

PART E – FORMAT INFORMATION REQUIRED

101. This section outlines the information to be provided by potential providers in their Proposals that will be assessed in the evaluation process.
102. The responsibility to provide evidence of capability to perform the required Services rests with the Potential providers. However, any Proposal submitted in response to this RFP will be treated as approval for the Ministry to make whatever searches and investigations it deems necessary in order to confirm the Potential provider's capability to provide the Services.
103. Formatting your Proposal in accordance with the sequence of questions in this Part E is a Minimum Standard. However it is **not** necessary to fit your response into the tables below. Potential providers may reproduce these tables in order to fully answer each question. Note however that a response is required for each question. Where a question is deemed not applicable please note this clearly.

RELEASED UNDER THE
OFFICIAL INFORMATION ACT

PART E – QUALITY EVALUATION - 70% of total

**PART E - Information about Potential Provider's (Minimum Standard) –
18% of Quality**

COMPANY PROFILE

	INFORMATION REQUIRED	PROVIDER INFORMATION
1	Organisation Name	
2	Legal Trading Name (if applicable)	
3	Postal and Service Address (contact address for all correspondence regarding this RFP)	
4	Contact person responsible for communication relating to this RFP	Name: Role:
5	Other contact details to be used for correspondence regarding this RFP	Telephone: E-mail:
6	GST registration number	
7	PerOrg or Provider number (for organisation's who have previously held a Ministry contract)	
8	Governance Structure	
9	Management Structure, including key managers relevant to delivery of the required Services	
10	Size of the organisation, including - staff numbers - annual turnover	
11	Outline and describe the proposed organisational structure specific to the delivery of the Services	

FINANCIAL INFORMATION		
	INFORMATION REQUIRED	PROVIDER INFORMATION
12	<p>Your Proposal should demonstrate the financial stability of your organisation</p> <p>For example, you could include an Annual Report or an independently audited financial statement or unqualified position statement from a Chartered Accountant</p> <p>Please also include an overview of other contracts held and services delivered by your organisation</p>	
INSURANCE		
13	Specify whether you have, or will obtain, adequate insurance to cover any liabilities that may arise from providing the required Services	
CONFLICTS OF INTEREST		
14	Detail any existing or potential conflicts of interest related to your Proposal and/or the provision of services, and how you would manage or resolve those conflicts.	
CONFIDENTIALITY		
15	If you consider any parts of the Proposal should be held confidential, you must indicate the reasons why	
16	Describe the arrangements you have to ensure client confidentiality (compliance with the Privacy Act [1993]; and Health Information Privacy Code 1994 and commentary [2008 edition])	

PART E – Delivery of Services – 24.5% of Quality		
	INFORMATION REQUIRED	PROVIDER INFORMATION
17	Describe your understanding of the requirements of this RFP, including your understanding of the target audience(s)	
18	Describe how the required Services in this RFP will be delivered in a culturally appropriate way to: - Māori clients, - Pacific clients, - Asian clients	
19	Describe how the required Services in this RFP will be delivered to people with disabilities	
20	Describe any alternative or innovative delivery Proposals you wish the Ministry to consider	
JOINT-VENTURES or SUB-CONTRACTING		
21	If you intend to enter a joint venture or employ sub-contractors in order to provide the Services, each such party should be identified clearly in your Proposal Please describe the relevant skills and experience proposed sub-contractors bring to the delivery of the Services	

PART E – Potential Provider’s Experience – 7.5% of Quality		
	INFORMATION REQUIRED	PROVIDER INFORMATION
22	Provide details of your experience in the provision of the required and / or relevant services, including evidence of successful implementation	

PART E – Capability of Potential Provider’s – 21.5% of Quality		
	INFORMATION REQUIRED	PROVIDER INFORMATION
23	Where known, provide a list of names, titles, roles, expertise and background experience for those proposed to manage and deliver the required Services Copies of curriculum vitae can also be included	
24	Where staffing is not known presently, please provide an explanation of where and how staffing will be recruited	
25	Explain your gambling harm minimisation workforce recruitment, training and retention pathways	

PART E – Potential Provider’s Alignment – 14% of Quality		
	INFORMATION REQUIRED	PROVIDER INFORMATION
26	Describe the alignment that exists between your proposed services to prevent and minimise gambling harm with the wider addiction treatment sector	
27	Describe how you will work with other providers to deliver all the purchase units? Evidence of relevant related examples is desired	
28	Describe how your Services will align at a local, regional and national level with the Preventing and Minimising Gambling Harm Strategy 201/11 to 2015/16	
29	Describe your organisation’s involvement in any regional provider collectives, including the name of organisations involved in the collective, the nature of the collective, and how the collective would add value to the delivery of the Services under this RFP	
30	Describe your organisation’s involvement in any Whānau Ora collectives, including the name of the collective and the organisations involved in the collective, and how the collective would add value to the delivery of the	

Services under this RFP	
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PART E – Outputs and Outcomes – 10.5% of Quality

	INFORMATION REQUIRED	PROVIDER INFORMATION
31	Describe any desired outputs and outcome measures that might be used to establish performance indicators and targets	
32	Demonstrate how you will ensure the Services to be provided will be of excellent quality For example, you could describe your internal quality assurance processes	

PART E – Requirements (Minimum Standard)

REFEREES		
	INFORMATION REQUIRED	PROVIDER INFORMATION
33	<p>Please include details of at least two referees that can be approached and for whom you have provided and demonstrated the abilities to provide these Services either in part or in full.</p> <p>Please include:</p> <ul style="list-style-type: none"> the name of the referee; the telephone number and email address of the referee's key contact person; an overview of the referee and its business; an overview of the services provided to the referee; the period over which the services were provided. 	
LEGAL OBLIGATIONS		
34	Confirm that you have completed and attached the "Statement of Compliance / Non-Compliance" attached as Appendix B.	
35	Confirm that you have completed and attached the "Request for Proposal" Declaration attached as Appendix E.	
36	Confirm that you have completed and attached the "Conflict of Interest Declaration for Potential Provider's" form attached as Appendix F.	