



## Ministerial consultation on draft Cabinet paper to establish Care System Board

<b>Date:</b>	<b>2 August 2023</b>		
<b>To:</b>	<b>Hon Andrew Little, Minister for the Public Service</b>		
<b>Action Sought:</b>	<b>Agree</b> to circulate draft Cabinet paper for ministerial consultation	<b>Due Date</b>	8 August
<b>Report No:</b>	<b>2023-0218</b>		
<b>Contact:</b>	<b>Callum Butler, Policy Director, Strategy and Innovation Policy,</b> 9(2)(a) privacy		
<b>Encl:</b>	<b>Yes</b> – draft Cabinet paper	<b>Priority:</b>	Medium
<b>Security Level:</b>	<b>IN CONFIDENCE</b>		

## Executive Summary

1. We provided you with advice in March 2023 on a proposal for an interdepartmental executive board (the Board) to improve collaboration and consistency across agencies involved in providing State care, and to strengthen overall accountability for the care system [report 2023-0055]. You agreed to progress this work.
2. This proposal was developed following concerns raised by the Royal Commission of Inquiry into Abuse in Care that agencies are working in siloes and are not always working together effectively to provide State care. The Royal Commission’s final report has been delayed until March 2024.
3. There is an opportunity to respond to this concern, rather than waiting to progress this work until release of the Royal Commission’s report. Establishing the Board will provide a mechanism to support agency collaboration to ensure the safety and wellbeing of people in State care.
4. Since you were provided with this advice, the proposal has developed further in consultation with the Public Service Commissioner, key chief executives, and the relevant departments. The most significant changes to the proposal are:
  - a. 9(2)(f)(iv) confidentiality of advice
  - b. The role of the board has been narrowed, in order to focus on clear operational improvements the Board can work towards while longer term reforms are underway. The Board will develop targets and measures to drive progress against an agreed set of objectives. This approach aligns with our experience that joint initiatives are most successful when they have a clear purpose or targets.

5. Minor changes have also been made to the paper to reflect agency feedback regarding resourcing, and voice and partnership mechanisms.
6. We have put this paper on the agency agenda for discussion on Monday 7 August. Pending any changes you request, we suggest you circulate the paper for ministerial consultation, with feedback due on Tuesday 22 August. This will allow for lodgement of the paper on 24 August, in time for the final GOV Committee meeting before the election, held on 31 August.
7. Once established, the Board will be responsible to an appropriate Minister for the performance of its functions. We suggest you discuss with the Prime Minister who the appropriate Minister for the Board should be. Given the Minister for the Public Service has been the minister responsible for the Crown Response to the Abuse in Care Inquiry, there could be benefit in designating the Minister for the Public Service as appropriate Minister for the Board to align these positions.

### **Recommended Action**

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We recommend that you:

- a **agree** to circulate the draft Cabinet paper for ministerial consultation, with feedback due on 22 August 2023

*Agree/disagree.*

- b **discuss** with the Prime Minister who will be the appropriate Minister for the Board

- c **agree** that Te Kawa Mataaho release this briefing in accordance with proactive release requirements and guidance once the relevant Cabinet decisions have been taken.

*Agree/disagree.*

Hon Andrew Little  
**Minister for the Public Service**

## Ministerial consultation on draft Cabinet paper to establish Care System Board

### Purpose of Report

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8. This report updates you on the draft Cabinet paper to establish an interdepartmental executive board to support collaboration and co-ordination across State care systems. It seeks your agreement to circulate the **attached** draft paper with your colleagues for Ministerial consultation.

### Cabinet proposals to establish a care system interdepartmental executive board

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9. We provided you with advice in March on a proposal for an interdepartmental executive board to improve collaboration and consistency across agencies involved in providing State care [report 2023-0055]. You agreed to progress this work.
10. This proposal was developed following concerns raised by the Royal Commission of Inquiry into Abuse in Care that agencies are working in siloes and are not always working together effectively to provide State care. The Royal Commission's final report has been delayed until March 2024.
11. There is an opportunity to respond to this concern, rather than waiting to progress this work until a Government response is formed following the release of the report next year. Establishing the Board will incentivise and provide the structural mechanism to support agencies to collaborate better to ensure the safety and wellbeing of people in State care.
12. Since you were provided with this advice, the proposal has developed further in consultation with the Public Service Commissioner, key chief executives, and the relevant departments. These developments are discussed below.

### We have further developed this proposal through consultation

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#### Chair and servicing department of the Board

13. 9(2)(f)(iv) confidentiality of advice  
[Redacted]
14. The Board will be provided with corporate and administrative support from a servicing department.  
9(2)(f)(iv) confidentiality of advice  
[Redacted]  
This servicing department role would include providing secretariat services to the board and accountability reporting required under the Public Finance Act 1989.

