

Health Report

COVID-19 Māori Health Response – Initial Funding Package

Date due to MO: 15/4/2020

Action required by: 24/4/2020

Security level: IN CONFIDENCE

Health Report number: N/A

To: Hon Dr David Clark, Minister of Health
Hon Grant Robertson, Minister of Finance
Hon Peeni Henare, Associate Minister of Health

Contact for telephone discussion

| Name | Position | Telephone |
|--------------|---------------------------------------|-------------|
| John Whaanga | Deputy Director-General, Māori Health | 021 578 040 |

Action for Private Secretaries

Please:

Date dispatched to MO:

Forward the Report to Minister Robertson for signing

Return signed Report to the Ministry of Health

COVID-19 Māori Health Response – Initial Funding Package

Purpose of report

This report provides additional information about the utilisation of the initial funding package of the Māori health COVID-19 response for your sign-off.

Background

1. The group of Ministers with Power to Act on COVID-19 matters [CAB-20 MIN-0130] convened on 20 March 2020 at 5.30pm and, in accordance with their Power to Act, authorised the Minister of Finance and Minister of Health, in consultation with the Minister for Māori Crown Relations: Te Arawhiti and Hon Peeni Henare, to work through the detail of the proposed Māori Response Package and to take final decisions on this Package.
2. Following this, the initial funding Package for the Māori health COVID-19 response was agreed within the powers of Joint Ministers under CO(18)2 – Proposals with Financial Implications and Financial Authorities and drawn-down following the decision on 21 March 2020. A copy of this letter and the corresponding Cabinet Minutes is attached in appendixes one and two.
3. As part of this initial funding Package, the Māori health COVID-19 response funding was provided to the Ministry of Health in two parts to the total of \$30 million:
 - a. \$13 million from the COVID-19 Health Response contingency fund for Māori specific COVID-19 initiatives to be managed within the National Māori Health Services appropriation and
 - b. \$17 million within the previous allocation of \$238.8m to the National Public Health Services appropriation from the first announcement of the COVID-19 Health Response package can be used towards Māori specific activities.
4. In addition to the Ministry of Health lead initiatives, \$10 million was provided from the COVID-19 Health Response contingency fund for Whānau Ora agencies through Te Puni Kōkiri's Whakamahi i ngā Huanga a Whānau Ora (Commissioning Whānau Ora outcomes) appropriation. This made up the majority of the total \$15 million for the purpose of funding packages of care, access to food, hygiene and sanitation packs, essential supplies, warm clothing and access to quality health information.

Key points

5. The Ministry's Māori Health COVID-19 response is underpinned by the COVID-19 Māori Response Action Plan (the Plan) to ensure the health and wellbeing of iwi, hapū, whānau and Māori communities is protected during the COVID-19 pandemic. The Plan sets out a strategic approach and suite of actions to ensure the overall COVID-19 health

response uphold Te Tiriti o Waitangi and support the achievement of Māori health equity.

