

From: [Brian Coffey](#)
To: Out of scope [@health.govt.nz](#)
Cc: Out of scope; [ODI \(MSD\)](#)
Subject: FW: SWC paper - COVID Care in the Community, due tomorrow at 1pm
Date: Wednesday, 9 February 2022 11:51:12 am
Attachments: [image001.png](#)
[SWC paper - COVID Care in the Community 8 Feb.docx](#)
Importance: High

Kia ora Out of scope

Thanks for the opportunity to provide some rapid and brief feedback on this paper.

1. ODI welcomes the commentary in para 74 - the statement of risk is useful. It may be that the statement of risk is expanded to include “*there is also a risk of support for disabled people who rely on family caregivers for their support needs when those caregivers are required to self-isolate*”. Also to address the concerns raised in para 2 of this email response it is recommended that the following wording is included. *Within the scope of this paper it is difficult to provide all the information on how the significant risks for disabled people have been considered in the COVID Care in the Community Framework and initiatives. A supplementary paper will be provided for the Minister of Health, the COVID Minister and the Minister for Disability on (date) that provides further detail on how the issues for disabled people have and are being responded to.*

Disabled people	There remains significant risk for disabled people - high mortality rates associated with COVID-19 infections are reported for disabled people internationally. Ensuring accessibility of communications and support will be critical to supporting disabled people to isolate when needed. The lack of feeling safe is as relevant as being safe and will impact behaviours, in particular hesitancy in accessing COVID-19 testing. An additional risk identified is when family/whanau members who provide support for disabled family members need self-isolate. Within the scope of this paper it is difficult to provide all the information on how the significant risks for disabled people have been considered in the COVID Care in the Community Framework and initiatives. A supplementary paper will be provided for the Minister of Health, the COVID Minister and the Minister for Disability on (date) that provides further detail on how the issues for disabled people have and are being responded to.
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2. The substance of the paper does not provide any detail on how the risks identified for disabled people in para 74 will be responded to. These issues are raised below within the context that disabled people, their representative organisations, family/whanau of disabled people will seek

evidence and confidence that disabled peoples' needs have been well considered. It is very likely that these issues, quite rightly, will be raised with Minister for Disability Issues and other relevant Ministers in their interactions with the disability community. It is therefore suggested that in the paper a commitment is made to provide an supplementary paper for the Minister of Health, the COVID Minister and the Minister for Disability that provides a response to the issues highlighted below and how disabled people have informed the approaches proposed. For instance:

- Para 7 in the paper comments on the how ... *“A range of metrics and provisional targets were also agreed by Ministers in December 2021 to provide additional system surveillance and assessments of its effectiveness. These function to identify where the system is working well, where further resource may be needed, and how the model of care may need to shift to ensure people who are isolating are supported to do so safely.”* Question – it is assumed that these metrics will be broken down and reported on against ethnicity/gender and other important demographics. Will the metrics be reported/disaggregated by disability. ODI would recommend strongly that this occurs – it is an expectation of the disability community and an expectation of the New Zealand Disability Strategy and Action Plan. The Independent Monitoring Mechanism in their report *“Making Disability Rights Real in a Pandemic”* (January 2021) also articulates this expectation.
- Para 6 reports that “Cabinet agreed to a transfer of up to \$594.505m from the Covid-19 Response and Recovery Fund for the remainder of 2021/22^[1]. “ The associated footnote describes the entities/organisations that receive this funding - are disability organisations accessing this funding?
- Para 12 and 13 speak to *“facilitative workshops (that) have been held with different providers to clarify scope and required resourcing to integrate the clinical coordination and emergency management functions between the hub and the DHB, to reduce the risk of people falling through the gaps between services. Working in this way has fostered increased levels of local and regional interagency collaboration, which has been a positive outcome.”* Have disability organisations been involved in this work? How have disabled people, their representative organisations and family/whanau as well as disability service providers been engaged and informed the outcomes of these workshops.
- Paras 17 - 22 refer to the risk stratification tool. It would be helpful if the tool was provided as an appendix to the report. ODI would be interested in how disability/impairment is considered within the risk stratification tool and how the tool has been used to enhance the services and support provided for disabled people.
- Para 29 comments on the Co-ordination hubs being established in the Northern Region. Looking forward to seeing more detail in response to the highlighted [“What’s in place to prioritise disabled

people” in para 32.]

- Paras 48. to 52. Report on the provision of alternative isolation accommodation – it will be important to note how accessibility is considered and responded to.
- Paras 78- 80 detail the important communications and information approaches required to underpin the “Care in the Community” initiatives – it will be important to ensure that the communications work for disabled people and that they are translated into accessible formats. In para 80 it would be important to identify the disabled peoples organisations and other disability networks/organisations that are being engaged with.

Nga mihi

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