# Questions and answers

View questions and answers about the Request for Proposals for building disabled person and whānau wellbeing facilitation services.

## Pre-supplier briefing questions

### Are family led (rather than disabled led) organisations eligible to apply?

Whaikaha is committed to investing in disabled, and whānau led organisations.

As such, we have updated the pre-condition to read as follows :

**Community agency/agencies’ activities and services (and this approach in particular) are governed, led and staffed by disabled people, tāngata whaikaha Māori, whānau whaikaha and / or family members of disabled people.**

There is a new question (weighted 15%, with other weightings adjusted accordingly) that reads :

**Please describe how your Community agency/agencies’ activities and services (and this approach in particular) are governed, led and staffed by disabled people, tāngata whaikaha Māori, whānau whaikaha and / or family members of disabled people.**

We look forward to receiving proposals from groups that meet all of the pre-conditions

We also note, family led groups may choose to partner with disabled people in order to ensure both disabled and whānau perspectives directly inform their work.

## Supplier Briefing 15 April 2024 – Questions and answers

### 1. What are the expectations around connecting with mainstream services?

We want to create more opportunities to connect with mainstream services, and keen to see through your RFP responses how this might be achieved, measured and what the outcomes will be for disabled people, tāngata whaikaha Māori and whānau.

### 2. What happens if there are further changes in purchasing rules after we’ve started this work, how do we manage this?

Whānau supported through these facilitation services will be well placed in terms of access to support from the facilitator to understand the purchasing rules.

If there are further changes, Whaikaha will work with the community agencies who are successful in securing contracts to ensure whānau have the information they need to make plans and enact decisions about their disability support funding.

### 3. The RFP talks about a focus on Māori, Pacific and rural communities, what about migrant and refugee populations?

The RFP evaluation panel is community based and will be interested in serving a range of communities. It would be great to receive a range of complementary responses to serve the whole community.

We do expect that any responses are able to articulate how they would serve tāngata whaikaha Māori, whānau whaikaha and Pacific disabled people and their families in culturally appropriate ways.

### 4. Regarding the pre-condition that you are not a respite provider. What about a situation for example if you partner with a provider who runs a holiday programme, does that then make them a provider of respite? Although technically they are not a respite provider?

Part of the intended outcomes is creating more options for families to take a break; this can include working with mainstream holiday programmes.

It’s important that the organisation receiving this funding to do this work does not have conflicts of interest (i.e. Do not directly benefit from the choices that people make through the planning and facilitation process)

### 5. What is the catchment area for Tairāwhiti? Is Wairoa included, we need to be clear?

Early in the workplans is the expectation that a relationship with the local NASC is formed, ensuring that whānau receive consistent, accurate information and referral pathways (both ways) are established.

The areas covered will be the same as the local NASC coverage. (in the case of Tairāwhiti, this will be the area that is supported by Your Way Kia Roha Tairāwhiti which does not include Wairoa – this area is supported by Hawkes Bay NASC)

### 6. Are we able to partner with Iwi?

Yes, disabled person and/or whānau led organisations are encouraged to partner with Iwi.

### 7. If we were to work alongside a holiday programme for example, can we train their staff?

Yes, this could be considered as meeting criteria under both workforce development and creating mainstream partnerships

### 8. In the past the DHB would run courses to train carers around the use of oxygen, tracheostomies etc as disabled people with health needs are not accepted anywhere unless they come with a trained support worker, but no one does this training anymore.

Could the funding be used for this training?

Work alongside Health NZ | Te Whatu Ora colleagues that results in more options and opportunities for disabled people with complex health needs is encouraged. We would not expect Whaikaha funding is used for resourcing training if it’s the responsibility of another agency.

### 9. On page 11. It says this is for facilitation not for directing funding the disabled person and family as they would use their IF or carer support.

However, with the funding changes they can no longer use their own funding so how will this now work?

At the request of the community, we have included a focus on approaches that benefit the whānau as a whole. This includes ensuring that family carers are valued and supported.

As facilitators build relationships with family members and help them explore options and opportunities available across the community, they will be able to identify opportunities to improve family wellbeing without the need to use IF or carer support.

### 10. Are you expecting multiple approaches for a region or one coordinated approach?

Some of the regions are large; while we encourage groups to collaborate and build off each other's strengths, we’re open to getting a range of proposals from within each region.

### 11. What outcome measures are you looking for? E.g., uptake of new users, outcomes of family sessions which are hard to measure e.g., mum returned to a part-time job?

