

# Network Meeting



**Date: 24 November 2021**

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## Attendees

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- Ruth Jones
- Henrietta Harper
- Karim Baradi
- Rachel Mullins
- Paul Barclay
- Ally Calder
- Allison Nichols
- Catherine
- Lesley Campbell
- Karen Rickerby
- Michael Nollan
- Marty van der Kley

## Apologies

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- Nick Stoneman
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## Minutes

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### Welcomes and Introductions

Ruth welcomed everyone to the last DLC network meeting of the year with a karakia. Ruth called for everyone to introduce themselves, names have been noted in the attendance.

**Kōrero from Erin Black (System Transformation Programme Lead - MSD) and James Poskitt (Strategy Manager – Ministry of Health) re System Transformation (Ministry for Disabled people)**

James: The Ministry for Disabled people will come into effect from 1 July 2021 effect. James acknowledged the timeframe to get to this point in the Systems Transformation journey and the expectations around this from within the disabled community. Next 6-7 months is to get the balance right as the establishment team need to ensure that there is no destruction in the current support systems, and that the machinery surrounding the ministry continues to work as the new system gets up and running.

The critical message is, what is being established is a Ministry for all disabled persons and whānau, not just a ministry for disability support. There is still a lot of work to be done over the next two or three months about what this bigger role looks like, it is very clear that it needs to drive better outcomes for everyone. More about how the Ministry will reach out across the whole sector and lift those aspirations and better outcomes is to come.

They are Committed to a national implementation of the Enabling Good Lives (EGL) approach. The establishment unit (where James comes in) will ensure that they get to the 1st of July with the necessary processes and finances to operate.

Erin:

Erin is also Whānau Whaikaha – her daughter Ayla had an undiagnosed neuromuscular disorder. Erin's role as Programme Lead within Systems Transformation is to support progress to the national scaling of the EGL approach working towards the establishment of the new Ministry for Disabled people. Within the program, there two key work streams, people capability and capacity development and EGL operating and experience model.

The capability and capacity development has two key focus areas. The first one is building disabled and whānau leadership and the other is the leadership insights. For those familiar with some of the EGL Waitaha activities, there have been regional leadership groups in each of the prototyping demonstration sites which have provided them some great insights around what's working really well for people, how the team can help them to scale up into leadership, and most importantly, what they can take take from those learnings as EGL rolls out nationally

They are working more specifically on five kinds of areas of deliverables that were also approved in the cabinet paper in October which is the development of a partnership approach with the community, and monitoring evaluation strategies via an individual commissioning piece of work called commissioning for outcomes. In the new Year will be the time where the team will start reaching out to the community to start partnering with them. Right now, they are working towards before Christmas delivering what will be more of an illustrative plan and timeline for when people can expect to have that opportunity to come, as well as information on some of the next steps.

*Questions for James:*

Alison ND asked- One of the ones that came directly out of that experience as the comment that you made, James, that this is not just about CSS moving to MSA and in the same work, this has been really a particular issue because as there was you know, work put into identifying disabled people and tracking. What does that implicate, what are the implications of moving from DSS focused model to the population of disabled people for New Zealand - thoughts?

James answered: I think what it does is it makes the questions a whole lot easier because we're not limited by the DSS label. So, when we're talking about the fact that we're a lot clearer about who we mean, what it doesn't make easier though is the ability to identify or connect into things that count – exactly who those people are. And so, what we found through the whole COVID experience was one of the reasons we defaulted to the to the DSS group is that we know exactly who they are. And anyone who gets money is easy to identify in a system and so that way you can build our support. One thing that's important for the new ministry is population perspective - how do we actually identify and reach out and engage as people? Across the whole health system, how you

identify people, disabled people or people who need particular support is experience. That's kind of part of the challenge as well with 20 different databases

There was a follow-up question: What about looking at the disability survey?

James (and Erin) answered: It is one option. The ministry will be able to help around that visibility and equity for the population. The new agency will be able to really force that behaviour change and drive that this is something they will have to plan for. It is important to get disabled people a seat at the table so that they are a part of the conversation.

Ruth Asked: What does this mean for people in Canterbury? And what does this time look like for the next 6 months?

James Answered: This is what time looks like from an establishment process. There are critical pieces of work. One is the name of the Ministry. 3 different languages, 3 different names. This is an opportunity for engagement. Strong disabled people whānau leadership and governance aspect. Considering what the functions of the ministry will be consultation with Disabled Community.

