





HEI WHAKATAU | BRIEFING

Subject: Māori Communities COVID-19 Fund (MCCF) Community Resilience Funding Approvals Phase 2 Tranche 2

Date:	16/2/2022	Priority	High
Classification	IN CONFIDENCE	Tracking Number	44723

Contact for telep	hone discussion (if required)		
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Dave Samuels	Te Tumu Whakarae mō Te Puni Kōkiri	9(2)(a)	
Grace Smit	Deputy Secretary – Organisational Support, Te Puni Kōkiri		√
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Patricia Joseph	Manager, Equity for the COVID-19 Vaccine and Immunisation Programme, Ministry of Health		
Peter Douglas	PAG Advisor, Department of the Prime Minister and Cabinet		

Other Agencies C	onsulted 🛛 🦰				
	🗆 MoJ 🧹	🗆 NZTE 🧹	MSD 🛛		□ MoE
MFAT		🗆 MfE	🗆 DIA	□ Treasury	⊠ MoH
	🛛 Te Arawhiti				

Minister's office to complete:		
	□ Approved	Declined
	□ Noted	\Box Needs change
\wedge \wedge \wedge \wedge	□ Seen	\Box Overtaken by Events
Comments:	□ See Minister's Notes	□ Withdrawn
Forward to:		√ or ×
 Associate Minister of Health (Māori H 	ealth)	
Minister for Māori Development		
Minister for Māori Crown Relations –	Te Arawhiti	
Minister of Finance		
Minister for Social Development		

Purpose

- 1. This paper provides the following:
 - a. An update on Phase 1 and 2 of the Māori Communities COVID-19 Fund (MCCF), including funding allocated and spent to date.
 - b. The second tranche of Phase 2 proposals (13) for your approval to proceed to contracting, with a total value of \$3.779m
 - c. Five proposals which were considered but not recommended are also provided.
- 2. Agencies intend to proceed with contracting immediately following your approval.

Update on MCCF Phase 1 – Vaccination Uptake

- 3. Phase 1 of the MCCF opened on 22 October 2021. A total of \$72.08m was approved by Ministers across 8 tranches, with approximately \$55.23m paid out to kaitono to date. Since the MCCF was established, the Māori first dose vaccination rate has increased from 69% to 90% and the second dose rate from 49% to 85%.
- 4. The latest MCCF reporting dashboard is attached to this briefing as Annex 1, which provides progress since fund launch, and funding by DHB areas.
- 5. When the MCCF was originally established, \$58.5m (out of a total of \$120m) was allocated for vaccination support (not including \$1.5m departmental expense), however high demand and opportunities identified by providers resulted in an additional \$13.583m being reprioritised from Phase 2 to support vaccination uptake, leaving \$46.417m remaining to be allocated in Phase 2.
- 6. While 77% of the Phase 1 funding has been paid to kaitono, activity continues on the ground. 48 of 85 contracts will complete by end of February with most contract milestones due to complete by March 2022. Agencies are working with kaitono to actively monitor progress against contracted milestones.

Update on MCCF Phase 2 – Hapori Resilience

7. The agreed criteria for Phase 2 are:

Maori led planning for home isolation

- ii. Supporting capability of iwi, hapū and Māori organisations
 - Communications and connections
 - Support for hapori Māori to operate under the COVID-19 Protection Framework
 - Vaccination support

iii.

iv.

- Urgent community needs that fall between existing services
- 8. The importance of vaccination remains high, as the focus of Phase 1 of the MCCF was primarily on first doses for an eligible population which at the time did not include 5-11-year olds, or Māori who were eligible for a booster shot. Kaitono advise that additional targeted efforts are required in some areas to encourage vaccination of tamariki and uptake of boosters.

- 9. On 9 February, Ministers approved 12 proposals totalling \$15.71m as tranche 1 of Phase 2. The kaitono responsible for these proposals have been notified and agencies are working with kaitono to agree contracts. Two proposals presented to Ministers were not approved. The proposal from Tūwharetoa ki Kawerau has been reframed and is resubmitted for consideration below. Te Arawhiti is working with Ministers' offices to reframe the proposal from Nationalh lwi Chairs Forum. This proposal may also be resubmitted as part of a future tranche.
- 10. The second round of 13 proposals is included for Ministers consideration in this briefing, the total value of these proposals is \$3.779m. If these proposals are approved for funding, the remaining pūtea in the MCCF will be \$26.928m. A third tranche of proposals will be presented to Ministers towards the end of February.

Additional MCCF Considerations

Further support for community responses to Omicron

- 11. A paper¹ has been provided to Cabinet with proposed details for funding to support vulnerable Māori and Pacific whānau through community-led preparations and responses to Omicron during Phases Two and Three, and a plan to ensure it is delivered quickly.
- 12. One of the funding pathways proposed in this paper is to build on the MCCF to enable communities (particularly iwi) to draw on their strengths in mobilising for their own community-based approaches, working alongside government approaches.

Phase 2 Tranche 2 Proposals

Summary of Tranche 2

- 13. Phase 2 Tranche 2 includes 13 proposals with a total value of \$3.779m. This includes the resubmitted proposal from Tuwharetoa ki Kawerau at \$0.300m.
- 14. All proposals have been considered and reviewed by the Senior Officials Group, comprising officials from MCCF agencies. An Inter-Agency Panel of officials has also worked to ensure proposals are aligned with the Care in the Community response and have support from Regional Leadership Groups.
- 15. Proposals are summarised below, and in more detail in Annex 2.

