

# Real-Time Evaluation of the Care in the Community Welfare Response

## Cycle One Findings (April 2022)

### Care in the Community Welfare Response to Omicron

The Care in the Community (CiC) welfare response is a locally-led, regionally-enabled, and nationally-supported approach that helps people remain safe and supported while isolating due to COVID-19. The response supports the Government’s overarching COVID-19 Protection Framework objectives to **“Minimise and Protect”** by using a **“no wrong door approach”** to meeting households’ welfare needs. This is achieved through Regional Leadership Groups (RLGs) and Regional Public Service Commissioners (RPSCs) working in partnership with community providers and leaders, iwi, Māori, Pacific, and ethnic communities, the disability sector, Councils, and government agencies. Partnerships between regional leadership structures and communities allow for the welfare response to be delivered in a way that is tailored to local needs.

Government funding was provided to bolster existing community resources and ensure effective delivery of the response. This included:

- increasing the number of Community Connectors and discretionary funding to enable Connectors to meet essential wellbeing needs
- providing targeted food support for identified foodbanks and community food organisations
- resourcing RLGs and RPSCs to oversee planning, alignment, and delivery of welfare through existing regional partnerships, including specific funding to enable full participation of iwi in the RLGs.

### Evaluation in ‘Real-Time’

A Real-Time Evaluation (RTE) of the welfare response is underway to understand how regional coordination mechanisms and partnerships with the community sector are working in practice. A Working Group that includes representatives from across MSD are providing oversight and guidance for the evaluation.

To inform real-time decision making, rapid insights about implementation of the response are being captured from the perspectives of RPSCs, RLGs, community providers, and Community Connectors. This is being achieved through a combination of document review, attendance at existing coordination meetings, and interviews with key stakeholders.

Data collection for the RTE will occur across three cycles (approximately six weeks apart). The current findings are from Cycle One, completed in April 2022.

### Cycle One focused on answering three key questions:

- 1 **“What is the role and contribution of regional coordination mechanisms, community providers, and Community Connectors in the context of the welfare response?”**
- 2 **“What have been the key enablers and challenges in delivery of the welfare response?”**
- 3 **“What relationships and networks have been developed and how are they supporting delivery of the welfare response?”**

### The context

Patterns of demand for welfare support have been changing from week to week, placing significant strain on all those involved to keep pace with demand [2]. As detected in the weekly Pulse Check Survey, food is the most requested and provided form of support. Many households receiving support from community partners have never sought or received support from them before. Providers are also receiving requests from, and providing support to, people outside of their communities and regions.

Welfare checks undertaken by providers reveal a high level of unmet need and

A team of four evaluators conducted interviews and attended regularly occurring meetings to gain perspectives from:

**One** RPSC, **five** RPSC advisors, **one** RLG member, and a range of agency representatives (including from the Ministry of Social Development (MSD), the Ministry for Pacific Peoples, and NZ Police)

**19** community providers (including Pacific providers, Māori and non-Māori/non-Pacific providers, and providers of services for older people)

**Eight** Community Connectors (located across four different regions)

Findings were sense-checked with participants and a thematic analysis was completed to identify key themes relating to the evaluation questions. Insights from the interviews were triangulated with existing evidence (including findings from the weekly Pulse Check Survey) where possible [1].

## ‘Real-Time’ Findings

### A broad range of strategies are being used to ensure a tailored and timely response

#### Community Providers and Connectors

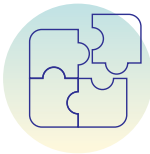
Providers have responded by pivoting planning and making tactical changes to ensure **“every door is the right door”** for families seeking support. This is being achieved through:

- Simplifying referral pathways for accessing support
- Shifting to a needs-based rather than a geographic approach
- Deliberate placing of Community Connectors across relevant services
- Weekly planning meetings to adjust rosters and delivery schedules
- Expanding volunteer networks, including drawing on families, churches, and sports groups
- Flexibly deploying their workforce and extending working hours
- Moving decision making processes to the frontline so that they sit with those “close to the ground”.

