

Independent Living BC
A Housing for Health Partnership

Rent Supplement Component

Request For Proposals
from
Private Sector Operators
and
Non-Profit Societies

February 25, 2006

**BC HOUSING &
FRASER HEALTH**

**Request for Proposals
Fraser Health-RS-#07**

February 25, 2006

Closing Date and Time:

Proposals must be received by **2:00 p.m.** Daylight Savings Time on
Thursday, April 20, 2006

Closing Location:

BC Housing
Attention: Manager, Program Development
RFP for *Independent Living BC* Rent Supplements Fraser Health-RS-#07
Suite 601 - 4555 Kingsway
Burnaby BC V5H 4V8

Contact:

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I. INTRODUCTION

Through *Independent Living BC – A Housing For Health Partnership* (“ILBC”), British Columbia Housing Management Commission (“BC Housing”) and Fraser Health Authority (“Fraser Health”) have issued this Request For Proposal (the “RFP”) to private sector operators and non-profit societies (the “Proponent”) to secure access to:

- 27** assisted living units in **Burnaby**
- 30** assisted living units in **Langley**
- 22** assisted living units in **Maple Ridge**
- 40** assisted living units in **White Rock/South Surrey**

II. PROGRAM DESCRIPTION

The Province of BC and the five regional health authorities have developed ILBC as a strategy to improve the continuum of service options for British Columbia’s elderly and disabled citizens (the “Tenants”). *Independent Living BC* provides self-contained accommodation combined with support and personal care services that facilitate individuals remaining independent in their own home as long as they are able and choose to do so.

Independent Living BC emphasizes the principles of individuality, choice, dignity, privacy, and independence for individuals. ILBC helps the health authorities to provide the range of hospitality and personal care services individuals need in combination with affordable housing for low to moderate income persons.

BC Housing and Fraser Health (the “Funding Partners”) will enter into a multi-year agreement with the selected private sector operator(s) and non-profit society(ies) (the “Operator”) to provide subsidies which will make up the difference between what the Tenants can afford and the price of accommodation and services as agreed upon by the Operator, BC Housing, and Fraser Health. The Tenants will be identified by Fraser Health.

III. BACKGROUND ON INDEPENDENT LIVING BC

As part of the provincial government’s New Era commitment, *Independent Living BC* will provide 3,500 housing units combined with services that facilitate people to remain independent for as long as they are able to self direct their own care.

The Program philosophy is to maximize independence and to promote choice, self-direction and dignity. (See Appendix A. Principles of *Independent Living BC*.)

While a prime target of *Independent Living BC* will be persons 75 years of age and older, environments designed specifically for other groups of individuals such as young people with disabilities are being developed.

All *Independent Living BC* units must include the following three components:

1. a private housing unit with a lockable door;
2. hospitality services; and
3. personal care services.

Hospitality services refer to those services that are “hotel-like” in nature and must include two meals a day, lunch and dinner, housekeeping and laundry services on a weekly basis, social and recreational opportunities, and a 24-hour emergency response system.

Personal care services refer to services that assist Tenants with activities of daily living and specific nursing and rehabilitation tasks delegated under the provincial Personal Assistance Guidelines (Ministry of Health, January, 1997). Related skills include transferring, moving around safely, and assistance with personal hygiene, bathing, dressing, grooming, eating, and managing medications.

Independent Living BC includes two sub-categories:

1. “Independent housing with supports” refers to housing in which personal care services are available on a scheduled basis only.
2. “Assisted living” refers to housing in which personal care services are available 24 hours a day, seven days a week, on a scheduled and unscheduled basis, as required by the Tenants.

In all respects other than availability of personal care services, the services required under each of the two program sub-categories are identical. Similarly, the physical housing standards do not differ.

IV. STATEMENT OF WORK

In responding to this RFP, Proponents need to develop a proposal (the “Proposal”) based on a clear understanding of the Tenants, the services they need, the assistance available from BC Housing and Fraser Health, and the responsibilities of the active parties involved in making ILBC work.

The Proposal will be evaluated on its fit with the general objectives of ILBC and the specific criteria of this RFP.

