



## **Independent Evaluation**

### **REQUEST FOR PROPOSALS**

### **For Independent Evaluation of the Mental Health Commission of Canada**

<b>ISSUE DATE:</b>	<b>MAY 01 2010</b>
<b>DEADLINE FOR PROPONENT INQUIRIES:</b>	<b>JUNE 01 2010</b>
<b>DEADLINE FOR ISSUING ADDENDA:</b>	<b>JUNE 15 2010</b>
<b>PROPOSAL SUBMISSION DEADLINE:</b>	<b>JULY 01 2010</b>

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**Language of the RFP**

This Request for Proposals has been prepared in both official languages of Canada. If there is a discrepancy between the English and French versions, the English version shall prevail.



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# 1. INTRODUCTION

## 1.1 Invitation to Proponents

This Request for Proposals ("RFP") is an invitation to suppliers (the "Proponents") to submit proposals (the "Proposals") for the services and deliverables described in Section 2.5 (the "Deliverables"). This RFP is issued by the Mental Health Commission of Canada (the "Commission"), a not-for-profit organization funded by Health Canada.

## 1.2 Agreement

The selected Proponent will be required to enter into an agreement with the Commission for the provision of the Deliverables (the "Agreement") and the Agreement shall include the terms and conditions set out in this RFP. It is the Commission's intention to enter into an Agreement with only one (1) legal entity. It is anticipated that the Agreement will be executed on or around **August 01, 2010**, and the term of the Agreement is to be for a period of **ten months** expecting to be completed by **April 30, 2011** with an option in favor of the Commission to extend the Agreement on the same terms and conditions for an additional term of **six months**. This six-month lag between the last deliverable and the end of the contract period is intended to be a contractually covered period for emergency extension (e.g., data collection or analysis issues), and/or presentation of the final product by the Contractor, or as a temporal contingency plan.

# 2. STATEMENT OF WORK

## 2.1 Background

The proposal to create the Mental Health Commission of Canada (MHCC) was first made by the Standing Senate Committee on Social Affairs, Science and Technology in November 2005. Almost two years earlier, in February, 2003, the Committee, under the leadership of Senator Michael Kirby, had undertaken the first-ever national study of mental health, mental illness and addiction.

During the final phase of its study, the Committee held more than 50 meetings, comprising more than 130 hours of hearings. The Committee heard from more than 300 witnesses, whose testimony filled more than 2,000 pages. The Committee travelled to every province and territory, and supplemented its public hearings by two separate e-consultations through the committee's website that gathered hundreds of individual stories.

Based on this evidence, the Committee tabled its final report, ["Out of the Shadows at Last – Transforming Mental Health, Mental Illness and Addiction Services in](#)



[Canada](#)” in May, 2006. In it, the Committee reaffirmed the need for a Mental Health Commission to provide an ongoing national focus for mental health issues.

The Government of Canada announced funding for the Mental Health Commission of Canada in its March 2007 Budget, and indicated that the mandate and structure of the Commission would be closely based on the proposal contained in the Senate Committee report.

The creation of the Commission was also endorsed by all provincial and territorial governments (with the exception of Québec) at a meeting of Ministers of Health in October 2005, and all these governments have since confirmed their support for the Commission. In addition, the creation of the Commission has been enthusiastically welcomed by all mental health stakeholder communities.

The Government of Canada named Former Senator Michael Kirby as the first Chair of the Mental Health Commission of Canada, and the Commission was incorporated as a non-profit corporation in March 2007.

The goal of the Mental Health Commission of Canada is to help bring into being an integrated mental health system that places people living with mental illness at its centre.

To this end, the Commission encourages cooperation and collaboration among governments, mental health service providers, employers, the scientific and research communities, as well as Canadians living with mental illness, their families and caregivers.

As stated in its 2010/11 Business Plan, the Commission’s vision and mission are as follows:

- *Vision:* A society that values and promotes mental health and helps people living with mental health problems and mental illness to lead meaningful and productive lives.
- *Mission:* To promote mental health in Canada, to change the attitudes of Canadians toward mental health problems and mental illness, and to work with stakeholders to improve mental health services and supports.

