

Working Paper 2017/04

Eight Existing Poverty Initiatives in NZ and the UK: A compilation

MCGUINNESS INSTITUTE
TE HONONGA WAKA



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Initiatives in NZ and the
UK: A compilation**

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Author	McGuinness Institute
Research team includes	Alexander Jones, Ali Bunge, Ella Reilly and Eleanor Merton
For further information	McGuinness Institute Phone (04) 499 8888 Level 1A, 15 Allen Street PO Box 24222 Wellington 6011 New Zealand www.mcguinnessinstitute.org
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Introduction

This working paper brings together a compilation of fact sheets intended to explore the landscape of existing initiatives that target poverty in New Zealand and the UK. Along with *Working Paper 2017/01 – TacklingPovertyNZ 2016 Tour: Methodology, results and observations* and *Working Paper 2017/03 – Key Graphs on Poverty in New Zealand: A compilation*, this working paper forms part of the background research for the Institute’s *Demarcation Zones for Public Policy Innovation* proposal and *Project TacklingPovertyNZ*. It is important to acknowledge the complexity of the issues that *TacklingPovertyNZ* and the Demarcation Zones proposal are trying to address. It is because of this complexity that the evidence-based research in the *TacklingPovertyNZ* working papers is so vital.

The fact sheets cover a variety of existing initiatives in New Zealand, such as placed-based initiatives, Whānau Ora and Contract Mapping, as well as information on the Greater Manchester Experiment and the UK Estate Regeneration Fund, which are experimental policy reforms in the UK. Each fact sheet provides a broad outline of the initiative and attempts to analyse its successes and failures where appropriate. It is our intention that this information will allow New Zealand to learn from existing achievements and criticisms, applying knowledge to our own work where possible. Both the *Demarcation Zones for Public Policy Innovation* and *Project TacklingPovertyNZ* seek to change the way we think about poverty, and we acknowledge the importance of understanding successes, both in New Zealand and internationally, in order to move forward.

More about the Demarcation Zones proposal

The Demarcation Zones proposal, presented to Prime Minister Bill English in late 2016, laid out an experimental approach to public policy reform in regions with some of the highest levels of deprivation and hardship in New Zealand. The proposed demarcation zones would be areas separated out from existing governance and funding structures in order to allow policy reform tailored to the specific needs of that region. The proposal was a response to the findings of the series of *TacklingPovertyNZ* regional one-day workshops in 2016. One such finding was that the status quo in the visited areas is not working. The other significant finding was that a one-size-fits-all approach will not achieve satisfactory results; initiatives aimed at alleviating poverty must remain localised and should allow for separate regions to experiment with policy that will work for their unique community and its challenges.

More about Project TacklingPovertyNZ

Project TacklingPovertyNZ was originally launched in 2015 with a workshop that brought 36 young New Zealanders together to discuss and formulate solutions for how to tackle poverty in New Zealand. Participants found that ‘assuming that one solution will work for everyone indicates a failure to address cultural disparities and injustices, and an ignorance of the diversity of our population’.¹ In 2016 the project expanded to include the nationwide series of workshops in which the 2015 workshop cohort assisted the McGuinness Institute. The workshop series aimed to provide a platform to better assess how poverty is understood within a multitude of different communities by directly working with the locals in those communities.

¹ TacklingPovertyNZ workshop participants. (2016). *TacklingPovertyNZ: Exploring ways to reduce poverty in New Zealand*, p. 7. Retrieved 10 July 2017 from www.mcguinnessinstitute.org/wp-content/uploads/2017/02/20170227-TacklingPovertyNZ-publication-final-WEB.pdf.

Place-based initiatives (PBIs)

Overview

Three unique PBIs have been established in New Zealand to date. They are assisted by an agency-neutral National Support Team and receive analytical and data support from the Social Investment Unit. The PBIs all use a social investment approach to improve outcomes for at-risk children and their families. Social investment involves using ‘the expert knowledge and judgement of local decision-makers, in conjunction with national level data and analysis in order to gain a much improved understanding of what the local needs are’.² Social investment also involves putting at-risk children and their families at the heart of service provision, and carefully evaluating results to ensure that local needs are being met and outcomes are improving. The three regions for the PBIs were selected because of their high numbers and high proportions of at-risk 0–24 year olds, and based on their local capacity and capabilities. There are varying levels of local government involvement in each PBI; the Deputy Mayor of Gisborne and District sits on the board of Manaaki Tairāwhiti and a council representative sits on the South Auckland Social Investment Board. PBIs are working locally with the Regional Economic Growth Programme, Whānau Ora and Children’s Teams.

² Bennett, P. (2016). *Social Investment Approach for Māngere Children*. Retrieved 14 March 2017 from www.beehive.govt.nz/release/social-investment-approach-m%C4%81ngere-children.

Table 1: Comparing three place-based initiatives

	Kainga Ora (Northland)	Manaaki Tairāwhiti (Gisborne and Wairoa)	South Auckland Social Investment Board (SIB)
Purpose	<p>Common purpose Kainga Ora aims to improve outcomes for at-risk children and their families by giving local leaders the flexibility and support to collectively tailor responses to what works in their specific communities.</p> <p>Specific purpose It will support local agency leaders in Northland to cultivate and build on what is already working well, and to provide additional capacity for these agencies to offer integrated services to 0-24 year olds who are at risk of poor outcomes, as well as their family and whānau.³</p>	<p>Common purpose Manaaki Tairāwhiti aims to improve outcomes for at-risk children and their families by giving local leaders the flexibility and support to collectively tailor responses to what works in their specific communities.</p> <p>Specific purpose It intends 'to provide the sector with locally focused united leadership that enables whānau perspectives to shape how services connect.'⁴</p>	<p>Common purpose The South Auckland SIB aims to improve outcomes for at-risk children and their families by giving local leaders the flexibility and support to collectively allocate public resources and make local investment (and disinvestment) decisions based on what works in their specific communities.</p> <p>Specific purpose It will achieve material and measurable improvements for 0-5 year olds and their families by using analytics, improving the sharing of information between agencies, considering interventions, building workforce capability, engaging with stakeholders and the community and evaluating results.⁵</p>
Initial target population	In the first year, Kainga Ora will focus on 570 children and young people, including their whānau, in Otangarei, Kaitiāia and Kaikohe. Eventually, however, the initiative will expand to co-ordinate and commission services across Northland for an estimated 6000 at-risk children and youth from 0-24 years old over five years. ⁶	50 at-risk and hard to engage with families.	The first area of focus for the South Auckland SIB will be approximately 1480 at-risk Māngere 0-5 year olds and their whānau/families.
Business case	Deloitte worked for the Ministry of Education (MoE) to produce the social investment business case after Northland was selected as a site for a PBI (based on the criteria of high numbers and proportions of at-risk 0-24 year olds and on an assessment of their local capacities, capabilities and willingness).	Selwyn Parata, Chair of Te Runanganui o Ngati Porou Trust Board, prepared the social investment business case presented to the Ministry of Social Development (MSD).	Counties Manukau District Health Board (CM DHB) prepared the social investment business case presented to the State Services Commission (SSC).

3 Parata, H. (2016). *Initiative to help Northland's most at-risk kids*. Retrieved 14 March 2017 from www.beehive.govt.nz/release/initiative-help-northland%E2%80%99s-most-risk-kids.

4 Jackson, L. (Email correspondence, 10 March 2017). Please note that as at of June 2017 Manaaki Tairāwhiti has not yet launched its website.

5 Nicholas, D. (Email correspondence, 31 March 2017). *South Auckland Social Investment Plan for the year to June 2017*.

6 Chamberlain, N. (2016). From the Chief Executive. *PreScribe: Northland District Health Board Staff Magazine 2016(3)*, p. 2. Retrieved 24 February 2017 from www.northlanddhhb.org.nz/Portals/0/Communications/Publications/1666%20NDHB%20PreScribe%20Magazine%20Q3-2016%20-%20EMAIL.pdf.

	Kainga Ora (Northland)	Manaaki Tairāwhiti (Gisborne and Wairoa)	South Auckland Social Investment Board (SIB)
Governance structure	Lead minister Louise Upston (Associate Minister of Education), previously Hekia Parata (Minister of Education)	Lead minister Anne Tolley (Minister of Social Development)	Lead minister Paula Bennett (Minister of State Services)
	Lead government agency MoE	Lead government agency MSD	Lead government agency SSC
	Independent Chair · Harry Burkhardt (Chairman of Ngāti Kuri Trust Board)	Independent Chairs · Ronald Nepe (Chief Executive of Te Rūnanga o Tūrangānui a Kiwa) · Herewini Te Koha (Chief Executive of Te Rūnanganui o Ngāti Porou) ⁷	Independent Chair · Sandra Alofivae (barrister, board member of Housing New Zealand [HNZ] and Fonua Ola [Pacific Social Service Network]) ⁸
	Local PBI Governance Group Kainga Ora was formed from the Social Wellbeing Governance Group, which was established in 2013 to address the rate of youth suicide in the Northland region. As well as Harry Burkhardt, members are · Nick Chamberlain (CEO, Northland DHB), · Hira Gage (Director of Education for Tai Tokerau, MoE), · Eru Lyndon (Regional Commissioner, MSD), · John Langley (Regional Director, CYF), · Nicole Devereux (Regional Manager, MSD), · Tui Marsh (Regional Manager, TPK), · Haami Piripi (Chair, Te Rarawa) and · Russell Le Prou (District Commander, NZ Police).	Local PBI Governance Group A new governance group made up of iwi, government and community leaders from the consolidated groups. As well as Ronald Nepe and Herewini Te Koha, members are · Rehette Stoltz (Deputy Mayor, Gisborne District Council), · Annie Aranui (Regional Commissioner, MSD), · Jim Green (Chief Executive, Gisborne DHB), · Mere Pohatu (Regional Manager, TPK), · Roy Sye (Regional Director, MoE), · Sandra Venables (Superintendent/District Commander, Eastern NZ Police) and · Rangi Manuel (Chief Executive, Te Whare Maire O Tapuwāe).	Local PBI Governance Group South Auckland SIB, which is hosted on behalf of member agencies by the CM DHB. As well as Sandra Alofivae, members are · Alastair Riach (Assistant Regional Commissioner Northern Region, DoC), · Di Grennell (Deputy Chief Executive - Regional Partnerships, TPK), · Eru Lyndon (Acting Regional Commissioner Auckland [& Northland], MSD), · Geraint Martin (CEO, CM DHB), · Greg Groufsky (Deputy Chief Executive, HNZ), · Hamiora Bowkett (Chief Strategy & Policy Officer, Ministry of Health), · Isabel Evans (Director of Education, Auckland, MoE), · Superintendent John Tims (District Commander Counties Manukau, NZ Police), · Karl Cummins (Director Auckland Strategy, MoJ), · Ken Allen (Regional Manager Community Investment, MSD),

7 (2016, September 30). Manaaki Tairāwhiti programme to help whānau. *Gisborne Herald*. Retrieved 14 March 2017 www.gisborneherald.co.nz/localnews/2491732-135/manaaki-tairawhiti-programme-to-help-whanau.

