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APPENDIX A EVALUATION OF PROPOSALS

The Authority will evaluate the Proposals in accordance with this Appendix A.

1. TECHNICAL SUBMISSIONS AND TECHNICAL SUPPLEMENTS

Subject to the terms of this RFP, the evaluation of the Technical Submission (as amended and supplemented by the Technical Supplement) will consider whether the Technical Submission (as amended and supplemented by the Technical Supplement):

- i. contains any Material Non-Compliances;
- ii. satisfies the provisions of this RFP, including the requirements set out in Appendix B of this RFP and the Draft Project Agreement; and
- iii. demonstrates to the satisfaction of the Authority that the Proponent is capable of performing the obligations and responsibilities of Project Co and delivering the Project in accordance with the Project Agreement and that the Proponent has a good understanding of the Project and the work.

The Authority will also score the degree to which a Proponent's Technical Submission (as amended and supplemented by the Technical Supplement) is in accordance with the criteria described in Table 1 of this Appendix A. Table 1 describes these criteria and indicates the maximum points available for each criterion and the weighting of each sub-criterion of the criterion where applicable. Where weightings are not indicated, sub-criterion will be weighted equally. A linear distribution of points between minimum and maximum will apply unless otherwise noted, with the minimum scoring to equal 0 points, and the maximum scoring equalling the maximum available points for the category

Measurement Methodology Document:

The requirements and details of each scored element are identified and described in the Measurement Methodology document. This document includes all definitions as they relate to the scored elements. Additionally, the document contains diagrams and includes various scoring methodology examples.

Number Corresponds to Appendix B	Measurement Category	Total Category Points Available
3.B1	Travel Distance and Corridor Efficiency	30
3.B2	Separation of Flows	15
3.B3	Line of Sight	15
3.B4	Natural Light	15





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	Total Points Available	100
3.B7	Qualitative	10
3.B6	Process Mapping	5
3.B5	Standardization	10





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Table 1: Scored Elements Criteria

App B Section		Criteria				Points	
3B.1	Travel Distance and Corridor Efficiency Authority Objective: The goal of the travel distance and corridor efficiency measurement is to obtain a highly efficient and effective corridor circulation system for key paths of travel within the facility. Refer to Section 2 of the Measurement Methodology document measurement details and examples. Campbell River Hospital						
	Travel Route		Points Availabl	Min	Max		
	LDRP Patient Rooms to C-Section	OR	3.75	154	4 138		
	Emergency Patient Rooms to Imaging M	lodalities	3.75	124	4 108		
	Surgery to PARR and Holding		3.75	4:	3 33		
	Surgery to Day Surgery		3.75	10	1 88		
	Comox Valley Hospital Travel Route	Points Availabl	Min	Max			
	LDRP Patient Rooms to C-Section	3.75	104	4 89			
	Emergency Patient Rooms to Imaging M	3.75	10	5 95			
	Surgery to PARR and Holding			48	8 40		
	Surgery to Day Surgery		3.75	79	9 71		
3B.2	Separation of Flows Authority Objective: The goal of the separation of flows measurement is to obtain a design that provides unique corridor circulation systems for key types of traffic within the facility. Refer to Section 3 of the Measurement Methodology document measurement details and examples. Campbell River Hospital					15	
	Functional Program Department	Public E		Soiled Elevator Path of Travel	Patient Elevator Path of Travel		
	Emergency	Scor	ed	Scored	Scored		
	Diagnostic Imaging	Not Sc	ored	Scored	Scored		
	Surgery Not So		ored	Scored	Scored		
	PARR	Scor	ed	Scored	Scored		
	Maternity (LDRP's)	Scor	ed	Scored	Scored		
	Surgical Day Care	Scor	ed	Scored	Scored		