6. The Māori Health COVID-19 response to date has focused on a range of activity and engagement underway across the health and disability sector including Māori specific initiatives to support Māori providers and communities as well as critical public health initiatives such as influenza vaccinations, Community Based Assessment Centres (CBACs) and tailored communications for Māori.
7. Iwi, Māori providers and DHB General Managers Māori health have played a critical role in rapidly mobilising and implementing protective public health measures to mitigate the spread and transmission of COVID-19, particularly for kuia and kaumatua, individuals and whānau experiencing additional health and wellbeing needs.
8. A key part of this response is the two initial Māori specific response areas totalling \$13 million for Māori health and disability provider support (\$5 million) and Māori community outreach and support (\$8 million). These funds are targeted at meeting localised health and disability needs of Māori and jointly administered by the Ministry and Tumu Whakarae (DHB Māori Group Managers) through working with providers and iwi to identify where services are needed most. The funding allocation model is based on Māori populations due to the direct correlation between the Māori population with wider social determinants of health and wellbeing need.
9. Additionally, the Ministry is working with DHBs and other providers to tailor of the public health initiatives so that are responsive to Māori whānau, hapū and iwi. Key focus areas of this work include:
 - a. Public health messaging and communications for Māori through appropriate and trusted channels including a telehealth service with call back mechanism (\$4 million)
 - b. Māori-specific vaccination programme to address equity issues and a health promotion campaign (\$10 million)
 - c. Activate and establish Community Based Assessment Centres (CBACs) in Māori communities (\$3 million)
10. The Ministry is firstly focused on ensuring the general public health response caters to Māori health and disability needs. At the same time, gap analysis is performed to ensure the Māori health COVID-19 public health response funding is targeted at those areas where additional services are required to meet the needs of Māori. Following this approach, timeframes for implementation of targeted Māori public health initiatives will be subsequent to the general public health response.
11. Despite activities and initiatives are being established as part of the initial Māori health response for COVID-19, additional health and disability needs, and funding pressures are emerging for Māori whānau, hapū, iwi and communities.
12. There is substantial evidence from previous pandemics that Māori are both at additional risk and will be worse impacted by COVID-19. Both extension of current and additional initiatives will be required to ensure the risks and health and disability needs of Māori will be met as we move into the next phases of the COVID-19 pandemic.

Next Steps

13. The Ministry of Health's Māori response team will focus on implementation of the funding with DHBs over the coming month and developing next phase activities for the Māori COVID-19 Action Plan to addressing emerging risks and health and disability needs for Māori. We will provide you with updates in a further health report and as needed.

Recommendations

The Ministry recommends that you:

- a) **note** that on 21 March 2020 through Joint Ministers, Cabinet:
- i. **agreed** to draw-down \$13 million from the COVID-19: Public Health Response Tagged Contingency in 2019/20 to ensure that the initial health response to the COVID-19 pandemic delivers equitable health outcomes for Māori
 - ii. **agreed** \$17 million within the previous allocation of \$238.8m to the National Public Health Services appropriation from the first announcement of the COVID-19 Health Response package can be used towards Māori specific activities.
 - iii. **approved** the following changes to appropriations to provide for the decision in paragraph i above, with a corresponding impact on the operating balance and net core Crown debt:

| | 2019/20 \$m | 2020/21 \$m | 2021/22 and outyears \$m |
|----------------------------------|----------------|----------------|-----------------------------------|
| Vote Health | | | |
| Minister of Health | | | |
| Non-Departmental Output Expense: | | | |
| National Māori Health Services | 13.00 | - | - |
| Total Operating | 13.00 | - | - |

- b) **approve** the Ministry's Māori health COVID-19 response initiatives (\$30 million) **Yes / No**
- c) **approve** the funding methodology for the allocation of the Māori specific initiatives to DHB regions **Yes / No**
- d) s9(2)(f)(iv)

John Whaanga
Deputy Director-General
Māori Health
Date:

Hon Peeni Henare
Associate Minister of Health
Date:



Hon Grant Robertson
Minister of Finance
Date:

Hon Dr David Clark
Minister of Health
Date: 21 April 2020

Proactively Released

COVID-19 Māori Health Response – Initial Funding Package

Background

14. The group of Ministers with Power to Act on COVID-19 matters [CAB-20-MIN-0130] convened on 20 March 2020 at 5.30pm and, in accordance with their Power to Act, authorised the Minister of Finance and Minister of Health, in consultation with the Minister for Māori Crown Relations: Te Arawhiti and Hon Peeni Henare, to work through the detail of the proposed Māori Response Package and to take final decisions on this Package.
15. Following this, the initial funding Package for the Māori health COVID-19 response was agreed within the powers of Joint Ministers under CO(18)2 – Proposals with Financial Implications and Financial Authorities and drawn-down following the decision on 21 March 2020. A copy of this letter and the corresponding Cabinet Minutes is attached in appendixes one and two.
16. As part this initial funding Package, the Māori health COVID-19 response funding was provided to the Ministry of Health in two parts to the total of \$30 million:
 - a. \$13 million from the COVID-19 Health Response contingency fund for Māori specific COVID-19 initiatives to be managed within the National Māori Health Services appropriation and
 - b. \$17 million within the previous allocation of \$238.8m to the National Public Health Services appropriation from the first announcement of the COVID-19 Health Response package can be used towards Māori specific activities.
17. The following changes to appropriations with a corresponding impact on the operating balance and net core Crown debt were agreed to by Joint Ministers:

| | 2019/20 \$m | 2020/21 \$m | 2021/22 and outyears \$m |
|----------------------------------|----------------|----------------|-----------------------------------|
| Vote Health | | | |
| Minister of Health | | | |
| Non-Departmental Output Expense: | | | |
| National Māori Health Services | 13.00 | - | - |
| Total Operating | 13.00 | - | - |

18. Additional to the Ministry of Health lead initiatives, \$10 million was provided from the COVID-19 Health Response contingency fund for Whānau Ora agencies through Te Puni Kōkiri's Whakamahi I ngā Huanga a Whānau Ora (Commissioning Whānau Ora outcomes) appropriation. This made up the majority of the total \$15 million for the purpose of funding packages of care, access to food, hygiene and sanitation packs, essential supplies, warm clothing and access to quality health information.

Overview of the Māori Health COVID-19 Response

19. The Ministry's Māori Health COVID-19 response is underpinned by the COVID-19 Māori Response Action Plan (the Plan) to ensure the health and wellbeing of iwi, hapū, whānau and Māori communities is protected during the COVID-19 pandemic. The Plan sets out a strategic approach and suite of actions to ensure the overall COVID-19 health response uphold Te Tiriti o Waitangi and support the achievement of Māori health equity by:
 - a. Ensuing iwi, hapū, whānau and Māori organisations are supported to respond directly to the increasing health and other needs of their people due to COVID-19
 - b. Enabling iwi, hapū, whānau and Māori health organisations to provide appropriate services to their people and ensuring the response to COVID-19 utilises mātauranga Māori approaches in the design and delivery of appropriate services.
 - c. Ensuring Māori health equity is prioritised in the COVID-19 national response planning and implementation, including targeted information, guidance and support to iwi, hapū, whānau and Māori communities.
 - d. Ensuring Te Tiriti and Māori health equity responsibilities are met in the exercise of kaitiakitanga and stewardship over the national COVID-19 response.
20. To implement the initial response activities within the Plan, \$30 million was acquired for Māori specific initiatives (\$13 million) and tailoring of the public health response (\$17 million).
21. As per the Joint Minister's decision, the \$13 million is devoted towards two initial Māori specific response areas:
 - a. *Māori Health and Disability Provider Support*
This provides additional resources and support for Māori providers to reprioritise and redirect efforts towards COVID-19 including:
 - i. additional provider capacity in to meet demand,
 - ii. additional operating costs to ensure their services are tailored for COVID-19 and
 - iii. backfill and additional workforce as required.
 - b. *Māori Community Outreach and Support*
This provides additional funding for providers to deliver locally-specific support to kuia and koroua as well as for Māori who are self-isolating, unwell or in general need of assistance including:
 - iv. transport to and from essential health appointments or to provide access to medicines
 - v. support with the costs of prescriptions, general practice and other co-payments for health and disability services not otherwise covered by the health and disability system and
 - vi. other services as deemed necessary to prevent, mitigate and protect Māori whānau from the impacts of COVID-19.

Further details about how the Ministry developed the allocation funding model for these two Māori response areas is provided below.