While the commission is not intended to, nor will it provide, or evaluate mental health services, it is undertaking five key “strategies”:

- Developing a **mental health strategy for Canada**
- Designing and implementing an **anti-stigma/anti-discrimination initiative**
- Designing and implementing a **knowledge exchange centre**
- Launching and supporting **partners for mental health**
- Design and implement the At Home/Chez Soi **multi-site mental health and homelessness research demonstration projects.**

The first three strategies are included in the original 2007 Funding Agreement with Health Canada, the fourth strategy was added to the 2008/2009 Business plan, while the homelessness research demonstration project was added to the Commission in 2008 and has its own separate Funding Agreement.

The Mental Health Commission of Canada will:

- Be a catalyst for the reform of mental health policies and improvements in service delivery;
- Act as a facilitator, enabler and supporter of a national approach to mental health issues;
- Work to diminish the stigma and discrimination faced by Canadians living with mental illness;
- Disseminate evidence based information on all aspects of mental health and mental illness to governments, stakeholders and the public.

## *2.2 Evaluation Requirement*

The 2007 Funding Agreement between Health Canada and the Mental Health Commission of Canada stipulates the Commission must undertake an initial independent program evaluation during fiscal year 2010-2011.

The agreement further stipulates the MHCC shall provide a draft of the evaluation framework and consult with the Minister during its development; and provide to the Minister, by April 30, 2011, a copy of the final evaluation report and make it available to the public (clause 5.1.4 of the Funding Agreement).

The 2008 homelessness research demonstration project Funding Agreement between Health Canada and the Mental Health Commission of Canada, stipulates the Commission must carry out an independent evaluation, within 5 years and 180 days of the coming into force of the Act, using recognized evaluation standard according to a framework and time to be approved by its board of directors.

The homelessness research project is well integrated into the Commission and not only supports other initiatives, but is also supported by the work within the Commission. To date, the planning, design, development and implementation of the homelessness project has appeared to be quite successful, and has been a model for other initiatives within the Commission. Thus, while the homelessness research demonstration project is required to have its own separate thorough and comprehensive evaluation, and is not specifically identified in the 2007 Funding Agreement, the homelessness research demonstration project will be included in a limited way in the 2010/2011 independent evaluation.

## *2.3 Objectives, Issues and Scope*

Although the evaluation is not intended, at this point, to assess the relevance of the Commission given it has only recently been established and is still in its early stages of development.

The main purpose of the evaluation is to provide an assessment of the Commission's progress towards its five key strategies as identified in the 2009/2010 Business Plan, as well as an assessment of policy or program effectiveness, of impacts both intended and unintended, and, if appropriate, of alternative ways of achieving expected results. To this, it will be more of a formative evaluation. The evaluation should touch on both the organization itself (e.g., appropriateness of structure, level of development) and its performance (e.g., are strategies and activities outlined in the Commission's Business Plan meeting their objectives).

The key evaluation objectives for the evaluation are:

- To develop a detailed methodology report in order to plan for the evaluation of the MHCC. Preparation of the methodology report will include the development of a detailed logic model for the MHCC, an evaluation framework with the detail required to undertake the evaluation, including evaluation questions, indicators, data collection methods and sources. The methodology report will also include a detailed work plan, outlining the specific tasks, related costs and timing to conduct the evaluation of the MHCC.
- To carry out the evaluation using the methodologies established in the plan.

The other objective of the evaluation is to address evaluation issues in the following areas:

- Implementation activities related to the five strategic areas undertaken to date including work of the advisory committees and work undertaken to achieve stakeholder engagement;
- Overall governance and accountability mechanisms established by the Commission;
- Core frameworks established to guide the organization including knowledge management, communications, performance and risk management
- Start-up activities undertaken by the Commission including Board governance, policies and procedures, operating model and organizational structure;

While it is early in the Commission's mandate, a useful and meaningful evaluation can be undertaken at this stage. However, given how early we are in the Commission's mandate and the dearth of available data and performance information, the part of the evaluation dealing with performance and results could be more qualitative and focus on establishing whether or not the Commission appears to be moving in the right direction, establishing the conditions for success, and identifying signs of success, rather than a more rigorous assessment as to whether the Commission attained its ultimate objectives. By 2010/11, the Commission will have undertaken a number of activities and will have produced outputs. It should therefore be able to report on immediate and short-term outcomes. An evaluation could provide an assessment as to whether these activities, outputs and short-term outcomes are consistent with the mission, vision and strategies of the Commission.