8 Bennett, P. (2016). *Social Investment Approach for Māngere Children*. Retrieved 14 March 2017 from www.beehive.govt.nz/release/social-investment-approach-m%C4%81ngere-children.

	Kainga Ora (Northland)	Manaaki Tairāwhiti (Gisborne and Wairoa)	South Auckland Social Investment Board (SIB)
Governance structure cont.			<ul style="list-style-type: none"> Patricia Reade (Transformation Director, Auckland Council) and Seti Talamaivao (Northern Regional Manager, MPP).
Annual funding ⁹	Funding of about \$1.6m per annum for two years has been allocated through Vote Education as seed funding and to support staff. ¹⁰	MSD will fund Manaaki Tairāwhiti \$376,000 for project management and administrative backing. ¹¹	\$1.5 million is allocated for 2016/2017. This is made up of \$0.5 million SIB running costs and \$1 million for interventions for children and their families.
Approach and priority actions	<p>Kainga Ora will partner with communities, government agencies, NGOs, iwi and community leaders to co-design responses for at-risk groups. This will ensure that wise investments are being made to support the Northland community while promoting a self-sustainable environment.¹²</p> <p>Priority actions for Kainga Ora are</p> <ul style="list-style-type: none"> Completing 570 profiles of children and young people; Creating Community Action Plans for Kaitaia, Kaikohe and Otangarei; Initiating integrated agency responses as children are identified; and Testing where there are gaps in agency service provision. 	<p>Manaaki Tairāwhiti has initially focused on bringing together 12 local governance groups to form a transparent oversight group that will strengthen social sector collaboration and reshape services. These groups include Safe Tairāwhiti Community Trust, Tairāwhiti Disability Working Group, Violence Free Tairāwhiti, Prisoner Integration Network, Ruia Project, SST and Youth Service Level Alliance Team.¹³</p> <p>The Manaaki Tairāwhiti group will develop community-led action plans and will have the ability to better tailor social services to the specific needs of their recipients.</p> <p>Priority actions for Manaaki Tairāwhiti are</p> <ul style="list-style-type: none"> Beginning 50 families project to identify service and practice improvements to deliver better results from existing services and Implementing a cross-agency triage process for Whangaia Nga Pa Harakeke, the Children's Team, and a Health initiative: E Tipu E Rea. 	<p>The SIB will seek three key outcomes for the first group of 0-5 year olds in Māngere:</p> <ul style="list-style-type: none"> Reduce substantiated physical child abuse, Reduce hospitalisations, and Increase ECE participation.
Results to date	Too early to ascertain.	Too early to ascertain.	Too early to ascertain.
Concerns raised	Too early to ascertain.	Too early to ascertain.	Too early to ascertain.

⁹ Please note: appropriations are held by the lead ministries for each PBI, as the PBIs are not yet set up as legal entities.

¹⁰ Ministry of Education. (2017). *Briefing for the Associate Minister of Education Hon Louise Upston*, para 90, p. 18. Retrieved 20 March 2017 from www.education.govt.nz/assets/Documents/Ministry/Publications/Briefings-to-Incoming-Ministers/Upston-BIM.pdf.

¹¹ Please note: the designated time frame for this funding is unknown.

¹² Parata, H. (2016). *Initiative to help Northland's most at-risk kids*. Retrieved 14 March 2017 from www.beehive.govt.nz/release/initiative-help-northland%E2%80%99s-most-risk-kids.

¹³ Jackson, L. (Email correspondence, 10 March 2017). Please note: as at June 2017 Manaaki Tairāwhiti has not yet launched its website.

Whānau Ora

Purpose

Whānau Ora is a nationwide initiative.

The Outcomes Framework confirms that Whānau Ora is achieved when Whānau are:

- self-managing
- living healthy lifestyles
- participating fully in society
- confidently participating in te ao Māori
- economically secure and involved in wealth creation
- cohesive, resilient and nurturing
- responsible stewards of their natural and living environments¹⁴

In 2009 the Minister for the Community and Voluntary Sector, then Tariana Turia, set up the Taskforce on Whānau-Centred initiatives. In 2010 the taskforce reported their findings to the Government in *Whānau Ora: Report of the Taskforce on Whānau-Centred Initiatives*.¹⁵ The taskforce's outcome framework acts as the central purpose statement of Whānau Ora.

Implementation of Whānau Ora has required two phases. Phase One from 2010–2014 involved re-orienting the way service providers operate by putting whānau at the centre. Phase Two, which is currently underway, involves moving decision-making powers to the commissioning agencies.¹⁶

Target population

As of 2015 the three commissioning agencies had provided services for 9408 whānau. In total, this equates to 49,625 people.¹⁷

Currently around 35% of families receiving support from Whānau Ora are from non-Māori ethnic groups.¹⁸

Governance structure

Whānau Ora is led by TPK in partnership with MSD and MoH. Strategic oversight is provided by the Whānau Ora Partnership Group, established in 2015 and 'made up of six Iwi Chairs Forum representatives and the Ministers of Finance, Education, Health, Social Development and Economic Development'.¹⁹ The Partnership reports to the Minister for Whānau Ora, Te Ururoa Flavell, who sets Whānau Ora priorities. TPK then contracts three non-government commissioning agencies: Te Pou Matakana for North Island whānau, Te Pūtahitanga o Te Waipounamu for South Island whānau and Pasifika Futures for Pasifika families.²⁰ The commissioning agencies work with provider collectives in their respective regions. Providers in these collectives can be NGOs or government organisations; any existing provider can apply to work under Whānau Ora but has to gain consent from the commissioning agency in that region before becoming official. These regions are TPK's ten regions of service delivery and each region also has a Regional Leadership Group. Each group comprises community representatives, an official from TPK and a representative from a district health board.²¹ On the final level of governance are Whānau Ora navigators (Kaiārahi) who personally work with whānau to deliver results.

Annual funding

TPK formally administers funding for Whānau Ora by delegating funding to the commissioning agencies in order to invest in communities.

14 Te Puni Kōkiri. (2016). *The Whānau Ora Outcomes Framework: Empowering whānau into the future*, p. 1. Retrieved 24 February 2017 from www.tpk.govt.nz/docs/tpk-wo-outcomesframework-aug2016.pdf.

15 Ministry of Social Development. (2009). *Whānau Ora: Report of the Taskforce on Whānau-Centred Initiatives*. Retrieved 24 February 2017 from www.msd.govt.nz/documents/about-msd-and-our-work/publications-resources/planning-strategy/whanau-ora/whanau-ora-taskforce-report.pdf.

16 Te Puni Kōkiri. (2017). *About Whānau Ora*. Retrieved 13 March 2017 from www.tpk.govt.nz/en/whakamahia/whanau-ora/about-whanau-ora.

17 Te Puni Kōkiri. (2015). *Frequently Asked Questions*. Retrieved 13 March 2017 from www.tpk.govt.nz/en/whakamahia/whanau-ora-old2/frequently-asked-questions.

18 See Footnote 17.

19 See Footnote 16.

20 See Footnote 16.

21 Controller and Auditor-General. (2015). *Whānau Ora: The first four years*, p. 13. Retrieved 24 February 2017 from www.oag.govt.nz/2015/whanau-ora/docs/whanau-ora.pdf.

Each commissioning agency must submit annual investment plans to TPK that detail the programmes to be commissioned and the results sought by those activities.²²

Whānau Ora providers receive different funding according to the region they are active within.²³ Until 2015 nearly a third of funding was spent on administration costs, which included research and evaluation.²⁴

As at June 2016, total funding for Whānau Ora commissioning activity was set to be \$68,981,000 for the 2016/17 financial year.²⁵

Approach and priority actions

Whānau Ora uses a model of delegation among multiple groups and agencies to carry out their programme. Rather than focusing on individuals and their problems, Whānau Ora improves individual wellbeing by supporting the whole whānau. This is achieved primarily in the relationships between whānau and the navigators. The navigators support whānau to make plans based on their specific needs and aspirations and then connect them with the relevant networks of service providers. The success of Whānau Ora is measured against the outcomes in the purpose section of this fact sheet.