Several organisations have also invested in building the capability of their workforce.

Community Connectors are flexibly enacting a range of tasks:

- Planning and coordinating responses to referrals, including triaging, allocating, and establishing methods to track delivery of support



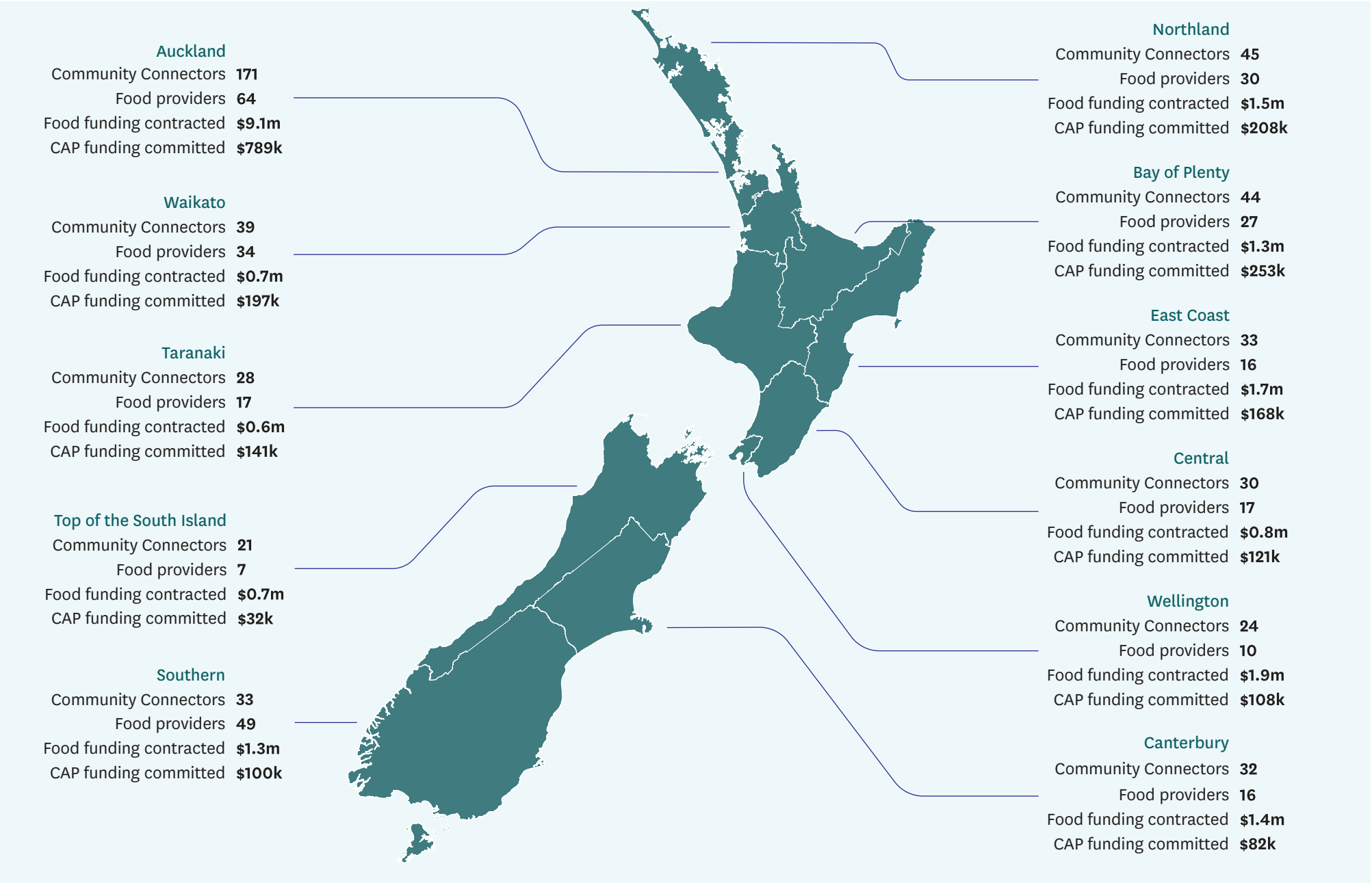
many people appear to be **“struggling in silence”**. The provision of food support has become a vehicle for surfacing a range of wider welfare needs in the community, including those relating to employment, education, insecure housing, and mental and physical health. Participants noted that individuals and whānau are experiencing significant anxiety and stress due to increased costs of living and changes in employment situations, impacting their ability to afford food.