Issues:

The evaluation will examine three key issues:

- Complementarity
- Design and Delivery
- Performance (effectiveness, efficiency and economy).

The extent to which all of these issue areas are covered will be established in the planning phase.

Complementarity: The evaluation will examine questions around “duplication” and “need” both internal and external to the Commission.

Design and Delivery: The evaluation will examine to what extent the Commission is well managed and has adequate and effective mechanisms for accountability. This will include, but is not limited to whether a performance measurement strategy is in place and is sufficient to support accountability and decision-making.

Performance (effectiveness): The evaluation will examine to what the extent the Commission activities have resulted in the achievement of immediate and intermediate outcomes (perhaps some would be appropriate).

Scope of work includes the following:

- Familiarization with background, planning and work completed to date for the Mental Health Commission of Canada;
- Verification of scope, and development of detailed methodology, work plan and timeline;
- Assessment of extent and appropriateness of plans and controls (including provisions for early warning signals and corrective action) to successfully execute project management plan;
- Assessment of feasibility and timely completion of critical tasks;
- Assessment of viability of inputs and activities as the structure and process mechanisms to achieve intended outputs and outcomes;
- Assessment of fulfillment of requirements outlined in the Health Canada funding agreement;
- Assessment of performance monitoring and reporting requirements established in MHCC Business Plan;
- Assessment of key stakeholder views within and outside of the Commission on the planning, developing and organizing of the Mental Health Commission of Canada;

- Assessment of whether consumers and their families and caregivers' have been meaningfully engaged in the implementation process;
- Assessment of adherence to organizational guiding principles

Please note that since the homelessness research project will be undergoing a separate thorough independent evaluation, the evaluation for homelessness in this case will focus more on structure, organization, governance, accountability, and management.

#### *2.4 Statement of Work*

The successful Proponent will focus on matters related to governance, accountability and design including the start-up of the organization and the initial implementation steps taken by the Commission from inception (2007) to March 31 2010. The methodologies for the study must be comprehensive and robust using recognized evaluation standards appropriate to federally funded initiatives

The successful Proponent will complete an evaluation of the MHCC. The Contractor shall:

For evaluation planning (PHASE I):

- a) Conduct project orientation and kick-off meeting;
- b) Develop detailed project work plan;
- c) Conduct a preliminary document review including background, planning documents;
- d) Conduct interviews with key stakeholders to confirm activities, outputs, and outcomes, explore possible evaluation issues and questions, identify potential data sources, and explore the feasibility of using various methodologies;
- e) Based on the information obtained from the document review and interviews, develop a draft logic model and evaluation matrix;
- f) Validate logic model and evaluation matrix (in workshop setting with advisory committee and/or other key stakeholders);
- g) Develop the detailed evaluation framework/plan and methodology; and
- h) Complete detailed work-plan for the conduct of the evaluation.

For conducting the evaluation (which will be determined in evaluation planning phase) (PHASE II):

- a) Conduct detailed review of documentation, secondary data, literature review
- b) Develop data collection instruments;
- c) Conduct analysis of administrative and performance data;
- d) Conduct interviews with key informants as required;

- e) Conduct expert interviews, Delphi panel and focus groups and survey as required;
- f) Complete monthly progress reports;
- g) Complete MHCC evaluation reports as identified;
- h) Prepare final evaluation report(s), including sub-reports by evaluation issue or theme; and
- i) Present findings formally and informally as required.

The Preliminary Report should be a complete draft of the Final Report providing a comprehensive description of the methodology, the completed activities, the information sources, observations, findings and recommendations, where appropriate.

Throughout the course of the evaluation, the successful Proponent shall provide weekly verbal progress reports and monthly written reports briefly summarizing work completed, upcoming work in the next period and issues requiring resolution or direction. Requests for information will be bundled where possible and discussed at the weekly meeting.

The Commission will endeavor to respond to requests for information and to review and comment on draft reports in an expeditious manner. The Proponent should provide adequate schedule allowance in the work plan for these reviews.

### 2.5 Deliverables

The evaluation is to be completed by **April 30 2011**, and the contract will terminate on **November 01 2011**. The six month lag between the last deliverable and the end of the contract period is intended to be a contractually covered period for emergency extension (e.g., data collection or analysis issues), general reflection, and/or presentation of the final product by the Contractor, or as a temporal contingency plan. No additional extensions should be anticipated or assumed. Deadlines for deliverables must be respected at all times and may only be extended with written permission from the Contracting Authority at least one week prior to the deadline in question. Being a national organization comprised of individuals from across the country, our final and public documentation is available in both official languages, and several staff, Board, and Advisory Committee members, as well as external stakeholders speak French as their first language. The successful Proponent should have French capabilities. All final documentation must be presented in both official languages.

