



First Nations Health Authority
Health through wellness

Request for Proposals (RFP)			
Scope of Service	Curriculum Writer		
RFP #	2016RFP-33		
RFP issued by	First Nations Health Authority (FNHA)		
Issue date	December 29, 2015		
Amount	N/A		
Closing date/time	Proposals must be received before 16:00 hours (4:00 pm) Pacific Time on: January 29, 2016		
FNHA Contact Information and Questions	<p>All enquiries related to this RFP including any requests for information, questions, and clarification, are to be directed to the following email address: fnha.contracts@fnha.ca.</p> <p>FNHA will respond if time permits. Information obtained from any other source is not official and should not be relied upon. Enquiries and any responses will be recorded and may be distributed to all Proponents at the FNHA's option.</p>		
Delivery of proposals	<p>Four (2) hard copies and one (1) electronic copy (saved on a USB Flash in a Microsoft compatible format) of your proposal must be delivered by hand or courier to the closing location at:</p> <p>First Nations Health Authority, Attention: Contracts 540 – 757 West Hastings Street, Vancouver, BC. V6C 3E6</p> <p>Proposal envelopes should be clearly marked with the name and the address of the proponent, the RFP number and the RFP project name. Proposals may not be sent by mail, facsimile or email.</p>		
Short Listed Proponents	For those Proponents which have not been contacted by end of business day on January 31, 2016 , will serve as notice that their proposal submission was unsuccessful.		
Successful Proponent Notified	February 17, 2016	Expected Start Date of Project: February 1, 2016	End Date of Project: October 31, 2016
Proponent's submissions	A person authorized to sign on behalf of the proponent must complete and sign the Proponent Section (below), leaving the rest of this page otherwise unaltered and include the originally-signed and completed page with the first copy of the proposal.		

Proponent Section to be completed by proponent and included as the "cover page" of the Proponents Response	
The enclosed proposal is submitted in response to the above-referenced RFP including any addenda. Through submission of this proposal we agree to all of the terms and conditions of this RFP and agree that any inconsistencies in our proposal will not be considered. We have carefully read and examined the RFP including the <i>Administrative Section</i> and have conducted such other investigations as were prudent and reasonable in preparing the proposal. We agree to be bound by the statements and representations made in our proposal.	
Signature of Authorized Representative:	Legal Name of Proponent (and Doing Business As Name, if applicable):
Printed Name of Authorized Representative:	Address of Proponent:
Title:	
Date:	
Authorized Representative email address (if available):	Authorized Representative phone, fax (if available):

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Request for Proposals –Curriculum Writer

1. Introduction:

You are invited to submit a proposal for a Curriculum Writer for the First Nations Health Authority(FNHA). The First Nations Health Directors Association (FNHDA) seeks to promote culturally strong, experienced, professionally trained First Nations Health Directors; provide technical advice on research, policy, program planning and design; and support the implementation of community Health Plans. Therefore, the FNHDA desires to contract a curriculum writer to create, implement and help launch a FNHDA certification program.

The primary target audience for the Certification program would be Health Directors who are currently in their role/position within First Nations communities. The second target audience would be future Health Directors who may seek employment in this role.

The exploration of co-development (potentially with an institution) of curriculum for a Certification program while maintaining the intellectual property rights, control and usage of the future FNHDA curriculum.

A Grandfather clause based on formal and informal learning, merit and achievement needs to be a part of the certification process to grant certification of current Health Directors. It is important that a prior learning assessment process take into consideration the prior experience of Health Directors in relation to the future FNHDA certification program while aiming to ensure that all Health Directors achieve the competencies of the future FNHDA Certification program. The Grandfather Clause certification based on merit will need to be developed.

2. Background:

The BC First Nations Health Authority (FNHA) is the first province-wide health authority of its kind in Canada. FNHA aims to reform the way health care is delivered to BC First Nations and help improve health and wellbeing.