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F	Proposal Name	Location	Funding Agency	Funding (\$m)	Received funding in phase 1?
	l Tuwharetoa ki Kawerau	Kawerau and surrounding rural communities	Te Puni Kōkiri	0.300	No
2	2 Taikura Trust	Tāmaki Makaurau	Te Puni Kōkiri	0.535	No
3	Ngātiwai Trust	Te Tai Tokerau	Te Puni Kōkiri	0.523	Yes
	l Ngāti Maniapoto Marae Pact Trust	Waikato-Waiariki	Te Puni Kōkiri	0.315	Yes
٦	5 Rangitane Tu Mai Rā Frust on behalf of Ko Vairarapa Tēnei	Ikaroa-Rāwhiti	Te Puni Kōkiri	0.043	Yes

Table 1 – Proposals in Tranche 2

¹ COVID-19 RESPONSE: FURTHER SUPPORT FOR MĀORI AND PACIFIC COMMUNITY RESPONSES TO OMICRON

Te Tai Tokerau	Te Puni Kōkiri	0.127	Yes
Ikaroa-Rāwhiti	Te Arawhiti	0.350	No
Waikato-Waiariki	Te Arawhiti	0.147	Yes
Te Tai Tokerau	Te Arawhiti	0.187	No
Ikaroa-Rāwhiti	Te Arawhiti	0.750	Yes
	Ikaroa-Rāwhiti Waikato-Waiariki Te Tai Tokerau	Ikaroa-RāwhitiTe ArawhitiWaikato-WaiarikiTe ArawhitiTe Tai TokerauTe Arawhiti	Ikaroa-RāwhitiTe Arawhiti0.350Waikato-WaiarikiTe Arawhiti0.147Te Tai TokerauTe Arawhiti0.187

Proposal Short Summaries

16. The table below includes a short summary of the activity for each of the proposals, prepared by the contracting agency.

Kaitono	Proposal Summary
1 (Resubmitted)	This proposal is for a range of activities within the scope of Phase 2 to reach hard
Tuwharetoa ki Kawerau	to engage whānau in a community with a high level of vulnerability to the impact Omicron. These activities include three marae based wānanga to provide reliable
\$0.300m	information about COVID-19, COVID-19 preparedness and planning for home isolation, ongoing engagement with whānau about isolation planning and
Te Puni Kōkiri	vaccination guidance, including mitigating high levels of misinformation. Funding sought for clinical and other kaimahi to help support/educate whānau about how
	use Rapid Antigen Testing, and about COVID-19, vaccinations and home isolation.
	It is important to note the Eastern Bay has the two most deprived deciles (9-10),
	Kawerau and Opotiki, higher than that seen nationally for Māori.
	No aspects of this proposal relate to services being funded by the Ministry of Social Development, the Ministry of Health, DHB or another government agency
	or government funded organisation.
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Taikura Trust \$0.535mvulnerability factors including health conditions and difficulty accessing COVID-11 in 4 response services (Vaccination and Care in the Community). Considering 1 in 4 people live with disabilities and 84% of Māori are affected by various levels of impairment, and in Tāmaki 53% are located within higher risk locations like Counties Manukau with a deprivation profile of 42%, and most are in deprived areas (7 to 10), Taikura Trust aims to build the capacity to ensure supports are available to Māori whānau in need.This proposal complements other initiatives by having a specific focus on supporting tāngata whaikaha. Funding will increase the capacity of the Taikura Trust to provide additional tailored and specialised support for tāngata whaikaha (not only their existing registered whānau but those across the Tāmaki rohe) and to all agencies and providers on how to work with disabled communities on all challenges faced because of COVID-19, and strengthen resilience.This proposal is to enable Taikura Trust to support tangata whaikaha and whāna to access COVID-19 vaccination, outbreak and isolation support through three services: • Outreach • Crises management • Immediate resourcing3Ngātiwai Trust S0.523m%0.523mNgātiwai Papae 1 delivery demonstrates their bespoke approach has transferrable learnings that will support successful outcomes in Phase 2. They have been actively, engaged across their community and the foundations for	Kaitono	Proposal Summary
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	Ser -	wider COVID response work within Te Tai Tokerau through the lwi, community,
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Kaitono	Proposal Summary
4 Ngāti Maniapoto Marae Pact Trust	The Maniapoto Marae Pact Trust (the Pact Trust) have prepared a strategy to keep whānau engaged and support them through the home and community preparedness plans that are now urgently required.
\$0.315m Te Puni Kōkiri	The Pact Trust is a trusted local provider servicing the Maniapoto rohe (King Country). In Phase 1 they delivered over 1000 vaccinations to complex needs and socially isolated individuals. They engaged with over 400 households to begin conversations about "Mana Kainga"- how to isolate safely at home.
	After a successful Phase 1 contract execution, the Pact Trust now propose to:
	 develop and deliver resilience plans to 200 households supporting over 1000 individuals
	 support 10 marae and community groups to wananga on what the COVID-19 Protection Framework means for them
	 continue vaccination delivery for at-risk whānau across the spectrum; children, rangatahi, koeke, 1st, 2nd and booster immunisations.
	The Maniapoto Marae Pact Trust has a track record of excellence, are well connected with other providers in the rohe and are trusted by very vulnerable and at risk whānau in the community.
5 Rangitane Tu Mai Rā Trust on behalf of Ko Wairarapa Tēnei	Rangitāne Tu Mai Rā Trust is the umbrella organisation on behalf of Ko Wairarap. Tēnei, this roopu was initiated in response to the Covid-19 pandemic threat in 2020. It is a coordinated and planned approach for Wairarapa Māori to develop and lead the way to support Wairarapa whānau during the pandemic responses including mātāwaka.
\$0.043m Te Puni Kōkiri	They successfully completed Phase 1 MCCF and Phase 2 is to support their newly appointed Māori coordinator role (recently funded by Te Puni Kōkiri) which was a gap they identified in Phase 1. This application enables them to increase their communications with their vulnerable population, further support the coordinator with appropriate resources and to provide resources to eight marae ready for distribution to whānau.
	The activities proposed do not duplicate or overlap services being funded by agencies outside the MCCF.

