



TARANAKI DISTRICT HEALTH BOARD

## **APPLICATIONS FOR FUNDING**

### **McBroom Estate**

**Applications for funding from the Estate by applicants providing for health and disability needs in the Patea and Waverley areas for those communities**

Organisation(s) submitting application: \_\_\_\_\_

**Closing date for receipt of applications:**  
**4pm Saturday 29<sup>th</sup> May 2010**

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## A Background

This call for applications arises from orders made by consent by the High Court in Wanganui on 12 November 2003 pursuant to Section 66 Trustee Act concerning the management and administration of the estate of the late William Cunninghame McBroom ("The Estate").

## B Process

At the proceedings before the High Court it was agreed that:

- a) Taranaki DHB shall annually seek applications for funding from the estate by applicants providing for public health and disability needs in the Waverley and Patea areas for those communities by placing advertisements in local newspapers to close on or before 1 June each year.
- b) In any one year the funds available to Taranaki DHB for distribution shall be the funds paid by Public Trust or accumulated by previous distributions from Public Trust.
- c) Taranaki DHB shall allocate funds on the criteria in clause E(Evaluation Criteria) below
- d) Should Taranaki DHB in its absolute discretion receive and grant applications which total less than the fund available for distribution, then the Taranaki DHB may accumulate such funds in an interest bearing account. Such account shall be entitled "McBroom Estate" and shall only be available for distribution in terms of the Consent Orders referred to herein.
- e) Following decision as to allocation all parties who have applied shall be notified of the destination and allocation of funds in any one year.

## C Call for Applications

Taranaki DHB is therefore calling for applications for funding from the Estate by applicants providing for health and disability needs in the Patea and Waverley areas for those communities.

## D Timetable

The timetable for applications is outlined below.

Timetable	Process
01 May 2010	Call for applications advertisement process commenced.
29 May 2010	Closing date for applications.
By 01 July 2010	All applicants notified of funds allocation and destination.

## **E Evaluation Criteria**

All applications will be evaluated against criteria that are intended, by Taranaki DHB, to ensure that any services or projects funded are as closely aligned with community expectations as possible, and in this case, with the criteria agreed at the High Court for the annual distribution of the Estate funds:

The McBroom Estate Criteria that will be used are as follows:

- i. Applications shall only be considered if they show a benefit in the provision of health and disability needs of the Patea and Waverley communities.
- ii. The funding shall not be allocated for funding of services that the Government ordinarily funds.
- iii. Taranaki DHB shall allocate the funds equitably.
- iv. Taranaki DHB shall consider and allocate funds from the Estate annually and such allocations shall be made no later than the first day of July in any one year.

## **F Instructions for Submitting an Application**

It is appreciated that writing an application can take some considerable time. In order for applications to have the best chance of success, they **MUST** clearly address the questions asked so that the evaluation panel can have a clear idea of **WHAT** project is being proposed, and **HOW** it will be delivered. These are the most important points to note when writing the application.

- i. This invitation to submit an application is not an offer capable of acceptance by the applicant. No contract is formed in relation to the application process by reason of the invitation to submit an application, not from any application which might be made to provide the service or undertake the project.
- ii. No applications (part or whole) received after 4pm Saturday 29 May 2010 will be considered as part of this call for applications process.
- iii. Taranaki DHB will not disclose to third parties, other than those contracted to advise on funding decisions, and confidential or commercially sensitive information included in response to this call for applications unless authorised by the applicant.
- iv. Taranaki DHB reserves the right to fund all or part or none of the proposed projects presented via this call for applications.
- v. Taranaki DHB reserves the right should any application be successful to vary the project specifics, terms, conditions, volumes and or price by mutual agreement during the contract development process.

## G Submitting an Application

All applications are to be completed on the attached application template. Please contact Taranaki DHB for an electronic copy of the template. Electronic responses will be accepted until the date specified but must be accompanied by hard copy within 2 working days.

Please ensure all hard copy material is securely bound together, and pages are numbered. **One electronic copy and two paper copies of all material are necessary** (i.e. the original and a photocopy are acceptable). Please ensure applications are legible and preferably word-processed. The electronic copy can either be e-mailed or sent on disk or CD-ROM.

If you need advice about any aspect of the application process or criteria, please write (email, fax or post) your query to:

Peter Byarugaba  
Taranaki District Health Board  
Private Bag 2016  
NEW PLYMOUTH 4342

**Phone:** 06 753 6139

**Facsimile:** 06 753 7780

**Email Address:** peter.byarugaba@tdhb.org.nz

A written response will be made as quickly as possible after receipt of the query.

