

## REQUEST FOR PROPOSAL FOR SPINAL CORD INJURY (SCI) VALIDATE

### 1. GENERAL INFORMATION.

- a. **Purpose.** This request for proposal (RFP) is to contract for services to be provided to the **Praxis Spinal Cord Institute** ("Praxis") for **SCI Validate** for the period of January 10, 2024 to March 31, 2024.
- b. **Who May Respond.** Canadian companies developing health technologies that have evidence-based applications (TRL 7+) to individuals with a spinal cord injury (SCI) and a demonstrated market/commercial viability technology that will provide improvement in health outcomes and economic benefits to Canada.
- c. **Instructions on Proposal Submission.**
  - i. **Closing Submission Date.** Proposals must be submitted no later than midnight (Pacific Time) on **December 15<sup>th</sup>, 2023**.
  - ii. **Enquiries.** All enquiries regarding any aspect of this RFP should be directed to the Contact Person by email (each an "Enquiry") not less than three business days before the Closing Date and Time. The Contact Person is **Arushi Raina**, [araina@praxisinstitute.org](mailto:araina@praxisinstitute.org). The following applies to any Enquiry:
    - a) Enquiries must quote the RFP title in the subject line of the email;
    - b) directing an Enquiry to anyone other than the Contact Person may result in a Proposal being disqualified;
    - c) responses to an Enquiry will be in writing;
    - d) all Enquiries, and all responses to Enquiries from the Contact Person, will be recorded by Praxis;
  - iii. **Instructions to Offerors.** Your proposal should be submitted to: [araina@praxisinstitute.org](mailto:araina@praxisinstitute.org) and a cc to [contracts@praxisinstitute.org](mailto:contracts@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 RFPs will not be considered.
  - iv. **RFP Costs.** 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. **Notification of Award.** It is expected that a decision selecting the successful contractor(s) will be made within 30 days of the final interview following the receipt of proposals. Interviews are anticipated to occur between December 2023 – January 2024. Upon conclusion of final negotiations with the successful contractor(s), all Offerors submitting proposals in response to this RFP will be informed, in writing of the decision. Praxis reserves the right to reject any and all proposals received in response to this RFP. A contract for the accepted proposal will be drafted based upon the factors described in this RFP. Appeals may be addressed to [araina@praxisinstitute.org](mailto:araina@praxisinstitute.org) with a cc

to [contracts@praxisinstitute.org](mailto:contracts@praxisinstitute.org) by no later than January 30, 2024 in a clear 1 page/600 word summary clearly referencing the criteria and eligibility criteria as referenced in this RFP.

- vi. **Term and Scope of Engagement.** The engagement will commence on January 10, 2024 and end on March 31, 2024 and be subject to milestone reviews. Offerors must be available for monthly calls during program to provide updated metrics, impact, progress and to provide milestone reports during the term and every six months up to 2 years following the term. Companies must agree to terms aligned with Praxis' funder(s). The contract shall be based on the available budget. Contracts may range from \$50K-\$200K CAD but have to be clearly mapped to milestones and timeline within the period of the engagement.

## 2. Description of Our Organization.

Praxis is part of the life-changing work done in the life sciences sector, and plays a key role in the development of new technologies and treatments for those living with SCI. Our vision is a world without paralysis after SCI.

Praxis advances SCI research and innovation worldwide through networks of international researchers, health care professionals, clinical trials, entrepreneurs, investors, and people with lived experience (PLEX) of SCI.

Driven by the priorities of people with spinal cord injuries, the four distinct areas of focus for Praxis are:

- Pioneering PLEX leadership and engagement with those living with SCI
- Catalyzing networks of people and data
- Ensuring the latest research and knowledge is used in the health system
- Speeding up the availability of new SCI technology to those who need it

Praxis takes on the role of identifying priorities, marshalling resources, and driving knowledge translation. From our home in Vancouver, Canada we facilitate an international network of people with SCI and world-class experts who work together to identify, prioritize and solve the most urgent challenges.

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 both standards of care for people with SCI. We also work to get new technologies from idea, to development, and ultimately available to improve the lives of those dealing with SCI in their lives.