Results to date

Statistics from Phase One of Whānau Ora indicate that collectives and navigators were generally achieving more than 50% of their goals.²⁶ The percentage of whānau reporting improvements in long-term outcomes was greatest in education/training (62%) and healthy eating/exercise (48%).²⁷

Concerns raised

- Critics of the initiative question its accountability and capacity for success. However, these claims can be countered by the results presented in the publicly available reports on the performance of Whānau Ora.²⁸
- Nearly a third of total spending on Whānau Ora in the first four years was spent on administrative costs and the Auditor-General believed that 'Te Puni Kōkiri could have spent a greater proportion of funds on those people – whānau and providers – who Whānau Ora was meant to help'.²⁹
- The inconsistent explanations of the aims of the initiatives in the Whānau Ora programme also came into question in the Auditor-General's report.³⁰

22 Te Puni Kōkiri. (2015). *Frequently Asked Questions*. Retrieved 13 March 2017 from www.tpk.govt.nz/en/whakamahia/whanau-ora-old2/frequently-asked-questions.

23 Controller and Auditor-General. (2015). *Whānau Ora: The first four years*, p. 24. Retrieved 24 February 2017 from www.oag.govt.nz/2015/whanau-ora/docs/whanau-ora.pdf.

24 Controller and Auditor-General. (2015). *Whānau Ora: The first four years*, pp. 4–5. Retrieved 3 March 2017 from www.oag.govt.nz/2015/whanau-ora/docs/whanau-ora.pdf.

25 Te Puni Kōkiri. (2016). *Annual Report for year ended 30 June 2016*, p. 26. Retrieved 3 March 2017 from www.tpk.govt.nz/documents/download/1505/tpk%20annualreport-30june-2016.pdf.

26 Te Puni Kōkiri. (2015). *Whānau Ora Annual Summary Report: 1 July 2014 – 30 June 2015*, p. 26. Retrieved 24 February 2017 from www.tpk.govt.nz/documents/download/1665/tpk-whanau-ora-annual-summary-report-2014-2015.pdf.

27 Te Puni Kōkiri. (2015). *Whānau Ora Annual Summary Report: 1 July 2014 – 30 June 2015*, p. 27. Retrieved 24 February 2017 from www.tpk.govt.nz/documents/download/1665/tpk-whanau-ora-annual-summary-report-2014-2015.pdf.

28 Waatea News. (2016). *Whānau Ora critics get it wrong*. Retrieved 14 March 2017 from www.waateanews.com/waateanews/x_story_id/MTM5NjQ=/Whanau-Ora-critics-get-it-wrong.

29 Controller and Auditor-General. (2015). *Whānau Ora: The first four years*, p. 5. Retrieved 3 March 2017 from www.oag.govt.nz/2015/whanau-ora/docs/whanau-ora.pdf.

30 Thomas, G. (2015). Watchdog criticises Whānau Ora. *Radio New Zealand*. Retrieved 14 March 2017 from www.radionz.co.nz/news/te-manu-korihii/272910/watchdog-criticises-whanau-ora.

Contract Mapping

Overview

‘Contract Mapping: Mapping community services’ is a website administered by MSD.³¹ The website aims to provide easy, open and transparent access to information about the social services that the government funds throughout New Zealand to improve government accountability and to help communities address their needs. The website is still a work in progress. It currently collates data from MoH and MSD and, in time, will include agency data from MoJ, TPK and MoE.

The information on this website, particularly if it was more widely contributed to by other agencies, would be a useful tool for developing a stocktake of service providers with a view to tackling poverty and empowering communities under the demarcation zone proposal.

Using the maps

- Selecting the ‘view data’ tab on the contract mapping website will take you to the national view in which a map of New Zealand is shown divided into 14 regions. From this view you can click on a region. The region is then divided into territorial authorities. Clicking on a territorial authority from the regional view, the map will then show you the territorial authority (local council) area divided into area units. Selecting an area unit will take you to the smallest area view possible. This is the first time you can see service provider information.
- The locations of the service providers are shown by different coloured pins on the map. A green pin indicates a provider that matches your filter choices. An orange pin shows that there is a provider in that location, but they do not match your filter choices. If you choose not to filter the data, all data will be displayed. MSD offices are shown on the site as teal coloured pins.
- Links to population information for the areas are available at the top of the panel on the left in territorial authority view. In area unit view, this panel also shows the providers that receive funding for services in that area unit.

Specific note

- The service group ‘trailing new approaches to social sector change’ is not defined on the website, but the New Zealand Treasury briefly defines this by saying: ‘This appropriation is limited to the delivery of social sector services as part of the Social Sector Trials in specified locations and, in those locations where that delivery is led by Non-Government Organisations, to the administration of that delivery’.³² These appropriations are also ‘intended to achieve innovative cross-agency responses to tackle social issues among targeted groups in specified locations’.³³

Concerns raised

- As noted earlier, MoJ, TPK and MoE are yet to provide data to the website.
- The website notes: ‘The total of the contracted funding a provider receives is apportioned to the area unit. Services may not be directly located in that area unit, but the provider has been contracted to deliver services across an area that includes the area unit. The total amount of the contract has been apportioned to all the area units within the provider’s contracted area.’ This means the allocation of funds represents where the services are contracted to deliver, not where the services are directly located.
- The data is from the 2017 Financial Year and is updated each month. The website notes: ‘This allows us to make changes to show any new contracts signed in the month, contracts that have come to an end, and variations to contracts.’ On this basis we understand that completed contracts will be omitted as the data is updated.
- While there are definitions for the filter criteria ‘national contracts’ and ‘non-departmental operating expenditure’, there is no definition for ‘sector support providers’. There are also no definitions for some of the service groups such as ‘An Unrelenting Focus on Work’.

31 The site can be found at www.contractmapping.govt.nz. See the glossary at www.contractmapping.govt.nz/about-the-data/glossary.html for terminology and further background information.

32 New Zealand Treasury. (2015). *The Estimates of Appropriations 2015/16 – Social Development and Housing Sector B.5 Vol. 10*, p. 133. Retrieved 27 February 2016 from www.treasury.govt.nz/budget/2015/estimates/v10/est15-v10-socdev.pdf.

33 New Zealand Treasury. (2015). *The Estimates of Appropriations 2015/16 – Social Development and Housing Sector B.5 Vol. 10*, p. 88. Retrieved 27 February 2016 from www.treasury.govt.nz/budget/2015/estimates/v10/est15-v10-socdev.pdf.

- The colour coding of the pins is not clear. Orange pins are described as showing that there is a 'provider in that location but they do not match your filter choices'. This is confusing because a significant number of pins display as orange even when there are no filters selected. More information provided as to why this is, what kind of filters would apply to these providers and why they have been included would be useful.
- There is no information regarding whether contract mapping includes the costs of pure benefits per region (e.g. the jobseeker benefit). Information regarding the mean financial figure appropriated to service providers in each region/district would also be helpful if included.

Specific regions

The following three sections outline funding allocations for the 2017 Financial Year in the Far North District, the Gisborne District and the Rotorua District. They include only contract funding data. There is some variation in the data because the agencies themselves vary in the detail of their contracts and employ different systems of contracting.

The information for each district is reported by (A) area units, (B) service groups, (C) funders and (D) examples of geographical maps.

For the area units we have highlighted the highest (dark orange) and lowest (light orange) per capita funds to illustrate the extent of the variation between areas. Area units denote the regions within each district, while service groups are the types of services that have been provided in each district. These service providers have been grouped into nine groups within each funding agency. Funders indicate the government departments that contribute financially to each district and respective service groups.

Table 2: Contract mapping in the Far North District³⁴

(A) Far North area units	Number of providers	Apportioned amount (\$)	Per capita (\$)	Average apportioned amount per provider (\$)	Population per area unit
North Cape	328	179,600	358.51	548	501
Houhora	329	377,100	447.29	1,146	843
Motutangi-Kareponia	328	933,400	532.77	2,846	1752
Taipa Bay-Mangonui	328	545,800	348.55	1,664	1566
Inlet-Whangaroa Harbour	327	3,300	218.23	10	15
Awanui	329	138,100	393.31	420	351
Karikari Peninsula-Maungataniwha	328	3,253,600	770.82	9,920	4221
Mangapa-Matauri Bay	326	1,582,100	596.57	4,853	2652
Kaitaia East	328	1,188,200	611.22	3,623	1944
Kaeo	328	192,900	387.43	588	498
Kaitaia West	328	2,494,500	769.92	7,605	3240
Kapiro	326	1,006,000	410.97	3,086	2448
Ahipara	328	439,000	389.15	1,338	1128

³⁴ Retrieved 24 February 2017 from map.contractmapping.govt.nz. See interactive Far North District Contract Mapping: map.contractmapping.govt.nz/#ta_1.

Table 2 cont.

(A) Far North area units	Number of providers	Apportioned amount (\$)	Per capita (\$)	Average apportioned amount per provider (\$)	Population per area unit
(i)	(ii)	(iii)	(iv)	(v)	(vi)
Herekino	328	1,352,200	694.50	4,123	1947
Bay of Islands	327	6,500	308.95	20	21
Kerikeri	327	3,570,000	609.32	10,917	5859
Waitangi	326	315,800	397.25	969	795
Russell	326	280,900	343.00	862	819
Haruru Falls	329	246,200	313.21	748	786
Waihou Valley-Hupara	329	2,182,700	739.38	6,634	2952
Inlet-Bay of islands	325	700	226.97	2	3
Paihia	326	787,700	445.02	2,416	1770
Hokianga North	327	1,620,200	829.57	4,955	1953
Opuwa West	326	75,400	292.06	231	258
Opuwa East	325	116,400	326.04	358	357
Okaihau	327	258,000	358.39	789	720
Ohaewai	327	329,100	462.89	1,006	711
Kohukohu	332	71,200	383.03	214	186
Kawakawa	325	660,900	488.46	2,034	1353
Moerewa	325	964,500	627.93	2,968	1536
Rawene	330	207,100	469.56	628	441
Kaikohe	328	3,074,500	746.41	9373	4119
Pokere-Waihaha	324	2,443,200	975.32	7,541	2505
Ngapuhi-Kaikou	327	2,231,500	887.63	6,824	2514
Hokianga South	327	2,095,000	802.67	6,407	2610
Omapere and Opononi	328	135,000	281.24	412	480
Total		35,358,200	633.05	3002	55,854

(B) Far North service groups	Apportioned amount (\$)	Per capita (\$)
An Unrelenting Focus on Work	4,598,700	82.33
Communities Getting on with it	607,800	10.88
Health	20,995,800	375.91
Opportunities for Youth	1,651,600	29.57
Other	1,240,200	22.20
Protecting Our Children	6,069,200	108.66
Reducing long term welfare dependence	119,600	2.14
Trialling new approaches to social sector change	75,400	1.35
Total	35,358,200	633.05

Table 2 cont.

