Expression of interest

National Pasifika Disability Leadership Group

Talofa, Kia Orana, Malo e lelei, Bula Vinaka, Taloha ni, Fakalofa lahi atu and Warm Pacific Greetings.

We are seeking 12 individuals from Auckland, Hamilton, Wellington and Christchurch to be part of the National Pasifika Disability Leadership Group (The Group).

There will be opportunities to develop and foster group members to raise awareness and advocate on behalf of Pacific people with disabilities, their family members and carers.

Background

Le Va has been contracted by the Ministry of Health Disability Support Services (DSS) Group to develop and deliver the new Pasifika Disability National Coordination Service. This service has been established to assist the DSS Group to implement the National Pasifika Disability Plan 2009-2013.

The Pasifika Disability National Coordination Service will contribute to achieving the vision of the National Pasifika Disability Plan 2009-2013, which is to ensure:

"Pacific peoples with disabilities can live in their home and take part in their community in the same way other New Zealanders do".

At Le Va, our vision is clear: vibrant Pacific leadership and well Pacific families. Our function is to grow the Pacific health workforce and enhance mainstream services so that they are more responsive to Pacific families. Our aim is to enhance the quality of services for Pacific peoples and their families.

The work of The Group will complement the work of Te Pou and the national training coordination and grant schemes (visit www.disabilityworkforce.co.nz).

Who should apply?

We would like to encourage:

- Pacific people with disabilities, their family members and carers
- Representation from the following areas, Auckland, Hamilton, Wellington and Christchurch.
- Organisations that advocate on behalf of Pacific people with disabilities, their family members and carers

Te Pou o Te Whakaaro Nui

LeVa Pasifika within Te Pou

Disability Workforce Development — Supporting wellbeing

What is the process?

Applicants are invited to complete the application form and submit by June 7th, 2010. A selection panel will then assess all applications against the selection criteria and appoint members for the group.

All applicants will be notified of the outcome by June 21 2010.

What will be expected if you are part of this group?

The Group will meet twice annually. All members are expected to attend these meetings.

Le Va will also provide opportunities for members to develop professionally as Disability champions. Group members may also be required to communicate with decision makers, community leaders and other relevant audiences.

We will ensure that any aids required to support individuals attending and participating in the meetings are provided.

Payment

It is expected that members from Government Organisations or Crown Entities will be supported by their organisations to attend the meetings.

All other individuals will be paid a standard sitting fee of $300 per full day or $150 per half day, in line with standard Government rates.

The costs of reasonable travel and accommodation will be organised and paid for by Le Va.

Date of first meeting

The first meeting will be held on July 1 2010. Venue and location has yet to be confirmed.

So if you are interested

Please complete the attached application form and submit by June 7th to:

Robert Muller

Le Va

PO Box 108-244, Symonds Street

Auckland

For any queries, you can contact Robert on robert.muller@leva.co.nz or 09 301 3729.

National Pasifika Disability Leadership Group Application Form

Personal details

Title	Given Name	Surname
Address		Age
Gender		

Phone	
Fax	
Mobile	
Email	

Are you a New Zealand citizen or permanent resident? (Circle one) Yes / No

Which ethnic group(s) do you identify with?

Tell us about your experience or knowledge of the challenges people with disabilities face.

Describe your involvement in Pacific cultural/community activities.

What other leadership roles have you held? (Please list)

Do you have any special requirements you need to assist with your attendance at meetings?

Yes / No

If yes, please explain:

Referee report

Please give the details of the one referee who we can contact and discuss your application if required.

Name			
Address			
Suburb		City	
Telephone		Mobile	
Fax			
Email			
Organisation			
Position			

Declaration

I confirm that the above referee is aware that their details have been provided to Le Va and I give permission for the above referee to be contacted for information regarding my suitability with regards to being a member in the National Pasifika Disability Leadership Group. I also confirm that I acknowledge that this Expression of Interest does not bind Mental Health Programs Limited in any way to accept me as a participant or make any payment to me whatsoever.

Signature _____

Date _____

Please attach a copy of your CV.