Kaitono	Proposal Summary
6 Poutini Waiora	Poutini Waiora has collaborated with a range of entities to form a "Navigator Hub" The kaitono proposes expanding the scope of this hub to aid in the COVID-19 response.
\$0.291m Te Puni Kōkiri	Poutini Waiora would like to increase the brief of Navigators to also support Buller District whānau to navigate issues created as an impact of COVID-19, and to support whānau to live with COVID-19 in the community. Whānau in the Buller District are at significant risk of not being prepared or adequately resourced to deal with a COVID-19 outbreak in the community.
	This proposal is seeking funding to enable the scope of navigator services to also deal with COVID-19 responsiveness to whānau of the Buller District.
	Current Ministry of Health statistics indicate that rates of unvaccinated Māori across Te Waipounamu DHB's are between 11% (Canterbury DHB) and 14% (West Coast DHB).
	The West Coast DHB has some persistently high rates of unvaccinated Māori, specifically in SA2's towards the more remote parts of the Buller district, including
	 Inangahua SA2 in the Buller district has a Māori vaccination rate of 79%
	 Karamea SA2 in the Buller district has a Māori vaccination rate of 74.5%
	 Charleston SA2 in the Buller district has a Maori vaccination rate of 83%
	While Poutini Waiora operates across the West Coast, this proposal is specifically targeted to the Buller district which is not covered by any other MCCF proposal.
	In engagement with the kaitono there has been some indication that inclusion of training for kaimahi to engage in testing might be added to the project scope. This element of the proposal may be in scope for the MOH welfare response rather than MCCF.
7 Arowhenua Whānau Services \$0.086m Te Puni Kōkiri	Arowhenua Whānau Services (AWS) serves remote communities in the South Canterbury DHB and has access to large numbers of whānau through existing service provision. AWS was also contracted in Phase 1 to deliver expanded vaccination services in the rohe to aid lifting vaccination rates for Māori in remote corners of Te Waipounamu. This proposal is a modest addition to the Phase 1 activities that appears a reasonable continuation in a DHB that has lagged behind others in Te Waipounamu in terms of Māori vaccination rates.
	AWS anticipates that two kaimahi will work with whānau over approximately four months to prepare a resilience plan, health and safety plan and assessment for any welfare needs related to adapting to the dynamic, evolving Covid-19 context.
	The population of Māori in the South Canterbury DHB aged 12 years and over is 3,428 (MoH). Of this group, 87% are fully vaccinated and 91% are partially vaccinated. 42% of tamariki Māori in South Canterbury aged 5-11 years have been at least partially vaccinated. Based on Deprivation Index (NZDep for 2018), the majority of South Canterbury's SA2's fall between decile 2 and decile 5, but with pockets of deciles 8 and 9 in urban Timaru (for example Timaru East, Timaru Central and Marchwiel East).
	The activities proposed do not duplicate or overlap services being funded by agencies outside the MCCF.
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Kaitono	Proposal Summary
8 Ta Taki Tu Charitabla	Taki Tu Charitable Trust are looking to provide support to 1,000 whānau Māori and achieve the following outcomes:
Te Taki Tu Charitable Trust, supported by Tuwhera & Marama Hou	 To create a communications campaign to provide clear information to encourage vaccination and appropriate self-isolation practice and whānau plans
Charitable Trusts \$0.125m	 To encourage an increase in the uptake of vaccinations for whānau Māori with a focus on rangatahi and whānau aged 12-45yrs
Te Puni Kōkiri	 To increase capacity of lwi and Māori providers to reach whānau Māori wanting to be vaccinated
	• To increase reach to whānau Māori who are geographically isolated – resulting in an increase in vaccination rates.
	• To provide hygiene and home packs to 1000 whānau
	The activities proposed do not duplicate or overlap services being funded by agencies outside the MCCF.
9 Te Whare Āwhina O Ngati Tautahi Incorporation	The proposal seeks Phase 2 MCCF Funding to support a 3-month project, ending 31 May 2022, that builds capacity and momentum achieved by Phase 1 in the development of targeted resilience levers for whānau and hapū. The deliverables will see five hapū volunteer training packages, four CPF Marae resilience plans and five wānanga (online or in person) to support whānau and hapū resilience.
\$0.127m Te Puni Kōkiri	Tai Tokerau remains vulnerable with only 80% of Māori fully vaccinated. Ngati Tautahi hapū are impacted by rural geographical settings, low employment opportunities and disconnection of fundamental infrastructure. This creates a high need for whānau-hapū led resilience approaches to combating the impacts of COVID-19, Delta, Omicron. Te Whare Awhina provides one to one, trusted services to support whānau in navigating wellbeing and development opportunities. The kaitono received Phase 1 funding and supported the increase ir vaccinations for Tai Tokerau.
	The activities proposed do not duplicate or overlap services being funded by agencies outside the MCCF.
10 Ngati Pahauwera Development Trust Ltd	Ngati Pahauwera Development Trust (NPDT) have a comprehensive plan to help community members who must isolate. This includes preparing and distributing isolation kits, as well as plans for a support network, including collecting relevant household information about whānau and assessing their vulnerability. MPDT has a strong record of delivery across all MCCF agencies.
\$0.350m Te Arawhiti	NPDT have a membership through whakapapa of around 7,988 registered members, a large component of whom are rurally isolated, and for whānau requiring support, they must travel either up to Wairoa & Gisborne or down to Napier & Hastings. The area is at the highest level of social deprivation with vulnerability factors including high-density, poor quality housing, and gang-related environments, and where vaccinations currently sit at 77.9% (Māori 68.1%). Though the kaitono suggests the rate of unvaccinated in their community to be 10%, they have been unable to convince that part of the population to get vaccinated, and so this proposal significantly focusses on being able to respond to those at a higher risk of harm from contracting COVID-19.
λ	The activities proposed do not duplicate or overlap services being funded by agencies outside the MCCF.