- Addressing immediate needs of isolating whānau, particularly through the provision of kai and care packs personalised to the unique circumstances of each household
- Identifying the range of needs to be met for a particular person or whānau beyond their immediate need
- Building relationships with a) people/whānau/communities and b) local and national supports, including agencies, services, councils, NGOs, schools, churches, and marae – **“when we need something done, we know where to go”**
- Supporting people and whānau to connect with services and/or agencies they know can meet their needs and advocating for whānau until all needs are met.

#### Regional Public Service Commissioners and Regional Leadership Group members

RLGs have designed contextually relevant structures to enable more effective delivery of the CiC welfare response. This has included separating tactical/operational functions from strategic functions in some instances. Others have developed separate intelligence and communication functions, helping to reduce duplication of effort and improve alignment of activities.

Allocation in MSD regions (week ending 3 April 2022)



‘Real-Time’ Findings continued

Key partners in the welfare response have a shared understanding of their role, purpose, and value

Community Providers and Connectors

Community providers describe their role in the welfare response as a combination of meeting the immediate and urgent needs of whānau (particularly for food), providing pastoral care, and addressing enduring issues of hardship in their communities. In their view, **“we have one chance to meet a need, and we have to get it right.”**

The high level of demand observed in response to the Omicron peak has required Community Connectors to define their role in action. The flexible, non-prescriptive, nature of their contracts is perceived as invaluable,



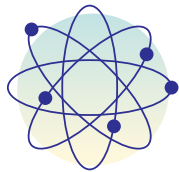
allowing Community Connectors to draw on their own experience and skills to determine how best to meet the needs of their communities. There are three key aspects of the role:

- 1) ensuring the immediate needs of families and whānau are met by connecting them to relevant agencies, services, and supports
- 2) serving as the primary point of contact for whānau needing additional wrap-around support once immediate needs are addressed
- 3) completing ongoing follow-up and advocacy to empower whānau and communities and enhance their wellbeing.

Regional Public Service Commissioners and Regional Leadership Group members

There is a shared understanding of the evolving role and purpose of the RLGs and the RPSCs. Their role is described as **“leading”, “convening”, “coordinating and connecting”, “relationship-building”, and “working cross-sectorally”** to deliver an effective response at the local level. Community providers affirmed that RPSCs and RLGs are enabling them to deliver timely support to those required to isolate.

Community Connectors are seen as a unique and integral component of the welfare response



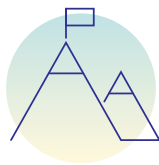
Community Providers and Connectors

Community providers describe Community Connectors as the ‘glue’ holding all the different parts of the welfare response together. Drawing on their existing skills, relationships and networks, and most importantly, their **“lived experience”**, they can meet the needs of communities in a timely and culturally appropriate way. Providers expressed that Community Connectors are experts at facilitating relationships between families and relevant government agencies and services. Community Connectors were considered to be **“game changers”** and **“lifesaving”**, enabling providers to engage with ‘hard to reach’ populations and alleviating workload pressures traditionally experienced by this sector – **“I feel the peace and comfort knowing that my boat is not drowning but floating on the surface of the water because of the Community Connector.”**

Community Connectors describe their role as distinct from other roles within their own organisations, with a primary focus on facilitating access to government agencies and services. Community Connectors ensure that when they connect people to an agency or service they are **“handed over to a person.”** They walk alongside people until their needs are met and reconnect wherever possible to make sure their wellbeing is sustained. Unlike other roles, there are no limits around who Connectors can support, and which agencies and services they will collaborate with to meet need. There is no allegiance to one agency because, for them, whānau are at the heart of the matter – **“it’s about being able to service our people because it’s a job that we love.”** Being from the community that they are supporting enables Community Connectors to build strong, trusting relationships with individuals and whānau – **“the key to it is whanaungatanga.”** Such relationships with whānau take time to build and maintaining these relationships is the ultimate priority of Connectors – **“we have people who will only trust us.”**