This FNHA has taken over the administration of federal health programs and services previously delivered by Health Canada's First Nations Inuit Health Branch – Pacific Region. FNHA has a broad mandate to work with the province and First Nations to improve health services and address service gaps through new partnerships, closer collaboration, and health systems innovation

3. Scope of Work and Deliverables

Services:

- 1) To write and implement curriculum for the FNHDA Certification Program for Health Directors in British Columbia.
- 2) Focus Group Meetings to commence and for the curriculum writer to engage with the focus group on the progression of the writing direction.
- 3) At the 2016 Annual General meeting for First Nations Health Directors the curriculum writer will present to Health Directors the up-to-date material for discussion/review. Note: The 2016 Annual General meeting is scheduled in September, 2016.
- 4) The Curriculum writer will participate in engagement sessions to provide feedback data, receive direction from the Board of Directors and adhere to the FNHDA Standards of Excellence

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Deliverables:

- 1) Create the curriculum for the certification program.
- 2) The 8 Certification areas of learning were initially generated from the spring 2013 Regional Engagement sessions provincial report, the 2014 Spring Regional Engagement sessions feedback data, direction from the FNHDA Board of Directors, and the FNHDA Standards of Excellence (SoE). A second review and refinement of the Certification areas of learning were then refined by the FNHDA focus group. The 8 Certification areas that need to be included in the curriculum is:
 - (a) First Nations Culture and Protocols
 - (b) First Nations health governance system and First Nations Health Directors Association
 - (c) Health Programs and Services
 - (d) Human Resources
 - (e) Health Administration: Financial Management and Budgeting
 - (f) Health Management
 - (g) Communications
 - (h) Legal Accountabilities.
- 3) Ensure that the Certification program achieves the FNHDA 7 standards of Excellence:
 1. Grounding Work within Culture and Tradition
 2. Providing Health and Wellness Leadership for the Community
 3. Providing informed, technical advice
 4. Establishing and maintaining beneficial partnerships
 5. Providing effective Health Administration
 6. Being a supportive manager and Health Team Leader
 7. Participating actively in professional development and continuous learning
- 4) Ensure that the FNHDA certification program is inclusive of all regions and easily accessible so that all new health directors are able to attend the program.
- 5) Start the research on the delivery method as soon as possible of the certification program and have an established delivery method confirmed in early 2016.
- 6) The curriculum writer will be required to report to the Executive Director of the FNHDA-FNHC Shared Secretariat on the status of curriculum development within a written report. This may be in the form of monthly written updates that include components such as overall project highlights, accomplishments, and any issues that the project has and whether these obstacles have been overcome as well as the expected results of the project.
- 7) The FNHDA-FNHC Executive Director requires the curriculum writer to present a complete project plan that includes a timeline of deliverables in the initial stages of the contact.
- 8) The final objective is to have the curriculum complete by the AGM in September 2016. This could be reached by completing 1 module per month.
- 9) In order to launch the FNHDA's Certification program by year 2017 all requirements for curriculum development need to be completed before December 31, 2016.

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4. General Information

Summary of Information Provided

To assist you in preparing your quantitative and qualitative proposals, we have provided the following templates and plan summaries in the attached appendices:

- Appendix A – Overview of the FNHA
- Appendix B - Definitions and Administration Requirements
- Appendix C - Receipt Confirmation Form
- Appendix D –Corporate Proposal Template
- Appendix E – Financial / Quantitative Proposal Template
- Appendix F – Service Related/Qualitative Proposal Template

5. Responsibility and Work Performed by FNHA Staff

The successful proponent will:

- a. Have the full cooperation of First Nations Health Authority staff and access to information necessary to meet the accountabilities set out in this request for proposal and respond to reasonable inquiries.

The FNHA will:

- b. Provide a reasonable level of resources (human and financial resources) to the successful proponent to meet the accountabilities set out in this request for proposal.
- c. Approve of deliverables completed by the Proponent and associated payments.

6. Evaluation

An evaluation committee will be formed by the FNHA and may include employees and contractors of the FNHA. All personnel will be bound by the same standards of confidentiality.

The mandatory and desirable criteria against which proposals will be evaluated are identified below. Proponents should ensure that they fully respond to all criteria in order to be comprehensively evaluated.

The FNHA may request and receive clarification from any Proponent when evaluating a proposal. The evaluation committee may invite some or all of the Proponents to appear before the committee in order to clarify their proposals. In such event, the evaluation committee may consider such clarifications in evaluating proposals.