Kaitono	Proposal Summary
11 Raukawa Charitable Trust	Raukawa Charitable Trust is seeking funding for staff to connect with whānau in rural areas in need of health and wellbeing support, especially those who are caring for whānau with disabilities, as well as continuing with its vaccination efforts, focussing on booster doses and the 5-11 age group.
\$0.147m Te Arawhiti	The Trust is seeking funding for the human resource required to deliver the activities planned such as providing information sessions on preparedness, developing information resources on home isolation, ensuring all whānau have access to services and working with housing providers to advocate for housing needs. This includes recruiting a project manager to ensure delivery and liaise with partners and external stakeholders. Establishment of a South Waikato Covid Hub is also being lead by Raukawa, working with all local health providers to best meet the needs of whānau.
	The Trust received Phase 1 Funding to deliver iwi-led vaccination activity. The activities proposed for Phase 2 do not duplicate Whanau Ora services.
12 Te Pūtahi-Nui-o-Rehua Charitable Trust	This is a whānau-led program to create resilience in the face of COVID-19 through a communications outreach program, which will make in-person/kanohi ki te kanohi wellbeing calls to create a trusted whānau network across Ohaeawai, Kaikohe and Kawakawa during COVID-19.
\$0.187m	This programme has been shaped on the real-life experience of whanau who had
Te Arawhiti	COVID-19 in this community where poverty, drugs and suicide are existing issues. The programme is based on the unmet needs that whānau previously experienced in navigating self-isolation and recovery from COVID-19 amongst deprivation.
	The activities planned under the programme run until the end of 2022. This proposal seeks funding for the portion of activities to be delivered by 31 May 2022.
13 Ngāti Whare	Funding sought to reduce co-dependency between the households in the Minginui/Te Whaiti community to better enable well whānau to avoid interactions with those self-isolating.
\$0.750m Te Arawhiti	Minginui/Te Whaiti is an isolated community with low vaccination rates and limited access to healthcare services, particularly due to the recent suspension of their local GP. While the community is small, approximately 300 people, 80% of the population are Maori. There are also significant co-morbidities in the community and substance dependency which makes maintaining in-home self-isolation difficult for some. Compounding this issue is the state of housing with 103 of the 114 homes having either water damage (floor or roof), mould, plumbing or electrical issues and the lack of cell phone use and reception in the area, which makes kānohi-ki-te-kānohi communication more prominent.
EN.	Funding would be used to provide basic necessities (food, bedding, electricity, solar showers, and plumbing solutions) to households that are not self-isolating, so that they can reduce their dependence on others and more easily avoid interactions with those who are self-isolating.
	Te Arawhiti has worked closely with the kaitono to match the proposal to the MCCF criteria. Some elements have been redirected to the Care in the Communities fund and removed from the proposal considered here.

Proposals considered but not recommended by SOG

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17. The table below includes a short summary of each of the five proposals considered but not recommended by SOG including why the proposal is not recommended for funding. More detail about each proposal is presented in Annex 3.

Kaitono	Proposal Summary
1	Providing tailored digital communications and social media training for Māori organisations delivering their COVID-19 response.
9(2)(b)(ii)	The proposal is not recommended to progress. Te Puni Kōkiri may refer 9(2) to
\$0.090 - \$0.164m	other kaitono that requested communications assistance.
Te Puni Kōkiri	
2	To provide increased services to Māori who rely on 9(2)(b)(ii)
9(2)(b)(ii)	services including increased vaccination opportunities, mental health and wellbeing advocacy and support with further social disruptions that may occur
\$0.240m	because of the pandemic.
Te Puni Kōkiri	The proposal is not recommended to progress. The proposal relates to the core social and health supports provided by the 9(2)(b)(di) and has been referred to MSD and MOH.
3 9(2)(b)(ii)	To provide rongoā healing for whānau including online sessions and kete with natural healing resources.
\$0.978m	The proposal is not recommended to progress as it does not meet the criteria for
Te Puni Kōkiri	MCCF Phase 2.
4	To provide Rongoā Māori healing services and products.
9(2)(b)(ii)	The proposal is not recommended to progress as it does not meet the criteria for MCCF Phase 2.
\$0.969m	
Te Puni Kōkiri	
5 9(2)(b)(ii)	9(2) proposes to act as a central connector and facilitator, providing contracting, technology licensing, support and ongoing training for 27 Māori organisations to increase vaccinations, community resilience and access to health services.
\$3.442m	The proposal is not recommended to progress as the provider's ability to deliver the services proposed could not be established.
Te Puni Kōkiri	
lext steps	
8. Following Minister	ial approval of these proposals, agencies will establish contracts wit
	Officials will also advise unsuccessful kaitono that their proposals have no

- been funded.
- 19. Officials continue to work with kaitono on proposals for a third tranche. This includes working carefully with kaitono to ensure proposals meet the criteria of the MCCF and are well aligned with Care in the Community and other government-funded work in this space.

Consultation

20. This briefing and the proposals discussed in this briefing have been developed in collaboration with Te Puni Kōkiri, Te Arawhiti, Ministry for Social Development, and the Ministry of Health.

Recommendations

21. It is recommended that you approve the following decision relating to a resubmitted proposal:

1.	1. Agree to Te Puni Kōkiri proceeding to contract Tuwharetoa ki Kawerau with total investment value of	Minister Henare	Noted
		Minister Davis	Noted
\$0.300m	Minister Jackson	Noted	
		Minister Robertson	Noted