**NO verbal communication regarding this call for applications will be entered into.**

Completed applications should be sent to:

Peter Byarugaba  
Contract Manager  
Taranaki District Health Board  
Private Bag 2016  
NEW PLYMOUTH 4342

**Phone:** 06 753 6139

**Facsimile:** 06 753 7780

**Email Address:** peter.jones@tdhb.org.nz

**No later than 4pm, Saturday 29 May 2010**



## McBroom Estate Application Template

The application template has two parts, both of which must be completed for the application to be accepted:

### Part A ORGANISATION DETAILS & CONFIRMATIONS

Please provide the following details of your organisation:

**1.1 Full name of legal entity:** .....

**1.2 Legal Status:** .....

**1.3 Is the entity registered for GST:**

Yes  GST Number ..... No

**1.4 Details of Owners/Directors/Trustees**

Name	Owner/Director/Trustee/Other (please specify)

**1.5 Contact details:**

Address: .....

Phone Number: ..... Fax Number: .....

Contact Person: ..... Position: .....

E-mail: .....

**1.6 Organisation Chart**

**1.7 What health or disability services does your organisation currently provide? Please provide details as to what type of service(s) is/are provided, including (but not limited to) the location, target group(s) and how long the service has been provided.**

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**1.8 Describe the locality of the proposed service/project, (what geographical area ie. Patea and/or Waverley, will the service/project be provided to and what are the key geographical and demographic features of this locality).**

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**1.9 Please confirm that you meet the eligibility criteria for the McBroom Estate**

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**1.10 Please confirm that you are not seeking funding for a service or project that the Government ordinarily funds.**

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**Part B                      APPLICATION FORM**

**1.      PROPOSED SERVICE/PROJECT**

**1.1    Please provide a comprehensive outline of the service or project for which you are seeking funding from the McBroom Estate**

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**1.2    Please outline the expected timeframe for completion of the service/project**

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**1.3    Outline how you will monitor the outcomes of the service/project**

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**2. MONITORING AND QUALITY PROVISIONS**

**2.1 Does your organisation have:**

A code of consumer rights and responsibilities	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
A mission statement or service philosophy	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Service Standards	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Policy for handling consumer complaints	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
A procedure for staff appointments and appraisals	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

**You may be required to give evidence of these if requested by us.**

**3. FUNDING AND FINANCIAL**

**3.1 Please provide an indicative budget for the proposed service or project as follows:**

- Salary of staff .....\$
- Travel, accommodation .....\$
- Fees .....\$
- Equipment.....\$
- Any other relevant significant costs .....\$

**Total indicative budget of proposed service or project      \$**

Additional budget information:

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**3.2 Please describe the financial management processes and policies of your organisation(s) e.g. delegation, financial committee, frequency of financial reports prepared and table to Board of Trustees, whether the accounts are independently audited.**

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**4 ACKNOWLEDGEMENT & AGREEMENTS**

- 4.1 Submitting this application constitutes your organisation's offer to Taranaki District Health Board to provide the service/project described, at the funding specified.
- 4.2 Neither Taranaki DHB's issue of this Call for Application nor your response to it will create any obligation on Taranaki DHB to enter into any agreement with you or any third party.
- 4.3 You are responsible for all costs of submitting your application.
- 4.4 Taranaki DHB reserves the right to reject your application or terminate any offer/contract made to you, if any information provided by you is a false and/or an inaccurate representation.
- 4.5 By signing below, the signatory represents a person duly authorised to make this offer on behalf of the organisation(s) referred to in this application.

**Signed on behalf of the organisation(s) submitting this application:**

**Organisation:** .....

**Signed:** .....

**Full name (please print):** .....

**Position:** .....

**Date:** .....

**5. CONSENT FOR RELEASE OF INFORMATION**

**CONSENT FOR RELEASE OF INFORMATION**

The organisation(s) submitting this application acknowledge(s) that it/they give permission for Taranaki DHB to make enquiries or request from any person for any information (including personal information about anyone who might have a role in providing the service) which may have a bearing in its/their ability to provide the service proposed.

**Confidentiality of Information**

Subject to the paragraph below, the information contained in this application will be treated as strictly confidential by Taranaki DHB, its agents and its advisors. Taranaki DHB will not, except as required by law, disclose any of the information provided in your application to any other person without your prior written consent.

Taranaki DHB may however disclose the fact that the organisation(s) referred to above submitted an application to provide the service and in submitting that application the organisation(s) referred to above accepts that Taranaki DHB may disclose all or part of the information provided (including prices) and any subsequent contract with you, in response to a request under the Official Information Act 1982 without reference to you.

If you are not successful in the selection process, please advise whether you want us to **keep** it on our file for future reference or **destroy** it. Please select one option.

Keep  Destroy

**Organisation:** .....

**Signed:** .....

**Full name (please print):** .....

**Position:** .....

**Date:** .....

**PLEASE ENSURE THAT ALL SECTIONS HAVE BEEN COMPLETED**

**THANK YOU FOR TAKING THE TIME TO COMPLETE THIS APPLICATION**