(C) Far North funders	Apportioned amount (\$)	Per capita (\$)
Ministry of Health (59%)	20,995,800	375.91
Ministry of Social Development (41%)	14,363,400	257.14
Total	35,358,200	633.05

(D) Examples of geographical maps

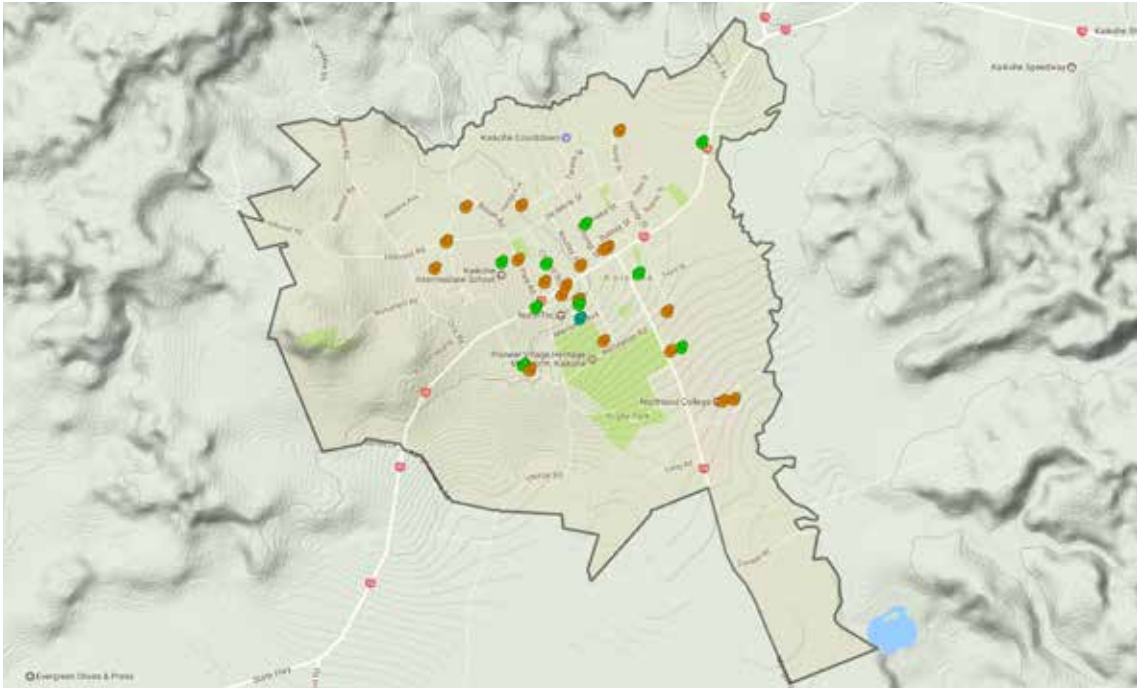


Figure 1: Service providers in Kaikohe, Far North

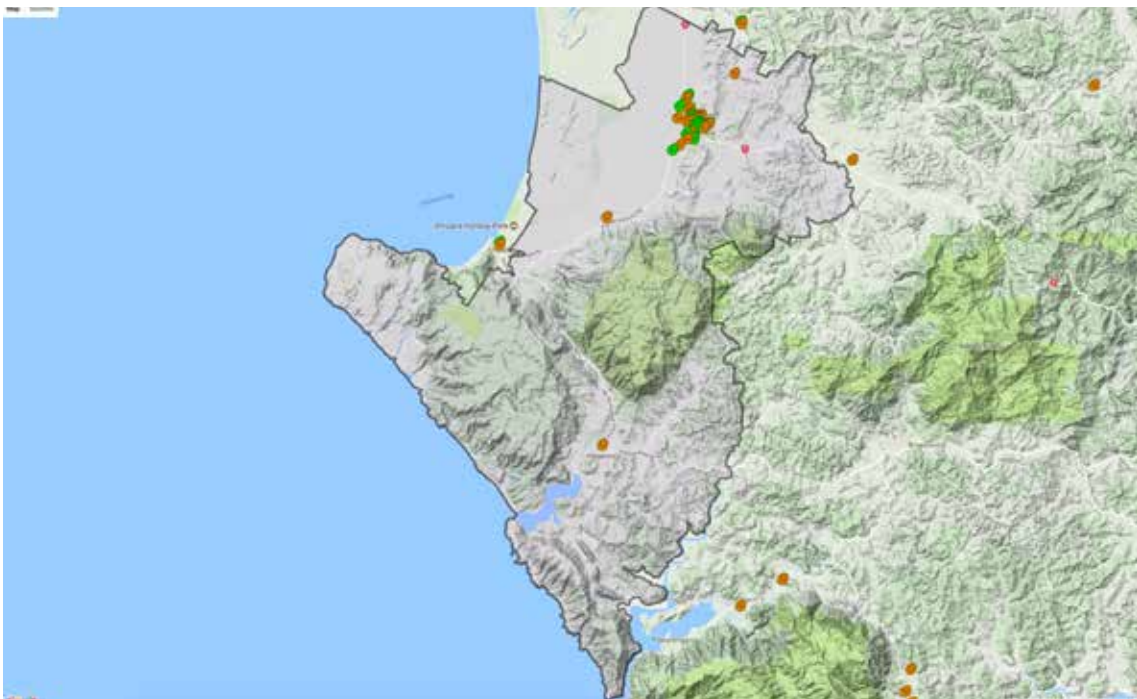


Figure 2: Service providers in Kaitiaki, Far North

Table 3: Contract mapping in the Gisborne District³⁵

(A) Area units	Number of providers	Apportioned amount (\$)	Per capita (\$)	Average apportioned amount per provider (\$)	Population per area unit
East Cape	301	2,943,500	1,093.82	9,779	2691
Ruatoria	301	215,200	286.92	715	750
Tokomaru Bay	301	114,400	254.21	380	450
Tarndale-Rakauroa	314	1,228,500	740.49	3,912	1659
Tolaga Bay	314	275,600	332.80	878	828
Wharekaka	314	1,181,500	616.31	3,763	1917
Te Karaka	315	157,000	289.19	498	543
Matokitoki	314	150,600	321.90	480	468
Patutahi	315	100,300	267.38	318	375
Makaraka	314	391,900	376.42	1,248	1041
Riverdale	314	537,100	332.80	1,711	1614
Mangapapa	314	2,527,200	594.50	8,048	4251
Te Hapara	315	2,539,700	594.50	8,063	4272
Whataupoko	314	2,074,700	561.79	6,607	3693
Gisborne Central	314	2,658,900	855.51	8,468	3108
Gisborne Airport	314	1,356,600	496.36	4,320	2733
Kaiti North	305	631,700	309.64	2,071	2040
Outer Kaiti	305	950,400	364.16	3,116	2610
Wainui	305	515,600	342.35	1,690	1506
Kaiti South	305	1,407,800	495.01	4,616	2844
Tamarau	305	761,700	331.44	2,497	2298
Manutuke	314	211,700	354.61	674	597
Tiniroto	314	1,297,900	616.31	4,133	2106
Total		24,229,400	545.78	3391	44,394

³⁵ Retrieved 24 February 2017 from map.contractmapping.govt.nz. See interactive Gisborne District Contract Mapping: map.contractmapping.govt.nz/#ta_28.

Table 3 cont.

(B) Service groups	Apportioned amount (\$)	Per capita (\$)
An Unrelenting Focus on Work	2,616,200	58.93
Communities Getting on with it	356,300	8.03
Health	14,373,400	323.77
Opportunities for Youth	1,367,000	30.79
Other	89,500	2.02
Protecting Our Children	5,312,100	119.66
Reducing long term welfare dependence	100,000	2.25
Trialling new approaches to social sector change	15,000	0.34
Total	24,229,400	545.78

(C) Gisborne funders	Apportioned amount (\$)	Per capita (\$)
Ministry of Health (59%)	14,373,400	323.77
Ministry of Social Development (41%)	9,856,000	222.01
Total	24,229,400	545.78

