



Listening, learning, changing Mā Whakarongo me Ako ka huri te tai

Crown Response to the Abuse in Care Inquiry

COVERSHEET

Minister	Hon Erica Stanford	Portfolio	Lead Coordination Minister for the Government's Response to the Royal Commission's Report into Historical Abuse in State Care and in the Care of Faith-based Institutions
Date of meeting	7 October 2025	Date to be published	16 March 2026

List of documents that have been proactively released		
Date	Title	Author
7 October 2025	Agenda and items for discussion	Crown Response Office
7 October 2025	Care System Leadership – decisions to be sought from Cabinet in November 2025	Crown Response Office
7 October 2025	Options for wider State and non-State redress	Crown Response Office

Withholding grounds

Information within this document has been withheld as if it had been requested under the Official Information Act 1982. Where this is the case, the reasons for withholding have been listed below. Where information has been withheld, no public interest has been identified that would outweigh the reasons for withholding it.

- section 9(2)(f)(iv) to maintain the current constitutional conventions protecting the confidentiality of advice tendered by Ministers and officials

Notes

- Paper titled *High level options to strengthen responses to claims by wider and non-State care institutions* can be found in the Joint Minister meeting pack for meeting 11 August 2025 at the following link: [Ministerial briefings | Crown response to the Abuse in Care Inquiry](#)



Meeting pack – 7 October 2025

Care and Redress Ministers – Crown Response to the Abuse in Care Inquiry

Membership:

- Hon Erica Stanford, Lead Coordination Minister for the Government’s Response to the Royal Commission’s Report into Historical Abuse in State Care and in the Care of Faith-based Institutions (Chair) and Minister of Education;
- Hon Simeon Brown, Minister of Health;
- Hon Louise Upston, Minister for Social Development and Employment and Minister for Disability Issues; and
- Hon Karen Chhour, Minister for Children and Minister for the Prevention of Family and Sexual Violence.

Meeting pack:

- Aide-memoire: agenda and items for discussion;
- Item 1: Care System Leadership - decisions to be sought from Cabinet in November 2025 – Briefing CRACI 25/109
- Item 2: Options for wider State and non-State redress – Briefing CRACI 25/108



Aide-memoire

Agenda and items for discussion

For: Care and Redress Ministers – Crown Response to the Abuse in Care Inquiry

Date: 7 October 2025

Security level:

Purpose

1. This pack provides the Care and Redress Ministers for the Crown Response to the Abuse in Care Inquiry with an agenda and papers to support its discussion on 7 October 2025.

Agenda

	Item	Timing
1.	<p>Care System Leadership</p> <p><i>(Paper: Item 1: Care System Leadership - decisions to be sought from Cabinet in November 2025)</i></p> <p>This item responds to a Cabinet directive to report back with advice on structural and other system-level changes, including <i>Whanaketia</i> recommendation 41, to establish a Care Safe Agency [ECO 25 MIN 0060 refers].</p> <p>This item seeks agreement to:</p> <ul style="list-style-type: none">• a proposal to build and strengthen a Care Safety System comprising three components:<ul style="list-style-type: none">○ A 'safety in care' system leadership group;○ A core set of consistent care safety expectations across all sectors; and○ Strengthened care safety functions in individual sectors.• a proposed initial focus for the Safety in Care System leadership group to provide system-wide: leadership and strategic direction, policy advice, and performance measurement and reporting; and• report-backs to this group of Ministers in February and April 2026 with progress updates and plans for the next stage of work on each of the three components.	20 minutes

	These decisions will form the basis for advice to be presented to Cabinet in November.	
2.	<p>Wider State and non-State redress (Paper: Item 2: Options for wider and non-State redress)</p> <p>This item seeks agreement to:</p> <ul style="list-style-type: none"> • Option One – establish a single point of connection for State and wider and non-State survivors and organisations, funded from within the existing tagged contingency; • commission further advice in relation to schools, Health New Zealand, and non-government organisations that are currently delivering social services on: <ul style="list-style-type: none"> ○ Option Two (increased support for wider and non-State redress schemes); and ○ Option Three (partial integration with the State redress scheme); and • defer decisions on Option Four (full integration with the State redress system) until Phase Two of work on wider and non-State redress, which can consider options involving legislative amendments and/or major system changes. <p>If you agree to the recommendations, the next steps are to:</p> <ul style="list-style-type: none"> • write to the Minister of Finance to progress the draw down from the tagged contingency for Option One; • prepare a Cabinet paper for SOU on 5 November, seeking agreement to establish a single point of connection (Option One) as a first step; and • reflect decisions on Budget bid invitations in the planned further advice to Care and Redress Ministers. 	20 minutes
3.	<p>National Day of Reflection</p> <p>This item seeks to provide:</p> <ul style="list-style-type: none"> • the outcome National Day of Reflection fund and community events planned; • the approach for attendance at National Day of Reflection events; and • the proposed announcements on the National Day of Reflection 	5 minutes



