

**Request for Proposal
(July 4th, 2017)**



**Strategic Opportunities for Integrating Health and Transportation
Deadline: 13:00 EST, August 17th, 2017**

A SCOPE

The Transportation and Planning Standing Committee (TPRSC) and the Sustainable Transportation Standing Committee (STSC) have recommended a project that inventories, assesses, and identifies gaps to provide recommendations to strengthen the integration between health and transportation, and land use as it pertains to transportation systems. The final report will be reviewed by the Project Steering Committee, TPRSC, STSC and Urban Transportation Council (UTC) of TAC.

B BACKGROUND

Health elements include items such as air pollution, noise, physical activity, land use, etc. Transportation systems have been primarily designed for motorized vehicles and goods movement. Likewise, current land use planning practices and policies, including development review processes, have created development that enables travel by car more readily than walking, cycling, or other forms of active transportation. This significantly influences the way Canadians travel in their daily lives to the point where it may increase their risk of numerous negative health outcomes. Increasing opportunities for physical activity and reducing motorized vehicle use through enabling active and sustainable transportation, can reduce the risk for many chronic diseases, including obesity, type 2 diabetes, some types of cancer, osteoporosis, cardiac and respiratory disease, and injury.

Health status can be improved when transportation systems facilitate public, active and sustainable transportation, whereby physical activity is safely integrated into daily life and exposure to traffic-related air pollution and noise would be reduced. Furthermore, such an approach can result in a reduction of greenhouse gas emissions and congestion as well as improved productivity and sustainability. Land use planning, from a transportation standpoint, provides important considerations of how individual designs influence the other designs within a system.

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The link between health and transportation system planning has been recognized in a number of studies promoting potential the health benefits of active and sustainable transportation. Furthermore, health elements (and related determinants of health such as mental health and social well-being) are beginning to be considered in a range of local, regional, provincial transportation strategies and plans, technical documents and guidelines.

The paradigm has begun to shift towards health-promoting transportation systems and environments. There is an opportunity to further build health considerations into transportation policies, planning, infrastructure investment, land use planning, and design decisions.

C PROJECT OBJECTIVE

The primary objective of this project is to develop a report that inventories, assesses, identifies gaps, and recommends improvements to strengthen the integration of health (both physical and mental health) in existing transportation policies, guidelines and planning tools. The aim is to:

1. Assess the current integration of public health guidance in existing transportation engineering and planning practices on varying government levels; and
2. Recommend improvements to strengthen integration of all users of transportation systems, including pedestrians, cyclists, and persons of all ages and abilities within the land use and transportation framework emphasizing the public Right of Way environment, and to reduce and mitigate exposure to traffic-related air pollution and noise. An additional goal is to increase access to healthy, sustainable forms of transportation such as public transit and electric vehicles. Consideration should be given to ensure recommendations are capable of strengthening policies and practices for transportation authorities during the planning stages of the transportation system.

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D PROJECT TASKS

The consultant is expected to present the approach and methodology on how to best achieve the project objective and deliverables. The following elements should form part of the project methodology:

- Review the best practices of various jurisdictions across Canada and internationally, and/or organizations addressing the health implications associated with transportation, including any relevant documents, standards and designs that have been developed.
- Review existing and emerging national, provincial, local and international tools, guidelines, policies and practices; and identify opportunities to further strengthen the understanding and application of existing tools, guidelines, policies and practices to incorporate health considerations into transportation planning, design and decision making.
- Conduct stakeholder interviews, by phone or electronically, upon which content will be used to inform gap analysis. Local municipalities (and associated public health officers) are capable of providing specific knowledge that is more reflective of the different communities within Canada. The interviews will give local municipalities the opportunity to communicate the different transportation system processes and challenges specific to their region ensuring a good cross-section of municipalities with different geographic and population sizes, densities and different settings (rural/suburban/urban) are included.

Results of interviews can communicate:

- Local infrastructure and policy requirements to support healthy communities and healthy environments;
- Transportation system strengths, weaknesses, and opportunities specific to the geographic area;
- Emerging design trends in each of the different geographic areas;
- Considerations for context and demographics based on geographical areas;
- Considerations for winter or extremely cold weather;
- Opportunities, challenges and practices among municipalities of different sizes i.e. including communities less than 10,000 pop (rural), mid-size communities, and urban centres;