Please refer to the Praxis website ([www.praxisinstitute.org](http://www.praxisinstitute.org)) for additional information.

**3. SCOPE OF SERVICES.** The Offeror shall be readily available to perform SCI Validate services, as requested.

The services for the SCI Validate must generate evidence to illustrate improved outcomes of care and potential health system cost savings for Canada (e.g economic impact analysis) and demonstrate a link towards, advancing and increasing access to SCI-related health technology. In addition, the services must directly contributing to one or more of Praxis' additional priorities under this RFP as follows:

- a. **Clinical Feasibility Testing:** research validating human use of the technology/device including but not limited to collaborative projects, human factor testing, clinical pilots and testing. Earlier stage safety/pre-clinical testing is not eligible given the stage of technologies supported through this proposal
- b. Training for the purposes of technology adoption (e.g., researchers, entrepreneurs, businesses, clinicians);
- c. Commercialization (e.g., knowledge transfer, ideation and conception, prototyping, testing, patenting, manufacturing, investment attraction, marketing to SCI use/adoption);
- d. Outreach and engagement (e.g., communications, conferences and events, promotions clearly connected to SCI adoption); or
- e. Advocacy and coordination (e.g., standardization, data and informatics, research and analysis, policy development).

The budget for services for SCI Validate will not include costs of regulatory registration, including fees or costs incurred outside of Canada. If a cost outside of Canada needs to be incurred, the expense will require pre-approval by Praxis. For a cost to be incurred outside of Canada to be approved, a report justifying why suitable alternatives do not exist in Canada will be required.

**4. PROPOSAL CONTENTS.** The Offeror, in its proposal, shall, as a minimum, include the following within maximum 10 pages (12 pt. font in Arial or Times New Roman with 1.5 spacing on standard paper size of 8 1/2" x 11);

- a. **Corporation Information:** The Offeror shall fill out Appendix – Business Information and Requirements.
- b. **Technology Information:** The Offeror shall describe their novel technology, intended impact on SCI population, product roadmap, clinical validation/research completed to date, with a focus on current evidence to support SCI care.
- c. **Commercialization Plan Summary:** The Offeror shall describe their intended plan to commercialize their technology in Canada and globally, including clinical evidence generation, reimbursement, regulatory approvals, and sales milestones matched to clear timelines. Relevant comparisons with current comparable technologies under

development should be included as relevant. A company pitch may be attached too, but not in replacement of the clearly labelled summarized commercialization plan.