In addition to monthly verbal progress reports (see section 2.4) and meetings with the Evaluation Steering Committee and/or Project Authority as required, the Contractor shall deliver to the acceptance and satisfaction of MHCC the following:

DELIVERABLES	TIMELINES
Conduct project orientation and kick-off meeting	Aug 5 2010
<b>Evaluation planning (PHASE I):</b>	

DELIVERABLES	TIMELINES
Interview guide for key stakeholders	Sept 1 2010
Draft Logic Model and Evaluation Framework	Sept 1 2010
Final Logic Model and Evaluation Framework	Oct 1 2010
Draft Methodology Report including detailed work plan for conduct of evaluation	Sept 15 2010
Final Methodology Report including detailed work plan for conduct of evaluation	Oct 15 2010
<b>Conduct of Evaluation (PHASE II):</b>	
Draft and final data collection instruments (interview protocols, focus group guide, survey, etc) as required	Oct 15 2010
Draft thematic or issue-specific evaluation report of MHCC	Feb 28 2011
Final thematic or issue-specific evaluation report of MHCC	March 31 2011
Monthly status reports complete with research status and work yet to be completed	Monthly
Present findings formally (up to 10 times in Ottawa) and informally (as needed)	TBD

### 3. REQUIREMENTS FOR PROPOSAL SUBMISSION

#### 3.1 Proposal Contents

Please organize submission according to the following components and sequences.

- 1) Completed and signed form of offer;
- 2) An executive summary of the proposal;
- 3) A summary of the evaluation intent and approach;
- 4) A description of the proposed methodologies for the evaluation;
- 5) A high level work plan and timeline for the project;
- 6) Details of the proposed project team including description of the relevant qualifications and experience of the individuals and the Proponents organization.
- 7) References for three similar program evaluations successfully completed by the Proponent within the last five years;
- 8) Resumes of all personnel proposed for the key roles;
- 9) Two client references;
- 10) Detailed budget including clear outline of fees (per diem costs for all personnel) and expenses to carry out the evaluation (Appendix A);
- 11) Completed and signed conflict of Interest declaration (Appendix B); and
- 12) Any proposed changes to the Agreement terms and conditions.

Proposals which fail to include the above information will be eliminated from the review process.



**Proposals must be submitted electronically** to the Executive Associate to the President and CEO, Mental Health Commission of Canada [smahajan@mentalhealthcommission.ca](mailto:smahajan@mentalhealthcommission.ca)

**Proposals will be accepted until JULY 01 2010**

All proposals will become the property of the Mental Health Commission of Canada.

### 3.2 Costs

Please submit the price for completion of this project (both fees and expenses). The Proponent should assume that it is required to supply all necessary professional staff to undertake the assignment. The Proponent should also clearly outline the extent to which Commission staff and resources will be required in completing the assignment. This would include, for example, gathering documentation, arranging interviews etc. The Proponent should provide **a concrete maximum ceiling price** for the assignment and a proposed payment schedule.

The cost of this assignment with an estimated beginning date of August 01 2010 shall not exceed the approximate available budget of **\$175,000** (including applicable GST or HST). Unit and total prices for fees and expenses in a completed Cost Bid Form (Appendix A) must be submitted in a separate sealed package or separate electronic file from the rest of the proposal.

## 4. EVALUATION PROCESS AND CRITERIA

Proposals will be reviewed and assessed by an evaluation committee comprised of representatives of the Commission (President and Chief Executive Officer, Chief Financial Officer, Director, Manager) and will include external advisors from Health Canada as well as individuals from similar organizations that have undergone independent evaluations e.g., Canadian Partnerships Against Cancer, Provincial Centre for Excellence for Child and Youth Mental Health at the Children's Hospital of Eastern Ontario.