(D) Example of a geographical map

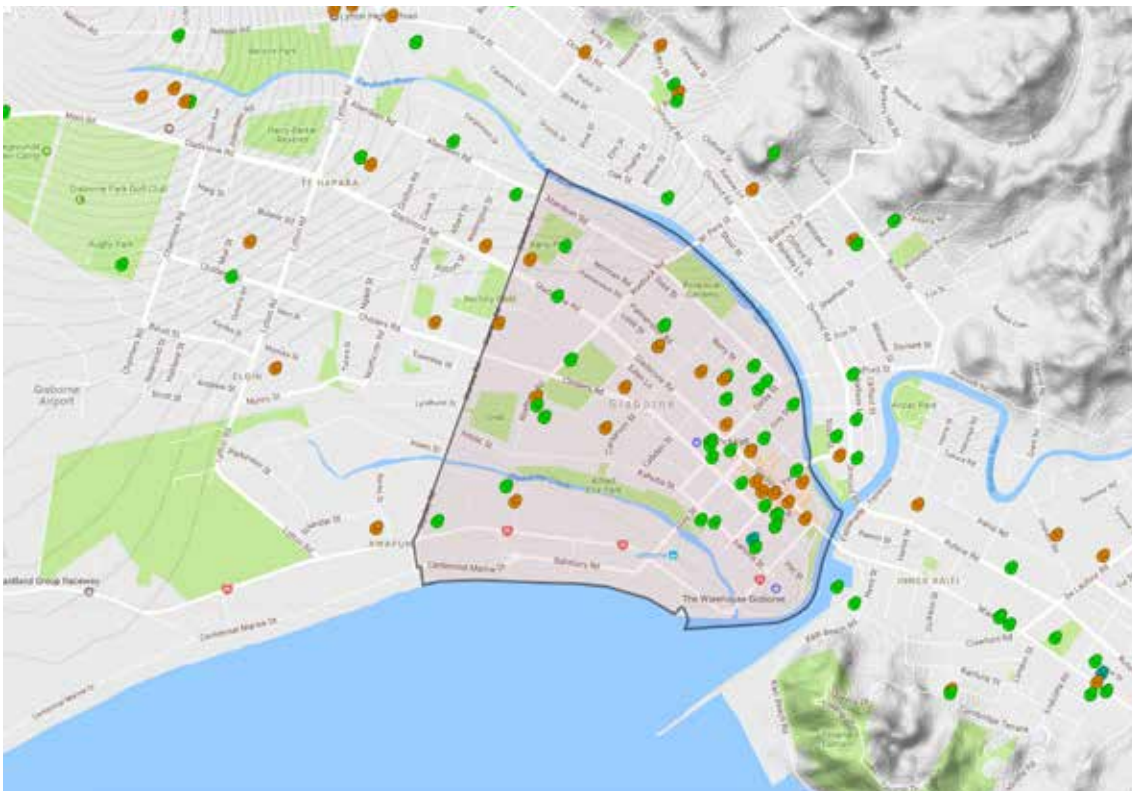


Figure 3: Service providers in Gisborne Central, Gisborne

Table 4: Contract mapping in the Rotorua District³⁶

(A) Area units	Number of providers	Apportioned amount (\$)	Per capita (\$)	Average apportioned amount per provider (\$)	Population per area unit
Hamurana	361	1,118,400	467.77	3,098	2391
Tikitere	362	2,506,400	882.21	6,924	2841
Ngongotaha North	359	2,267,800	790.74	6,317	2868
Mamaku	359	217,500	297.09	606	732
Ngongotaha South	359	460,000	415.56	1,281	1107
Kawaha Point	359	392,700	239.29	1,094	1641
Fairy Springs	359	1,035,300	514.29	2,884	2013
Arahiwi	360	41,600	277.34	116	150
Selwyn Heights	359	425,300	376.07	1,185	1131
Koutu	359	1,090,900	573.53	3,039	1902
Owhata West	359	1,944,900	542.51	5,418	3585
Western Heights	359	2,795,800	731.50	7,788	3822
Ohinemutu	360	72,600	257.60	202	282
Owhata East	359	1,219,900	573.53	3,398	2127
Mangakakahi	359	1,792,900	731.50	4,994	2451
Pukehangi North	359	1,042,700	474.80	2,904	2196
Kuirau	359	1,091,000	988.20	3,039	1104
Poets Corner	360	58,900	218.10	163	270
Pukehangi South	359	1,306,500	467.77	3,639	2793
Fordlands	359	979,700	514.29	2,729	1905
Utuhina	359	611,200	435.31	1,703	1404
Owhata South	360	150,700	257.60	419	585
Victoria	360	963,200	585.89	2,676	1644
Waiwhero	359	333,300	474.80	928	702
Sunnybrook	359	807,900	415.56	2,250	1944
Hillcrest	359	825,400	514.29	2,299	1605
Glenholme West	359	1,238,600	542.52	3,450	2283
Glenholme East	359	1,140,800	573.53	3,178	1989
Fenton	359	529,400	380.31	1,475	1392

³⁶ Retrieved 24 February 2017 from map.contractmapping.govt.nz. See interactive Rotorua District Contract Mapping: map.contractmapping.govt.nz/#ta_24.

Table 4 cont.

(A) Area units	Number of providers	Apportioned amount (\$)	Per capita (\$)	Average apportioned amount per provider (\$)	Population per area unit
Lynmore	359	1,637,300	522.77	4,561	3132
Pomare	359	435,100	290.06	1,212	1500
Springfield	359	3,307,600	770.99	9,213	4290
Whaka	360	99,800	297.09	277	336
Ngapuna	359	203,100	395.82	566	513
Tarawera	359	1,103,100	790.74	3,073	1395
Ngakuru	359	1,016,800	593.57	2,832	1713
Kaingaroa Forest	360	144,400	297.09	401	486
Reporoa	360	132,300	277.34	368	477
Golden Springs	359	776,000	594.61	2,162	1305
Total		37,316,500	565.35	2663	66,006

(B) Service groups	Apportioned amount (\$)	Per capita (\$)
An Unrelenting Focus on Work	3,763,500	57.02
Communities Getting on with it	566,700	8.59
Health	25,349,800	384.05
Opportunities for Youth	1,402,300	21.24
Other	484,000	7.33
Protecting Our Children	5,683,300	86.10
Reducing long term welfare dependence	67,100	1.02
Trialling new approaches to social sector change	No funding mentioned	No information
Total	37,316,500	565.35

(C) Rotorua funders	Apportioned amount (\$)	Per capita (\$)
Ministry of Health (68%)	25,349,800	384.05
Ministry of Social Development (32%)	11,966,700	181.30
Total	37,316,500	565.35

(D) Example of a geographical map

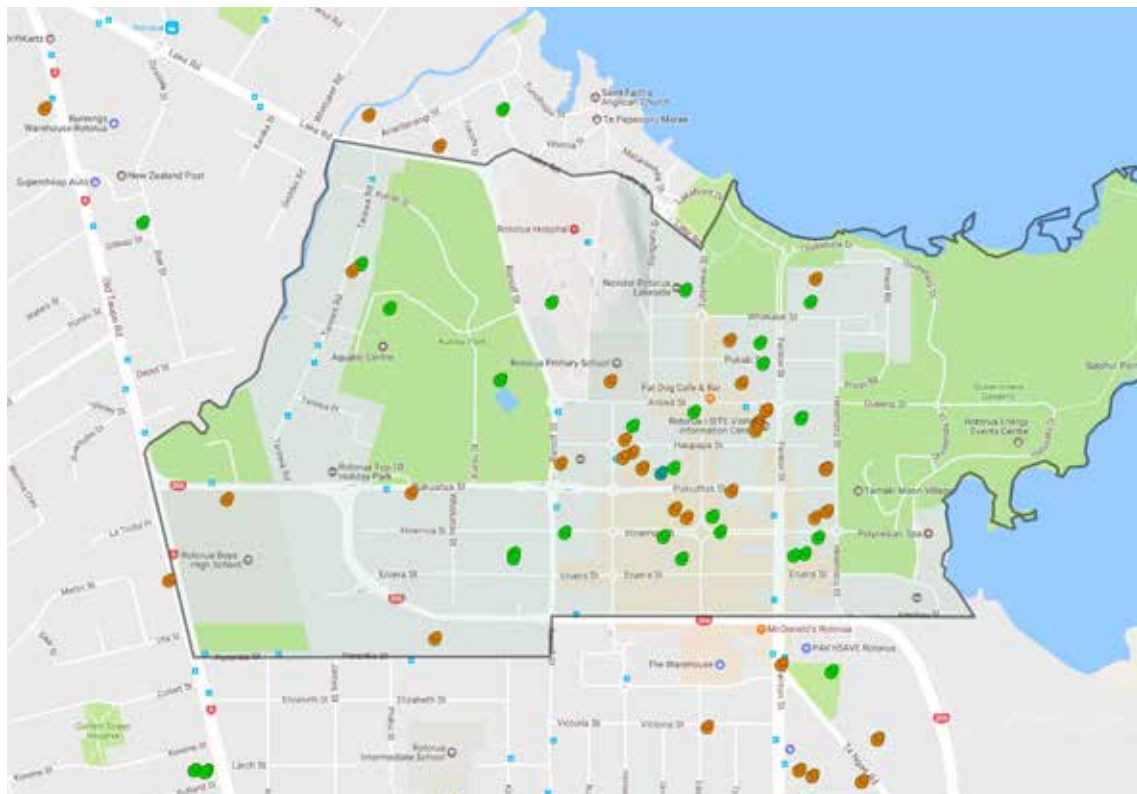


Figure 4: Service providers in Kuirau, Rotorua

Children's Teams

Introduction

Children's Teams are not service providers. They instead represent a different approach, working with whānau to 'create safer lives for at-risk children'.³⁷ The Teams bring together agencies, NGOs and communities to share information and create a plan for each child. They promote 'accountability at every level – from chief executives of government agencies in Wellington to front-line workers interacting directly with children and their families'. The Teams were developed as a response to the *White and Green Paper for Vulnerable Children*, which set out a programme to address weaknesses in service provision to children and their families. 'This community-led approach builds on what already exists and responds to the unique needs of each community'.³⁸ There are currently ten Children's Teams operating around New Zealand in

- Rotorua,
- Whangarei,
- Horowhenua/Ōtaki,
- Marlborough,
- Hamilton,
- Tairāwhiti,
- Eastern Bay of Plenty,
- Whanganui,
- Canterbury and
- Counties Manukau.

Target population

The Teams focus on children and young people aged 18 and under who are not involved in care and protection services but 'who are vulnerable to maltreatment and at risk of significant harm to their wellbeing'.³⁹

This includes, but is not limited to:

- children living in homes where family violence is present
- children who have difficulty attending school or engaging when present
- children with social or behavioural problems
- children with unaddressed health issues
- whānau struggling with social or economic issues who have dependent children
- whānau with dependent children where parenting capacity needs to be strengthened
- whānau with dependent children for whom a statutory intervention may be required if concerns and risk factors are not addressed.

