PLEASE PRESS PAUSE ⏹ ⏸ ▶

What are we rushing back to?
The non-government charitable sector request:
Please Press Pause before we lose everything we've discovered together through this crisis.

Government

	Our old normal	Level 4	Our new world
Prevailing attitude of Government	We need to manage risk and make sure we don't get in trouble for any decisions we make.	Deeper level of listening and mutual respect. Forget risk just do it. Non-Government sector at the front line knows what's going on. Ask them what they need and give it to them.	New rules and expectation of how Government operates with community are put in place. We keep being strong, kind and united. The community ecosystem flourishes when system constraints are removed.
Minister meetings	Half hour meetings at Beehive, many fly. Minister often late. Sit in the waiting room accompanied by Ministry staff. Distracted. Bells ring. Not a lot achieved.	Meetings via Zoom from home offices. Much more relaxed and very focused. No distractions. Feels more personal. Feels more equal. Decisions made.	Our flying footprint nationwide is reduced. People get to spend more time with their families and in their own communities. Acceptance that Zoom is our new tool for face to face meetings rather than our default. Face to face meetings that involve travel only when necessary.
Meetings with ministries and officials	In Wellington. Many Government employees commute weekly at high financial and personal cost, taking up valuable housing stock. Government staff turnover an issue. Meetings more process than outcomes focused and very time consuming. Providers have to travel to Wellington for meetings.	Meetings via Zoom from home offices. Much more relaxed and very focused. No distractions. Feels more personal. Feels more equal. Decisions made.	Our flying footprint nationwide is reduced. People get to spend more time with their families and in their own communities. Acceptance that Zoom is our new tool for face to face meetings rather than our default. Face to face meetings that involve travel only when necessary.
Decision making	Slow - can take more than a year. Often siloed. Often fiscally driven rather than meeting need.	Fast - takes less than five days. We get things done quickly together. Very satisfying for both parties. Move to whole of Government.	Agile Government. Negotiation timeframes become reportable KPI. Cross-sector collaboration harnesses our respective areas of expertise.
Contracts	One to two years. Multiple negotiations year on year waste both funder and provider time. Creates staff anxiety every year re job security. Paper copies have to be initialed on every page.	Existing contracts rolled over. Practical decisions made. More time able to be devoted to front line. More budget certainty, less staff anxiety. Electronic signing processes in place.	Five-year contracts. Electronic processes. Flexi-fund provided as core component of contracting, supported by smart systems to enable person-focused support.
Sustainability	Some ministries have no annual CPI in contracts. DHBs pay variable amounts from nil to passing on what they receive. Significant time with negotiation. Advice always late, making budgeting and salary raises for lower paid frontline staff an issue and increasing tension with unions. Financial and operational risk burden that often falls disproportionally on NGOs.	Indication that there may be a consistent nationwide CPI increase applied to all Health contracts including DHBs for the 2020-2021 year.	Annual consistent CPI increase agreed and signaled early across all Government contracts every year. Risk is explored and shared.
Clauses and outcomes	All contracts are different. Some have unrealistic wash up clauses like no time allowed to recruit a new staff member. Outcomes are often unrealistic and drive providers towards easy to reach clients. Providers have demonstrated that they achieve better outcomes with less constraint.	Outcome contracts and wash up clauses suspended. Staff able to be directed to need. Providers supporting the most vulnerable in a new way. Flourishing of provider relationships and innovation.	FTE funding. Outcomes are evidence-based, realistic and shaped between Government and providers together.
Reporting and audits	Onerous meaningless reporting. Some providers data-rich but this is not being utilised. Multiple audits from multiple ministries every year. Some every six months, auditing the same domains. Significant wasted time from senior management and frontline staff directed to meet with panels of auditors. Sector frustrated. Has continually raised issue, but little movement in 20 years.	No audits except PPE processes and systems. All hours devoted to frontline work. Some requests for onerous reporting as time elapses.	Funders and providers work together to measure what matters. One audit to cover all Government contracts. Mandate given to existing Government owned audit agency. Telarc to work with the sector and drive this. Onerous reporting removed.