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- Understanding of key provincial design policies and the process involved in modifying these, identifying external factors related to the involvement of integrating health, transportation and land use and assess the effectiveness, or impact, of the integration process;
 - Examine the legislative framework for transportation systems (e.g. Environmental Assessment Process);
 - Benefits and risks of integrating health and transportation priorities into sustainable transportation planning;
 - Implementation considerations, collaborations, and partnerships during planning, design and construction; and
 - Lessons learned from previous initiatives integrating health into transportation planning, including the identification of key factors for successful integration, innovative approaches to overcoming barriers, etc.
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- Develop a synthesis of success stories or examples of initiatives either “in the works” or that have been implemented in Canada, Europe or other countries.
 - Conduct an economic cost benefit analysis to identify associated costs and benefits with the various approaches and design trends that integrate health and transportation, looking at examples from other municipalities. This can provide a resource for municipalities to strengthen their case in developing active and sustainable transportation infrastructure and programs.
 - Prepare a health benefits case from a transportation perspective, which includes the identification of how health is supported and/or impacted by different modes of transportation, as well as assessing the impact of integrating health, transportation and land use for different demographics (age, level of mobility, etc.).
 - Explore various means by which health considerations can be integrated into transportation planning, design and decision making and identify gaps in the current tools and practices (e.g. health impact assessments), as well as highlighting the potential reduction in health inequities for different groups associated with integration of health considerations through transportation and land use.
 - Review the extent as to how health impacts (including those relating to air quality, climate change, noise and sedentary behaviour) are integrated into and/or supported by the various Canadian transportation manuals and guidelines.

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- Suggest measures to strengthen the integration between health and transportation where gaps exist and recommend changes to practices and tools that may be adopted or adapted by Canadian provinces/communities of different sizes/regions, with suggested changes being separately organized for federal and provincial transportation authorities; major municipalities or urban centres; smaller municipalities or towns in rural areas; etc.
- Impartial recognition of advancements in transportation technology and the opportunities they provide for addressing health considerations.
- Develop recommendations/guidance to address the identified gaps and strengthen the integration between health and transportation for both rural and urban context of Canada. Recommendations should include suggested performance measures to evaluate each. Recommendations can consist of a variety of soft actions (i.e. future programming, road design workshops, curriculum changes, communication and engagement strategies for organizations) and hard actions specific to existing policy documents and design guidelines (i.e. technical suggestions made in accordance with the document that is being suggested for amendment) as appropriate, in responding to identified gaps. Next steps for implementation and prioritization of how the action items shall be completed should be included.

The final product of this project will be “Strategic Opportunities for Integration Health and Transportation” document.

It is expected that the consultant will have an understanding of the TAC *Geometric Design Guide for Canadian Roads* (2017).

The TAC Climate Change Task Force checklist should be referenced through the development of this report. The CCTF checklist can be found at:

<http://www.tac-atc.ca/sites/tac-atc.ca/files/site/doc/councils-commitees/climate-change-task-force/pdfs/climatechange-checklist.pdf>

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E PROJECT DELIVERABLES

Final deliverables must include:

- Development of a stand-alone document, *Strategic Opportunities for Integrating Health and Transportation*. The document should include an executive summary, table of contents, list of figures, list of tables, introduction and to address the identified gaps and strengthen the integration between health and transportation. All information compiled throughout the tasks of the assignment should be included, with appendices used for remaining information that is not appropriate to be included in the body of the report.
 - A sample table of contents is provided below, but is not be limited to the following:
 - Executive Summary;
 - Table of Contents, List of Figures, List of Tables
 - Introduction: Healthy active living and injury prevention, complete communities, link between traffic-related air pollution and noise to health, impact of climate change on transportation systems (and impact of transportation systems on climate change), road design needs, advancements in transportation technology, etc.;
 - Background: Road Design Profiles/System, Objectives, Relevant Transportation Definitions, role of TAC, Existing policies with design authority, etc.;
 - Review of best practices;
 - Challenges, Issues and Opportunities;
 - Recommendations (including method for identifying recommendations e.g. SWOT, PESTLE analysis);
 - Performance Measures;
 - Appendices of Detailed Analysis
- Regular meetings with the Project Steering Committee, both by teleconference and during in-person meetings at fall and spring TAC technical meetings.
- Lead a minimum of two (2) focused half-day webinar workshops designed to obtain stakeholder input on the draft recommendations produced as a result of the interviews and background research. The consultant is responsible for workshop preparation, workshop discussions related to technical topics, preparation of invites, hosting, any

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display material, or PowerPoint presentations. The consultant is also responsible for developing a technical memo documenting the results of the workshops.

- Monthly progress reports including information on study progress, task status, schedule tracking task completion, and note of any perceived challenges.
- Presentations of 100% final draft report findings to the Project Steering Committee (PSC), TPRSC, STSC, Urban Transportation Council, Chief Engineers' Council (CEC), and Environment Council (EC). Please refer to schedule in section F. It is expected that the consultant be present in person to give the final presentations, with committee meetings being held over multiple days during the technical meetings.
- Draft report milestones and literature review document as indicated.
- A 5 page primer that describes the integration of health and transportation from a broad perspective. This primer will be used as a reference document for the publication and will be made available through the TAC Library.
- PowerPoint presentation that covers integration of health and transportation from a broad perspective. Presentation should be roughly 45 minutes in length and intended for TAC's webinar program.
- Power Point presentation and the supporting documentation for each meeting.
- An original unbound (8½" x 11") master copy that complies with format and style specifications supplied by TAC (listed below). Electronic files of all text and figures and all other supporting material shall also be delivered to TAC as part of the contract. Electronic files must also comply with requirements listed below. All final products become the property of TAC.

