

Commission de la santé mentale du Canada

Request for Proposal

Suicide Prevention Toolkit Development and Adaptation for Saskatchewan

Submission Deadline: **3 p.m. ET, August 5, 2022**

Ce document est disponible en français



The views represented herein solely represent the views of the Mental Health Commission of Canada. Production of this material is made possible through a financial contribution from Health Canada.

About us

The Mental Health Commission of Canada (MHCC) leads the development and dissemination of innovative programs and tools to support the mental health and wellness of Canadians. Through its unique mandate from the government of Canada, the MHCC supports federal, provincial, and territorial governments as well as organizations in the implementation of sound public policy. We invite you to learn more about the MHCC and our work on <u>suicide prevention</u> from our website.

Background

In 2018, the MHCC — in collaboration with the Canadian Association for Suicide Prevention, the Centre for Suicide Prevention, the Public Health Agency of Canada, and an advisory committee of people with lived and living experience related to suicide — developed the <u>Toolkit for People Who Have Been Impacted by a Suicide Attempt</u>.

Recently, the Saskatchewan Ministry of Health provided the MHCC with funding to adapt this toolkit to support the province's <u>Pillars for Life</u> suicide prevention plan. The objectives of this initiative are to create a toolkit that facilitates collaboration among community stakeholders toward the development of

- evidence-informed information on suicide prevention and life promotion for youth and adults who interact with youth
- increased awareness and reduced stigma related to having thoughts of suicide
- support for people who experience thoughts of suicide.

Purpose

The MHCC is seeking proposals from local research agencies or multidisciplinary teams based in Saskatchewan (or with extensive experience working in Saskatchewan and in the province's context) to inform and develop the content of a customized toolkit by collecting and analyzing data from youth, adults who interact with youth, community stakeholders, etc. Once the English toolkit is complete, its content will be translated into French, with special consideration given to identified target audiences (e.g., Indigenous youth, youth represented in diverse population groups). When developing the toolkit, candidates must include diverse viewpoints and mitigate any risk to participants from exposure to emotionally triggering content.

Description and scope of services

The successful candidate will be required to meet regularly with the MHCC and its advisory committee or other project team members (as outlined under Deliverables). Proposals must carry out the following activities, which are fundamental to achieving the initiative's goals:

- 1. Create customized toolkit content on suicide prevention that will
 - raise awareness about suicide, profiling supports and services available to youth and adults who support them, both provincewide and for specific regions, communities, and target audiences
 - address emerging thoughts of suicide (e.g., encouraging access to support services, increasing coping and resilience, and advocating for crisis planning)
 - provide information and guidance for adults and youth who are supporting someone having thoughts of suicide, including communication, resources, and advice on understanding risk.
- 2. Integrate input from key voices in Saskatchewan, including
 - youth ages 13-18 (including both those who have and have not experienced thoughts of suicide) and further identified target youth audiences such as vulnerable, Indigenous, recent immigrant, and 2SLGBTQ+ youth
 - adult educators and relevant community stakeholders
 - available data sources pertaining to youth mental health and well-being
 - families of youth ages 13-18
 - Roots of Hope Saskatchewan community networks
 - MHCC stakeholders, Youth Council, and Hallway Group members (as needed)
 - Saskatchewan Ministry of Health community networks and mental health experts, and relevant community-based organizations (as needed).

Deliverables

The successful candidate must complete the following deliverables within the timelines given.

Deliverables	Timelines
Methodology:	Summer 2022
 Develop a methodology and obtain research ethics board (REB) approval for data collection and analysis 	
• Evaluate the efficacy of the existing toolkit (through surveys, key informant interviews, and focus groups of targeted Saskatchewan audiences) to determine focus areas and adaptation needs	
Data collection and analysis:	September-December 2022
• Collect and analyze data with people who have lived and living experience, subject matter experts, key community stakeholders, etc.	
• Conduct an environmental scan of Saskatchewan-based approaches and resources that address suicide prevention, including an analysis of accessible data sources	
Adapted toolkit:	January-March 2023
• Develop toolkit content in English	
 Provide the MHCC with outline draft by January 2023 for review by the ministry and advisory group (final draft by March 2023) 	
Project meetings:	Every two weeks, 2022-23
• Meet with MHCC project team members and advisory committee (as required) to review progress and key milestones	

Note: These deliverables and timelines are subject to change, according to an agreement by the successful candidate and the MHCC.