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6.1 Mandatory Proposal Format

Proponent responses must clearly demonstrate the following or they will be excluded from further consideration during the evaluation process:

- a) The Proponents proposal must be received at the closing location before the specified closing time;
- b) The Proponents proposal must be in English and **MUST NOT** be sent by mail, facsimile or email;
- c) Proponents must submit four (2) hard copies and one (1) electronic copy (saved on a USB Flash Drive in a Microsoft compatible format) of their proposal to the following address:

**First Nations Health Authority
Attention: Contracts
540-757 West Hastings Street
Vancouver, BC. V6C 3E6**

- d) Proponents must submit one (1) *Request for Proposals cover page*, with the *Proponent Section* in its original form, unaltered, fully completed and signed;
- e) Description of the Proponents organization, size and structure. Indicate if appropriate, if the Proponent is a small or minority-owned business;

6.2 Desired Criteria

Capability of the Individuals and/or Team, including:

- a) Location of the proponent (s);
- b) Years and types of experience. Please also provide a description of prior experience, including the following:
 - i. Names;
 - ii. Addresses;
 - iii. Contact persons;
 - iv. Telephone numbers;
- c) The type of assistance that will be required from the FNHA staff;
- d) The availability of the proponent's resources (IE staff) to ensure that deadlines are met in a timely manner;
- e) Price. A detailed description of price, including: Fees, Expenses, GST, PST, any additional taxes, and Freight;
- f) Work Experience – working with First Nations organizations and/or First Nations; and

FNHA procurement activities will be governed to ensure all vendors are treated fairly and have equal access to procurement activities; to the extent possible preference in awarding contracts will be given to First Nation organizations and/or First Nation individuals.

7. Evaluation Scoring

Once the following two requirements are met, the responses will be evaluated based on the evaluation criteria table below:

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- 1) All responses must satisfy the Regulatory and Security Environments described herein to be considered.
- 2) The responses must pass all the mandatory criteria to be considered. Responses not satisfactorily meeting all mandatory requirements may be excluded from further evaluation at the discretion of the evaluation committee.

Evaluation Criteria	Description	Weight
1.0 Corporate Strength (See Appendix D)	Proponents must demonstrate that they are positioned so that services and support can be provided to FNHA over the long term.	5%
2.0 Quantitative (See Appendix E)	Proponents are to provide the solution that provides the best value for FNHA's investment, and provides the required services and functionality for the lowest total cost of ownership.	40%
3.0 Qualitative(See Appendix F)	Proponents are to demonstrate, in detail, how the proposal will meet all of FNHA's service requirements.	50%
4.0 Value Adds (See Appendix F)	New/innovative and value added approaches to service delivery	5%
Total		100%

8. Proposal Format

Your proposal should include the following:

- 1) A very short executive summary highlighting key features of your submission and confirming you have complied with all of the plan design provisions and proposed financial and administration arrangements included in this request for proposal.
- 2) Answers to the questionnaire enclosed in Appendix D, E and F.
- 3) Your proposed rates and expenses in Appendix E

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Appendix A– Overview of the FNHA

The First Nations Health Authority

The first and only provincial First Nations Health Authority in Canada. Transforming health services for First Nations and Aboriginal people in BC.

Why a First Nations Health Authority?

Statistically significant health disparities exist for First Nations people in BC and across Canada with health outcomes that consistently lag behind those of other Canadians. The First Nations Health Authority aims to reform the way health care is delivered to BC First Nations to close these gaps and improve health and wellbeing.

A New Relationship with our Partners

BC First Nations, the Province of BC, and the Government of Canada have all determined that First Nations health disparities are no longer acceptable. A New Relationship between these Tripartite Partners was forged and a series of precedent-setting agreements led to the creation of a First Nations Health Authority. The FNHA is mandated by two health agreements (the Transformative Change Accord: First Nations Health Plan [2006], and the Tripartite First Nations Health Plan [2007] – collectively “the Health Plans”), the BC Tripartite Framework Agreement on First Nation Health Governance [2011] and resolutions at the annual Gathering Wisdom events and the Framework Agreement.

In 2013, the First Nations Health Authority assumed responsibility for the design and delivery of health programs and services for BC First Nations formerly delivered by Health Canada’s First Nations Inuit Health Branch – Pacific Region. The FNHA has a broad mandate to improve health services for BC First Nations through new partnerships, closer collaboration, and health systems innovation.