What are you calling a result?

Different approaches will result in different outcomes. It’s important that people move past ‘planning’ and are supported to take action that makes a difference in their lives. Depending on the individual families worked with this will look different in every situation.

We ask agencies to identify how they will learn and continually improve their approaches. There will be a developmental evaluation occurring alongside this work which will support the agencies, as well as inform future investment.

### 12. Could a video of whānau talking about their experiences be used to show outcomes?

Yes

### 13. Is this just about respite or could it be used to support families with developing their good life plans?

This is about wellbeing, which will relate to the wider plans for a good life

### 14. Can you tell us how much money is available?

The funding available is for all three regions, and so rather than disclose the budget we really want to know what each community / agency wants to offer and how much this will cost.

If appropriate we can work together to negotiate to commission more or less of what is proposed (and the appropriate funding for the mutually agreed workplan).

### 15. What is the length of the contract?

13 months is the initial term so we need agencies to be up and running quickly.

### 16. In terms of partnering with other organisations, how do we do this or know who is out there?

For those who give permission we will share everyone’s contact details that have participated in these supplier briefings and encourage you to connect with each other.

### 17. Is there are number of people that need to be supported?

We will be guided by the community on this, as we’re aware from our engagement the different circumstances and approaches that may be appropriate for different communities e.g., those in rural locations are likely to need more 1:1 home visits and travel time to find and engage with whanau.

We have not indicated volumes as this will be different for different communities and the various approaches.

### 18. Where will referrals be coming from? NASCs? If you’re looking for people based outside the system how do we find them?

Early in the workplans is the expectation that a relationship with the local NASC is formed, ensuring that whānau receive consistent, accurate information and referral pathways (both ways) are established.

There will also be people who don’t engage with the system – this is why it is so critical that this is led by the local community, and trusted people within the community are key to making this successful.

## Further questions - Added 23 April 2024

### 1. Would referrals come through the NASC, or in our case here in Tairāwhiti, through ‘Your Way, Kia Roha'?

Early in the workplans is the expectation that a relationship with the local NASC and IF Host(s) are formed, ensuring that whānau receive consistent, accurate information and referral pathways (both ways) are established.

Referrals may also come from elsewhere in the community; for example, through Disability Information Advisory Services, or via other relationships that the community agency has developed locally.

### 2. In terms of budget, is leasing of a vehicle permitted?

Question continued: Here in Tairāwhiti, particularly up the coast a four wheel drive vehicle will be required to reach whānau living in rural/isolated areas. As you know, our roads aren’t good but this shouldn't stop us from delivering a service to all in our community.

Answer: Agencies need to include all their costs – if this includes a vehicle it should be included in the pricing template.

### 3. Would an organisation, that meets all requirements regarding location, aligned with the 3 Pou of Whaikaha, led/staffed by disabled people etc,

### be considered if they specialise in a specific, complex disability? For example, acquired brain injury caused by stroke, tumour, hypoxia etc.

Yes if you meet all the requirements then your agency would be considered

### 4. What are the disability supports available to children with neurodevelopmental disabilities and/or global developmental delays?

The disability supports available to children are dependent on their specific support needs. Please talk directly with the local NASC for further information on what supports might be available in your region.

### 5. How can the programme be led by the "community" when the community being served are children (many of whom are non-speaking) and their whānau?

Can we assume that "community led" in this sense is "parents and carers"?

Yes, that is correct.

### 6. Question on number 2 of the pre-conditions on page 17 of the RFP document.

Question continued: This question says "Community agency/agencies (including the parent and subsidiaries) have no conflict of interest with this service development, e.g., they do not allocate or host disability support funding, and they do not provide direct ‘respite’ services for disabled people and families."

Does this mean that we cannot contract a local organisation to provide facilitation services if they also provide NASC services or IF hosting?

Answer: One of the pre-conditions in the RFP relate to conflicts of interest; we have identified holding a disability support provider contract related to allocation or hosting of funds, or being a provider of respite as a conflict of interest.

This is because we need the whānau who receive the facilitation support to be able to trust the facilitator to provide impartial advice, and the facilitators need to be free (and be seen to be free) to provide impartial advice to any whānau.

### 7. What is meant by “led” and “staffed” by. Does it mean that people without disabilities cannot be employed by the agency or take on leadership roles unless they are family members?

Governance, leadership and staffing of the community agency, and this approach in particular, must include (but is not limited to) disabled people, tāngata whaikaha Māori, whānau whaikaha and / or family members of disabled people.