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p B ction		Criteria						
	Comox Valley Hospital							
	Functional Program Department	Public Elevator Path of Travel	Soiled Elevator Path of Travel	Patient Elevator Path of Travel				
	Emergency	Scored	Scored	Scored				
	Diagnostic Imaging	Not Scored	Scored	Scored				
	General Surgery	Not Scored	Scored	Scored				
	PARR	Scored	Scored	Scored				
	Maternity (LDRP's)	Scored	Scored	Scored				
	Surgical Day Care	Scored	Scored	Scored				
	Maximum: 6 or less deviations per facility Minimum: 10 or more deviations per facili	•						
	for maximum line of sight visibility from key st	taff locations within the	facility.	Line of Sight Authority Objective: The goal of the line of sight measurement is to obtain a design that is optimized for maximum line of sight visibility from key staff locations within the facility. Refer to Section 4 of the Measurement Methodology document measurement details and examples.				
	Measurement View	rs.	Number of View Destinations	Points Available per View				
	Measurement View ED Triage Desk to Waiting		View	Available				
		g Room	View Destinations	Available per View				
	ED Triage Desk to Waiting	g Room n Entry	View Destinations	Available per View 0.200				
	ED Triage Desk to Waiting ED Triage Desk to Walk-li	g Room n Entry Treatment Bays	View Destinations 1	Available per View 0.200 0.200				
	ED Triage Desk to Waiting ED Triage Desk to Walk-li ED Collaboration Centre to Exam	g Room n Entry Treatment Bays eatment Rooms	View Destinations 1 1 1	Available per View 0.200 0.200 0.200				
	ED Triage Desk to Waiting ED Triage Desk to Walk-li ED Collaboration Centre to Exam ED Care Sub-Station to Exam Tre	g Room n Entry Treatment Bays eatment Rooms reatment Areas	View Destinations 1 1 1 11	Available per View 0.200 0.200 0.200 0.200 0.200				
	ED Triage Desk to Waiting ED Triage Desk to Walk-li ED Collaboration Centre to Exam ED Care Sub-Station to Exam Tre ED Care Sub-Station to Patient Tr	g Room n Entry Treatment Bays eatment Rooms reatment Areas Holding Rooms to PARR & Pre-Op	View Destinations 1 1 1 11 14	Available per View 0.200 0.200 0.200 0.200 0.200 0.200 0.200				
	ED Triage Desk to Waiting ED Triage Desk to Walk-li ED Collaboration Centre to Exam ED Care Sub-Station to Exam Tre ED Care Sub-Station to Patient Tr ED Care Sub-Station to Secure F PARR & Pre-OP Collaboration Centre	g Room n Entry Treatment Bays eatment Rooms reatment Areas Holding Rooms to PARR & Pre-Op s and bays) urg Day Care Prep	View Destinations 1 1 1 11 11 14 2	Available per View 0.200 0.200 0.200 0.200 0.200 0.200 0.200 0.326				
	ED Triage Desk to Waiting ED Triage Desk to Walk-li ED Collaboration Centre to Exam ED Care Sub-Station to Exam Tre ED Care Sub-Station to Patient Tr ED Care Sub-Station to Secure H PARR & Pre-OP Collaboration Centre Patient Care Areas (all rooms Surg Day Care Charting Station to Su	g Room n Entry Treatment Bays eatment Rooms reatment Areas Holding Rooms to PARR & Pre-Op s and bays) urg Day Care Prep	View Destinations 1 1 11 11 14 2 9	Available per View 0.200 0.200 0.200 0.200 0.200 0.200 0.200 0.200 0.326				
	ED Triage Desk to Waiting ED Triage Desk to Walk-li ED Collaboration Centre to Exam ED Care Sub-Station to Exam Tre ED Care Sub-Station to Patient Tr ED Care Sub-Station to Secure H PARR & Pre-OP Collaboration Centre Patient Care Areas (all rooms Surg Day Care Charting Station to Su	g Room In Entry Treatment Bays Eatment Rooms Treatment Areas Holding Rooms To PARR & Pre-Op To and bays) To pay Care Prep To bays	View Destinations 1 1 11 11 14 2 9	Available per View 0.200 0.200 0.200 0.200 0.200 0.200 0.200 0.326 0.200 0.200				
	ED Triage Desk to Waiting ED Triage Desk to Walk-li ED Collaboration Centre to Exam ED Care Sub-Station to Exam Tre ED Care Sub-Station to Patient Tr ED Care Sub-Station to Secure H PARR & Pre-OP Collaboration Centre Patient Care Areas (all rooms Surg Day Care Charting Station to Su	g Room In Entry Treatment Bays Eatment Rooms Treatment Areas Holding Rooms To PARR & Pre-Op To and bays) To pay Care Prep To bays	View Destinations 1 1 11 11 14 2 9	Available per View 0.200 0.200 0.200 0.200 0.200 0.200 0.200 0.326 0.200 0.200				
	ED Triage Desk to Walk-ling ED Triage Desk to Walk-ling ED Collaboration Centre to Exam ED Care Sub-Station to Exam Tre ED Care Sub-Station to Patient Tr ED Care Sub-Station to Secure H PARR & Pre-OP Collaboration Centre Patient Care Areas (all rooms Surg Day Care Charting Station to Suration to Suration Bays (all rooms and	g Room n Entry Treatment Bays eatment Rooms reatment Areas Holding Rooms to PARR & Pre-Op and bays) urg Day Care Prep nd bays) TOTAL	View Destinations 1 1 11 11 14 2 9	Available per View 0.200 0.200 0.200 0.200 0.200 0.200 0.326 0.200 1 15 Points Available				