The deliverables must comply with the TAC publication guidelines (http://tac-atc.ca/sites/tac-atc.ca/files/site/doc/projects/docs/tac_publications_guidelines.pdf) and be submitted in the following formats:

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DOCUMENT REQUIREMENTS

Please submit all of the following:

- Electronic version of the complete document and draft deliverables in Microsoft Word.
- Electronic version of the complete report (text, graphics, appendices, etc.) in Adobe PDF format
- Electronic version of the document in Adobe InDesign is requested for all projects.
- TAC will provide a template document, pre-set with TAC standards for fonts, headers and footers, the TAC logo, reference format, etc. Consultants are asked to maintain integrity with the standards provided in the template. Requests for variations from this should be discussed with the project manager.

FIGURES AND GRAPHICS REQUIREMENTS

- Electronic files for all graphics and images (e.g. tables, figures, charts, road signs, photos, etc.) used in the report must be provided to TAC with the final document. Text within a graphic or figure must be able to be accessed by TAC, to facilitate translation.
- Acceptable graphic formats are Adobe Illustrator or Adobe Photoshop. Embedded graphics in Word documents are not acceptable.
- Electronic files for road signs must be in a vector file format. Sign graphics must follow conform to the Standard Dimensions for signs found in the TAC Sign Pattern Manual. Colours used should match those colours found in the Sign Pattern Manual.
- Spreadsheets must be created using Microsoft Excel.
- Three or four colour photographs in TIF, JPG or EPS format, and with a resolution no less than 300 dpi, must be submitted for possible use on the publication cover. Credits shall be included with each photo. Rights for use of the photos, if required, must be obtained in advance of submission by the consultant.

All documents shall be submitted in English. All the source material, including charts, graphs and tables must be submitted in such a format that their content can be edited and translated.

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F PROJECT SCHEDULE

A schedule identifying minimum expected project milestones is included below:

<i>Milestone</i>	<i>Date</i>
<i>Proposal due</i>	<i>August 17, 2017</i>
<i>Contract Award</i>	<i>End of August, 2017</i>
<i>Consultant Initial Meeting in person with PSC during the fall Meeting (St. John's, Newfoundland)</i>	<i>September 22, 2017</i>
<i>Development of the literature review and best practices scan.</i>	<i>September, 2017 – February, 2018</i>
<i>Literature review/best practices scan document due</i> <i>Initial Table of Contents due</i>	<i>February, 2018</i>
<i>Consultant meeting in person with PSC during 2018 April Technical Meetings (Ottawa, ON)</i>	<i>April, 2018</i>
<i>50% Draft Report due</i>	<i>August, 2018</i>
<i>Consultant meeting in person with PSC during 2018 Fall Technical Meetings (Saskatoon, SK)</i>	<i>September, 2018</i>
<i>100% Draft Report due</i> <i>Primer due</i>	<i>February, 2019</i>
<i>Presentation in person of 100% final draft Report to PSC, TPRSC, STSC, UTC, EC and CEC during the TAC 2019 Spring Technical Meetings (Ottawa, ON)</i>	<i>April, 2019</i>
<i>Final Documents Submission</i>	<i>May, 2019</i>

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It is expected that the consultant Team Lead (i.e. Consultant Project Manager) will be present in room for the spring and fall project meetings. The consultant team is responsible to give the final presentations by a consultant team member in person to the listed committees. These committee meetings will take place over multiple days during the technical meetings. Teleconference meetings are to be scheduled between in person meetings as required surrounding discussion and deliverable schedules. The consultant shall allow for a minimum of 3 teleconferences to be held, one between each in person meeting, with allowance for additional teleconference meetings as required.

The Project Steering Committee may require several reviews as the document is being drafted. A minimum of three weeks should be allocated for this review prior to any meeting or teleconference. Proponents should give allowance for this time when planning their study completion schedule. The Project Steering Committee wishes to be an active participant in the study development, and therefore, will be interested in the Project Steering Committee/Consultant interaction proposed.

The Project Steering Committee will review each draft document, and the consultant will address all comments.

TAC Pooled Fund Project Guidelines, which are to be followed, can be found online at:
<http://www.tac-atc.ca/sites/tac-atc.ca/files/site/doc/projects/docs/pfp-guidelines.pdf>

This project will use a TAC SharePoint site for documentation transfer.

