - Methodology &amp; Approach</td>
<td>40%</td>
</tr>
<tr>
<td>Other</td>
<td>10%</td>
</tr>
<tr>
<td>Financial Requirements to Provide Service</td>
<td>30%</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
</tr>
</tbody>
</table>

Upon completion of the evaluation of the proposal submissions, the highest scoring proponents may be contacted for a site visit which will include an evaluation based on the following four categories: (1) current resident care and satisfaction; 2) staffing; 3) operational business processes; and, 4) environmental characteristics. Each category will be scored from a maximum of 25 points. Proponents will be expected to achieve a minimum score in each category of the evaluation process in order to be considered as a potential pilot site. The score of the site visit, in conjunction with the score of the proposal evaluation, will form the basis for the recommendation of the top three proponents. The recommended proponents must have approval from Service Newfoundland and Labrador to participate in this pilot project.

In summary, the selection process will include:
1. Screening of proposals on the mandatory requirements for the PCH pilot site (Section 3.0);
2. Evaluation of the proposal submissions based on the proposal requirements (Section 6.0);
3. Evaluation of the site visit; and, if selected,
4. Approval from Service Newfoundland and Labrador.

8.0 INQUIRIES ON REQUEST FOR PROPOSALS

All inquiries and requests for clarification related to this RFP are to be directed via e-mail ONLY to Margot Suttis, Long-Term Care Consultant, at pch@gov.nl.ca.

The Department of Health and Community Services recommends that potential proponents register by e-mail to the above address to receive any updates, inquiry responses and other relevant communication related to the RFP. Responses to inquiries will be supplied via e-mail to all proponents who have registered. Confidentiality of proponents will be maintained. The final date for inquiries will be Monday, July 23, 2012.
9.0 SUBMISSION OF PROPOSALS

Three (3) copies of the proposal must be received at the offices of the Department of Health and Community Services no later than 4:00 p.m. NST on Friday, August 3, 2012.

All submissions and supporting documents become the property of the Department of Health and Community Services.

Late or faxed submissions will not be accepted under any circumstances.

Proposals are to be addressed to:

Margot Suttis, Long-Term Care Consultant
Long-Term Care and Community Support Services
Department of Health and Community Services
3rd Floor, West Block, Confederation Building
P.O. Box 8700
St. John’s, NL A1B 4J6

Hand deliveries may be made to the reception desk in the Department of Health and Community Services addressed to the person indicated above.

The cost of preparing the proposal is the sole responsibility of the proponent. No one who submits a proposal in response to this RFP shall have any claim for compensation of any kind whatsoever as a result of participating in this RFP. By submitting a proposal, each proponent shall agree that it has no claim for damages arising from any aspect of this RFP process.

10.0 AWARDING OF CONTRACT

Proposals will be evaluated in accordance with the evaluation criteria and site visit identified in this RFP. The selected proponents will be notified by the Department of Health and Community Services. Each of the selected proponents will be required to enter into a written contract embodying terms satisfactory to the regional health authority and the Department of Health and Community Services. No legal relationship will exist between a selected proponent, the regional health authority and the Department of Health and Community Services until the noted written contract has been duly executed by the parties, and then that legal relationship will be subject to the terms of the duly executed written contract.

The Department of Health and Community Services reserves the right to award the contracts in whole or in part.
Before entering into a written contract with the Department of Health and Community Services, the selected personal care homes must:

- Agree to a Service Newfoundland and Labrador inspection as deemed necessary;
- Have support from the regional health authority;
- Accept the agreed upon government subsidized rate for all pilot project participants;
- Support and participate as necessary in an ongoing assessment process utilizing the new interRAI assessment tool;
- Support and participate in increased monitoring by the regional health authority and Department of Health and Community Services; and,
- Participate in an on-going, as well as final, pilot project evaluation process.

11.0 RESERVED RIGHTS

The Department of Health and Community Services reserves to itself the unfettered right to reject any or all responses to this RFP and is not bound to accept the highest ranking, lowest cost or any response. Each proponent in submitting a response to this RFP agrees that the proponent shall not take any legal action of any nature or kind arising from any decision made by the Department to award or not to award to any proponent. The Department of Health and Community Services may elect to cancel this RFP at any time with or without cause and no liability shall accrue as a result of the exercise of its discretion in this regard.