### 4.1 Mandatory Requirements

The mandatory requirements listed below will be evaluated in the selection process:

- Proposals must convey a grasp of the mandate of MHCC and the significance of the key initiatives;
- Proposals must demonstrate a very clear understanding of the evaluation requirements and objectives;
- Proposals must describe relevant previous experience conducting complex, large scale evaluations;

- Proposals must indicate a sound understanding of evaluation approaches, in particular qualitative methodologies as well as expertise in the analysis and synthesis of information derived from multiple sources;
- Proposals must clearly outline the methodological approach and analyses to be employed in the evaluation and indicate how such approaches will meet the evaluation objectives;
- Proposals must establish the qualifications, evaluation expertise, and unique skills sets of the lead applicant and other evaluation personnel and describe their role in the evaluation;
- Proposals must provide a work plan and timeline with detailed fees and expenses for each work plan component;
- The lead applicant must certify that, should services under a contract resulting from this solicitation be authorized, the personnel identified in this application will be available to commence performance of work immediately upon contract award and remain available to perform the work in relation to the fulfillment of this requirement.

#### *4.2 Evaluation Process and Criteria*

Proposals will be reviewed and evaluated by the evaluation steering committee.

The Commission will conduct the evaluation of the Proposals in the following three (3) stages:

<b>Stage I</b>
Stage I will consist of a review to determine which Proposals comply with all of the mandatory requirements listed in <i>section 4.1</i> of the RFP for the independent evaluation. Proposals, which do not comply with all of the mandatory requirements, may, subject to the express and implied rights of the Commission, be disqualified and not evaluated further
<b>Stage II</b>
Stage II will consist of a scoring by the Commission of each qualified Proposal on the basis of the rated criteria.
<b>Stage III</b>
<p>Upon completion of Stage II for all Proposals, the sealed pricing envelope (Cost Bid Form) provided by each Proponent will then be opened and Stage III will consist of a review and scoring of the pricing submitted. The maximum score for this section is 10. The evaluation of price shall be undertaken after the evaluation of mandatory requirements (Stage I) and any rated requirements (Stage II) has been completed.</p> <p>The formula to be used for scoring price is as follows:</p> <p><math>S = MP \times L / P</math>, where:</p> <p>S = the price score for the Proposal being evaluated;</p> <p>MP = the maximum points awarded for price; [maximum amount is 10 points]</p> <p>L = the price of the lowest price qualified Proposal; and</p> <p>P = the price of the Proposal being scored.</p>

### **Total Score**

At the conclusion of Stage III, all scores from Stage II and Stage III will be added and, subject to satisfactory reference checks, the highest scoring Proposal will be selected and the Proponent of that Proposal will be invited to enter into an Agreement to carry out the work.

The Commission intends to award an Agreement to the Proponent who submits the most advantageous Proposal to the Commission as determined by the Commission through the evaluation process.

The Proposal with the lowest price will not necessarily be selected. While price is a determinant in the selection process, it is to be clearly understood that there must be a full and complete understanding of the services/deliverables to be provided, demonstrated through the Proposal as presented.

If no Proponents demonstrate appropriate qualifications or experience, the Commission may, without liability cost or penalty, cancel this RFP or choose not to award an Agreement to any of the Proponents.

**Stage II** will review, evaluate and score Proposals based on the following rating criteria out of a total of 90 points:

**Qualifications and experience of the Proponent organization with Health Care and Mental Health: (20 points)**

- Does the organization possess knowledge of and familiarity with Health Care and Mental Health, preferably in the Canadian context?
- Does the organization possess knowledge of and familiarity with Health care reform initiatives, particularly related to mental health?
- Does the organization have experience working with participants and stakeholders in mental health in Canada?

**Qualifications and experience of the Proponent organization with Federal Program Evaluation: (20 points)**

- Does the proponent demonstrate knowledge, understanding and experience in program evaluation and /or Treasury Board of Canada policies and guidelines pertaining to evaluations, e.g.,
  - program or strategy evaluation principles
  - data collection processes, data analysis and reporting
  - document reviews, interview techniques
  - relevant models for evaluation of federal initiatives, strategies or programs
  - accountability evaluation frameworks
  - federal accountability provisions
  - program planning and implementation
  - organizational design and resourcing, project planning and management, performance measurement systems, experience conducting program evaluations in Canada, particularly developing evaluation frameworks, information and data collection plans, study methodologies and reporting on findings