1. The Tenants

All Tenants to be assisted through *Independent Living BC* will be identified and selected by Fraser Health. They will be seniors and adults with disabilities who are able to direct their own care and whose health will be better managed by support and care within a community setting rather than within a residential care setting.

Tenants, many of whom will have low incomes, will pay no more than 70% of their after tax income for the accommodation and hospitality services they require. (See “Assistance Available” below.)

Typical Tenants will be physically frail or have physical challenges and will need assistance in maintaining their independence. They are susceptible to becoming isolated in their existing homes, often because of mobility problems and/or weak support networks. This isolation may lead to depression, neglect, and stress which become reflected in health symptoms. They will require varying degrees of assistance with support and personal care at scheduled and/or unscheduled times throughout the day.

Tenants will have health or medical issues that are predictable. This means they will be able to be managed by scheduled professional care from their physician and/or Community Care clinician. They will be motivated and able to share responsibility for managing the risks, due to their frailty, of living in the community.

All Tenants to be assisted through *Independent Living BC* will be identified and selected by Fraser Health, and each Tenant must meet the following criteria:

- is a beneficiary (i.e. eligible for health services in the Province of British Columbia);
- requires both hospitality and personal care services;
- is at significant risk in their current living environment; and
- has care needs most appropriately met in an independent housing with some support services or assisted living environment.

People who are able to self direct their own care are cognitively capable of making decisions regarding their own care relevant to the specific task. They can communicate effectively, verbally or non-verbally through communication devices, so as to be understood by any authorized caregiver or spouse living with the Tenant. They have the ability to make informed, voluntary decisions regarding care requirements and participate in the development of their care plan, or alternatively make their needs known to the person they are living with who then participates in the development of that person's care plan. They are able to use the emergency response system and take direction in an emergency situation.

The Tenant will be required to move out of their *Independent Living BC* unit if they meet one of the following criteria:

- has care needs that are more appropriately met in residential care;
- exhibits behaviours that jeopardize that Tenant's safety and well-being or the safety and well-being of others; or
- is not complying with the terms of his or her Residency Agreement.

Residency Agreement means an agreement that defines the expectations, rights and obligations of the Tenant and the Operator, including the services to be provided, the charge to the Tenant for those services and the conditions under which a Tenant will be required to move out of their *Independent Living BC* unit.

All Tenants will be assessed and selected for entrance to and exit from a rent supplement apartment by Fraser Health. The selected applicants will be reviewed with the Operator prior to residency.

2. Services

In an *Independent Living BC* environment, Tenants will receive two types of services — hospitality and personal care.

Hospitality services

These include the following:

- meal service for at least two main meals (lunch and dinner) daily to be included in the basic hospitality package with the ability to provide all three meals as necessary. A meal

service that provides opportunity for choice is preferred. The ability to meet common special dietary needs (e.g. for those with diabetes, diverticulitis) is required.

- housekeeping and heavy laundry (linens and towels) on at least a weekly basis; periodic cleaning of carpets and drapes;
- easy, on-site access to some social or recreational activities;
- monitoring; and
- 24-hour emergency wireless on-call response capacity through a staff person on-site.

Note: Neither “monitoring” nor “on-call emergency support” imply medical expertise. “Monitoring” requires the Operator’s staff to be sensitive, in the course of everyday interaction with the Tenants, to any signs of health concerns that should be raised with the Tenant and/or Fraser Health staff involved with the Tenant. “On-call emergency response capacity” requires the ready availability, on-site, of a person able to respond in an appropriate manner when a Tenant is experiencing difficulties.

Personal care services

All Tenants referred to *Independent Living BC* will also require some level of personal care services. Personal care services means those services that assist a person with the activities of daily living and specific nursing and rehabilitation tasks delegated under the provincial Personal Assistance Guidelines (Ministry of Health, January, 1997). Related skills include transferring, moving around safely, and assistance with personal hygiene, bathing, dressing, grooming, eating, and managing medications.

The standards for evaluating the provision of personal care services are:

1. philosophy of personalized assistance which reflects an understanding of the target population;
2. staff with the skills to serve the target population (including educational and training requirements and/or opportunities for staff);
3. staff history to indicate good potential for consistency of care; processes in place to provide quality assurance, accountability to Tenants, and risk management including risk management agreements.