Mandatory requirements

- 1. Conflict of interest declaration:
 - Any submission by an employee, team member, or contractor currently engaged for service with the Saskatchewan Ministry of Health will not be considered. Candidates must avoid any real, apparent, or potential conflict of interest and declare all such conflicts of interest.
- 2. References:
 - Candidates must provide **at least two references from clients** they have delivered similar services to. Be sure to include the company name; client contact name, title, phone number, email address; and the service period and services provided.

Rated requirements

Proposals will be rated based on the following criteria:

Team composition and expertise: 60 points

Candidates should provide:

- A combination of education and of suicide and suicide prevention research experience (three-to-five years per team member) related to a specific population group (youth, 2SLGBTQ+ communities, people living in rural and remote areas, and older adults (families of youth)
- Education and experience should include the use and application of health equity data analysis (HEDA) on research projects
- Experience working on issues related to mental health and suicide prevention: a demonstrated capacity and understanding of suicide and the suicide prevention continuum (e.g., prevention, intervention, postvention)
- Experience with scientific literature reviews: the ability to extract high-value information from Canadian and international scientific journal articles on suicide and suicide prevention
- Experience working with youth (ages 13-18), including those from vulnerable, Indigenous, recent immigrant, and 2SLGBTQ+ populations
- Experience in stakeholder management, specific to the suicide and suicide prevention health community (e.g., researchers, people with lived and living experience, policy makers, service providers)
- Experience summarizing key findings and making recommendations for broader communication and marketing purposes

Note: Candidates should demonstrate that one or more team members has experience and expertise with the identified populations — in research, conducting literature reviews,

facilitating and engaging target audiences and convening engagement — by providing samples or links to published work.

Technical criteria: 30 points

Candidates should provide:

- A work plan outlining their intended approach to delivering the tasks or activities itemized in this RFP. Be sure to elaborate on the proposed approach (methodology, process, and practice) and describe in detail the various activities, timelines, and level of effort needed to complete the project objectives.
- An outline of the potential risks associated with the work plan, including a detailed strategy for mitigating those risks.
- Any quality assurance and quality control (QAQC) initiatives they would put in place to protect their data including its integrity, gathering process, management, and protection along with any contingencies they might use if the integrity of the data is breached.

Financial factors: 10 points

Scoring will be based on the following criterion:

• The submission of a fixed (firm) all-inclusive price in Canadian dollars, including information on how the fixed price was calculated.

Note: The submission with lowest price will receive 10 points, with the others pro-rated according to their relative proportion to that price.

Proposal format

Organize your proposal according to the following format:

1. Cover letter:

- RFP title
- Name, address, phone number, and email address of the primary contact

2. Mandatory requirements:

- Conflict of interest declaration
- References (at least two)

3. Team composition and expertise:

- Any past working relationships among members of the proposed team, as well as any successes and issues that may have arisen
- Up-to-date bios (one page, max.) of each proposed team member that includes relevant work experience, education, and relative professional designations and certifications

4. Technical proposal:

- Work plan: proposed approach and details on the various activities, timelines, and level of effort needed to complete the project objectives, including
 - research methodology and REB analysis
 - data collection and analysis
 - development of English content.
- Potential risks associated with the work plan and strategies to mitigate those risks
- Any QAQC initiatives and contingencies
- 5. Financial proposal:
 - Pricing for all proposed services

Inquiries

- Email any questions or clarifications you have email to Palki Ahmad, MHCC Program Manager, Prevention and Promotion Initiatives, at <u>pahmad@mentalhealthcommission.ca</u> (before 3 p.m. ET on July 29, 2022).
- No questions or clarifications will be accepted on or after 3 p.m. ET on July 29, 2022.

Submission deadline

• 3 p.m. ET, August 5, 2022

Contact Person:

Please submit your proposal and any questions via email to the attention of:

Palki Ahmad

Program Manager, Prevention & Promotion Initiatives

Mental Health Commission of Canada

pahmad@mentalhealthcommission.ca



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