**Qualification of Key Members of the Proposed Team with Health Care and Program Evaluation: (10 points)**

- What is the likelihood of this research team successfully achieving the objective(s) and completing this project within the time frame of the award? Is the researcher's commitment of time to this project reasonable?
- Does the proposal demonstrate that the team members individually and collectively have the appropriate range and depth of skills and experience necessary to conduct the evaluation efficiently and effectively, e.g.,
  - academic qualifications
  - career background
  - track record

- experience in conducting and reporting on federal program evaluation, preferably for Health Canada
- experience in evaluation of issues and topics related to Canadian health care system
- experience developing performance measurement frameworks
- historical productivity and impact

**Methods and Approach: (40 points)**

- Are the methods clearly described? Are the methods valid and adequate? Does the research design address the project objectives? Are the approaches to measurement sound? Have appropriate methods been selected to analyze the data and information?
- Does the proposal contain sufficient detail to allow a complete understanding of the proponent's approach, e.g.,
  - work plan
  - client engagement
  - project management, reporting and controls
  - scheduling and likelihood of timely delivery
  - analytical strategy to address the scope of work for this study
  - data collection methodology and relevant instruments and techniques
  - a discussion of the likelihood of success for the proposed evaluation methodology including factors such as strengths and weaknesses of the information sources, collection methods and analysis methods\*
  - how the proposed methodology will align with, complement or enhance other related work in Health Canada
  - potential challenges and mitigation strategies related to the development and execution of the evaluation methodology
- Does the proposal contain a contribution matrix that indicates the level of effort or time allocated for each proposed team member for each phase of the work plan in sufficient detail to permit an understanding of how the skills and experience of the individuals relate to their involvement in the work
- Is the approach likely to generate the findings required by Health Canada?
- How well the applicants have identified and addressed the limitations of their approach?



**Stage III** will review, evaluate and score Proposals based on the cost bid out of a total of 10 points.

**Total Score** will be determined by adding the scores of Stage II and Stage III.  
Stage II Score (\_\_\_/90) + Stage III Score (\_\_\_/10) = \_\_\_\_/100 points

## 5. TERMS AND CONDITIONS OF THE RFP PROCESS

### 5.1 Timeline

The following is the timeline for the RFP process:

ISSUE DATE:	MAY 01 2010
DEADLINE FOR PROPONENT INQUIRIES:	JUNE 01 2010
DEADLINE FOR ISSUING ADDENDA:	JUNE 15 2010
PROPOSAL SUBMISSION DEADLINE:	JULY 01 2010

The Commission may amend the above timeline for this RFP in its sole discretion at any time prior to the Proposal Submission Deadline.

### 5.2 New Information by way of Addenda

This RFP may be amended only by a written addendum (an “**Addendum**”) in accordance with this section. If the Commission decides that it is necessary to provide additional information relating to this RFP, such information will be communicated to all Proponents by Addenda made available to all Proponents in the same way as the original RFP. Any amendments or supplements to this RFP made in any other manner shall not be binding. It is the sole responsibility of the Proponent to ensure that it has received all Addenda pertaining to this RFP. The Commission will not take any responsibility for losses, misunderstandings, errors or omissions from the Proponent not having received or reviewed any and all Addenda.

### 5.3 Inquiries and contact information

Prospective bidders may direct questions and other communications about this RFP to:

Sapna Mahajan  
Executive Associate to the President and CEO  
Mental Health Commission of Canada  
403-385-4054  
[smahajan@mentalhealthcommission.ca](mailto:smahajan@mentalhealthcommission.ca)

All inquiries and communications must be received prior to the Deadline for Proponent Inquiries set out above.



#### *5.4 Submission Details*

Proponents must submit a hard and soft copy of their proposal. Proposal length must not exceed 20 pages, single-spaced using Arial 12 pt font. Pages must be numbered. The length restriction excludes appendices which should be limited to proponent resumes and references.

Proponents must submit one printed hard copy of the Proposal with original signatures, packaged in a sealed envelope (containing a separate Price Bid envelope) and labeled with the Proponent's name and address, delivered before the Proposal Submission Deadline set out above to:

MENTAL HEALTH COMMISSION OF CANADA  
#800, 10301 Southport Lane SW  
Calgary, AB  
T2W 1S7  
Attention: Sapna Mahajan

Proponents must also submit one electronic copy in Microsoft Word or PDF format, sent by email to the email address shown below before the Proposal Submission Deadline.