Despite successes, there are ongoing challenges, particularly for sustaining the momentum and wellbeing of the workforce



Community Providers and Connectors

Many community providers have been working to support their communities to manage the effects of COVID-19 since the first lockdown. Responding to the level of need and demand from the community, particularly in response to Omicron, has required intensive efforts from providers. Many described working long hours alongside Community Connectors to ensure the delivery of support seven days a week.

Community Connectors reported working long hours (12-hour days) to make sure community needs are met. This is in line with findings from the weekly Pulse Check Survey: in the week ending 3 April 2022, Community Connectors supported over 10,500 households. While this is less than the previous four weeks of the survey, where Connectors reported working significantly over capacity in many regions, the sector is still working at close to full capacity. Community Connectors and other staff within their organisations have been affected by COVID-19, reducing workforce capacity, and increasing the load on Connectors. There is a growing need for Community Connectors to begin prioritising their own wellbeing.

Regional Public Service Commissioners and Regional Leadership Group members

Some concerns were raised about the intensity and frequency of RLG engagements and the size of the groups; this might impact on sustaining commitment beyond the response. Members identified receiving frequent requests to collect information from community providers, with tight timeframes. This can strain relationships that have taken a long time to build. It is also not always clear to RLG members how the information requested is being used by decision makers within government agencies. Regional leadership members also reported issues with data accessibility and availability that make it difficult to feedback information to their communities.

While funding to support regional leadership structures has been helpful in implementing the welfare response, there are growing concerns about ongoing access to funding to support community resilience and recovery efforts – **“you can only get so far through relationships.”** RLG members noted there has been limited engagement with, and representation from, several priority groups, including youth and people with disabilities. Representation from some key agencies, including the Ministry for Pacific Peoples, has been limited due to their current capacity constraints. Lack of representation on the RLGs may have implications for how well the welfare response is meeting the needs of priority groups within each region.

Regional leadership members have focused exclusively on efforts to support community wellbeing since the beginning of the Omicron outbreak. As a result, they have been unable to focus on their own wellbeing, raising concerns about their ability to sustain the current pace of work in the medium to longer term.

Access to discretionary funding has been valued



Community Providers and Connectors

Access to discretionary funding appears to play an important role in enabling providers to respond more flexibly and creatively to meet the needs of their communities. The flexibility **“allows us to treat people like people”** with the fund used to help families with a range of costs, including costs for transport, rent arrears, urgent accommodation, and utilities.

Community Connectors described the fund as **“phenomenal”** and particularly helpful for supporting people who are ineligible for assistance from MSD. The discretionary fund enables Connectors to **“move in spaces where other agencies can’t”** and helps to build a relationship necessary for future work focused on empowering whānau. Community Connectors are careful not to draw too heavily on this resource, using it as **“a last resort”**. They recognise the fund is limited and are wary of creating dependence among whānau – **“we exhaust all options first and only then access this fund”**. This may explain why Provider Pulse Check Survey responses have consistently indicated that discretionary funding spend per household is lower [3] than expected. The cumulative total cost to date of discretionary funding used to support households in self-isolation for non-food essentials is \$13.9m [4].





Partnerships have been forged and strengthened, contributing to increased sharing of ideas and resources



Community Providers and Connectors

Community providers have increased their engagement with each other and with government agencies. They reported **“leaning on each other,”** expansion of their networks, and increased learning across organisations. Providers are working closely with a broad range of government agencies to give appropriate advice and guidance to their communities (e.g. MSD, Ministry of Health, Inland Revenue, Immigration New Zealand, New Zealand Police, and Ministry of Education). Improved communication with government agencies is helping providers to feel heard and supported. They appreciate the mandate to be more flexible in responding to community needs.