22. Additionally, the Ministry is working with DHBs and other providers to tailor of the public health initiatives so that are responsive to Māori whānau, hapū and iwi. Key focus areas of this work include:

- a. Public health messaging and communications for Māori through appropriate and trusted channels including a telehealth service with call back mechanism (\$4 million)
 - vii. The Māori health COVID-19 communications campaign uses channels across iwi radio and provider networks. The campaign includes both national and regional activities to both connect at cross-agency level as well as with tailored local channels into Māori communities. This campaign is a collaborative effort across the Ministry of Health, DHBs, Iwi and other agencies and organisations.
 - viii. The Ministry is also working to establish appropriate call-services, including tailoring of Telehealth as well as other iwi call services, to deliver timely health advice to whānau, hapū and iwi – including for those who don't necessarily have reliable internet access.
- b. Māori-specific vaccination programme to address equity issues and a health promotion campaign (\$10 million)
 - ix. The Ministry is working to tailor the annual influenza campaign to increase the reach of vaccinations to Māori focusing on the priority group including our kuia and koroua and those with health conditions that them more at risk with regard to COVID-19.
 - x. Ministry is working with DHBs and their provider networks to ensure more equitable distribution to ensure supply reaches those areas with a high Māori need and identify where additional services is required to reach Māori. Funding will be targeted at innovative approaches, such as establishing pop-up and drive-through vaccination centres, to increase to increase Māori uptake of immunisations.
 - xi. The health promotion campaign is interlinked with the COVID-19 Māori communications campaign. The focus of the health promotion activities will be tailored to the phases of the overall COVID-19 response. For example, as part of the initial response, public health messages were developed in te reo for Māori whānau, hapū and iwi.
- c. Activate and establish Community Based Assessment Centres (CBACs) in Māori communities (\$3 million)
 - xii. The Ministry is working with DHBs, Māori providers and Iwi to implement this initiative. Work is underway to identify where gaps in access exist for Māori and establish appropriate testing sites or CBACs in those locations.
 - xiii. Communications to support whānau, hapū and iwi understand when, where and how to access the testing/CBAC is also underway.

The Ministry is firstly focused on ensuring the general public health response caters to Māori health and disability needs. At the same time, gap analysis is performed to ensure the Māori health COVID-19 public health response funding is targeted at those areas where additional services are required to meet the needs of Māori. Following this

approach, timeframes for implementation of targeted Māori public health initiatives will be subsequent to the general public health response.

23. The Ministry is engaged with Iwi, Māori providers and DHB General Managers Māori health who all have a critical role in rapidly mobilising and implementing protective public health measures to mitigate the spread and transmission of COVID-19, particularly for kuia and kaumatua, individuals and whānau experiencing additional health and wellbeing needs. Additionally, the Ministry consults with a Māori Reference Group made up of Māori health and disability providers, Iwi and other Māori organisations who provide advice on areas and how best to tailor the COVID-19 response for Māori.
24. Another part of the Ministry's response is a Māori focused psychosocial initiative which is being developed with funding through mental health and addiction services to provide tailored mental health support for Māori during the COVID-19 pandemic.

Funding allocation methodology for the \$13 million Māori specific initiatives

25. For the \$5 million Māori health and disability provider support initiative:
 - a. Funding is first allocated to 20 DHB regions using Māori population data as per Stats NZ population projections. This was determined as the appropriate approach due to the correlation between the Māori population with wider social determinants of health and need associated with wider economic, and social determinants of health wellbeing indicators (such as deprivation, household income, etc). The funding allocations to DHB regions is set out in Appendix Three.
 - b. The Ministry will work with Tumu Whakarae (DHB Māori Group Managers) to identify the suite of relevant Māori health and disability providers and how best to allocate the DHB regional quantum of funding to those providers. Consideration will be given to type of services they provide, the magnitude of complex and high needs populations being serviced, availability, reach, capacity, capability, recent service performance and the ability to support smaller providers in their local network.
 - c. Where providers cross regional boundaries, agreement will be made between those regions and with the Ministry regarding who and how much funding should be allocated. Any gaps identified will be addressed by the Ministry and neighbouring DHBs to identify solutions.
26. For the \$8 million Māori community outreach and support initiative:
 - a. \$7.5 million of this funding is first allocated to the 4 major DHB (Northern, Midland, Central and Southern regions using Māori population data as per Stats NZ population projections for the same reasons noted above. Allocation to the four regions is deliberate to support collaboration between DHBs and increase flexibility of the funding allocation at the local level for Māori communities. The funding allocations to DHB regions is set out in Appendix Three.
 - b. The remainder \$0.5 million will be held nationally by the Ministry, for Māori organisations that do not have a direct regional connection, in order to allocate funding as appropriate for specific areas.