#### A narrower role for the Board, driven by targets and measures

15. Following discussions with the Chief Executives of Oranga Tamariki and Education, the board's role has been more tightly scoped on a set of clear objectives, with the development of targets to drive delivery against a narrower role. The rationale for this change is that there are already a number of longer-term policy reforms underway which relate to different care settings across government, and following the Royal Commission's final report in March 2024, a further programme of work may be developed. A more tightly scoped role for the Board would give the opportunity to focus on key

operational improvements that can be made in the meantime. This approach also aligns with our experience that collaboration initiatives are most successful when they have a clear purpose or targets.

16. Under the new proposal, the Board would be responsible for strengthening the policies, standards and processes used in providing care across government in order to support better wellbeing outcomes for those in care. This could include implementing consistent approaches and minimum standards to support the following objectives:
  - a. a safe and appropriately skilled workforce, with appropriately vetted staff with the necessary skills and training
  - b. care providers' facilities, processes and practices are meeting minimum standards and following best practice approaches
  - c. people in care have access to appropriate health and education services
  - d. people in care, their carers and their whānau are supported through transition points, e.g. moving in and out of care, and starting school.
17. The Board would be required to specify targets within these areas that they could work towards, and design measures to assess and track progress against the targets. Once developed, these targets and measures would be taken to Cabinet for approval. This approach will help the Board to focus on what operational improvements can be made in the shorter term while wider, longer term reform programmes are underway.

### **Resourcing for the Board**

18. We have worked with Treasury and the Ministry of Education (as the proposed servicing department for the board) to confirm the practical arrangements to support the board and resource its work. We have confirmed that we would expect the Ministry of Education to deliver servicing functions for the board within existing baselines. Once the board has been established, its members could also agree to different resourcing approaches (including secondments) if they consider more support is needed for providing secretariat support to the board.
19. We expect the board's substantive work to be delivered by the agencies represented on the board. We anticipate that resourcing to achieve the targets developed by the Board will largely be met from agency baselines given the targets will relate to existing services provided to an established population group. Once the Board has been established, the Board will work with relevant officials to consider any financial implications of its work programme, and discuss funding options including the reprioritisation of resources with the Minister for the Board.

### **Exploring voice and partnership mechanisms**

20. Several agencies suggested the proposals should go further to strengthen voice and partnership with key communities, including Māori, Pacific peoples, disabled people and care-experienced people, at a system level. We have added paragraph 46 to clarify that while the proposals do not include specific voice or partnership mechanisms, the board should consider how its work can involve these communities appropriately (eg through the voice and partnership mechanisms that already exist within board members' respective agencies). We have also added a Tiriti o Waitangi analysis section in paragraphs 56-58.

## Defining the scope more tightly

21. Several agencies were interested in further defining the indicative scope for the board's work set out in paragraphs 37 to 39 of the paper. We have not made amendments to these paragraphs. The scope of the Board as expressed in the paper means the categories of State care which would be covered by the Board's role. Our intent is not to over-define the scope of the board's work, but rather to ensure the board reflects the key agencies responsible for different state care settings. Once the board is established, we expect it will confirm its scope with the Minister responsible for the Board, and develop its targets and measures in line with the scope. We have added paragraph 39 in the draft paper to clarify these expectations.

## Next steps

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22. We have put this paper on the agency agenda for discussion on Monday 7 August next week, and the Chief Executive for Oranga Tamariki (who is supportive of the proposal) will also brief the Minister for Children later that week.
23. Subsequent to any changes you may have, we recommend you circulate this paper to your colleagues for consultation. The last GOV Committee meeting before the election is scheduled for **31 August**. In order to make this Committee meeting, we will need to lodge the paper on 24 August. We therefore suggest that ministerial consultation conclude on 22 August so that we can make any necessary changes before lodgement.
24. You may also wish to discuss with the Prime Minister who the appropriate Minister for the Board will be. The Board would be responsible to this Minister for the performance of its functions, and would work with the Minister to develop the targets and measures referred to above. This Minister would work with the Ministers whose departments are represented on the Board and may wish to form a ministerial group to consider advice from the Board. Given the Minister for the Public Service has been the minister responsible for the Crown Response to the Abuse in Care Inquiry, there could be benefit in designating the Minister for the Public Service as appropriate Minister for the Board to align these positions.
25. Following Cabinet agreement to the proposal, an Order in Council is required to formally establish the Board. Given there will be no further Cabinet Legislation Committee sessions following 31 August, the formal establishment of the Board could happen following the election. In the meantime, chief executives can operate as an informal board, and begin work with the appropriate Minister to develop the targets and measures they will work towards once agreed by Cabinet.