Vulnerable Populations

	Our old normal	Level 4	Our new world
Homeless: Rough sleeper population	Live on the street. Poor. Have to go to places to receive food. High users of all services. Cost per person $65K per annum. Addictions and access to treatment an issue.	Rapid resolution in crisis. Moved into motels. Free Wi-Fi, Sky TV and food delivered. Cost per person $55K per annum. The experience has given people a sense of home. Some decrease in addiction and desire for help.	Empty housing stock is explored and becomes part of the supply chain. Housing stock is affordable. Homelessness is rare, brief and non-recurring. Clean slate of Government debt.
Long term motel population *Transitionally homeless and those in emergency accommodation*	Individuals and whānau placed in long term motel accommodation due to crisis. Does not meet need as not designed for long term living. Children dislocated from school. Increased social issues.	Situation exacerbated in lockdown as unable to escape unsuitable housing to attend school or work. Increased social issues.	Long term housing increased through Kāinga ora and community housing providers accessing required capital to develop and sustain stock over time. Clean slate of Government debt.
People with mental illness	Struggle with poverty and daily living. Requesting more contact with services but staff time pressures mean this can be difficult.	Evening cooked meal delivered. Significant increase in wellness with increased nutrition. Fifty percent increase in whānau connection as many system constraints removed and staff able to spend time contacting whānau.	Additional flexible funding allows providers to purchase and provide nutritious main meal. Addressing system constraints means gains under level four are sustained. Clean slate of Government debt.
Corrections population	Released from prison to often temporary accommodation and support situations. Benefit and ID often not in place.	Benefits in place. Green card pre-loaded. Accommodation seen as a priority.	No one leaves prison without a sustainable housing and income plan. More deliberate engagement in study and employment in prison.
Technology	No support for phones, technology or data for vulnerable populations. Under investment in e-therapy. Difficulty in accessing staff like psychiatrists when we need them face to face, and rarely able to access online. Multi party whānau Zoom meetings difficult as access issues for all parties.	Clients all given phones, data packages and training in technology use. Providers supply key agencies with serial numbers. Business support through not accepting goods for resale. E-therapy value realised in lockdown situation and rapidly deployed to meets needs of different populations. Virtual consults with psychiatrists talking directly to the client and support staff when we need them, in settings like respite facilities. Multi party/whānau supports possible via Zoom.	Access to Wi-Fi and a device that has speech and visual connectivity is seen as a critical part of support. All vulnerable clients have access to technologies and data packages. This is managed through non-government provider contracts and provision of a flexi-fund. Providers supply key agencies with serial numbers. Business support through not accepting goods for resale. Evidence based e-therapies are supported post crisis to ensure access and wellbeing gains are not lost. Virtual consults become part of BAU, specialist staff readily available.

Where and how we work

	Our old normal	Level 4	Our new world
Offices	Predominantly office based.	Many people working from home. Essential workers, mobile staff and frontline staff celebrated and recognised.	Increased working from home. Centralised hubs which support the community ecosystem.
Mobile outreach	Limited cars. Staff have to book availability. Often in larger centres have to travel miles to pick up a car from the office.	All cars diverted so essential workers delivering mobile support have a car. No need to come to the office to pick up. Car is their new office.	Transport is built into contract pricing for frontline workers. Support for non-government organisations to access electric vehicles through lease or purchase.
Use of technology	Government agencies receive technology funding. Non-government providers don't. Training predominantly face to face. Core professional development unable to be accessed online, so rural providers have to travel large distances.	Government agencies receive technology funding. Non-government providers don't. Working together highlights very big differences in access to technology between Government and providers. Face to face training rapidly transformed to online. Core professional development made available online.	Technology is recognised as a core tool and providers are able to access funds to support staff and system development. Blended models of training. Gains made in online learning continue to expand.
Providers	Siloed and competitive. Driven by contracting models that pit them against each other. Short term contracts. Competitive contracting affects collaboration.	Examples of providers rapidly coming together. Collaborating to meet the needs of the most vulnerable. New developments including joined up referrals and delivery of services.	Community ecosystem models are supported.
Data	Non-government rich in data but not always fully utilised across the system.	Examples of shared data emerging. Eg. Creation of Covid-19 view right across the Housing First and Motel utilisation.	Resources to access shared systems and people to support the work of the non-government sector.
Response	Locked into traditional roles and boundaries of contracts	It's all about coming together and meeting the needs of the most vulnerable in the most effective way. Explosion of creativity.	Resource and hardwire joined up models of delivery that have proved effective.