G LEVEL OF EFFORT

A maximum budget of \$130,000, plus applicable taxes, is available for this project. A project cost breakdown will be requested at the beginning of the project. Invoices will be permitted on completed and approved items. An amount equal to 10% of each invoice will be retained until

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the final deliverables have been completed and accepted by the project steering committee and approved by the Urban Transportation Council.

H PROPOSALS

To be considered for this project, proposals to undertake this work must be received **no later than 13:00 ET on August 17, 2017**. One (1) hard copy of the proposal should be delivered, as well as an electronic version in Microsoft Word or Adobe Acrobat format, to the undersigned with the below bulleted information while following the Evaluation Criteria found in Appendix A. Hard copy versions of the proposal can be received by mail after the deadline, so long as the electronic version is received by the deadline.

- **Scope and objectives** – The proponent is to demonstrate a clear understanding of the project’s objective/scope and is to describe the challenges that might be encountered in its execution.
- **Methodology** – The proponent is to describe the approach to be used to accomplish all components of the project. The proponent is to identify major tasks to be undertaken, all resources to be used, including sources of information and data, analyses and testing that are planned, and means to be used to make recommendations. Include a list of titles that will be reviewed during the literature review component of the project. Include a list of potential jurisdictions for investigation as part of the best practices review. Include a list of stakeholders to be interviewed as part of the literature scan and best practices scan and invited to hosted webinars. The project steering committee will add to the provided lists where appropriate. The proponent is to specify the number/type/size/location of municipalities which should be included (i.e. 5 of each small, medium, large sized cities located in North America and Europe to confirm in discussion with the project steering committee).
- **Work plan** – The proponent is to show the time budgeted for the various components of the project; is to include deadlines for approvals through the various stages, and is to show that adequate time and resources are devoted to all aspects of the project.

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Consultants are to create a draft table of contents to outline the topics covered and convey flow of the document.

- **Project team** – The proponent is to identify the project leader and team members (engineers, planners, and public health professionals, including sub-consultants) and is to include resumes with examples of similar projects that have been worked on.
- **References** – The proponent is to name three organizations for which they have completed substantial projects of a related nature. The proponent is to include the organization’s address and the name and telephone number of an individual familiar with the project.
- **Fees breakdown** – The proponent is to include a total project cost, a detailed fees breakdown of the various components of the job, an itemized professional fees list for each member of the team, and administrative, travel and other expenses and disbursements per stage. Professional fees per team member should be matched for each component of the job to show hours assigned by each team member per component. The fee schedule should consider that all work done in a respective fiscal year is to be invoiced by March 31st of that period.
- **Conflict of Interest Declaration** – The proponent is to include in the proposal a disclosure, including information on possible sources of significant financial or organizational conflict of interest in conducting the research. For example, under certain conditions, ownership of the proposing agency, other organizational relationships, or proprietary rights and interests could be perceived as jeopardizing an objective approach to the research effort, and proponents are asked to disclose any such circumstances and to explain how they will be accounted for in the study.

Proposals will be evaluated based on the methodology, team qualities, the expertise that will be brought to the project, and the time that will be invested as described and presented by candidates (evaluation criteria are presented in Appendix A). When a tie between top proponents is encountered, within 5 points of the average compilation of scoring from

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evaluations, the selection will be based on majority vote of Project Steering Committee members.

The main body of the proposal shall be no more than ten (10) pages (single sided). The cover letter, detailed pricing form, project schedule chart, organizational diagram and resumes should not be included in the page count.

Proposals shall make use of a twelve (12) point font, single spaced, with one (1) inch borders all around for the ten (10) pages of the main body of the proposal.

The Project Steering Committee reserves the right to interview selected candidates prior to selecting a consultant team. It should be noted that the working language for this project is English. If you wish to discuss this project in more details, contact the Project Manager listed below.

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I PROJECT ADMINISTRATION

A project manager will provide liaison between the Project Steering Committee and the consultant for this project. All administrative and technical inquiries should be addressed to the undersigned. The Project Steering Committee will be responsible for reviewing project deliverables and ensuring that the work of the consultant successfully accomplishes the objectives set out herein. A contract for consulting services must be established with the consultant before work can begin.

For more information, contact:

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Appendix A: Evaluation Criteria for Project Proposals

Evaluation Criteria	Weight
Understanding of project's scope and end-product requirements (Based on Scope and Objectives)	25
Approach and methodology toward development of a report (Based on Methodology)	35
Adequacy of work plan to meet required timeframes (Based on Work Plan and Fees Breakdown)	15
Qualifications and experience of consultant team and project coordinator and their proven competence in relevant related work (Based on Project Team and References)	25
TOTAL	100