

## **Briefing Note for Meeting with Minister Salesa 1<sup>st</sup> May 2020**

It has now been over 6 weeks since we collectively began a focused response to the COVID-19 crisis. We have arrived at a point where we are hearing from our members an ongoing high level of frustration with the Ministry's performance in relation to providing support and guidance to the sector. This is coming through avenues such as our weekly regional zoom sessions which consistently involve over a hundred participating organisations. This frustration is centred around a lack of detailed and unambiguous guidance on a number of critical matters and the delays in communicating this to the sector. This has been a recurring theme across the following issues:

### **1. PPE guidance for use and related supply issues**

We are now several days into level 3 and the promised disability specific guidance is still not signed off. In addition to this version there are two other guidance documents in circulation: The Ministry website information and the joint statement on PPE supply signed by the DHBs, unions and HCHA. Ambiguity about guidance remains and the supply chain is still not reliable across all DHBs. When updated guidance does emerge there will be a surge in demand for masks and gloves and a low level of confidence that the supply chain can promptly respond. Attached is a letter describing how the reality of the PPE situation has unfolded for one provider.

### **2. Family visits and expanding bubbles under Alert level 3**

Detailed guidance under level 3 was not communicated until over the weekend before level 3 started, too late for providers who had to figure this out in a vacuum during the week prior. Initial guidance focused almost entirely on welcoming family members to have contact. The final guidance remained ambiguous – it talks about the need for a cautious approach and then states that family visits should be encouraged. The PM has made it clear that any bubble expansion should be “small.” Doing so in a typical residential service is fraught with risk – for everyone involved.

### **3. The return of vulnerable workers under level 3**

Several days into level 3 there is still no guidance specific to our sector. The Ministry website talks about the safe return of vulnerable workers and the Work Safe website clearly states this workforce should remain at home. Again, providers have had to sort this in the absence of specific guidance and, not surprisingly, have adopted a very cautious approach.

### **4. The infection control audit**

Despite the provision of a disability specific checklist and guidance from DSS, DHBs embarked on a range of approaches and timelines. Many providers reported that receipt of the checklist from DSS was very close to the timing of the audit and did not leave time

to prepare. One provider tellingly observed that responding to the question on training in the use of PPE was decidedly tricky in the absence of having any.

#### **5. Reimbursement of extra-ordinary COVID-19 related costs under Level 4**

As a result of initial advice that these would be reimbursed and not to apply for wage and leave subsidies during this period there is still no sign of a process or a timeline for reimbursement. Providers have been advised to keep a track of costs incurred and these are significant in the absence of any subsidies. There is rising apprehension that reimbursement will turn into a “contribution” to extra costs.

#### **6. No commitment to reimburse additional costs under level 3 and beyond (apart from access to the essential workers leave subsidies)**

We have advised earlier that leave subsidies will not enable providers to retain enough staff to meet their obligations to provide a safe and quality essential service. The additional costs under level 3 are similar to level 4 and some will persist into level 2. Furthermore, many providers may not be able to comply with their employment agreements. This places providers in an untenable position – contracted to provide a safe and quality essential service for some of the country’s most vulnerable citizens – and not able to do so. The absence of a cost of living contract price uplift for a third consecutive year in the upcoming budget and/or yet another failure to get a residential pricing model implemented would further compound the financial crisis the sector already faces.

#### **7. Surety of funding is not straightforward**

While surety of currently contracted funding has been provided there is considerable confusion about how this has been calculated with many providers reporting that they are being short-changed. Individuals employing their own staff are unsure about access to leave subsidies and/or how further funding will be calculated and paid. Seeking clarification has been problematic with portfolio managers and NASCs not always aware of the details. The absence of portfolio manager roles at times adds to the burden of trying to find answers.

#### **In Summary:**

We recognise that some of the reasons for the failures outlined above are due to the difficulties of implementing national approaches across 20 DHBs and the challenges in getting disability specific matters signed off within the Ministry – in itself a long standing problem. However, this does not seem to explain the whole picture. We need to understand better why these failures are repeating and what structural or capacity issues they seem to be exposing. Continuing as we are cannot be an option. We look forward to a discussion on how these matters can be resolved in a timely way.

**Garth Bennie**

**Chief Executive**

**NZDSN**