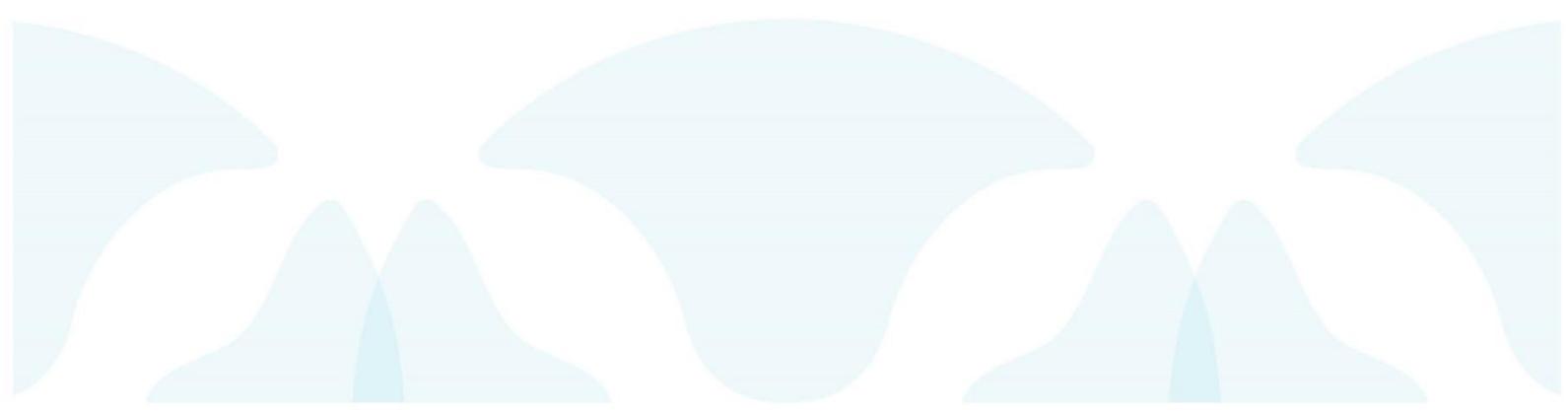
- d. Plan to Develop an Economic Impact Analysis:** A summarized plan and budget for the development of a high-level, externally verified/developed report estimating potential of health system savings through adoption of the health technology (compared to standard of care) in a realistic clinical setting, with clear assumptions and methodology outlined. A summary/link to relevant vendors or plans to develop this report may be provided.
- e. Scope of Services:** The Offeror shall describe the activities, in alignment with the eligible activities listed below, to deliver the clinical and commercial validation of its technology, and the structure for delivering the activities, including the allocation of responsibilities and the overall supervision to be exercised. The scope of services must include a health economic impact analysis illustrating the potential care and economic benefits of adopting this technology. The scope of services needs to also demonstrate how the work undertaken will directly lead to an increased potential and speed with which the technology will be available to Canadians. Scope of services elements must clearly align with budget presented (see f. Price).
- f. Price:** The Offeror's proposed price should include a clear budget and schedule of expenses, inclusive of information on the billing rates of each staff member who is expected to work on this project their expected hours and charges for expenses and the relevant milestones attached to all expenses. Only expenses incurred completing the scope of the work and milestones shall be included in the Offeror's proposed price. Praxis reserves the right to negotiate with the Offeror on the proposed structure of work and billing processes.
- g. References:** Provide three references external to the organization (names, contact persons, telephone numbers and emails).
- h. Letter of Support:** Optional, provide a maximum of two letters of support as appendices.
- i. Confidentiality.** All staff must ensure the confidentiality of information obtained as a result of their involvement with matters is maintained.
- j. Independence.** The Offeror must provide a statement confirming their independence from Praxis.

## 5. PROPOSAL EVALUATION

- a. Submission of Proposals.** The intention of the SCI Validate program is to support the validation pathway of novel health technologies (products and/or services) that have evidence-based applications to individuals with a spinal cord injury and a demonstrated market/commercial viability. All proposals shall be submitted to [araina@praxisinstitute.org](mailto:araina@praxisinstitute.org) with cc to [contracts@praxisinstitute.org](mailto:contracts@praxisinstitute.org).

- b. Evaluation Procedure and Criteria.** A review committee will review proposals and may request an interview or meeting with qualified Offerors prior to conducting final selection. Proposals will be reviewed in accordance with the following criteria:
- i. Impact on individuals with SCI:** Applicants will be assessed for the degree to which the health technology could improve health outcomes and/or quality of life for people living with SCI based on tangible metrics and evidence provided through initial evidence generated to date. The service needs to illustrate the potential for significant improvements to current standard of care for SCI including secondary complications. Previous experience engaging with people with SCI, caregivers, clinicians and researchers will be noted.
  - ii. Potential for Commercialization:** The health technology is differentiated from current offerings. It has a reasonable estimated market size based on its value proposition, market size and scalability. Market size may include indication of application(s) in addition to SCI such as: cerebral palsy, multiple sclerosis, stroke, age-related chronic conditions as it is important in validating the broader market viability of health technologies.
  - iii. Commercialization Plan Feasibility and Financial Viability:** the commercialization plan demonstrates that there is potential for the services to be financially sustainable in the future and be available for people with SCI to access. Plan outlines realistic objectives, resource requirements, timelines, capital to be raised, business model, and exit strategy. The team involved in executing the plan has the relevant expertise, experience, and network to conduct the proposed activities and adequate full-time resourcing is available to meet the needs of the plan.
  - iv. Scalability and Accessibility:** the ability for the services to scale to, at minimum, thousands of people living with SCI, is an important factor. The significance of impact on a smaller subset of people living with SCI, however, will be considered.
  - v. Economic Impact and Potential for Adoption in Canada:** the technology needs to illustrate the potential positive economic impact it may have in Canada through metrics and available evidence including but not limited to health system efficiencies and commercialization of Canadian intellectual property. The commercialization plan showcases that the services have a strong potential for adoption throughout Canada.
  - vi. Cost of services:** the pricing and cost of the proposal for the relative potential impact on SCI will be assessed. If relevant specific line items/costing may be compared internally to relevant vendors/providers to assess effective use of funds.

