Not just another acronym: NGOs in the Health and Disability sector

A Presentation on behalf of

The Health and Disability Sector NGO
– MoH Forum
What / Who is an NGO??

THE THIRD SECTOR

- Organisations – whether formal or informal
- Private – not part of the apparatus of government
- No profit distribution – does not distribute profits to the owners
- Self Governing
- Voluntary – non compulsory
What’s your non-work experience of NGOs?

- Are you a volunteer?
- Are you on a governance board, school committee, etc?
- Why??
NGOs work collaboratively to achieve best outcomes, which means working across other sectors as well as health.

- Our networks are sizeable and reach across all sectors
- NGOs share skill and knowledge
- NGOs often have to work with little resource
- VAVA
NGOs are values driven, not-for-profit, and built by passionate people. They see their role as wider than just fulfilling health contracts.

NGOs are:

- Passionate about serving our communities
- Often under-resourced
- Highly specialised and contracts need to reflect this
Government Policy directives

- “Statement of Government Intentions for an Improved Community-Government Relationship” (2001)

- Treasury’s “Guidelines for contracting with NGOs for services sought by the Crown”
Statement of Government Intentions

Recognises NGOs having:
- unique and vital role in NZ society
- Essential contribution to healthy civil society

States will be an active partner, based on honesty, trust and integrity, compassion and integrity; recognising diversity
Services purchased should:

- contribute to the achievement of Government outcomes and objectives
- reflect the needs of the ultimate users or recipients of the service
- provide appropriate accountability for public money
- represent value for the public money

The crown and its organisations should:

- act in good faith
- understand the nature of the organisations they contract with
- be consistent with the relationship the Government seeks to have with the community and voluntary sector
CONTRIBUTION OF NGOS TO HEALTH & DISABILITY SECTOR
1. NGOs are committed to the social and economic wellbeing of the communities they work for, and to reducing social inequalities.

NGOs:
- Work towards community outcomes
- Have a wider view of health
- Are well placed to advise on funding choices
- Are a useful resource to help DHBs in communicating with local stakeholders
2. NGOs employ experienced and expert staff.

- Staff know their communities and product.
- They are motivated by outcomes, not profit.
- NGO staff are a resource for DHBs.
- Recruitment and retention still a challenge.
- NGO sector actively involved in workforce development.
3. NGOs are committed to meeting their obligations under the Treaty of Waitangi.

- Many NGOs are Maori organisations operating under tino rangatiratanga
- NGOs are committed to building a “Treaty-driven society”
  - Kawanatanga / Governance
  - Tino Rangatiratanga - Māori control and self determination; and
  - Oritetanga - Equity
4. NGOs have significant influence. They represent substantial economic value in the health sector and mobilise powerful networks.

- Our influence comes from:
  - Funding share -- one third of DHB budgets go to non-DHB providers
  - Expertise of staff
  - Magnitude of local networks
  - DHBs have transferred risks to NGOs
  - NGOs deserve more influence over issues relating to these risks
5. NGOs have flexibility that promotes innovation and tenacity in decision making.

- NGOs provide “social glue” at local level
- We are highly responsive
- We successfully balance risk and innovation
6. NGOs deliver skilled and cost effective services.

- NGOs highly skilled and committed
- Excellent value for money

- Our value comes from
  - Our networks
  - The goodwill of our people
  - Efficient and responsive governance and management systems
Challenges facing the NGO sector
## Paradox of Now

<table>
<thead>
<tr>
<th>Market Model</th>
<th>Unable to operate supply and demand</th>
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<tbody>
<tr>
<td>Community promotes innovation, etc</td>
<td>More time on paperwork monitoring</td>
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<tr>
<td>Social values driven workforce</td>
<td>Verification/credential creep</td>
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<td>A vision of recovery in our grasp</td>
<td>Strangled by service specs and no money</td>
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<td>Passionate activists</td>
<td>Efficiency driven Managers</td>
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*Health and Disability Sector NGO-MoH Forum*
Challenges (cont’d)

- Contracting delays
- Pricing
- Consultation limitations
- Cost of Compliance requirements (e.g., HPC Act)
- Financial pressures (inflation, MECA, etc)
- Advocacy and lobbying
- Co-ordination of service:
  - Contracting
  - Development
  - Delivery
Working Group activities to date

- Co-ordination and Promotion of NGO sector
- 6 monthly meetings for NGOs and invited speakers (themes incl: working with PHOs, SOGI/Treasury Guidelines, working with DHBs, quality and risk, etc)
- Scoping of NGO H&D sector (size, funding)
- Surveys of H&D sector on relationships with DHBs and MoH
- Consultations on government policy/legislation
- Sector feedback to MoH
- Membership of MoH working groups (e.g., PHO Steering Group, NZHIS Steering Group, etc)
Future Tasks

- Further work on audits and risk management
- Continued input to legislation and draft policies
- Sector capacity and capability support
- Sector leadership/best practice
- Enhanced NGO sector relationship with feedback to MoH