22. It is recommended that you approve the following decisions for **Phase 2 Tranche 2**:

			· · · · · · · · · · · · · · · · · · ·
2.	Agree to Te Puni Kōkiri proceeding to contract Taikura	Minister Henare	Yes / No
	Trust with total investment value of \$0.535m	Minister Davis	Yes / No
		Minister Jackson	Yes / No
		Minister Robertson	Yes / No
3.	Agree to Te Puni Kōkiri proceeding to contract Ngātiwai	Minister Henare	Yes / No
	Trust with a total investment value of \$0.523m	Minister Davis	Yes / No
	•	Minister Jackson	Yes / No
		Minister Robertson	Yes / No
4.	Agree to Te Puni Kōkiri proceeding to contract Ngāti	Minister Henare	Yes / No
	Maniapoto Marae Pact Trust with a total investment	Minister Davis	Yes / No
	value of \$0.315m	Minister Jackson	Yes / No
		Minister Robertson	Yes / No
5.	Agree to Te Puni Kōkiri proceeding to contract	Minister Henare	Yes / No
	Rangitane Tu Mai Rā Trust on behalf of Ko Wairarapa	Minister Davis	Yes / No
	Tēnei with a total investment value of \$0.043m	Minister Jackson	Yes / No
		Minister Robertson	Yes / No
6.	Agree to Te Puni Kōkiri proceeding to contract Poutini	Minister Henare	Yes / No
	Waiora with total investment to \$0,291m	Minister Davis	Yes / No
		Minister Jackson	Yes / No
		Minister Robertson	Yes / No
7.	Agree to Te Puni Kokiri proceeding to contract	Minister Henare	Yes / No
	Arowhenua Whanau Services with a total investment	Minister Davis	Yes / No
	value of \$0.086m	Minister Jackson	Yes / No
		Minister Robertson	Yes / No
8.	Agree to Te Puni Kokiri proceeding to contract Te Taki	Minister Henare	Yes / No
	Tu Charitable Trust, supported by Tuwhera & Marama	Minister Davis	Yes / No
	Hou Charitable Trusts with a total investment value of	Minister Jackson	Yes / No
	\$0.125m	Minister Robertson	Yes / No
9.	Agree to Te Puni Kokiri proceeding to contract Te	Minister Henare	Yes / No
	Whare Awhina O Ngati Tautahi Incorporation with a total	Minister Davis	Yes / No
	investment value of \$0.127m	Minister Jackson	Yes / No
		Minister Robertson	Yes / No
10.	Agree to Te Puni Kokiri proceeding to contract Ngati	Minister Henare	Yes / No
	Pahauwera Development Trust Ltd with a total	Minister Davis	Yes / No
	investment value of \$0.350m	Minister Jackson	Yes / No
		Minister Robertson	Yes / No
11.	. Agree to Te Arawhiti proceeding to contract Raukawa	Minister Henare	Yes / No
	with a total investment value of \$0.147m	Minister Davis	Yes / No
		Minister Jackson	Yes / No
		Minister Robertson	Yes / No
		Minister Henare	Yes / No

12.	Agree to Te Arawhiti proceeding to contract Te Pūtahi-	Minister Davis	Yes / No
		Minister Jackson	Yes / No
\$0.187m	Minister Robertson	Yes / No	
13.		Minister Henare	Yes / No
	Whare with a total investment value of \$0.750m	Minister Davis	Yes / No
		Minister Jackson	Yes / No
		Minister Robertson	Yes / No

23. It is recommended that you note to the following

14. Note that five proposals, received from 9(2)(b)(ii)	Minister Henare	Noted
our second data the Courier Officials One	Minister Davis	Noted
were considered by the Senior Officials Group and are not recommended for contracting	Minister Jackson	Noted
	Minister Robertson	Noted

24. It is recommended that you approve the following decisions to **drawdown funding from the tagged** contingency:

15.	Note that \$60 million has been set aside in the Maori	Minister Henare	Noted
	Communities COVID-19 Fund, Phase 2: Whānau and	Minister Davis	Noted
	community resilience tagged operating contingency	Minister Jackson	Noted
		Minister Robertson	Noted
16.		Minister Henare	Noted
	Phase 2: Whānau and community resilience to Phase 1:	Minister Davis	Noted
	Rapid Vaccine Acceleration [TPK briefing 44312 refers] leaving \$46.417m remaining for Phase 2: Whānau and	Minister Jackson	Noted
	community resilience	Minister Robertson	Noted
17.	Note that Joint Ministers agreed to criteria for Māori	Minister Henare	Noted
	Community COVID-19 Fund, Phase 2: Whānau and	Minister Davis	Noted
	community resilience in December 2021 [TPK briefing 44453 refers], which confirms that funding held in contingency can	Minister Jackson	Noted
	be drawn down	Minister Robertson	Noted
18.	Note that the Minister of Finance, Minister for Māori Crown	Minister Henare	Noted
	Relations – Te Arawhiti, the Associate Minister of Health	Minister Davis	Noted
	(Māori Health), Te Minita mō Whānau Ora and Te Minita Whanaketanga Māori are authorised jointly to draw down the	Minister Jackson	Noted
	tagged operating contingency funding in recommendation 15 above, following agreement of criteria in December 2021.	Minister Robertson	Noted
19.	Note that joint Ministers have previously agreed to fund	Minister Henare	Noted
	\$15.710m of Phase 2: Whānau and community resilience	Minister Davis	Noted
	proposals [TPK briefing 44507 refers] leaving \$30.707m remaining for other Phase 2: Whānau and community	Minister Jackson	Noted
	resilience proposals	Minister Robertson	Noted
20.	Agree that funding within the Māori Community COVID-19	Minister Henare	Yes / No
	Fund Phase 2: Whānau and community resilience tagged	Minister Davis	Yes / No
	operating contingency up to a maximum of \$3.779 can be drawn down to fund proposals agreed in recommendations 2	Minister Jackson	Yes / No
	to 13 above	Minister Robertson	Yes / No

	2021/22	2022/23	2023/24	2024/25	2025/26 & Outyears
Vote Māori Development Minister for Māori Development					

Multi-category appropriation: Māori Communities COVID-19 Fund Non-Departmental Output Expense: Phase 2: Whānau and community resilience	3.779	-	-	-	-
Total Operating	3.779	-	-	-	-

21.	Agree that the proposed changes to appropriations for	Minister Henare	Yes / No
	2021/22 above be included in the 2021/22 Supplementary	Minister Davis	Yes / No
l nom imprest Suppry,	Minister Jackson	Yes / No	
	ion inproce ouppry,	Minister Robertson	Yes / No 🧹
22.	Agree that the expenses incurred under recommendation	Minister Henare	Yes / No
	21 above be charged against the Māori Community COVID-19 Fund, Phase 2: Whānau and community resilience tagged operating contingency described in	Minister Davis	Yes / No
		Minister Jackson	Yes / No
recommendation 16 above	Minister Robertson	Yes / No	

	Hon Peeni Henare
Hon Willie Jackson	Associate Minister of Health (Māori
Te Minita Whanaketanga Māori	Health)
Date:// 2022	Date:/ 2022
Hon Kelvin Davis	
Minister for Maori Crown Relations: Te	Hon Grant Robertson
Arawhiti	Minister of Finance
Date:// 2022	Date: / / 2022