Structure

Lead professionals

Children's Teams assign a lead professional who then brings others together to form a Child's Action Network. The lead professional acts as a single point of contact for the child and their whānau,

37 Oranga Tamariki. (2017). *Children's Teams*. Retrieved 30 May 2017 from www.mvcof.govt.nz/working-with-children/childrens-teams.

Unless indicated otherwise, all quotes and information in this fact sheet are extracted or adapted from this source: the Oranga Tamariki Children's Teams website under 'The approach' tab or the 'How they work' tab.

38 Children's Action Plan. (n.d.). *Children's Teams*. Retrieved 30 May 2017 from www.childmatters.org.nz/file/Diploma-Readings/Block-6/Child-Advocacy-Issues/cap-factsheet.pdf.

39 See Footnote 37.

providing support and guidance through the system. They 'coordinate the network around the child' in order to reduce inconsistencies and overlaps in services. They also complete any assessments and reviews, and ensure the child receives appropriate, effective and timely interventions. Lead professionals are supervised by managers.

Child's Action Networks

Child's Action Networks centre the child or young person and link them to a flexible network of others. The network improves coordination and access to resources and, depending on their needs, includes the child's parents and caregivers and various practitioners and professionals.

For each child, network members are responsible for:

- providing evidence and analysis to support their contribution to the common assessment
- contributing actively to solving problems or resolving difficulties
- delivering the activities in the child's plan
- keeping other members of the team informed about progress in their area of responsibility
- supporting the lead professional by keeping them informed, providing updates promptly when requested and attending meetings
- supporting the lead professional by sharing information, offering guidance and advice.⁴⁰

Children's Team Panel

The Panel brings together professionals from the community with expertise in the social, education, health, police and justice sectors. The Panel

- makes decisions on referrals to the Children's Team
- shares information and provides insight from their home agency or organisation
- reviews the progress of assessments, plans and reviews of children and whānau involved with the team
- provides advice and guidance to lead professionals
- embeds the approach within their home agency or organisations
- ensures there are no barriers to accessing their own agency's services.⁴¹

Approach

The Children's Teams complete assessments of children's needs and then develop plans to support the children with the services and resources available within the local community. The Teams are responsible for keeping the plans on track and are responsible for the safety and wellbeing of every child they oversee. The process of involvement with a Children's Team begins with a referral, which is then reviewed by the Children's Team Panel. If the Children's Team approach is deemed appropriate and the child or young person and their family all agree to participate, they are assigned a lead professional. Child Youth and Family then work together to identify needs, plan and set goals and work towards improving their wellbeing. They are steered by their lead professional, who prepares an assessment, and are supported by their Child's Action Network, which is established by the lead professional. The Child's Action Network then analyses the assessment and establishes aims for the plan. Once the assessment and plan have been approved by the Panel, the Child's Action Network implements the plan and reviews the results. When the child and their family no longer require the intensive coordinated support of the Children's Teams, they are able to be supported within their community.

Funding

Children's Teams' parent agency Oranga Tamariki have been allocated \$434.1 million in funding over five years. This includes '\$9.7 million over the next two years to support the 10 Children's Teams'.⁴²

⁴⁰ See Footnote 37.

⁴¹ See Footnote 37.

⁴² Tolley, A. (25 May 2017). *\$434.1 million to support young people in care*. Retrieved 30 May 2017 from [2017.budget.govt.nz/budget/2017/releases/r32-tolley-434-1m-to-support-young-people-in-care.htm](https://www.budget.govt.nz/budget/2017/releases/r32-tolley-434-1m-to-support-young-people-in-care.htm).

Social Sector Trials

Introduction

The Social Sector Trials (SSTs) [were] a community-based approach aimed at improving the way government plans, funds, and delivers social services.

They involve[d] transferring the control of resources including funding, decision-making authority, and accountability for results from government agencies to a Trial lead in the local community.⁴³

The SSTs are no longer administered by central government. Some were discontinued, while 11 were transitioned to a fully community-led model to build on what was learnt. Social Development Minister Anne Tolley said the SSTs ‘provided good information to help design community-led models for better social service results’ and ‘were most successful where there was good co-ordination from those involved’.⁴⁴ Minister Tolley emphasised that the SSTs had led to improved knowledge of effectiveness in social service provision and that this knowledge would be used to drive future policy innovations.⁴⁵

Target issues

SSTs were primarily focused on four areas of concern in young people:

- Levels of offending,
- alcohol and substance abuse,
- truancy and
- participation in education, training or employment.

The target age range was initially set at 12–18 years but was broadened to 5–18 years in the first trials.⁴⁶

Approach and priority actions

The process of implementing SSTs began with the establishment of a local advisory group and nomination of a Trial Lead (an NGO or a committed individual from the community). The Lead was then transferred the control of resources, decision-making and accountability, with the broad intention of the local community gaining more control.⁴⁷ The process also involved a stocktake of currently operating services and statistical analysis of current relevant activity. This then led to the development of action plans for each area that would enable improved coordination of existing services as well as the introduction of new initiatives. The process also required evaluation, with a cross-agency approach taken for the first two years and evaluation results made available on the MSD website.⁴⁸ Evaluations identified barriers to implementation and the delivery of results for young people.⁴⁹

Governance structure

The SSTs were a joint project of MoE, MoH, MoJ, MSD and the New Zealand Police. The Chief Executives of each of these ministries and the Commissioner of Police together comprised a Joint Venture Board responsible for overseeing an evaluation of the implementation and management. Complemented by a ministerial group, the Joint Venture Board included local stakeholders and agency representatives to allow joint accountability. Actual implementation and ongoing management of the SSTs was handled by a Director, who provided six-monthly progress reports to the Ministers.⁵⁰

The SSTs used a ‘community-influenced model’. Successful SSTs were indicated as appropriate for transition to a fully community-led model with a broader focus for service delivery.

43 Ministry of Health. (2017). *Social Sector Trials*. Retrieved 6 June 2017 from www.health.govt.nz/our-work/preventative-health-wellness/social-sector-trials.

44 Tolley, A. (2017). *Social Sector Trials move to local-led models*. Retrieved 6 June 2017 from www.beehive.govt.nz/release/social-sector-trials-move-local-led-models.

45 See Footnote 44.

46 New Zealand Police. (n.d.). *Social Sector Trials*. Retrieved 6 June 2017 from www.police.govt.nz/about-us/programmes-and-initiatives/social-sector-trials.

47 See Footnote 46.

48 Crafer, C. (2014). *Social Sector Trials: March 2011 – June 2015*. Retrieved 6 June 2017 from www.auditnz.govt.nz/publications-resources/information-updates/2014/social-sector-trials.pdf.

49 Ministry of Social Development. (n.d.). *Leadership*. Retrieved from 6 June 2017 www.ms.govt.nz/about-msd-and-our-work/publications-resources/corporate/annual-report/2010-11/leadership.html.

50 See Footnote 49.

Locations

The SSTs were first piloted in March 2011.⁵¹ The initial locations were

- Tokoroa/South Waikato (NGO Lead),
- Levin/Horowhenua (NGO Lead),
- Gore (NGO Lead),
- Kawerau (committed individual Lead),
- Te Kuiti/Waitomo (committed individual Lead) and
- Taumarunui (committed individual Lead).⁵²

SSTs introduced in 2013 in the following locations were discontinued in 2016 after varying results:

- Whakatane,
- Rotorua (0–18 years, education focus),
- Waikato,
- South Taranaki and
- Wairarapa.⁵³

SSTs operational as at 5 May 2016 were

- Tokoroa/South Waikato,
- Gisborne,
- Kaikohe,
- Waitomo,
- Taumarunui,
- Kawerau,
- Horowhenua,
- Porirua (0–74 years, health focus),
- South Dunedin and
- Gore.

Results to date

The results of the trials can be considered in terms of soft outcomes, hard outcomes and examples of new activity. Some examples of soft outcomes observed in 2014 were

- Stocktake of youth activities, a forum for discussion on youth issues, Action Plans developed (all for the first time)
- Communities feeling more connected
- Young people feeling more connected to each other (through events, programmes in schools/communities)
- The development of a culture of care for children and young people

51 Ministry of Health. (2017). *Social Sector Trials*. Retrieved 6 June 2017 from www.health.govt.nz/our-work/preventative-health-wellness/social-sector-trials.

52 Ministry of Social Development. (n.d.). *Leadership*. Retrieved 6 June 2017 from www.msd.govt.nz/about-msd-and-our-work/publications-resources/corporate/annual-report/2010-11/leadership.html and New Zealand Police. (n.d.). *Social Sector Trials*. Retrieved 6 June 2017 from www.police.govt.nz/about-us/programmes-and-initiatives/social-sector-trials.

53 Jones, N. (2016). 5 'social sector trials' to be abandoned. *New Zealand Herald*. Retrieved 6 June 2017 from www.nzherald.co.nz/nicholas-jones/news/article.cfm?a_id=715&objectid=11634223.

- Agencies (government and non-government) working collaboratively to deliver programmes and services
- Evidence of Trials leads [*sic*] influencing practice (e.g. one Trial lead has provided advice to local Police regarding their approach to youth violence)
- Agencies in Wellington applying learning from the Trials in policy decisions/direction⁵⁴

Hard outcomes included

- measurable increases in transition from secondary to tertiary education (from 18% in 2010 to 55% in 2013 in Te Kuiti),
- measurable increases in attainment of NCEA Level 2 qualifications (65% in 2011 to 78% in 2012 in Taumarunui), and
- measurable reduction in truancy (30% reduction in Kawerau between 2011 and 2013 and a 35% reduction in Gore between 2012 and 2013).⁵⁵

Examples of new activity included

- development of an education strategy in Kawerau,
- a youth hub resourced by the community and partner agencies in Waitomo,
- introduction of Kick-Start breakfast clubs supported by Fonterra and Sanitarium in Taumarunui,
- a comprehensive anti-truancy campaign and a youth radio station in South Waikato,
- youth coordinators and an interagency motivation and fitness programme in Horowhenua, and
- development of the Hokonui Tertiary High School to improve transition into education, training or employment in Gore.