Making History Today and Tomorrow

As the First Nations Health Authority has assumed responsibility for the historic transfer of programs, resources, assets, staff, and responsibilities, we are developing an organization that reflects First Nations culture and philosophy. Establishing a strong foundation prepares us to innovate, transform, and redesign health service delivery with guidance from BC First Nations in the coming years.

Responsive, Visionary, Transformative

The First Nations Health Authority is part of a unique health governance structure that includes political representation and advocacy through the First Nations Health Council, and technical support and capacity development through the First Nations Health Directors Association. Collectively, this First Nations health governing structure works in partnership with BC First Nations to achieve our shared vision.

The mandate of the FNHA is to:

- Plan, design, manage, deliver and fund the delivery of First Nations Health Programs in British Columbia;
- Receive federal, provincial and other health funding for or to support the planning, design, management and delivery of First Nations Health Programs and to carry out other health and wellness related functions;
- Collaborate with the BC Ministry of Health and BC Health Authorities to coordinate and integrate their respective health programs and services to achieve better health outcomes for First Nations in British Columbia;

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- Incorporate and promote First Nations knowledge, beliefs, values, practices, medicines and models of health and healing into the First Nations Health Programs, recognizing that these may be reflected differently in different regions of BC;
- Be constituted with good governance, accountability, transparency and openness standards;
- Establish standards for First Nations Health Programs that meet or exceed generally accepted standards;
- Collect and maintain clinical information and patient records and develop protocols with the BC Ministry of Health and the BC Health Authorities for sharing of patient records and patient information, consistent with law;
- Over time, modify and redesign health programs and services that replace Federal Health Programs through a collaborative and transparent process with BC First Nations to better meet health and wellness needs;
- Design and implement mechanisms to engage BC First Nations with regard to community interests and health care needs;
- Enhance collaboration among First Nations Health Providers and other health providers to address economies of scale service delivery issues to improve efficiencies and access to health care;
- Carry out research and policy development in the area of First Nations health and wellness;
- The FNHA may undertake other functions, roles and responsibilities connected to health and wellness of First Nations and other aboriginal people in BC.

The FNHA is governed by a nine member Board of Directors who collectively brings years of experience in First Nations health, community development, financial management and political expertise at all levels of government. The Board provides leadership and oversight for all corporate activities of the FNHA.

The FNHA was created in conjunction with the First Nations Health Council, providing support services while the political consensus was being built among BC First Nations. As a result, the FNHA website – <http://www.fnha.ca> uses the FNHC name. For more information please visit the website or contact us at: info@fnha.ca.

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Appendix B - Definitions and Administrative Requirements

1. Definitions

Throughout this Request for Proposals, the following definitions apply:

- a) "Contract" means the written agreement resulting from this Request for Proposals executed by the FNHA and the Contractor;
- b) "Contractor" means the successful proponent to this Request for Proposals who enters into a written Contract with the FNHA;
- c) "the FNHA" means the First Nations Health Authority;
- d) "must" or "mandatory" means a requirement that must be met in order for a proposal to receive consideration;
- e) "Proponent" means an individual or a company that submits, or intends to submit, a proposal in response to this Request for Proposals;
- f) "Request for Proposals" or "RFP" means the process described in this document; and
- g) "Should" or "desirable" means a requirement having a significant degree of importance to the objectives of the Request for Proposals.

2. Terms and Conditions

The following terms and conditions will apply to this RFP. Submission of a proposal in response to this RFP indicates acceptance of all terms that follow and that are included in any addenda issued by the FNHA. Provisions in proposals that contradict any of the terms of this RFP will be as if not written and do not exist.

3. Additional Information Regarding the RFP

Proponents are advised to fill out and return the attached *Receipt Confirmation Form*. All subsequent information regarding this RFP including changes made to this document will be posted on the following websites: BC Bid at www.bcbid.gov.bc.ca; and FNHA at www.fnha.ca. It is the sole responsibility of the Proponent to check for amendments on these websites.

4. Late Proposals

Proposals will be marked with their receipt time at the closing location. Only complete proposals received and marked before closing time will be considered to have been received on time. Late proposals will not be accepted and will be returned to the Proponent. In the event of a dispute, the proposal receipt time as recorded at the closing location shall prevail.