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ED Triage Desk to Walk-In Entry ED Collaboration Centre to Exam Treatment Bays ED Care Sub-Station to Exam Treatment Rooms ED Care Sub-Station to Patient Treatment Areas ED Care Sub-Station to Secure Holding Rooms ED Care Sub-Station to Secure Holding Rooms ED Care Sub-Station Centre to PARR & Pre-Op Patient Care Areas (all rooms and bays) Surg Day Care Charting Station to Surg Day Care Prep Patient Bays (all rooms and bays) 10 10 10 10 10 10 10 10 10 1
ED Care Sub-Station to Exam Treatment Rooms 1 0.200 ED Care Sub-Station to Patient Treatment Areas 10 0.200 ED Care Sub-Station to Secure Holding Rooms 1 0.200 PARR & Pre-OP Collaboration Centre to PARR & Pre-Op Patient Care Areas (all rooms and bays) 11 0.200 Surg Day Care Charting Station to Surg Day Care Prep Patient Bays (all rooms and bays) 18 0.200 TOTAL 2 55 3 15
ED Care Sub-Station to Patient Treatment Areas 10 0.200 ED Care Sub-Station to Secure Holding Rooms 1 0.200 PARR & Pre-OP Collaboration Centre to PARR & Pre-Op Patient Care Areas (all rooms and bays) 11 0.200 Surg Day Care Charting Station to Surg Day Care Prep Patient Bays (all rooms and bays) 18 0.200 TOTAL 2 55 3 15
ED Care Sub-Station to Secure Holding Rooms 1 0.200 PARR & Pre-OP Collaboration Centre to PARR & Pre-Op Patient Care Areas (all rooms and bays) 11 0.200 Surg Day Care Charting Station to Surg Day Care Prep Patient Bays (all rooms and bays) 18 0.200 TOTAL 2 55 3 15
PARR & Pre-OP Collaboration Centre to PARR & Pre-Op Patient Care Areas (all rooms and bays) Surg Day Care Charting Station to Surg Day Care Prep Patient Bays (all rooms and bays) 18 0.200 TOTAL 2 55 3 15
Patient Care Areas (all rooms and bays) Surg Day Care Charting Station to Surg Day Care Prep Patient Bays (all rooms and bays) 18 0.200 TOTAL 2 55 3 15
Patient Bays (all rooms and bays) 18 0.200 TOTAL 2 55 3 15
Minimum: Measurements that have less than the minimum Line of Sight views will score 0 points.
Measurement Views Direct Line of Sight ED Triage Desk to Waiting Room 1
ED Triage Desk to Walk-In Entry 1
ED Collaboration Centre to Exam Treatment Bays 6 ED Care Sub-Station to Exam Treatment Rooms 1
ED Care Sub-Station to Patient Treatment Areas 4 ED Care Sub-Station to Secure Holding Rooms 1
PARR & Pre-OP Collaboration Centre to PARR & Pre-Op Patient Care Areas (all rooms and bays) 8
Surg Day Care Charting Station to Surg Day Care Prep Patient Bays (all rooms and bays)