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Annexes

- MCCF Dashboard for week ending February 11 (attached as PDF)
 Tranche 2 Proposals (attached as PDF)
 Tranche 2 Not Recommended Proposals (attached as PDF)

IN CONFIDENCE

Māori Communities COVID-19 Fund – Phases 1 & 2 – weekly update as at February 11 2022

Fund overview (Phases 1 & 2)

\$120m

• Of which:

Total fund size across two phases

\$87.79m Total approved by Ministers \$15.71m from last report Total approved by Ministers

Funding currently under contract with providers **85** contracts

Phase 2 progress

\$72.08m

\$15.71m Approve \$15.71m from last report Approve

Approved by Ministers 12 proposals

Of which:
\$0m

Funding currently under contract with providers **0** contracts

Funding currently under contract with providers

Phase 1 progress

\$72.08m No change from last report

Approved by Ministers **46** proposals with **85** contracts (8 tranches)

► Of which:

\$72.08m No change from last report

\$55.23m

Paid to providers **85** contracts

85 contracts

Weekly progress update

- 12 proposals in Tranche 1 of Phase 2 have been approved by Ministers, worth \$15.71m.
- Further Phase 2 proposals will be submitted to Senior Officials February 14, and due to Ministers February 15.

MCCF Communications update

- Te Puni Kōkiri has issued a release to media and other stakeholders announcing a further 12 proposals totalling \$15.7 million have been approved by Ministers through the Māori Communities COVID-19 Fund to build resilience and continue to support vaccination uptake.
- A new page for <u>Tāngata Whaikaha</u> has been added to the Karawhiua website this week. We aim to launch a new Karawhiua digital marketing campaign later next week.



Performers at Toi Te Mana in Tauranga. Time slots between performances were used to promote vaccination and inform whānau. Photo credit: Ngāti Ranginui Fisheries



Volunteers and kaimahi at a drive-thru vaccination event held in December 2021 at Sulphur Point, Tauranga. Photo credit: Ngāti Ranginui Fisheries



A drive-thru vaccination event held in December 2021 at Sulphur Point, Tauranga, hosted by Ngāti Ranginui. Photo Ngā Kairauhī Trust





Provider Spotlight Ngāti Ranginui Fisheries – Phase 1

MCCF has provided \$0.1m of funding to Ngāti Ranginui to help facilitate two key initiatives in their rohe – Toi Te Mana and Te Kupenga Hao.

Toi Te Mana was held on 11 November 2021 at Baycourt Theatre in collaboration with local media outlets and Kapa Haka groups from schools and kura around Tauranga Moana. The event was livestreamed online and on radio in Tauranga and Whakatāne. National media outlets Te Karere, Te Ao and Aukaha also covered the event and feedback following the event was very positive. The 4–10-minute time slots between groups was filled with vaccination korero, advertising, promotion and included segments encouraging whānau to vaccinate.

Te Kupenga Hao o Ranginui was a mass drive-thru vaccination event held on 11 December 2021 at Sulphur Point, Marine Park. The event involved Māori Healthcare providers, local iwi and hapū, the Huria Trust, the local Whānau Ora Commissioning Agency and input from Moana Communications, the Tauranga City Council (TCC), the Western BOP District Council, and other local groups and businesses.

Feedback on the event from BOPDHB and TCC was extremely positive. Community feedback was also positive with comments praising the organisation and running of the event, as well as the inclusive environment created.

The pūtea provided by the MCCF to Ngāti Ranginui helped them provide 170 vaccine doses at Te Kupenga Hao as well as facilitating another 700+ doses administered across their rohe at local vaccination events hosted at local marae.

Taumarunui Community Kōkiri Trust – approved Phase 2 proposal

Ministers have approved this proposal worth \$0.267m, specifically targeting isolated communities in and around south Waikato.

Target groups in these regions are rangatahi, and those impacted by vulnerability factors such as being unvaccinated, living in rural and remote locations, or in need of support for mental health and addictions.

The proposal includes planning elements for home isolation including:

- employment of kaiāwhina to support COVID-19 response,
- support with the delivery of kai packs,
- provision of daily wellness checks, and
- medication runs for whānau.

IN CONFIDENCE

Māori Communities COVID-19 Fund – Phases 1 & 2 – Vulnerability index and DHB investment



MCCF funding has supported

All vaccination rate data sourced from daily MOH updates 'Overseas / Unknown' included in total vaccination figures



Māori Communities COVID-19 Fund: Phase 2 Proposal Template

The Māori Communities COVID-19 Fund (the Fund) was set up in October 2021 to accelerate Māori vaccination rates and support Māori communities. Phase 1 of the Fund focussed on supporting Māori vaccinations.

The objectives for Phase 2 are to support:

- Māori led responses to the COVID-19 environment and the Framework; and
- Increased resilience of Māori communities.

The Ministry for Social Development is leading the wider welfare response to COVID-19 and the Ministry of Health is leading the wider health response. The Fund is not intended to fund activities which come within the scope of Government agencies, including for example support for home isolation or welfare support.

What will be funded?

Scope of Phase 2 of the Māori Communities COVID-19 Fund		
Māori led planning for home isolation	 support for hapori Māori to <u>plan and design</u> support for and with whānau who are required to isolate. 	
Supporting capability of iwi, hapū and Māori organisations	 building capability in management, leadership, resilience planning, implementation, and therefore the overall ability to scale when needed, including 'soft' infrastructure. 	
	 sharing resources across Māori organisations, such as communications, strategy, and 'back-office' support, to allow them to scale up for greater impact. 	
Communications and connections	 support for organisations to establish channels to communicate and connect with Māori 	
Support for hapori Maori to operate under the COVID-19 Protection Framework	 support for those who are not required to isolate but who are more generally affected by COVID-19, including marae and Māori businesses as well as whānau, hapū and iwi. Examples may include marae and/or hapori asking for assistance to operate safely under the 	

	Framework, such as help to maintain social distancing at gatherings e.g. portable toilets or marquees.
Vaccination support	 Māori led initiatives to support whānau Māori vaccinations, including vaccinations for children aged 5 11 years once approved. The Ministry of Health retains responsibility for the roll out of vaccinations, however further support for Māori providers to work within their communities may continue to be needed.
Urgent community needs that fall between existing services	 urgent unmet community needs that arise in the context of COVID-19.