5. Eligibility

Proposals may not be evaluated if the current or past activities or interests of the Proponent, or any sub-contractors proposed by the Proponent, may, in the FNHA's opinion, give rise to an unresolved conflict of interest in connection with the project described in this RFP. This includes but is not limited to, involvement by a Proponent or any proposed sub-contractors in the preparation of this RFP. If a Proponent is in doubt as to whether there might be a conflict of interest, the Proponent should consult with the FNHA Contact Person identified in this RFP.

Proposals from not-for-profit agencies will be evaluated against the same criteria as those received from any other Proponents.

6. Evaluation

Evaluation of proposals will be by a committee formed by the FNHA and may include employees and contractors of the FNHA. All personnel will be bound by the same standards of confidentiality. The FNHA's intent is to enter into a Contract with the Proponent who has the highest overall ranking based upon such an evaluation.

7. Negotiation Delay

If a written Contract cannot be negotiated within thirty days of notification of the successful Proponent, the FNHA may at its sole discretion at any time thereafter, terminate negotiations with that Proponent and either negotiate a Contract with the next qualified Proponent or choose to terminate the RFP process and not enter into a Contract with any of the Proponents.

8. Debriefing

At the conclusion of the RFP process, all Proponents will be notified. Unsuccessful Proponents may request a debriefing meeting with the FNHA.

9. Alternative Solutions

If alternative solutions are offered, please submit the information in the same format, as a separate proposal.

10. Changes to Proposals

By submission of a clear and detailed written notice, the Proponent may amend or withdraw its proposal prior to the closing date and time. Upon closing time, all proposals become irrevocable. The Proponent will not change the wording of its proposal after closing and no words or comments will be added to the proposal unless requested by the FNHA for purposes of clarification.

11. Proponents' Expenses

Proponents are solely responsible for their own expenses in preparing a proposal and for subsequent negotiations with the FNHA, if any. If the FNHA elects to reject all proposals, the FNHA will not be liable to any Proponent for any claims, whether for costs or damages incurred by the Proponent in preparing its proposal, loss of anticipated profit in connection with any final Contract, or any other matter whatsoever.

12. Limitation of Damages

Further to the preceding paragraph, by submitting a proposal, the Proponent agrees that it will not claim damages for whatever reason relating to the Contract or in respect of the competitive process, in excess of an amount equivalent to the reasonable costs incurred by the Proponent in preparing its proposal. Furthermore, by submitting a proposal the Proponent waives any claim for loss of profits if no Contract is made with the Proponent

13. Proposal Validity

Proposals will be open for acceptance for at least 120 days after the closing date.

14. Firm Pricing

Prices will be firm for the entire Contract period unless this RFP specifically states otherwise.

15. Currency and Taxes

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Prices quoted are to be in Canadian dollars, inclusive of duties where applicable; FOB destination with delivery charges included where applicable, and exclusive of the Goods and Services Tax (GST).

16. Completeness of Proposal

By submitting a proposal, the Proponent warrants that if this RFP is to design, create or provide a system or manage a program, all components required to run the system or manage the program have been identified in the proposal or will be provided by the Contractor at no charge.

17. Sub-Contracting

The use of a sub-contractor must be clearly defined in the proposal. This includes a joint submission by two Proponents having no formal corporate links. In such a case, one of the Proponents must be prepared to take overall responsibility for successful performance of the Contract and this must be clearly defined in the proposal.

Where applicable, the names of approved sub-contractors listed in the proposal will be included in the Contract. No additional sub-contractors will be added nor other changes made, to this list in the Contract without the written consent of the FNHA.

18. Acceptance of Proposals

This RFP should not be construed as an agreement to purchase goods or services. The FNHA is not bound to enter into a Contract with the Proponent who submits the lowest priced proposal, or with any Proponent. Proposals will be assessed in light of the evaluation criteria. The FNHA will be under no obligation to receive further information, whether written or oral, from any Proponent.

Neither acceptance of a proposal nor execution of a Contract will constitute approval by the FNHA of any activity contemplated in any proposal that requires any approval, permit, or license pursuant to any federal, provincial, regional district or municipal statute, regulation or by-law.