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App B Section			Criteria			Points
	ED Collaboration Centre to Exam Treatment Bays 8					
	ED Care Sub-Station to Exam Treatment Rooms				1	
	ED Care Sub-	Station to Patient	Treatment Areas	3	4	
	ED Care Sub-	Station to Secure	Holding Rooms		1	
	PARR & Pre-OP C	collaboration Centrare Areas (all room		e-Op	9	
	Surg Day Care Charting Station to Surg Day Care Prep Patient Bays (all rooms and bays)					
3B.4	Maximum: If all views me	et the Line of Sight	Requirements, 15	Points will be aw	arded.	15
	Natural Light Authority Objective: The goal of the natural light measurement is to obtain a design that maximizes natural light in the facility while still meeting other energy goals. Refer to Section 5 of the Measurement Methodology document measurement details and examples. Refer to measurement methodology document for list of rooms subject to natural light measurement. Campbell River Hospital					
	Room Category Total Points Available in Category Number of Rooms in Category Points Per Room for Direct Natural Light Natural Light					
	Room Category 1	3.750	74	0.051	0.025	
	Room Category 2	2.625	37	0.071	0.035	
	Room Category 3	1.125	17	0.066	0.033	
	Comox Valley Hospital	Total Points	Number of	Points Per	Points Per	
	Room Category	Available in Category	Rooms in Category	Room for Direct Natural Light	Room for Borrowed Natural Light	
	Room Category 1	3.750	94	0.040	0.020	
	Room Category 2	2.625	41	0.064	0.032	





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App B Section		Crite	eria			Points
	Room Category 3	1.125	17	0.066	0.033	
	Maximum: All the rooms listed light. Minimum: 7.5 Points will be a				will have direct natural	
3B.5	Standardization Authority Objective: The goal of physical standardization in key Refer to Section 6 of the Meason Campbell River Hospital	areas of the facility.				10
	Room Category	Total Point Available in Cat		Number of Rooms in Category	Points Per Standardized Room	
	Room Category 1	2.500		43	0.058	
	Room Category 2	1.750		34	0.051	
	Room Category 3	Room Category 3 0.750 14 0.054				
	Comox Valley Hospital				1	
	Room Category	Total Point Available in Cat		Number of Rooms in Category	Points Per Standardized Room	
	Room Category 1	2.500		56	0.045	
	Room Category 2	1.750		45	0.039	
	Room Category 3	0.750		17	0.044	
	Maximum: All the rooms listed in the measurement methodology document will meet the standardization requirements. Minimum: A minimum of 2.5 Points will be achieved in Campbell River Hospital. A minimum of 2.5 points will be achieved in Comox Valley Hospital.					
3B.6	Process Mapping Authority Objective: The goal of the Process Mapping measurement is to obtain a design that optimizes key staff work flows within the facility. Refer to Section 7 of the Measurement Methodology document measurement details and examples. Campbell River Hospital				5	
	Department Process Map Number					
	Emergency Department 5					
	Diagnostic Ima	aging		2 an	d 3	
	Medical Device Rep	processing		4		
	Cardio Pulmo	nary		1		





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App B Section	Criteria			
	Comox Valley Hospital	_		
	Department	Process Map Number		
	Emergency Department	5		
	Diagnostic Imaging	7		
	Medical Device Reprocessing	4		
	Cardio Pulmonary	6		
	Minimum: 11 or more deviations scores zero points	5.	_	
	Maximum: 0 deviations are found.			
	Authorities Objective: The goal of the qualitative me the following: Healthy and healing environment associated. Honoring patient confidentiality and private. Full benefits associated with positive distributions. Industrial provides and the section 8 of the Measurement Methodolog. Campbell River Hospital	ted with interior building design; acy; actions such as nature views, artwork, virtual d ease of expansion.		
	Qualitative Element	Points Per Category		
	Building Interior Design	0.833		
	Confidentiality and Privacy	0.833		
	Views	0.833		
	Building and Site Efficiency	0.833		
	Ease of Expansion	0.833		
	Landscape	0.833		
	Comox Valley Hospital			
	Qualitative Element	Points Per Category		
	Building Interior Design	0.833		
	Confidentiality and Privacy	0.833		
	Views	0.833		
	Building and Site Efficiency	0.833		
	Ease of Expansion	0.833		
	Landscape 0.833			
	Minimum: Using the Qualitative Measurement Methodology a score of 50% or less scores zero points.			





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App B Section	Criteria	Points
	Maximum: A score of 100% scores full points.	
	Total Points Available	100

The Technical Submission (as amended and supplemented by the Technical Supplement) will be scored and awarded points based on the level of achievement of the criteria in Table 1, based on information provided in the Technical Submissions and Technical Supplements as described in Appendix B, Proposal Requirements. The Technical Submission (as amended and supplemented by the Technical Supplement) must achieve at least 30 total points from the 100 available points to be considered compliant. Each point awarded above 30 points and up to 90 total points will contribute to the calculation of the Adjusted Net Present Cost as described in this Appendix A, section 3, Step 2(a).