Relationships are at the heart of the work of Connectors, who expertly facilitate relationships between families and relevant agencies and services. This could be through helping people gather documentation and resources needed to access their full and correct financial entitlements from MSD, getting people into Emergency Housing, or linking them with a trusted budgeting service. Connectors also share resources with other organisations and groups who might be better placed to meet the needs of a particular family seeking support. Several Connectors have started to engage with other Connectors in their regions to celebrate successes and share resources, experiences, and knowledge.

Regional Public Service Commissioners and Regional Leadership Group members

RLGs and RPSCs report positive experiences of collaboration in the context of the response. New relationships are developing with Councils, ethnic communities, including the Muslim community, Kainga Ora, non-governmental organisations (NGOs), and Rural Support Trusts. RLGs and RPSCs particularly value the partnerships they have developed with agencies and organisations whose functions typically sit outside the scope of welfare provision. These partnerships have contributed to the sharing of new ideas, an improved understanding of what each agency does, and sharing of resources – **“a powerful forum has been created that has really joined up the public service.”**

The opportunity to engage with iwi is highly valued by regional leadership members. RPSCs and RLG members have been deliberate and thoughtful in setting up these relationships, for example, by having iwi co-chairs on the RLGs. Regional leadership members note access to an Iwi Partnership Fund has helped support iwi to have a voice at the table and facilitated their representation and engagement on RLGs, ensuring the **“right players [are] in the room.”** The funding has given iwi flexibility to determine how to engage and organise their contribution in their region. Perhaps most importantly, iwi engagement has highlighted the need to apply an equity lens to the welfare response.

There is increasing commitment and focus on supporting community recovery and resilience



In line with COVID-19 case numbers beginning to fall across most regions, all delivery partners are beginning to shift away from urgent responding to preparing for and mitigating the anticipated continued social and economic impacts of COVID-19.

Participants were unanimous in the need to maintain the Community Connection Service after the welfare response to support community recovery and resilience. Delivering the response has heightened awareness of the levels of hardship within their communities and addressing these is a top priority. For instance:

- Some regional leaders have identified the increasing costs of council rates as an area of concern and are working with local councils to alleviate the financial pressures these pose for their communities. RLG meetings are beginning to consider how unemployment and workforce constraints can be addressed, and how access to training and education opportunities can be facilitated.
- Community providers are starting to plan the delivery of future support that is focused on building resilience and self-sufficiency e.g. social enterprises facilitating access to healthy food, community gardens, and online food stores. They are leveraging new partnerships to refer to specialist services so that whānau needs are met in areas such as family harm, mental health, education, and budgeting/financial mentoring.
- Enhancing and sustaining the wellbeing of their communities has become a clear focus of Community Connectors. They are committed to using the networks they have developed through the response, and their strong relationships with MSD and the Ministry of Health, to enable whānau to access existing services. When speaking about their **“brothers and sisters”** at Work and Income, one Connector noted **“we are so appreciative of one another.”**

[1] The Pulse Check Survey is sent to providers once a week to report on the previous week’s operational delivery of food support and Community Connector services throughout New Zealand. It is important to note that survey findings are based off a limited number of provider estimates of their activity and spend.

[2] Provider monitoring data identified 110,229 cumulative requests for welfare support in the week ending 3 April 2022.

[3] For the week ending 3 April 2022, the average amount providers reported spending per household per week for support with non-food essentials was \$73

[4] The total budget set aside for discretionary funding to meet essential wellbeing needs is \$26.9 million.

Scope of Cycle One

The findings presented in this A3 represent the views of participants involved in Cycle One of the RTE.

Findings will be built on using information collected in future cycles of the RTE; these cycles will capture additional participant perspectives and focus areas.

A comprehensive evaluation that assesses the quality of implementation and outcomes achieved by the CiC welfare response is being planned. This will include engagement with recipients of the welfare response.

Next Steps

Cycle Two of the RTE is due to commence in May 2022. Consultations with stakeholders, to identify focus areas for further exploration in Cycle Two, are underway and decisions will be made in collaboration with the Evaluation Working Group.



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