What will be prioritised?

Priority will be given to proposals which target the following:

Target area	
Key geographic areas	Areas with low vaccination rates
	Areas with high Māori populations
	Districts and locations currently under red settings or
	moving to red settings under the COVID-19 Protection Framework
Māori population groups	Kaumātua
	Rangatahi
	tāngata whaikaha (people with disabilities)
XCN	people at risk of severe illness from COVID-19
	(immunocompromised, people with medical conditions and compromised immunity)
Vulnerable groups	not yet vaccinated
	living in rural and remote locations
	living in poverty, unable to (or at risk of not being able to) meet basic needs
L	1

without permanent housing
unemployed, not engaged in education or training
need support for mental health conditions and addictions

What will not be funded?

The following activities are outside the scope of the Fund and will not be able to be supported:

- projects/activities that are already funded by other government agencies, including as part of the immediate response and recovery to COVID-19. This includes the provision of health and welfare initiatives already funded through the Government's Care in the Community such as support for whānau in SIQ
- existing operations of an iwi or organisation, including existing staff costs our funding must support activity on top of existing activity
- retrospective events and activities or initiatives that go beyond <u>31 May 2022</u> (this includes for example staffing costs)
- applications where activities are based outside New Zealand
- medical costs
- legal advocacy or litigation costs, including court costs
- payment of existing debts
- new business ventures
- events that have a political component or purpose.

Eligibility Criteria

Eligible groups include:

- Whānau Ora commissioning agencies (who will work through their Whānau Ora provider networks)
- other Māori health providers
 - iwi and hapū groups including their associated health and social service providers
- other Māori organisations.

Strong preference will be given to organisations that are legal entities and have proven performance with MCCF agencies.

Other requirements:

You must be able to demonstrate:

- established or existing connections with whanau and communities
- established systems and processes
- proven experience in delivery
- business continuity planning
- a proposed framework for impact measurement
- demonstrated experience in kaupapa based design
- your initiative needs to be able to be completed by <u>31 May 2022</u>.

How to submit a proposal

To submit an application for investment please ensure your initiative fits within the scope of the Fund as described above and complete the Applicant and Project Details below. You will also need to agree to the declaration at the end of the document.



Organisation Key Contacts

Primary Contact (authority to sign the agreement)

 Name
 9(2)(a)

	9(2)(a)	
Role in Organisation		
Email		
Mobile		
Landline		
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Secondary Contact (day to day manager of 9(2)(ba)(i	
Name	
Role in Organisation	
Email	
Mobile	
Landline	
Additional information	
Are there any conflicts of interest (real	

Are there any **conflicts of interest** (real or perceived) between any members of the organisation, any third party or employees of Te Puni Kōkiri, Te Arawhiti, Ministry of Social Development or Ministry of Health? If yes, please state how conflicts of interest will be managed.

Project Details

Please:

- ensure your proposal comes within the scope of Phase 2 of the Māori Communities COVID-19 Fund (see guidance pp2-4 above)
- clearly describe what your proposal will deliver and how it will meet the needs of hapori Māori
- describe the target audience giving details of how many vulnerable whānau will be reached by your initiative
- > note all funded proposals must be completed by 31 May 2022.



MCCF Phase 2 Priorities

Please set out what your proposal will deliver in those of the areas listed in the table below which are relevant to your initiative. This should include:

- outcomes sought
- sufficient detail to make it clear how the proposed spending will deliver these outcomes
- clearly set out deliverables that can be included in a contract
- your proposed approach to measurement.



Support for hapori Māori to operate under the COVID-19 Protection Framework

Vaccination support

Urgent community needs that fall between existing services

How will you work with other groups/providers in your target area to avoid duplication and maximise impact?

Which agencies have you approached for support for COVID related activities? Have you been successful? If so, what is the funding for?

Do any aspects of your proposal relate to services being funded by the Ministry of Social Development, the Ministry of Health, DHB or another government agency or government funded organisation?

Requested Investment amount

Please provide the following documents with your application form

Declaration Risk Management Plan Budget	
Plan	
Plan	
Budget	$\boldsymbol{\mathbf{\lambda}}$
Budget	
Your organisation's	
bank deposit slip	
Child Protection	
Policy	
Business Continuity	
Plan	

Business continuity plan:

X.

This proposal has been designed to work within the COVID-19 Protection Framework with the bulk of the workshops being delivered online, and an option to deliver in person where needed.

Where there are high instances of illness or a region is unable to attend a workshop, we will work with them to deliver at a new date that suits.

Appendix One

DECLARATION

In signing this Declaration, I/we:

Social Good

.....

[Organisation's name]

- 1. Confirm the information contained in this document is true and accurate
- 2. Confirm the bank deposit slip provided to you is for my organisation
- 3. Confirm I/we have read and understood my rights and obligations under the Privacy Act 2020
- Confirm this project complies with the objectives of my organisation as contained in the Organisation's Constitution or Trust Deed or Māori Land Court order
- 5. Confirm the organisation is solvent and in a position to pay its expenses as they become due
- 6. Understand that there is no guarantee that my organisation will be successful in securing funding from the Māori Communities COVID-19 Fund
- 7. Confirm the organisation is fully compliant with all applicable legislation, including requirements under the Children's Act 2014 (if applicable)
- 8. Confirm the organisation will adhere to COVID-19 Government guidelines including Alert Level health and social measures
- 9. Agree, to inform and provide details to Te Puni Kökiri should any decision-making member of the organisation been declared bankrupt or has been charged with fraud
- 10. Agree, that the information provided in this document can be used by Te Puni Kōkiri for statistical purpose/ and or policy development
- 11. Agree, that if successful, we along with the target group beneficiaries of the proposed project may be required to participate in an evaluation of the project
- 12. Fully accept full accountability and responsibility for all requirements associated with the completion of the project
- 13. Agree to inform and provide details to Te Puni Kökiri should the position with respect to any of the above declarations change or be at risk of changing at any time up to and including completion of the project.