2. FINANCIAL SUBMISSION

Following the evaluation of the Technical Submission (as amended and supplemented by the Technical Proposal) as described in Section 1 above, the Authority will evaluate each of the Financial Submissions of those Proposals that have not been rejected, as follows:

Satisfaction of Financial Requirements:

The Authority will evaluate whether the Financial Submission substantially satisfies the following requirements:

- (a) the Proponent has arranged sufficient financing for the Project in accordance with the requirements of the RFP and the Final Draft Project Agreement;
- (b) the Proponent's Financing Plan, including security, bonding, guarantees and insurance elements, is robust and deliverable;
- (c) the Proponent's Financing Plan can be executed expediently if the Proponent is selected as Preferred Proponent;
- (d) each of the Proponent's Equity Providers continue to have the ability to raise sufficient capital to meet the equity requirements; and
- (e) the Proponent is financially viable.

If the Authority determines that the Financial Submission does not substantially satisfy the above requirements, the Authority may decide not to complete a detailed evaluation of the Proposal.





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3. RANKING PROCESS

Subject to the terms of this RFP, each Proposal that is still being evaluated following the foregoing processes will be further evaluated and ranked according to the following process:

Step 1: Highest on Scope Ladder

Each Proposal determined as meeting the requirements referenced in section 2 above will be examined to identify the extent to which, if at all, Scope Ladder items, as described in Section 4.4 and indicated in response to Section 4, Package 1 [Transmittal Package] of Appendix B of this RFP, have been used to achieve the Affordability Requirements. The Proposals will then be ranked in accordance with the Proponent's use of Scope Ladder items such that the Proponent using the least Scope Ladder items will be ranked the highest, and the Proponent using the most Scope Ladder items will be ranked the lowest.

If two or more Proposals are ranked equally under Step 1 above, the ranking process will proceed to Step 2.

Step 2: Lowest Adjusted Net Present Cost

The Authority will calculate the Adjusted Proposal Net Present Cost of the Proponent's Proposal by doing the following:

(a) Technical Criteria Adjustment

For the purposes of evaluation and ranking only, the Proposal Net Present Cost will be adjusted based on:

- calculating the number of points (including partial points) achieved by the Proponent's Proposal above 30 points and up to 90 points;
- (2) multiplying that calculated number of points by \$585,000 (the net present value of a point allocated by the Authority for this purpose); and
- (3) subtracting the product from the Proposal Net Present Cost of the Proponent's Proposal.

(b) Energy Adjustment

For the purposes of evaluation and ranking only, the Proposal Net Present Cost will be adjusted based on:

(1) Calculating the net present cost of the annual cost of energy based on the proposed Design and Construction Energy Target, and the proposed Agreed Proportions of the different types of energy included in the Targeted Energy Consumption; and





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- (2) The Authority's assumed unit cost (per Gigajoule of Energy) for each type of Energy, the Authority's assumed indexation applicable to these unit costs, and the discount rate to be applied in the Energy Adjustment calculation as follows, and adding this to the Proposal Net Present Cost of the Proponent's Proposal:.
 - i. an initial unit rate for natural gas of \$16.44 per Gj, including carbon taxes and carbon offset:
 - ii. an initial unit rate for electrical of \$0.08168 per kWh, including carbon offset;
 - iii. an indexation rate for both electrical and natural gas unit rates of 2.5% per year; and
 - iv. a discount rate of 7.5%.

If considering an alternate type of energy, the Proponent must notify the Authority and the Authority will provide the initial unit rate which will be used in calculating the Energy Adjustment.

The Proposal which offers the lowest Adjusted Proposal Net Present Cost as determined by the Authority will receive the highest ranking and be designated the highest-ranked Proposal.

Step 3: Most Advantageous to the Authority

If two or more of the Proposals that are ranked highest under Step 2 above have the same Adjusted Proposal Net Present Cost, and it is the lowest Adjusted Proposal Net Present Cost, the Authority will select from among such Proposals the Proposal that in the Authority's sole discretion is the most advantageous to the Authority and such Proposal will be designated as the highest-ranked Proposal.