Fraser Health will organize the provision of professional health care to the Tenants and will undertake ongoing liaison with the Operator’s Tenant Services manager, as appropriate.

The Operator will have no responsibility for the Tenant’s professional health or medical services. This responsibility rests with the Tenant and family members, in collaboration with the Fraser Health Case Manager.

3. The assistance available

The Province of BC, through BC Housing and the health authorities have joined in partnership to make independent living accommodation and services affordable to the Tenants.

The Tenants, many of whom will have gross incomes of approximately \$1020 per month, will pay no more than 70% of their after tax income for the accommodation and the hospitality services as described. For example a Tenant with a monthly income of \$1020 will pay \$714 for their rent and hospitality services. (Some disabled adults younger than 65 years will have incomes of about \$800.)

BC Housing will provide a fixed-sum monthly housing supplement (amount to be determined) for each eligible ILBC unit directly to the Operator. Fraser Health will also provide monthly funding to the Operator, to ensure that the Tenants can afford the services they need to maintain their independence.

Fraser Health will refer Tenants to the Operator based on a 50/50 split between “Independent Housing with Supports” and “Assisted Living” according to the level of personal care each individual would require. Operators will be compensated \$500 per month for “Independent Housing with Supports” and \$57 per day for “Assisted Living” Tenants.

The total assistance the program partners have available will be apportioned with careful attention to the “value for price” presented in the Proposal offered.

Financing for Non-Profit Projects

BC Housing, as a National Housing Act lender, is able to provide financing and facilitate mortgage insurance to non-profit organizations prepared to enter into long term operating agreements and a standard mortgage in BC Housing’s prescribed form. In addition, other encumbrances will be registered on title restricting use of the housing financed by BC Housing (a Section 219 Covenant and Option To Purchase in favour of BC Housing.)

Non-profit societies interested in this assistance need to provide capital and operating budgets.

4. Responsibilities

The three active operational partners in the rent supplement component of ILBC, Fraser Health, the Operator, and the Tenant, share responsibility for making ILBC work.

Fraser Health Responsibility

Fraser Health is required to:

- manage access to *Independent Living BC* in the area including determining if a Tenant meets the move in/move out criteria, authorizing a Tenant’s entry into and exit from *Independent Living BC* and determining the nature and amount of services to be provided to Tenants;
- establish a process for resolution of dispute between Fraser Health and the Operator;
- establish policies respecting the delegation of specific nursing and rehabilitation tasks to the Operator’s staff which are consistent with the provincial Personal Assistance Guidelines; and
- advise clients of the home care services that will be authorized to assist the client to remain at home until they move into a *Independent Living BC* residence or should the client choose not to move into a *Independent Living BC* residence.

Operator Responsibility

The Operator is required to:

- negotiate individual Residency Agreements with each Tenant in the independent living residence;
- negotiate, in partnership with Fraser Health, behaviour specific Managed Risk Agreements with Tenants as necessary;
- be registered under the *Community Care and Assisted Living Act*; and
- have processes to ensure quality of care and services including:
 - Tenant input into services;
 - Tenant dispute resolution; and
 - Tenant abuse prevention.

More information on the Office of the Assisted Living Registrar and the Assisted Living Registration Project may be found at www.healthservices.gov.bc.ca/assisted/

Tenant Responsibility

The Tenant is required to:

- assume and retain maximum personal responsibility for their own health and well-being, and maximum involvement in decision-making;
- direct and participate in their own care;
- pay for assessed applicable costs; and
- pay for additional support services desired by the Tenant such as having a companion attend on medical or social outings.

5. Criteria

The specific requirements of this RFP require that the Proposal do the following:

- provide assisted living units in one of the target communities:
 - **27** assisted living units in **Burnaby**
 - **30** assisted living units in **Langley**
 - **22** assisted living units in **Maple Ridge**
 - **40** assisted living units in **White Rock/South Surrey**
- make units available for a minimum of **five** years.

In general, the Proposal should:

- provide a home-like setting, specifically a self-contained living unit for each Tenant with a lockable door and the features necessary for independent living.