- c. There are known challenges regarding access to health services, both in terms of geography and the differences in health need across New Zealand. To ensure the funding is applied to appropriate services in the shortest time possible to meet locally specific needs of Māori communities, particularly in those known high need provinces (e.g. Northland, Eastern BOP, Lakes, Tairāwhiti, etc.) - local knowledge and insight is required to inform the best use of funding.
- d. The Ministry will work with Tumu Whakarae (DHB Māori Group Managers) as the local knowledge experts to engage with providers in their region to identify:
 - xiv. initiatives within the major regions are deemed the highest priority to fund based on local knowledge of community needs
 - xv. how much to fund each provider/organisation for the initiative
 - xvi. additionally, where required, provide guidance to all relevant providers in the region of known service gaps in order to generate appropriate initiatives.

27. s9(2)(f)(iv)

Continuing the Māori health COVID-19 response

28. Despite activities and initiatives are being established as part of the initial Māori health response for COVID-19, additional health and disability needs, and funding pressures are emerging for Māori whānau, hapū, iwi and communities.

29. There is substantial evidence from previous pandemics that Māori are both at additional risk and will be worse impacted by COVID-19. s9(2)(f)(iv)

30. s9(2)(f)(iv)

Appendix 1: Joint Ministers letter for the COVID-19 Māori Response Package

 Maori response
COVID-19 appropriate

Appendix 2: Cabinet Minute for the COVID-19 Māori Response Package

 294772_COVID-19
Oral Item Minute.doc

Appendix 3: Funding allocation of the \$13 million specific Māori response funding to DHB regions

| | | | |
|--|-----------------------------|-------------------------------|---|
| Funding Initiative | | Māori Provider Support | Community Outreach & Support |
| Amount | | \$5,000,000 | \$8,000,000 |
| Contingency held by Ministry of Health | | \$0 | \$500,000 |
| Total for DHBs to allocate | | \$5,000,000 | \$7,500,000 |
| DHB District | DHB Māori Population | Amount | Amount |
| Northland | 68,630 | \$414,452 | |
| Waitemata | 63,390 | \$382,808 | |
| Auckland | 40,250 | \$243,067 | |
| Counties Manukau | 93,560 | \$565,003 | |
| Northern | 265,830 | \$1,605,331 | \$2,407,997 |
| Waikato | 103,510 | \$625,091 | |
| Bay of Plenty | 65,740 | \$397,000 | |
| Lakes | 42,580 | \$257,138 | |
| Tairāwhiti | 26,430 | \$159,609 | |
| Taranaki | 24,960 | \$150,732 | |
| Midland | 263,220 | \$1,589,570 | \$2,384,354 |
| Hawke's Bay | 47,550 | \$287,152 | |
| Whanganui | 18,640 | \$112,566 | |
| MidCentral | 38,720 | \$233,828 | |
| Capital and Coast | 37,580 | \$226,943 | |
| Hutt | 27,810 | \$167,943 | |
| Wairarapa | 8,790 | \$53,082 | |
| Central | 179,090 | \$1,081,514 | \$1,622,270 |
| Nelson Marlborough | 17,550 | \$105,983 | |
| West Coast | 3,890 | \$23,491 | |
| Canterbury | 56,020 | \$338,301 | |
| South Canterbury | 5,620 | \$33,939 | |
| Southern | 36,740 | \$221,871 | |
| Southern | 119,820 | \$723,586 | \$1,085,379 |
| Total | 827,960 | \$5,000,000 | \$7,500,000 |