Email: [smahajan@mentalhealthcommission.ca](mailto:smahajan@mentalhealthcommission.ca)

Proposals submitted in any other manner will not be accepted.

In the event of conflict or inconsistency between the hard copy and the electronic copy of the Proposal, the hard copy of the Proposal shall prevail. Both the hard copy and electronic copy must be submitted before the Proposal Submission Deadline. Failure to deliver either the hard or electronic copy to the Commission before the Proposal Submission Deadline will result in disqualification. It is the sole responsibility of the Proponent to ensure the hard copy and the electronic copy are received by the Commission before the Proposal Submission Deadline.

#### *5.5 Proponent is held responsible for own costs*

The Proponent shall bear all of its own costs associated with or incurred in the preparation, presentation and submission of its Proposal.

#### *5.6 Confidentiality of Information*

All information, including, without limitation, any specifications, instructions, notes and memoranda, provided at any time by the Commission or its agents or contractors, to the proponent, or to employees, agents or contractors of the proponent, in connection with the this request for proposals or project shall be and remain at all times the sole and absolute property of MHCC and its licensors and shall not be used by the proponent for any purpose other than its participation in this request for proposal process, without the express written consent of MHCC.5.7

#### *5.7 Disqualification*

The Commission may disqualify a Proposal on grounds of faulty submission, improper conduct or provision of inaccurate or misleading information by the Proponent.

### *5.8 Contract Matters*

This RFP is not a legal offer, but only an invitation for proponents to submit a proposal to MHCC and shall not be construed as an agreement by MHCC to purchase any goods or services. MHCC shall not be bound to accept any proposal, or to enter into an agreement with any proponent submitting a proposal.

It is the proponent's responsibility to inform itself of all aspects of the project's requirements and the goods and services to be provided. No claim will be considered at any time for reimbursement for any expense incurred as a result of any misunderstanding in regard to the conditions or scope of the goods or services required.

### *5.9 Reserved Rights*

Notwithstanding any other provision contained herein, the Commission in its sole discretion and without obligation to provide any reason therefore, shall have the unfettered right to, at any time and from time to time, do any of the following:

- accept or reject any proposal at any time, including without limitation, a proposal that is received by the Commission after the proposal submission deadline;
- accept or reject individual items in a proposal
- request clarification or further information regarding any item in a proposal
- consider any alternate goods, services, terms or conditions that may be offered, whether such offer is contained in a proposal or otherwise
- split this RFP or any agreement negotiated in connection with same, into multiple parts and accept proposals (or portions thereof) from more than one proponent
- enter negotiations, at any time before or after the proposal submission deadline with anyone, in relation to the subject matter herein
- if applicable, reject any proponent's recommendation of any subcontractor or any other third party associated with the proposal and jointly, along with such proponent, determine alternate acceptable third parties
- extend or otherwise vary the proposal submission deadline, or any other timeline set out herein
- revise or vary this RFP
- withdraw or cancel this RFP in whole or in part, whether having received any response hereto or not; and
- waive any of the stated requirements set out in this RFP or request non-compliant proponents to rectify any non-compliance within such time as the Commission may require.

No extension, variation, revision, withdrawal or cancellation of this RFP or any provision hereof shall be valid or binding on the Commission unless it is in writing and issued by a duly authorized representative of the Commission.

The Commission shall not at any time have any obligation to deal exclusively with any proponent, including the successful proponent (s). The Commission expressly reserves its rights and discretion to seek a proposal regarding the subject matter hereof, from any person whomsoever and at any time.

#### *5.10 Successful Proponent*

The successful proponent(s) will be notified in writing by the Commission of their selection as a party with whom the Commission wishes to negotiate an agreement. The Commission may, in its sole discretion, determine to move forward to the negotiation stage with one or more proponents, or it may determine to cancel this RFP. If an agreement cannot be negotiated with the successful proponent(s) within a time period satisfactory to the Commission, the Commission may at its sole discretion, terminate negotiations with that proponent(s) and either enter into negotiations with another proponent, or terminate this RFP process and not enter into an agreement with any of the proponents.

There will be no valid or binding agreement between the proponent and the Commission, and no proponent will acquire any legal or equitable rights or privileges, relative to the goods or services to be provided or this RFP until the execution of a written agreement between the Commission and the proponent.