19. Definition of Contract

Notice in writing to a Proponent that it has been identified as the successful Proponent and the subsequent full execution of a written Contract will constitute a Contract for the goods or services. No Proponent will acquire any legal or equitable rights or privileges relative to the goods or services until the occurrence of both such events.

20. Contract

By submission of a proposal, the Proponent agrees that should its proposal be successful, the Proponent will enter into a Contract with the FNHA on the terms set out in Appendix C.

21. Contract Negotiation and Award

Following the evaluation and recommendation of the Evaluation Committee, the First Nations Health Authority may select one or more Proponents to enter into negotiations for a Contract or Contracts as follows:

- (a) The First Nations Health Authority may elect to divide the Services into more than one Contract, and enter into negotiations with a Proponent with respect to a portion of the Services, and award more than one Contract with respect to the Services;
- (b) If negotiations with any Proponent are not successful within such time period as the First Nations Health Authority may require, the First Nations Health Authority may at any time after the expiry of such time period discontinue further negotiation with that Proponent by written notice to the Proponent, and the First Nations Health Authority may at any time thereafter commence negotiations with another Proponent to finalize a Contract in accordance with the foregoing process with another Proponent. The foregoing process may be undertaken and/or repeated until either a Contract or Contracts are awarded by the First Nations Health Authority or until negotiations have been terminated by the First Nations Health Authority; and
- (c) FNHA reserves the right to negotiate additional services of a similar functional or technological nature from the successful Proponent without further competitive procurements.

22. Liability for Errors

While the FNHA has used considerable efforts to ensure information in this RFP is accurate, the information contained in this RFP is supplied solely as a guideline for Proponents. The information is not guaranteed or warranted to be accurate by the FNHA, nor is it necessarily comprehensive or exhaustive. Nothing in this RFP is intended to relieve Proponents from forming their own opinions and conclusions with respect to the matters addressed in this RFP.

23. Modification of Terms

The FNHA reserves the right to modify the terms of this RFP at any time in its sole discretion. This includes the right to cancel this RFP at any time prior to entering into a Contract with the successful Proponent.

24. Ownership of Proposals

Proposals submitted to the FNHA become the property of the FNHA. They will be received and held in confidence by the FNHA.

25. Use of RFP

Any portion of this document or any information supplied by the FNHA in relation to this RFP may not be used or disclosed for any purpose other than for the submission of proposals. Without limiting the generality of the foregoing, by submitting a proposal, the Proponent agrees to hold in confidence all information supplied by the FNHA in relation to this RFP.

26. No Lobbying

Proponents must not attempt to communicate directly or indirectly with any employee, contractor or representative of the FNHA, including the evaluation committee and any officials of the FNHA, or with members of the public or the media, about the project described in this RFP or otherwise in respect of the RFP, other than as expressly directed or permitted by the FNHA.

27. Collection and Use of Personal Information

Proponents are solely responsible for familiarizing themselves, and ensuring that they comply, with the laws applicable to the collection and dissemination of information, including resumes and other personal information concerning employees and employees of any sub-contractors. If this RFP requires Proponents to provide the FNHA with personal information of employees who have been included as resources in response to this RFP, Proponents will ensure that they have obtained written consent from each of those employees before forwarding such personal information to the FNHA.

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Appendix C - Receipt Confirmation Form

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Please fill out this form in order to advise the FNHA that you intend to submit a proposal for this RFP

FNHA CONTACT INFORMATION AND QUESTIONS:

All enquiries related to this RFP including any requests for information, questions, and clarification, are to be directed to the following email address: fnha.contracts@fnha.ca.

CLOSING DATE/TIME OF RFP:

Proposals must be received before **January 29, 2016** 16:00 hours (4:00 pm) Pacific Time.

PLEASE PROVIDE THE FOLLOWING INFORMATION ABOUT YOUR FIRM AND FAX TO (604) 689-1177:

Company: _____

Street Address: _____

City: _____ Postal/ZIP Code: _____

Province/State: _____ Country: _____

Mailing Address, if different: _____

Phone Number: (____) _____ Fax Number: (____) _____

Contact Person: _____

Title: _____

Email Address: _____



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Refer to attachments for the following Appendices:

- Appendix D –Corporate Proposal Template
- Appendix E – Financial / Quantitative Proposal Template
- Appendix F – Service Related/Qualitative Proposal Template