- 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.



## 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.

|                              |               |
|------------------------------|---------------|
| <b>Offeror Name:</b>         |               |
| <b>Authorized Signature:</b> | <b>Date:</b>  |
| <b>Print Name:</b>           | <b>Title:</b> |

**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.

## APPENDIX – COMPANY INFORMATION AND REQUIREMENTS

|   |           |             |              |
|---|-----------|-------------|--------------|
| <b>1.0. BUSINESS INFORMATION:</b>   |           |             |              |
| Offeror's <u>legal name</u> :   |           |             |              |
| 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: _____  |           |             |              |
| Please submit the following documents as applicable, if not an individual:  |           |             |              |
| <ul style="list-style-type: none"> <li>• If your business is an <b>incorporated company</b>, a current copy of the company's certificate of good standing.</li> <li>• If your business is incorporated in a <b>jurisdiction other than BC</b>, a current copy of the company's certificate of good standing.</li> <li>• If your business is a <b>registered partnership or sole proprietorship</b> in BC, a current copy of the BC Registry Services search showing the partnership registration or business name registration, as applicable.</li> </ul> |           |             |              |
| <b>2.0. BUSINESS ADDRESS:</b>   |           |             |              |
| Street:   |           |             |              |
| City:   | Province: | Country:    | Postal Code: |
| Telephone:  | (    )    | Cell Phone: | (    )       |
| Fax:  | (    )    | Email:      |              |

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| <b>3.0. MANDATORY BUSINESS REQUIREMENTS</b>  |  |
| <p><b>3.1. WorkSafeBC Coverage:</b> Under the <i>Workers Compensation Act</i>, 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.</p> <p>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?</p> <p>If no, confirm that you would obtain personal optional protection coverage for yourself, if eligible, if awarded a Contract.</p>                                       | <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A<br/>Assessment Reg. # _____</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No<br/><input type="checkbox"/> Not Eligible</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> |
| <b>4.0. EVALUATED COMPANY PROFILE, EXPERIENCE AND ACCOUNT MANAGEMENT REQUIREMENTS</b>  |  |
| <p><b>4.1. Offeror Profile &amp; Experience:</b> Please provide a short overview of the Offeror to a maximum of 1 page (single sided) that includes the following:</p> <ul style="list-style-type: none"> <li>• Offeror business overview, including size and background, vision statement and future plans;</li> <li>• A summary of the Offeror's expertise/experience with providing solutions and services similar in scope and complexity to the proposed Services and Solution;</li> <li>• A summary of customers both large, medium and small clients; and</li> <li>• Number of years providing solutions and services similar in scope and complexity of the proposed Services and Solution.</li> </ul> | <p>Confirm you have attached this information to your Proposal.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>  |
| <b>5.0. ADDITIONAL INFORMATION</b>   |  |
| <p><b>5.1. Conflict of Interest:</b> The provision of Services must not represent a conflict of interest.</p> <ul style="list-style-type: none"> <li>• 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. <ul style="list-style-type: none"> <li>○ If there is a potential conflict, provide a description as an attachment to your Proposal.</li> </ul> </li> </ul>  | <p><input type="checkbox"/> No Conflict<br/><input type="checkbox"/> Yes, there is a potential conflict of interest.</p> <p>If Yes, confirm you have attached this information to your Proposal.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>                               |
| <p><b>5.4. References:</b> Please provide a minimum of three references, preferably accredited institutions, clients and industry experts that the organization has collaborated with. 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.</p>  | <p>Confirm you have attached this information to your Proposal.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>  |