#### *5.11 Public Communication*

No publicity or discussions of the proponent's involvement or promotion of its relationship with the Commission shall be permitted until an agreement is fully executed by both parties and then only with the express written consent of the Commission. The failure of any proponent to do so shall be cause for the immediate rejection the proponent's proposal and the removal of the proponent from MHCC's approved vendor lists.

By submitting a proposal, proponents are acknowledging that their proposals may be shared with third parties as part of the Commission's evaluation and analysis process and hereby consent to same. Furthermore, proponents understand and agree that unless any option, scenario, opportunity, idea or process ("Idea") included in its proposal, is clearly identified in writing as proprietary to the proponent and meets the criteria that give rise to trade secret protection under applicable law, proponents will not be entitled to claim any compensation of any nature if said Idea is later used or implemented by or on behalf of the Commission, in whole or in part, whether pursuant to the contract contemplated by this request for proposals otherwise. No compensation will be due if the Commission developed the Idea itself without reference to the proposal, had prior knowledge of the Idea, holds or otherwise acquires proprietary rights to the Idea, or has not committed any fault or negligence with respect to its use of the Idea.



### *5.12 Execution of the Agreement*

In addition to all of the Commission's other remedies, if a selected Proponent fails to execute the Agreement or satisfy any other applicable conditions within fifteen (15) days after notice of selection, the Commission may, in its sole and absolute discretion and without incurring any liability, rescind the selection of that Proponent and proceed with the selection of another Proponent.

### *5.13 Conflict of Interest*

The Contractor declares that the Contractor has no interest in the business of any third party that would cause a conflict of interest or seem to cause a conflict of interest in carrying out the Work. Should such an interest be acquired during the life of the Contract, the Contractor shall declare it immediately to the Commission.

It is a term of this Contract that no individual, for whom the post-employment provisions of the *Conflict of Interest and Post-Employment Code for Public Office Holders* or the *Conflict of Interest and Post-Employment Code for the Public Service* apply, shall derive a direct benefit from this Contract unless that individual is in compliance with the applicable post-employment provisions.

## REFERENCES

Canadian Government Document. Standing Senate Committee on Social Affairs, Science and Technology. (2006). *Out of the Shadows at Last: Transforming mental health, mental illness and addiction services in Canada*. Retrieved December 3, 2007, from <http://www.parl.gc.ca/39/1/parlbus/commbus/senate/com-e/soci-e/rep-e/rep02may06-e.htm>.



## APPENDIX A:

**Cost Bid Form:** The Proponent must not amend this Form in any way other than by providing the requested information.

**Mental Health Commission of Canada**  
**Cost Bid Form**  
 Proponent Name \_\_\_\_\_

**Phase I**  
 Phase Name:        {Insert Phase I Name}

Resource Name	Resource Type	Resource Level	Hourly Rate	Estimated Hours	Price
Name 1	Type 1	Senior			
Name 2	Type 2	Intermediate			
Name 3	Type 3	Junior			
<b>Phase I Subtotal</b>					

**Phase II**  
 Phase Name:        {Insert Phase II Name}

Resource Name	Resource Type	Resource Level	Hourly Rate	Estimated Hours	Price
Name 1	Type 1	Senior			
Name 2	Type 2	Intermediate			
Name 3	Type 3	Junior			
<b>Phase II Subtotal</b>					

**Total Proposed Price**

--

Estimated travel and out of pocket expenses (for information)  
 \$ \_\_\_\_\_



## APPENDIX B:

### Conflict of Interest Declaration

To be signed submitted with your application. This declaration applies to applicants and their proposed team.

We have read the Conflict of Interest Guidelines. We have carefully reviewed our situation in light of these illustrations (check appropriate box):

To the best of our knowledge and belief, we are involved in no situation or action that might be regarded as a potential conflict of interest with our duties as a consultant.

It appears that we are involved in some situations or actions that might be regarded as a potential conflict of interest with our expected duties as a consultant. Details of each of these situations and/or actions are as follows:

- 1.
- 2.
- 3.

We agree to notify the Mental Health Commission of Canada, immediately if any new situations or actions develop that might be regarded as a potential conflict of interest with our duties as a consultant.

We further agree to be bound by the provisions of the Conflict of Interest Guidelines which form part of this Declaration.

Applicant(s):

Name (please print) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name (please print) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

All applicants are to sign

Name (please print) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

All applicants are to sign

Name (please print) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

All applicants are to sign



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