Blusson Spinal Cord Centre
6400 – 818 W 10th Avenue
Vancouver, BC Canada V5Z 1M9

PRAXIS
Spinal Cord Institute
Institut de la moelle épinière

E info@praxisinstitute.org
T 604.827.2421
W praxisinstitute.org

REQUEST FOR PROPOSAL
EPIDEMIOLOGICAL AND CLINICAL DATA ANALYSES SERVICES
FOR THE PERIOD
January 2 to March 31, 2024

1. GENERAL INFORMATION

a. **Purpose.** This request for proposal (RFP) is to contract for **Epidemiological and Clinical Data Analyses** services to be provided to the Praxis Spinal Cord Institute (Praxis).

b. **Who May Respond.** Researchers, consultants or organizations with experience analyzing administrative health data sets. Expertise in non-traumatic spinal cord injury (NTSCI) and/or traumatic SCI would be considered an asset.

c. **Instructions on Proposal Submission:**

   i. **Closing Submission Date**. Proposals must be submitted no later than midnight (Pacific Time) on **Sunday, December 10, 2023**.

   ii. **Inquiries**. Inquiries concerning this RFP should be directed to:

   Dr. Naama Rotem-Kohavi
   Research Associate
   Email: nrkohavi@praxisinstitute.org

   iii. **Instructions to Offerors.** Your proposal should be submitted to:

   Dr. Vanessa Noonan
   Director of Research and Best Practice Implementation
   Email: vnoonan@praxisinstitute.org

   It is the responsibility of the Offeror to ensure that the proposal is received by Praxis, by the date and time specified above. Late proposals will not be considered.

   iv. **Conditions of Proposal.** All costs incurred in the preparation of a proposal responding to this RFP will be the responsibility of the Offeror and will not be reimbursed by Praxis.

   v. **Right to Reject**. Praxis reserves the right to reject any and all proposals received in response to this RFP.

   vi. **Notification of Award**. It is expected that a decision selecting the successful candidate will be made within one week of the closing date for the receipt of proposals. Upon conclusion of final negotiations with the successful candidate, all Offerors submitting proposals in response to this RFP will be informed, in writing of the decision. A contract for the accepted proposal will be drafted based upon the factors described in this RFP and the terms established in Canadian Institute of Health Information (CIHI) and Praxis' Secure Access Environment Agreement.

   vii. **Term of Engagement.** The engagement will be for a period of 3 months, from **January 2** through **March 31 2024**.

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2. DESCRIPTION OF OUR ORGANIZATION

The Praxis Spinal Cord Institute is a Canadian-based not-for-profit organization that drives innovation in spinal cord injury (SCI) research and care. We strive to improve the lives of people living with SCI in Canada and around the world. Headquartered in Vancouver, BC, we facilitate an international network of researchers, healthcare professionals, entrepreneurs, investors, people with SCI and their supporters in order to find solutions to one of the most debilitating, costly and life-altering health conditions.

Our vision is a world without paralysis after SCI. To achieve this, we take a multi-disciplinary, adaptable approach to maximize our impact. This enables us to move the most promising ideas out of the laboratory, into a standard practice of care, into the marketplace and ultimately, into the lives of people with SCI. By working to address all of these areas simultaneously, and with national and international partners within the SCI community and beyond, the Institute is uniquely positioned to provide solutions for people with SCI.

We are funded by the Government of Canada and the province of British Columbia.

Please refer to the Praxis website for additional information.

3. SCOPE OF SERVICES

The Offeror shall be readily available to perform the following Epidemiological and Clinical Data Analyses services, as requested:

1. Conduct a literature search on NTSCI epidemiology, clinical care, and economic studies using administrative data.
2. Develop a draft for an analytical plan for the identification of cases of NTSCI from CIHI databases using a case-based approach and reported ICD-10 codes.

   The analytical plan should include the below objectives and should align with the methodologies used in Praxis' recent publication on TSCI (Thorogood et al., 2023):

   - To finalize a NTSCI cohort using a case-finding algorithm on updated data request (2004 to 2021).
   - To estimate the incidence (cases/year) in persons with NTSCI using hospital discharge records and national rehabilitation system records.
   - To describe the demographics of NTSCI in Canada (e.g., age, sex, geographical location).
   - To describe patient (e.g., etiology using ICD-10-CA codes, level of injury) and health system (e.g., intervention, length of stay, discharge destination) characteristics of NTSCI in Canada.
   - To determine the number of patients with NTSCI who encounter multiple admissions to hospital and or rehabilitation facilities.
   - To estimate cost of "initial" in-hospital stay using the resource intensity weight variable.
   - To estimate a Canadian prevalence of NTSCI by applying discharge incidence rates calculated from hospital care records to a cohort survival model.

