



BACKGROUND

Communities across NAN territory have been carrying crisis for far too long with supports that are inconsistent, temporary, or only arrive once the situation has already escalated. The impacts are not abstract. When crisis response is delayed or uncoordinated, communities are left to absorb the harm, and the same people who are already stretched thin are expected to hold everything together. This ongoing pattern has created a gap between what communities deserve and what they have been able to access in practice.

Functioning crisis supports are not simply an emergency measure. They are a core wellness function. When roles are clear, communication is organized, and culturally grounded supports are activated early, communities can protect lives, reduce trauma, and sustain continuity in care after the immediate event has passed. Over time, this strengthens trust, builds local capacity, and reduces the reliance on outside, last minute responses.

This work also supports a shift toward mutual aid across NAN First Nations. A shared crisis response template allows communities to support one another with readiness tools, coordination pathways, and practical resources that can be adapted locally. It creates the conditions for proactive mitigation by identifying risks early, planning before the tipping point, and building community led readiness rather than repeating reactive attempts to respond once crisis is already underway.

Developing a standardized and adaptable crisis response template and toolkit is aligned with the direction of Health Transformation. Health Transformation is about moving from fragmented systems to community led structures that are accountable, consistent, and grounded in self determination. Crisis response is one of the clearest places where this shift is needed now. By building a common framework that integrates community governance, cultural protocols, service coordination, and aftercare, NAN and its member First Nations can strengthen collective capacity to prevent harm, respond with dignity, and support long term recovery.

This RFP seeks a qualified consultant or team to design a Comprehensive Community Crisis Response Template and Toolkit adaptable to any type of crisis (mental health, environmental, leadership, housing, or social). The framework will align with NAN's Health Transformation process, uphold self-determination, and ensure that every NAN First Nation has access to culturally grounded crisis management supports.

SERVICES REQUIRED

Development of a Comprehensive and Culturally Grounded Community Crisis Response Template Requirements

1. Establishes a unified and culturally grounded framework for crisis prevention, response, and recovery.
2. Defines clear roles and coordination protocols across community, Tribal Council, and NAN departments.
3. Integrates both Western clinical care and traditional healing systems.



4. Embeds trauma-informed and community-led principles, ensuring local ownership.
5. Produces tools adaptable to all crisis types (mental health, environmental, leadership, housing, or public health).
6. Builds community capacity through training and readiness planning.
7. Aligns with ongoing Health Transformation standards, Safe People Safe Places Framework, and NAN's Community Wellness Framework.

Scope of Work

Requirements

A. Research and Environmental Scan

1. Review existing crisis response models from Wunnumin Lake and other NAN communities.
2. Analyze current departmental frameworks (Health Policy & Advocacy, Reclamation & Healing, Social Services, Education, Emergency Management, Infrastructure, crisis response).
3. Identify strengths, capacity gaps, and lessons learned from recent crisis coordination efforts.

B. Framework Development

Develop a Community Crisis Response Template composed of the following elements:

1. Governance and Activation Framework: Community leadership, NAN coordination roles, decision-making hierarchy, and communication protocols.
2. Crisis Action Plan Templates: Pre-formatted short-term (0 to 3 months), medium-term (3 to 6 months), and long-term (6 to 12 plus months) plans with activity checklists, resource allocations, and performance measures.
3. Integrated Resource Directory Template: To map available supports, service providers, and funding streams.
4. Cultural Protocol Integration Guide: Guidance on working with Elders, spiritual leaders, and traditional healers.
5. Budget and Funding Proposal Toolkit: Modular templates communities can use to request emergency or recovery funds.
6. Aftercare and Recovery Module: Post-crisis healing, debriefing, and mental wellness continuity supports.
7. Evaluation and Readiness Tools: Community readiness checklist, self-assessment indicators, and evaluation cycle.

C. Consultation and Co-Development

1. Conduct at least 15 engagement sessions (virtual and in-person) with selected First Nations, Tribal Councils, and NAN departments.
2. Facilitate 7 regional validation workshops to refine the framework.
3. Integrate cross-sector feedback (health, education, social services, crisis response, reclamation and healing, and infrastructure).

D. Implementation Toolkit

1. Develop facilitator and training guides for crisis teams.
2. Provide orientation materials and workshop modules for Chiefs and Councils, Health Directors, and frontline workers.



3. Design a communications and coordination playbook adaptable for any crisis situation.

DELIVERABLES AND TIMELINES

Deliverable	Description	Timeline
Inception Report	Workplan, methodology, and engagement schedule	Within 4 weeks of contract award
Draft Framework	Preliminary structure and templates	End of Month 4
Regional Validation Sessions	Two consultation sessions (virtual/in-person)	Month 6 to 8
Final Crisis Response Template & Toolkit	Fully integrated and formatted set of deliverables	Month 10
Pilot Training & Rollout	Testing and refinement in up to three communities	One Year
Final Presentation & Handover	Executive summary and leadership briefing materials	End of One Year

Project completion must occur within 12 months of contract signing.

GENERAL REQUIREMENTS

Requirements

1. Proven experience in Indigenous-led crisis management, emergency planning, or health systems design.
2. Strong understanding of First Nations governance, community processes, and cultural safety.
3. Experience in multi-sector coordination across health, education, and social services.
4. Demonstrated ability to produce clear, professional frameworks and templates.
5. Capacity for engagement facilitation in First Nations contexts.
6. Expertise in trauma-informed and culturally responsive practices.
7. Collaborative teams including Indigenous-owned firms, academic partners, and specialized facilitators are encouraged to apply.

PROPOSAL REQUIREMENTS

Submissions must include:

- Cover Letter outlining interest, approach, and understanding of NAN context.
- Company/Consultant Profile highlighting relevant experience.
- Detailed Workplan and Methodology.
- Project Team and Roles.
- Comprehensive Budget and Cost Breakdown (all-inclusive, HST and travel included).
- At least three (3) client references (NAN First Nations or Tribal Council preferred).



EVALUATION CRITERIA

Criteria	Weight
Understanding of NAN Context and Project Objectives	25%
Relevant Experience and Expertise	25%
Quality and Feasibility of Methodology	25%
Indigenous Engagement and Cultural Safety Approach	25%

PROJECT PRICING REQUIREMENTS

The total available budget for this project is up to \$800,000 CAD (inclusive of all professional fees, engagement costs, travel, and HST).

Budget must include costs for consultations, travel to remote communities, design and publication of materials, and training facilitation.

RIGHTS AND CONDITIONS

1. NAN reserves the right to accept or reject any proposal.
2. NAN is not obligated to award the contract to the lowest bidder.
3. All intellectual property resulting from this project will be owned by Nishnawbe Aski Nation.
4. The successful proponent must comply with all NAN confidentiality and data protection requirements.