- provide hospitality services including:
 - at least two meals (lunch and dinner), in the basic hospitality services package, and the capacity to provide all three meals daily;
 - housekeeping and laundry services at least once a week;
 - facilitation of social and recreational activities; and
 - monitoring and 24-hour wireless on-site emergency response.
- provide Tenants with personal care services to assist them with the activities of daily living (e.g. transferring, moving around safely, including assistance with personal hygiene, bathing, dressing, grooming, eating and assistance with managing medications).

A Proposal for new construction or renovation of existing privately or society-owned building should include sufficiently detailed information to facilitate a comparative evaluation with regard to the design and construction criteria specified in Appendix B. This information should include design drawings and specifications and a development schedule indicating when the new or renovated units will be available.

While the standard operating agreement will be five years, a longer term will be considered for new construction or renovation of existing building. The Proponent should specify their preferred operating agreement duration, up to a maximum of 10 years.

In all cases, the design and construction criteria in Appendix B. will be used to evaluate the design and construction aspects of the Proposal.

V. PROPOSAL REQUIREMENTS

Number of copies, closing date and location

Four copies of each Proposal must be submitted, two in bound form and two in unbound form to facilitate easy reproduction. All four copies should be submitted in one package clearly addressed as follows:

BC Housing
Attention: Manager, Program Development
RFP for *Independent Living BC* Rent Supplements Fraser Health-RS-#07
Suite 601 - 4555 Kingsway
Burnaby BC V5H 4V8

Deadline for receipt of Proposals at the above address is **2:00 p.m.** Daylight Savings Time on **Thursday, April 20.**

Proposals submitted by e-mail or facsimile will NOT be accepted.

For further information, proponents may also access the Fraser Health web-site at www.fraserhealth.ca, and "Independent Living...creating choices for life" (December 2002).

Mandatory requirements

All Proposals must meet the following requirements:

- The Operator must be able to secure insurance needed to meet the terms of Fraser Health Operating Agreement. (See Appendix F.)
- The building must meet mandatory criteria as determined by BC Housing. (See Appendix B.)
- The Proposal must be received at the location specified above and by the deadline.
- The Proposal must follow the format below.
- The Operator must submit a Letter of Committal in the form outlined in Appendix C.

Format

The Proponent is required to provide the information requested in the specified format.

N.B. If the Operator has design drawings of the proposed new construction or conversion of an existing building which clearly provide answers to any of the questions below, please submit the drawings and indicate in the appropriate spaces of the questionnaire: "Information provided on drawings submitted."

1. **Letter of Committal**
2. **Operator - Summary Information**
- **Support Documentation**
3. **Proposal - Summary Information**
- **Support Documentation**
4. **Schedule of unit availability**
5. **Price - Summary Information**
- **Support Documentation**

An introductory executive summary of the Proposal is not requested.

Each section below sets out the basic information required in a Proposal and is followed by a sub-section entitled "**Support Documentation**". The sub-sections list information that should be submitted in the Proposal if it is available.

NOTE:

BC Housing and Fraser Health reserve the right at their sole discretion to cancel this RFP and to not award a contract to any of the Operators responding. Operators are solely responsible for their own costs and expenses in preparing or presenting their proposal and for subsequent negotiations with BC Housing and Fraser Health, if any. Neither BC Housing nor Fraser Health is liable to pay such costs and expenses nor to reimburse or compensate an Operator under any circumstances.

Claims against Fraser Health and BC Housing

Fraser Health and BC Housing reserve the right in its sole discretion not to accept a Proposal from any Proponent which in the past commenced a claim or legal proceedings against Fraser Health or BC Housing, has notified Fraser Health or BC Housing of the possibility of commencing such a claim or proceedings, is currently bringing a claim or legal proceedings against Fraser Health or BC Housing, or against which Fraser Health or BC Housing has in the past either considered or actually commenced a claim or legal proceedings, in the event such a claim or legal proceeding involves previous contracts, tenders or business transactions. Fraser Health and BC Housing may at its sole discretion also take any such claims or legal proceedings into account in the evaluation of a Proponent's Proposal.