Name of authorised signatory

Name of authorised signatory

1

Signature

Date / /

Signature Date /

Appendix Two

RISK MANAGEMENT

Please consider the possible risks to delivering the project successfully and how the risks will be mitigated.

- 1. Using the table below, detail each potential risk, no matter how big or small.
- 2. Identify the likelihood of the risk occurring and the impact should the risk occur
- 3. Tell us how you will minimise the impact of the risk planned treatment.

Likelihood	Impact
Very likely (80-100%)	Severe
Likely (50-80%)	Major
Possible (20-50%)	Moderate
Unlikely (5-20%)	Minor
Rare (<5%)	Negligible

Risk identified	Likelihood	Impact	Planned treatment
A COVID outbreak prevents any in- person events being held	9(2)(ba)(i)		
The trainer becomes ill and is unable			
to deliver the training The internet connection in some			
remote areas won't allow online delivery.			

Māori Communities COVID-19 Fund (MCCF) Phase 2 - Concept Summary

Lead Agency:

Organisation name	
Proposal name	
Total funding requested	
lwi affiliation	
Area/Region(s) covered	
 Set out which of the following criteria the proposal is focused on: Māori led planning for home isolation Supporting capability and capacity of iwi, hapū and Māori organisations Communications and connections Support for hapori Māori to operate under the COVID-19 Protection Framework Vaccination support Urgent community needs that fall between existing services Set out the target areas, population groups and vulnerability factors. What funding has this kaitono previously received for Covid response (.e.g Phase 1, MoH, CiC etc) 	
How does this proposal complement rather than duplicate other activities and resources, e.g. the Government's health and welfare responses (CiC)?	
Are there components that fit under other funds?	

Agency recommendation (proceed to development stage, split proposal, refer to another agency, decline to proceed)

Do not progress under MCCF. Refer to MSD and MoH.

MCCF Phase 2 Criteria

Activities in scope	
Māori led planning for home isolation	 support for hapori Māori to plan and design support for and with whānau who are required to isolate.
Supporting capability of iwi, hapū and Māori organisations	 building capability in management, leadership, resilience planning, implementation, and therefore the overall ability to scale when needed, including 'soft' infrastructure. sharing resources across Māori organisations, such as communications, strategy, and 'back-office' support, to allow them to scale up for greater impact.
Communications and connections	 support for organisations to establish channels to communicate and connect with Māori
Support for hapori Māori to operate under the Framework	 support for those who are not required to isolate but who are more generally affected by COVID-19, including marae and Māori businesses as well as whānau, hapū and iwi. Examples may include marae and/or hapori asking for assistance to operate safely under the Framework, such as help to maintain social distancing at gatherings e.g. portable toilets or marquees.
Vaccination support	 Māori led initiatives to support whānau Māori vaccinations, including vaccinations for children aged 5 – 11 years once approved. The Ministry of Health retains responsibility for the roll out of vaccinations, however further support for Māori providers to work within their communities may continue to be needed, and would be consistent with the principles that guide decision making under the MCCF.
Urgent community needs	 urgent unmet community needs that arise in the context of COVID-19 that fall between existing services.

Target area	May include
Key geographic areas	 areas with low vaccination rates areas with high Māori population districts and locations currently under red settings or moving to red settings under the COVID Protection Framework kaumātua rangatahi tāngata whaikaha (people with disabilities)
	 people at risk of severe illness from COVID-19 (immunocompromised, people with medical conditions and compromised immunity)
Vulnerability factors	 not yet vaccinated living in rural and remote locations living in poverty, unable to (or at risk of not being able to) meet basic needs without permanent housing unemployed, not engaged in education or training need support for mental health conditions and addictions



- Support for hapori Māori to operate under the COVID-19 Protection Framework
- Vaccination support
- Urgent community needs that fall between existing services

Set out the target areas, population groups and vulnerability factors.

What funding has this kaitono previously received for Covid response (.e.g Phase 1, MoH, CiC etc)







Are there components that fit under other funds?

Agency
recommendation
(proceed to
development stage,
split proposal,
refer to another
agency, decline to
proceed)

MCCF Phase 2 Criteria

Activities in scope	
Māori led planning for home	 support for hapori Māori to plan and design support for and with
isolation	whānau who are required to isolate.
Supporting capability of iwi,	 building capability in management, leadership, resilience
hapū and Māori	planning, implementation, and therefore the overall ability to
organisations	scale when needed, including 'soft' infrastructure.
	 sharing resources across Māori organisations, such as
	communications, strategy, and 'back-office' support, to allow
	them to scale up for greater impact.
Communications and	 support for organisations to establish channels to communicate
connections	and connect with Māori

Support for hapori Māori to operate under the	 support for those who are not required to isolate but who are more generally affected by COVID-19, including marae and Māori
Framework	businesses as well as whānau, hapū and iwi. Examples may include marae and/or hapori asking for assistance to operate safely under the Framework, such as help to maintain social distancing at gatherings e.g. portable toilets or marquees.
Vaccination support	 Māori led initiatives to support whānau Māori vaccinations, including vaccinations for children aged 5 – 11 years once approved. The Ministry of Health retains responsibility for the roll out of vaccinations, however further support for Māori providers to work within their communities may continue to be needed, and would be consistent with the principles that guide decision making under the MCCF.
Urgent community needs	 urgent unmet community needs that arise in the context of COVID-19 that fall between existing services.

	COVID-19 that fall between existing services.
Target area	May include
Key geographic areas	 areas with low vaccination rates areas with high Māori population districts and locations currently under red settings or moving to red settings under the COVID Protection Framework
Māori population groups	 kaumātua rangatahi tāngata whaikaha (people with disabilities) people at risk of severe illness from COVID-19 (immunocompromised, people with medical conditions and compromised immunity)
Vulnerability factors	 not yet vaccinated living in rural and remote locations living in poverty, unable to (or at risk of not being able to) meet basic needs without permanent housing unemployed, not engaged in education or training