   CIHI data will be readily available and accessible through a Secured Access Environment (SAE) for the selected candidate upon ethics and authorization approval by CIHI.

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3. Working in partnership with Praxis, facilitate a National Advisory Working Group of experts in the field and actively engage PLEX.
4. Develop an analytical data set and conduct a summary of descriptive statistical analysis for objective 2 as described above and prepare it for dissemination at a relevant SCI conference (e.g. American Spinal Injury Association or the International Spinal Cord Society).
5. Create a detailed data manual outlining the decisions made on data cleaning, definitions and analyses, as well as including the analysis programming code.

For any potential publications resulting from this project (i.e., conference abstracts, manuscripts), Praxis will follow the ICMJE authorship guidelines and the Offeror would be the lead or senior author should the Offeror fulfills the criteria.

This is considered to be phase one of the project. Additional phases will be determined upon completion of this contract. This work is to be done in close collaboration with Praxis. The budget to complete this phase is a maximum of **CAD $42,500**.

Key Deliverables/Milestones	Target Completion Date
NTSCI National Advisory Working Group created	30-Jan-24
Literature search on NTSCI epidemiology conducted	30-Jan-24
Analytical plan developed	28-Feb-24
Analytical data set developed	15-Mar24
Descriptive statistical analysis for objective 2 performed	31-Mar-24
Conference material and presentation slides prepared	31-Mar-24
Detailed data manual created	31-Mar-24

Although it is preferable to submit a proposal covering all of the above areas, Praxis will consider proposals for subsets of these areas.

Offeror shall be prepared to submit detailed billing statements for all services billed at an hourly rate, if any, broken down into time increments of no more than a quarter hour. Offeror shall also include summaries of work performed and time spent on services performed, as discussed below.

4. PROPOSAL CONTENTS

The Offeror, in its proposal, shall, as a minimum, include the following;

a. **Experience:** The Offeror should describe their experience in Epidemiological and Clinical Data Analyses, including the names or websites of at least three clients, preferably including clients similar to Praxis. Experience should include the following categories:
   i. Experience providing Epidemiological and Clinical Data Analyses for non-profit or charitable organizations (e.g. university).
   ii. Experience providing Epidemiological and Clinical Data Analyses for clients conducting similar programs and government or donor-funded services.
b. **Organization Information:** If the Offeror is an organization, it should describe its organization type, size, structure, areas of practice, and office location(s), the resumes of staff likely to be assigned to the project, and, if applicable, shall attach a certificate of good standing.

c. **Individual Information:** If the Offeror is an individual, they should include a resume which describes their education and employment to date.

d. **Staff Experience and Qualifications:** The Offeror should describe the experience and qualifications of staff to be assigned to the project. The staff should have experience in Epidemiological and Clinical Data Analyses. Descriptions should include:

   i. Education, employment, and experience of each staff;
   ii. Overall supervision to be exercised; and
   iii. Prior experience of the individual staff with respect to the required experience listed above. Only include resumes of staff likely to be assigned to the project. Background, position in the organization, years and types of experience, and continuing professional education will be considered.

e. **Structure:** The Offeror should describe the structure to deliver the scope of work and, if relevant, the allocation of responsibilities.

f. **Cost:** The Offeror's proposed price should include information on the billing rates of each staff who is expected to work on this project and charges for expenses, if any, such as travel, research, copies, and faxes. Also include a monthly flat fee that would be charged to advise on routine matters that could be handled over the telephone or otherwise without extensive research or other work. Praxis reserves the right to negotiate with the Offeror on the structure of the billing and/or retainer fee.

g. **References:** Provide three references (names, contact persons, telephone numbers and emails), preferably clients similar to Praxis.

h. **Confidentiality.** The Offeror must ensure the confidentiality of information obtained as a result of their involvement with this project is maintained.

i. **Independence.** The Offeror must provide a statement confirming their independence from Praxis.