Erin Answered: This is a partial answer, still need to make decisions around what it means for Waitaha. It is more of an introduced approach. What does that look like? These are all things that we'll be working through and seeking to answer in the next seven months.

Paul Asked: Currently we have a problem with three different systems. How is the ACC funding supposed to fit in this whole new ministry with consistent individualized access to funds.?

James Answered: it's something that is going to be grappling with in the immediate future setting up the next six months where we get the ministry up and running, but it's clearly something that needs to be addressed. And the way that we've been thinking about it so far, it's not so much about the same funding approaches, it's about how do we address the obvious inequities between the ACC system and the other systems. And so, thinking about kind of structural change is how we're looking at it.

James also noted that applications close soon for the roles in the establishment unit, if you would like to join let James know. Here are both James and Erin's email contacts

- [james.poskitt005@msd.govt.nz](mailto:james.poskitt005@msd.govt.nz)
- [erin.black@health.govt.nz](mailto:erin.black@health.govt.nz)

## Community Perspective with Mark Benjamin

Mark thanks us for this opportunity.

What is his perspective on the change? It is overdue, the system is broken. There is no need for the system to be a challenge for disadvantaged people on top of other challenges. It also opens up doors to people that may not have had these opportunities available before. It is

being to lift the lid on ableism, he does not think that some of us are ready for the insights that will come out of that. I think that it is also time for some disabled people and Whānau to toughen up because some of this is not going to be pleasant, but it is a chance for us to do better.

The biggest wins from this: For disabled people to be in governance roles in its truest forms. The ability to shape a new system. A direct pathway to ministers and officials. If the system under delivers then it is good for people to get frustrated as it calls for change, it can be energy to invest time into discussions etc.

Many people in the DC need to break and imagine what can be, to look at the building and create. For some of us, it is about changing our discussions. Got to make sure that the right people are walking through the door of opportunities. There are a lot of people who are tired, they have fought to get to this point. It is important that we look after them so that they can take a few more steps. Look for what people do, but most importantly how they do it. Invest in the people that you trust.

We need to be comfortable with being uncomfortable.

Q: How can we be involved

Response: You've got to be strategic and ask the right questions. I suggest that you come up with the solutions or the answers and not expect the system. We can't look to the people who have created the existing system to create a pathway out of what they know. It really relies on new voices, new ideas. It relies on people occupying spaces.

Even the most highly qualified officials, they've not been on your personal journey. It is about the community reclaiming itself.

All we need to do is insist on transparency and fairness.

### *Questions for Mark*

Lesley C Asked: How do you see the new system working with all disabled people having an equitable response? I agree that there are good people working in government that are so far from the community so how can we truly get a system that approaches disabled people in an equitable and fair, outcomes orientated manner?

Mark Answered: I don't know, but I do know that it can happen because I have seen glimpses of it. It requires three things- investment, it will cost money to create equity. Trust, you have good officials asking who we talk to etc., but they just need to trust what the people in the community can do this. It also needs an equitable response.

Paul Asked: The concern I have is the timeframe, would we get a better system if it was a longer timeframe?

Mark Answered: It is better to get something across the line before the system puts it down. We can adapt and improve as we go, we just need the governance in place. This will probably occur over the next 3-5 years.

Need to move away from asking 'what isn't working?' to 'what should be working?'.

Marty van der Kley Asked: In terms of right now the new ministry is being established, for those disabled people who have been overlooked within the current health system has there be considerations that there has been an oversight?

Mark Answered: It is not just supporting to the 1.1 mil disabled people, it must be to all of the systems, housing etc. included. The ministry has the mandate to influence the other ministries. Health outcomes is a huge issue, there are some ugly truths to COVID-19 with disabled people and without answers in some cases. How wonderfully bizarre that we get to create this new ministry in the midst of a pandemic.

Allison ND Asked: Following on from that. My concern is that no matter how you cut a pie there are always issues. Does doing this (creating the ministry) put other ministries in a worse position by taking their resources?

Mark Answered: There can be major unintended consequences. disabled people and Whānau have had to adapt constantly, often just to survive. So, the good thing is that if the right people have the decision-making authority, they will likely be more flexible than the current system. Mark understands the concern and part of it might be a lack of capacity in some sense. We need more people to step into more places where they can be equipped with the right skills.

Ruth thanked Mark and said that we will be inviting him back.

Consensus vote due to the content and length of today's meeting, was to hold another meeting to discuss the current situation for Disabled people with COVID-19. Ruth advised the DLC will be in touch with a date as soon as feasible to arrange interpreters etc.

Meeting Closed: by Ruth