Annual funding

By December 2012, 61% of total resources for the SSTs were leveraged locally. Resources included

- In-kind resources: such as agency/NGO/Council staff or office space provision
- Donations: Fonterra supplying milk for a breakfast club or New World donating food for a youth activities day
- Cash and other financial resources: DHB contract for a full time Drug and Alcohol Counsellor, business donation for youth mentor⁵⁶

Concerns raised

As a result of the first six SSTs, a number of barriers were noted. These included variations in the recording of truanancies, different operating boundaries between agencies, the difficulties of recording accurate and useful data in rural and provincial communities, a proliferation of NGOs and a lack of vision or strategy in service providers for the communities they work in.⁵⁷

⁵⁴ Crafer, C. (2014). *Social Sector Trials: March 2011 – June 2015*. Retrieved 6 June 2017 from www.auditnz.govt.nz/publications-resources/information-updates/2014/social-sector-trials.pdf.

⁵⁵ See Footnote 54.

⁵⁶ See Footnote 54.

⁵⁷ See Footnote 54.

Regional Growth Programme

Introduction

The Regional Growth Programme is a joint commission by the Ministry for Business, Innovation and Employment (MBIE) and the Ministry for Primary Industries (MPI). The programme is based on the acknowledgement that regional economic development is essential for national economic growth. The regions are a significant component of New Zealand's economy and each has varying strengths and weaknesses depending on the local conditions.

The programme attempts to identify growth opportunities to increase jobs, incomes and investment. The regions involved were selected based on their average income, employment and investment rates in comparison to national averages.⁵⁸

Priority actions and approach

The Regional Growth Programme has six focus areas:

- export markets,
- investment,
- innovation,
- skilled and safe workplaces,
- natural resources and
- infrastructure.

The initial stages of the programme involved completing regional growth studies for each of the regions involved to identify sustainable growth priorities from the commercial opportunities of each region. Criteria for prioritisation were

- practicality,
- viability,
- potential impact on incomes and employment,
- market/export potential and
- existing local/regional investment.⁵⁹

The reports for each study also identified barriers and laid out actions that might address the barriers. The studies were supported by interviews and workshops with locals from the regions as well as a group of industry, iwi/Māori, and local government representatives.

Based on the findings from these studies, the programme then developed a Regional Economic Action Plan for each region.

Governance structure

A different senior public servant leads the Regional Growth Programme in each region.

- Northland: Ben Dalton, MPI;
- Bay of Plenty: Paul Stocks, MBIE;
- Waikato: Mike James, Ministry of Transport;
- Gisborne: Ruth Bound, MSD;
- Hawke's Bay: Carl Crafar, MoJ;

⁵⁸ Ministry of Business, Innovation and Employment. (2017). *Regional Growth Programme*. Retrieved 30 May 2017 from www.mbie.govt.nz/info-services/sectors-industries/regions-cities/regional-growth-programme.

⁵⁹ Ministry for Primary Industries. (2016). *Regional growth studies*. Retrieved 30 May 2017 from www.mpi.govt.nz/funding-and-programmes/other-programmes/regional-growth-studies.

- Manawatū-Whanganui: Di Grennell, TPK;
- Canterbury: Helen Wyn, Department of Internal Affairs;
- West Coast: Bruce Parkes, DoC; and
- Southland: Penny Nelson, Ministry for the Environment.⁶⁰

Annual funding

Funding for the Regional Growth Programme is not centrally administered. Each project undertaken as part of a Regional Economic Action Plan may be funded using a different model. For example, a motorway project in Northland is being funded \$709.5 million by a Public Private Partnership while the Hundertwasser Art Centre, also in Northland, received \$4 million in central government funding and has been fundraising a target of \$16 million from a variety of other sources.⁶¹

Regional Growth Programme: Gisborne/Tairāwhiti

The Regional Economic Action Plan for Tairāwhiti was developed by the community, led by the Tairāwhiti Action Plan Governance Group. The plan, launched 28 February 2017, outlines the priorities for the region for the next five years. The four focus areas of the plan are:

Tapping Our Potential – Focusing on adding value in sectors such as wood processing and Mānuka honey and increasing production through irrigation.

Promoting Our Place – Growing Tairāwhiti tourism to attract the rise in forecasted tourism numbers to New Zealand.

Connecting with People & Markets – Upgrading state highways and improving digital connection to enable better access to markets, and to make the region more accessible to tourists.

Building our Capacity to support business – Growing skills and the labour force needed to support business, and to benefit from the growing horticulture and tourism sectors.⁶²

Activate Tairāwhiti is overseeing implementation of the plan and individual actions will involve various relevant organisations and government agencies. Activate Tairāwhiti is an economic development agency that forms part of the Tairāwhiti Business Hub, along with the Regional Business Partner programme, New Zealand Trade and Enterprise and Callaghan Innovation. Activate Tairāwhiti is focused on building Tairāwhiti as a welcoming environment for capital investors, whether in the form of existing business expansion or attracting new businesses.⁶³

Regional Growth Programme: Northland/Tai Tokerau

The Tai Tokerau Northland Economic Action Plan was launched in February 2016. The Northland plan is made up of a group of projects aiming to encourage business growth, with a particular focus on infrastructure improvements. Transport, digital infrastructure, water, and skills and capability are all focus areas. The plan has also identified key opportunities in sectors such as tourism, marine, forestry and wood processing, agriculture, aquaculture, horticulture and honey, and Māori land productivity.⁶⁴ An advisory group that includes representatives from local businesses, iwi/Māori and local government oversees implementation of plan. Implementation of the plan includes an acknowledgement that sector development will be important for improving capacity for business growth. This is reflected in specific actions and initiatives such as

developing pathways to employment through the Kaikohe GROW Programme, placing and supporting young unemployed people in training and with employers in key sectors, such as tourism and horticulture

planting mānuka using long term unemployed workers in Kaikohe

60 Ministry of Business, Innovation and Employment. (2017). *Regional Growth Programme*. Retrieved 30 May 2017 from www.mbie.govt.nz/info-services/sectors-industries/regions-cities/regional-growth-programme.

61 Northland Inc. (2017). *Tai Tokerau Northland Economic Action Plan – one year summary*. Retrieved 30 May 2017 from s3-ap-southeast-2.amazonaws.com/nzlibrary/documents/Tai-Tokerau-Northland-Economic-Action-Plan-update-December-2016.pdf?mtime=20170210084453.

62 Ministry of Business, Innovation and Employment. (2016). *Gisborne/Tairāwhiti*. Retrieved 30 May 2017 from www.mbie.govt.nz/info-services/sectors-industries/regions-cities/regional-growth-programme/gisborne-tairawhiti.

63 Activate Tairāwhiti. (2015). *Regional Economic Action Plan*. Retrieved 30 May 2017 from www.activateairwhiti.co.nz/projects/regional-economic-action-plan.

64 Ministry of Business, Innovation and Employment. (2016). *Northland*. Retrieved 30 May 2017 from www.mbie.govt.nz/info-services/sectors-industries/regions-cities/regional-growth-programme/northland.

working with New Zealand transport agencies and regional tourism agencies to revitalise the Twin Coast Discovery Route

the QRC Tai Tokerau Resort College working with schools to provide a training pathway for young people to develop careers in the tourism and hospitality sector.⁶⁵

Regional Growth Programme: Bay of Plenty

The Toi Moana Bay of Plenty Economic Action Plan was launched in October 2015. The plan identifies priority areas that will boost investment and growth. As well as identifying key actions, the plan also assigns responsibility for leading those actions. Priority areas are agribusiness, aquaculture, education and skills, forestry and wood processing, geothermal, horticulture, Māori land utilisation, visitor economy, and water management.⁶⁶ The Bay of Connections Governance Group and a management group oversee implementation of the plan. The Governance Group is made up of business leaders representing, or with links to, various industry sectors, economic development agencies, Māori businesses, and local and central government.⁶⁷

The cornerstone of the Economic Action Plan is the Ōpōtiki Harbour Transformation Project. This project is a redevelopment that will leave the Ōpōtiki harbour accessible at any time of the year and will involve construction of a new wharf. The new wharf will be used by commercial industries for a range of purposes, including as processing facilities for an offshore marine aquaculture farm. The development is forecast to provide long-term skilled employment for approximately 220 people and will generate \$41–55 million per annum for the area.⁶⁸

⁶⁵ Ministry of Business, Innovation and Employment. (2016). *Northland*. Retrieved 30 May 2017 from www.mbie.govt.nz/info-services/sectors-industries/regions-cities/regional-growth-programme/northland.

⁶⁶ Ministry of Business, Innovation and Employment. (2016). *Bay of Plenty*. Retrieved 30 May 2017 from www.mbie.govt.nz/info-services/sectors-industries/regions-cities/regional-growth-programme/bop.

⁶⁷ See Footnote 66.

⁶⁸ See Footnote 66.

The Greater Manchester Experiment (UK)

Introduction

The Greater Manchester Experiment largely relies on creating independent hubs within the city to perform administrative and policy-making decisions regarding how money is spent. The experiment can be seen as an aspect of the UK's proposal to boost economic prospects in Northern England via investment into infrastructure, science, innovation and devolution of power in city deals. The Greater Manchester Experiment can also be seen as a part of the UK Conservative Government's plans to enact local devolution throughout many of the UK's cities and regions. This is partly based on the devolution models used to create the National Assemblies of Scotland, Wales and Northern Ireland.