5. PROPOSAL EVALUATION

A review committee will review proposals and may request an interview with some qualified Offerors prior to final selection. Proposals will be reviewed in accordance with the following criteria:

a. The Offeror's experience with similar clients and Epidemiological and Clinical Data Analyses;
b. Experience and qualifications of the staff to be assigned to the project;
c. Cost of services;
d. Response from references;
e. Other (confidentiality, independence);
f. Value in kind; and
g. Interviews, if conducted.

6. GOVERNING LAW

This RFP shall be governed by and construed in accordance with the laws of the Province of British Columbia and the courts of Vancouver, British Columbia shall have exclusive jurisdiction to determine all disputes and claims arising out of or in any way connected with this RFP.

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FORM OF PROPOSAL

Through submission of this Proposal, I/we agree to all of the terms and conditions of this RFP. No person, firm or corporation other than the undersigned has any interest in this Proposal.

Offerors must complete and submit all of the Form of Proposal and supply all of the information requested by the Appendix – Business Information and Requirements.

Proposals that do not include the information requested in the Appendix, or do not have sufficient information to be readily understood and evaluated may be rejected without further notice.

Note: Information provided must be responsive to the question. Please review all questions carefully.

CERTIFICATION AND AUTHORITY

I wish to present this Proposal as a qualified provider of the services and certify that the information contained in this Proposal is accurate and true to the best of my knowledge and I am duly authorized to sign the Proposal on behalf of the Offeror with the intent to bind the Offeror to the RFP and the statements and representations in the Proposal.

Offeror Name:	
Authorized Signature:	***Date:***
Print Name:	***Title:***

Note: This Form of Proposal should be executed by a director, officer or principal that is duly authorized to execute contracts on behalf of the Offeror. Form of Proposals that do not contain an authorized signature may be rejected.

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APPENDIX – BUSINESS OR INSTITUTION INFORMATION AND REQUIREMENTS

1.0. BUSINESS/INSTITUTION INFORMATION:

Offeror's legal name:

If you carry on business under a name other than your legal name, please provide it:

If the Offeror is not an individual, please provide a contact name and title:

Name: ________________________ Title:__________________________

If not an individual, please provide the name and title of the representative(s) authorized to execute contracts on behalf of the business:

Name: ________________________ Title:__________________________

*If you are an individual or an institution, skip this section.

Please submit the following documents as applicable:

- If your business is an **incorporated company**, a current copy of the company's certificate of good standing.
- If your business is incorporated in a **jurisdiction other than BC,** a current copy of the company's certificate of good standing.
- If your business is a **registered partnership or sole proprietorship** in BC, a current copy of the BC Registry Services search showing the partnership registration or business name registration, as applicable.

2.0. BUSINESS/INSTITUTION ADDRESS:

Street:

City:	Province:	Country:	Postal Code:
Telephone:	( )	Cell Phone:	( )
Fax:	( )	Email:	

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3.0. MANDATORY BUSINESS REQUIREMENTS	
3.1. WorkSafeBC Coverage: Under the *Workers Compensation Act*, if you are an employer you are required to be registered with WorkSafeBC and in good standing. If an employer, are you registered? If so, please provide your assessment registration (account) number. If you are a sole proprietor (with or without employees) who will perform services personally, you are required to have personal optional protection coverage for yourself, if eligible. Do you have personal optional protection? If no, confirm that you would obtain personal optional protection coverage for yourself, if eligible, if awarded a Contract. *Institutions are not required to fill out this section.	☐ Yes ☐ No ☐ N/A Assessment Reg. # ______________ ☐ Yes ☐ No ☐ Not Eligible ☐ Yes ☐ No
4.0. ADDITIONAL INFORMATION	
4.1. Conflict of Interest: The provision of the Services must not represent a conflict of interest. Are there any potential areas of conflict of interest that may exist with the provision of these Services to Praxis? Without limiting the foregoing, please disclose if you are a current or previous employee of Praxis. If there is a potential conflict, provide a description as an attachment to your Proposal. For additional information refer to the Code of Ethics.	☐ No Conflict ☐ Yes, there is a potential conflict of interest. If Yes, confirm you have attached this information to your Proposal. ☐ Yes ☐ No
4.2. References: Please provide a minimum of three references, preferably current clients using services comparable in scope, size, and technical requirements to the proposed services. Include the following information: business name, the name of the contact person who can respond to Praxis' questions, that contact person's job title, phone number, and email address, and a brief description of the services provided.	Confirm you have attached this information to your Proposal. ☐ Yes ☐ No