It is important to note that while the Greater Manchester Experiment solely deals with health and social spending, the initiative is now looking at rethinking how other sectors such as the cultural, education and immigration departments may be designed.

Priority actions and approach

The Greater Manchester Experiment can be broken into three different experiments: handing the city's health budget over to the local authorities; a new responsibility for combined authority; and a new city-wide Mayor for Greater Manchester, Andy Burnham (Labour Party), elected 4 May 2017.⁶⁹ The Greater Manchester Experiment is sometimes referred to as 'Devo Manc' (short for Devolution Manchester) and the changes to the health service as 'devo health'.

The rationale behind this experiment is that those working locally will better understand the needs of the population. Manchester is currently the fastest growing city in Britain apart from London, yet health outcomes for the population are among the worst in the country in regards to mental health. Statistics show that Manchester residents have a higher rate of 'unresolved depression' (6.9%) compared to the rest of Britain (5.8%). It is also estimated that 'between one in eight and one in ten Manchester adults are prescribed antidepressant medication', which far surpasses the UK average.⁷⁰

Governance structure

Plans in 2015 outlined that the government would devolve control of health and social care spending to a new strategic board, bringing together ten local authorities, 12 clinical commissioning groups, 15 NHS trusts and foundation trusts, and NHS England. This brings the total number of stakeholders in the project to 37.⁷¹ These stakeholders will be responsible for 100,000 workers and Greater Manchester's 2.7 million inhabitants. The Mayor of Greater Manchester, Andy Burnham, will play the dominant role in overseeing sums for the project. He is accountable to ten council leaders from Greater Manchester authorities.⁷² Combined authorities represent the different towns within the Greater Manchester area coming together.

While the experiment provides power to local authorities, central agencies such as the NHS will still play a role, although their primary responsibility will be to provide funding for the local authorities managing the healthcare sector.

Funding

On 1 April 2016 the Greater Manchester local authority took control over a £6 billion health and social care budget.⁷³ A timeline of events leading to this is outlined in Table 5: Timeline of the Greater Manchester Experiment.

Early responses

Some academics have criticised the project as being over-ambitious and lacking technicalities.⁷⁴ It is still too early to analyse the Manchester model of devo health as a success or failure.

69 Vize, R. (2015, February 27). The Greater Manchester experiment: will the rewards be worth the risk?. *The Guardian*. Retrieved 26 February 2017 from www.theguardian.com/public-leaders-network/2015/feb/27/greater-manchester-experiment-health-social-care-budget.

70 Manchester City Council. (2014). *Joint Strategic Needs Assessment In-depth Report on Mental Wellbeing*, pp. 2–3. Retrieved 5 March 2017 from www.manchester.gov.uk/download/downloads/id/22779/joint_strategic_needs_assessment_in-depth_report_on_mental_wellbeing.pdf.

71 Pidd, H. (2016, April 1). Greater Manchester begins £6bn 'devo health' experiment. *The Guardian*. Retrieved 26 February 2017 from www.theguardian.com/uk-news/2016/apr/01/greater-manchester-devo-health-social-care-budgets.

72 Gains, F. (2015). *The making of the Greater Manchester mayor – what next?*. Retrieved 26 February 2017 from blog.policy.manchester.ac.uk/featured/2015/02/the-making-of-the-greater-manchester-mayor-what-next.

73 See Footnote 71.

74 See Footnote 71.

Table 5: Timeline of the Greater Manchester Experiment⁷⁵

- 1986: Association of Greater Manchester Authorities (AGMA) formed as a voluntary association of the ten local authorities, following abolition of Greater Manchester County Council.
- 2005: Association of Greater Manchester Primary Care Trusts established with formal joint decision-making authority to jointly commission health services across the area.
- 2009: Greater Manchester given City Region status and allowed under Local Democracy, Economic Development and Construction Act 2009 to establish a combined authority with formal delegated powers for public transport, skills, housing, planning, and economic regeneration.
- 2011: Greater Manchester Combined Authority (GMCA) established - the first formal administrative authority for Greater Manchester since the abolition of the county council.
- 2012: Greater Manchester Association of Clinical Commissioning Groups established, with lead CCG arrangements for specialised and joint commissioning and coordinated approach to service reconfiguration.
- 2013: GMCA and the Local Enterprise Partnership issue joint strategy for economic growth and reform.⁷⁶
- July 2014: Greater Manchester and government agree £476 million of government funding for growth and reform plan.
- November 2014: GM Devolution Agreement sets out further devolution of powers on planning, land, transport, and fire services, and changing governance of GMCA to introduce arrangements for a directly elected mayor from 2017.
- February 2015: Memorandum of Understanding agreed for health and social care devolution, covering £6 billion a year of NHS spending.
- July 2015: Memorandum of Understanding agreed with Public Health England and NHS England on securing a unified public health leadership system to help transform population health.
- December 2015: Strategic partnership board approves governance arrangements for health and social care and produces strategic plan.

Table 6: Key abbreviations

AGMA	Association of Greater Manchester Authorities
CCG	Clinical Commissioning Groups
GM	Greater Manchester
GMCA	Greater Manchester Combined Authority
NHS	National Health Service

⁷⁵ Walshe, K. (2016). Health and social care devolution: the Greater Manchester experiment. *BMJ*, 352. Retrieved 6 March 2017 from www.bmj.com/content/352/bmj.i1495.full?ijkey=svGFsTqTl2KGRED&keytype=ref.

⁷⁶ Further information can be found at www.greatermanchester-ca.gov.uk/downloads/file/9/stronger_together_-_greater_manchester_strategy_summary.

UK Estate Regeneration Fund

Introduction and target issues

On 8 December 2016 the UK Government launched the Estate Regeneration Fund to regenerate deprived housing estates in England. The plan was launched due to the number of estates in need of regeneration, characterised by poor quality housing, buildings in physical decline and large areas of underused space.⁷⁷ Many deprived estates are also economically disconnected from their wider communities and contribute to a lack of opportunity for residents in the area. Rundown housing estates can offer huge potential to become thriving new communities, providing homes, jobs and opportunities, and places that work for everyone.

Funding

The fund contains £172 million (£140 million including an additional £32 million in capital grant funding and revenue funding).⁷⁸ Councils, housing associations and developers can bid for a share of the fund to transform neighbourhoods and deliver high-quality housing by revitalising local estates. The funding currently stated is available over five years from 2016–2021. The project is still very much in its early stages.

Approach

Specific criteria and requirements are associated with bidding for contracts, and it is expected that bidders will put forward schemes that will ‘improve or deliver additional homes, are fundamentally viable, and carry the support of local communities and local authorities’.⁷⁹ Communities will need to work with private entities to develop estates, with government funding providing the first step towards this.

The government is specifically looking for bidding proposals that demonstrate strong local community support and engagement with local residents, a focus on providing a net increase of housing/well-designed homes and neighbourhoods, and that are the best value for money for the taxpayer.⁸⁰

Governance structure

An independent advisory panel, chaired by Lord Heseltine and Minister of Housing and Planning, Gavin Barwell, developed the regeneration fund and will monitor the initiative.⁸¹ The advisory panel will also provide advice for local councils/communities participating in the project, including how they may go about bidding for a contract. The fund was also informed by discussions with over 100 areas/communities.

The Department for Communities and Local Government notes that a “one size fits all” national approach is not appropriate for the Estate Regeneration Fund. However, based on previous projects, the department suggests that three key principles will underpin the success of the fund: the community must be engaged as a partner, support and leadership of the local authority is essential, and there must be a willingness to work with the private sector to access commercial skills and to lever in investment.⁸²

77 Department for Communities and Local Government, Homes and Communities Agency, Barwell, G. & Javid, S. (2016). *New national plan and funding brings bigger boost to estate regeneration*. Retrieved 28 February 2017 from www.gov.uk/government/news/new-national-plan-and-funding-brings-bigger-boost-to-estate-regeneration.

78 See Footnote 77.

79 Department for Communities and Local Government & Homes and Communities Agency. (2016). *Estate Regeneration Fund*. Retrieved 28 February 2017 from www.gov.uk/government/publications/estate-regeneration-fund.

80 Department for Communities and Local Government & Homes and Communities Agency. (2016). *Estate Regeneration Programme Prospectus for 2016/17*. Retrieved 28 February 2017 from www.gov.uk/government/uploads/system/uploads/attachment_data/file/575800/Estate_Regeneration_Programme_Funding_Prospectus.pdf.

81 See Footnote 77.

82 Department for Communities and Local Government. (2016). *Estate Regeneration National Strategy Executive Summary*, p. 2. Retrieved 28 February 2017 from www.gov.uk/government/uploads/system/uploads/attachment_data/file/575602/Estate_Regeneration_National_Strategy_-_Executive_Summary.pdf.

Early responses

The regeneration fund is expected to ‘deliver thousands of net additional homes over the next 10–15 years’.⁸³ Commentators have mentioned that the fund could ‘transform the lives of thousands of people by delivering better homes in better estates’. Additionally, according to Lord Heseltine, the regeneration fund ‘puts residents at the heart of reshaping their estates, working with local authorities and developers’.⁸⁴

83 Department for Communities and Local Government. (2016). *Estate Regeneration National Strategy Executive Summary*, p. 2. Retrieved 28 February 2017 from www.gov.uk/government/uploads/system/uploads/attachment_data/file/575602/Estate_Regeneration_National_Strategy_-_Executive_Summary.pdf.

84 Department for Communities and Local Government, Homes and Communities Agency, Barwell, G., & Javid, S. (2016). *New national plan and funding brings bigger boost to estate regeneration*. Retrieved 28 February 2017 from www.gov.uk/government/news/new-national-plan-and-funding-brings-bigger-boost-to-estate-regeneration.



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