Item 1: Care System Leadership – decisions to be sought from Cabinet in November 2025

For: Care and Redress Ministers – Crown Response to the Abuse in Care Inquiry **Security level:**

Meeting Date: 7 October 2025

Tracking No: CRACI 25/109

Purpose

1. This paper seeks agreement to key decisions to be sought from Cabinet in November 2025 and provides advice on sources of funding to be examined for the initiatives proposed.

Recommendations

2. It is recommended that you:
 - a. **agree** to build and strengthen a Care Safety System comprising three components, to respond to recommendation 41 (to establish a Care Safe Agency) and progress many of the key related Royal Commission of Inquiry into Historic Abuse in State Care recommendations, by:
 - i. establishing a Cabinet-mandated 'Safety in Care' System Leadership Group (component one);
 - ii. developing a baseline set of consistent core safety expectations across all care sectors (component two); and
 - iii. filling gaps and maturing existing care safety functions in individual care settings (component three);

Minister of Health YES / NO

Minister of Education and Lead Coordination Minister YES / NO

Minister for Social Development and Employment YES / NO

Minister for Children YES / NO

- b. **agree** the initial focus for the Safety in Care System Leadership group would be on:
- i. providing system leadership and setting the strategic direction for care safety;
 - ii. providing system-wide policy advice on care safety to responsible Care Ministers;
 - iii. ensuring system-wide performance measurement and reporting;

Minister of Health YES / NO

Minister of Education and Lead Coordination Minister YES / NO

Minister for Social Development and Employment YES / NO

Minister for Children YES / NO

- c. **note** the 'Safety in Care' System Leadership Group and core care safety expectations are both joint agency priorities for making care safe that can begin immediately, using existing baseline and contingency funding, subject to final decisions by tagged contingency Ministers;
- d. **direct** the 'Safety in Care' System Leadership Group to provide Care Ministers with a detailed joint agency programme of work, for components one and two above, by mid-February 2026;

Minister of Health YES / NO

Minister of Education and Lead Coordination Minister YES / NO

Minister for Social Development and Employment YES / NO

Minister for Children YES / NO

- e. **note** there are a number of individual agency initiatives to fill gaps and mature care safety functions, which are already underway or can be funded within baselines or Budget 25 funding, as well as others that would require new or re-prioritised funding;
- f. **direct** the 'Safety in Care' System Leadership Group to provide Care Ministers with advice on priority individual agency initiatives for making care safe by April 2026, including opportunities to fund these initiatives through the Crown Response Budget 2025 contingency (\$28.0M over four years), the workforce Budget 2025 contingency (\$71.0M over four years) and/or from within Agency baselines;

Minister of Health YES / NO

Minister of Education and Lead Coordination Minister YES / NO

Minister for Social Development and Employment YES / NO

Minister for Children YES / NO

- g. 9(2)(f)(iv)
- 

- h. **note** that the “workforce safety” elements of the Crown Response to the Abuse in Care Inquiry will progress in concert with responses to workforce elements of the response to the Dame Karen Poutasi review and workforce elements of the Family Violence work programme; and
- i. **note** that the Lead Coordination Minister plans to refer the proposed approach (described in recommendations a and b above) to the newly formed Ministerial Advisory Group (MAG) for feedback before seeking Cabinet decisions.



Rajesh Chhana
Chief Executive, Crown Response Office
Crown Response to the Abuse in Care
Inquiry
01 / 10 / 2025

Hon Simeon Brown
Minister of Health

/ /

Hon Erica Stanford
Minister of Education and Lead
Coordination Minister for the Crown
Response to the Royal Commission’s
Report into Historical Abuse in State Care
and in the Care of Faith-based Institutions

Hon Louise Upston
Minister for Social Development and
Employment and with transferred
responsibilities from the Minister for
Children for redress matters

/ /

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Hon Karen Chhour
Minister for Children

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Cabinet requested advice by November 2025, on structural and other system-level changes to care including Whanaketia recommendation 41 (to establish a Care Safe Agency)

3. The Royal Commission of Inquiry into Historic Abuse in State Care (the Royal Commission) recommended the establishment of an independent care safe agency (recommendation 18) that would bring together 18 functions, many of which already exist across agencies and independent entities, into one entity and administer a single regulatory framework that would sit across a wide range of care settings.
4. In Budget 2025, Government provided funding to support the work of the Crown Response Office (CRO), to progress a number of agency initiatives to make care safe, including the following contingency funding linked to care safety work:

	FY25/26 (\$000)			Total across 4 years (\$000)		
	B25 Package	Drawn Down	Balance	B25 Package	Drawn Down	Balance
Making the care system safe – building a diverse, capable and safe care workforce	6,380	-	6,380	70,880	-	70,880
Implementing the Governments response to the Royal Commission of Inquiry	7,094	3,914	3,180	28,375	9,164	19,210

5. 9(2)(f)(iv) [Redacted] The briefing to support the discussion of Item 2 on wider state and non-state redress proposes an option that would entail a drawdown of approximately \$10 million from the \$19 million that remains of the \$28.4 million contingency.
6. On 7 May 2025, Cabinet Economic Development Committee invited the Lead Coordination Minister Responsible for the Government’s Response to the Royal Commission’s Report into Historical Abuse in State Care and in the Care of Faith-based Institutions (Lead Coordination Minister) to report-back to Cabinet in November with advice on any structural and other system-level changes to care, including *Whanaketia* recommendation 41, to establish a Care Safe Agency [ECO-25-MIN-0060 refers].

Multi-Ministers have received advice mapping needs and issues in the current care system against the findings and recommendations of the Royal Commission

7. On 11 August multi-Ministers were provided with a summary of the analysis undertaken to inform advice on responding to recommendation 41. This included:
 - a. data on where harm is occurring in the current care system;
 - b. analysis of how the New Zealand care system has changed since the time of the Royal Commission and a comparison with international care systems;
 - c. interviews with external independent monitors and internal subject matter leads within agencies; and

8. functional analysis of the 18 functions the Royal Commission recommended should be brought together into the independent Care Safe Agency, to identify gaps and opportunities for greater alignment or integration.
9. Based on that work, Ministers agreed six strategic objectives for making care safe:
 - a. improve system cohesion;
 - b. strengthen safeguards and standards;
 - c. build a safe and capable workforce;
 - d. strengthen monitoring and oversight;
 - e. strengthen complaint functions; and
 - f. strengthen accountability.
10. Ministers were also provided with the following five options for progressing these objectives:
 - a. Option 1: The status quo
 - b. Option 2: To fill gaps and mature existing care functions;
 - c. Option 3: Incremental actions to improve alignment across sectors;
 - d. Option 4: A top-down national regulatory framework; and
 - e. Option 5: A fully integrated Care Safe Agency across all functions and settings (as recommended by the Royal Commission).
11. Ministers agreed to prioritise further work on options two, three and four. The status quo option was considered insufficient to achieve the goal of making the care system significantly safer and would not meet survivor and public expectations. The significant structural change proposed under option five was assessed as unlikely to achieve the goal of improved care system safety and contained significant risks associated with the movement and location of functions which may not fit well together. This briefing sets out the outcome of work on options two, three and four.

Officials propose an approach to making care safe and responding to recommendation 41 that has three components

12. Officials propose an approach that combines elements of these three options. The A3 attached as Appendix One (Care System Leadership: Proposed Key Components) sets out the proposed approach, as follows:
 - a. **Establish a Cabinet-mandated 'Safety in Care' System Leadership Group** (which addresses the strategic objective of improving system cohesion);
 - b. **Develop a baseline set of consistent core safety expectations** to sit across the care system and address all six of the strategic objectives (to improve system cohesion, strengthen standards and safeguards, build a safe and capable workforce, and strengthen accountability, monitoring and oversight, and complaint functions); and
 - c. **Progress agency-specific initiatives to fill gaps and strengthen safety functions** within agencies with choices around pace and scale.

The 'Safety in Care' System Leadership Group would advise on strategic priorities and oversee the development of the core safety expectations

13. The new 'Safety in Care' System Leadership Group (the Leadership Group) would oversee responses to all the Royal Commission recommendations related to system leadership, system cohesion and strategic direction. The initial focus areas for the Leadership Group would be:
 - a. provide system leadership and set the strategic direction for care safety;
 - b. provide system-wide policy advice about care safety to responsible Care Ministers; and
 - c. ensure the provision of system-wide performance measurement and reporting.
14. It will be important to the successful operation of the Leadership Group that its focus should be on *care safety*, with work to prevent entry into care and lift care quality more broadly progressing as part of other agency and cross agency programmes of work.
15. A range of options were considered for the form of the Group ranging from:
 - a. Care Chief Executives working together informally (as they currently do);
 - b. developing a national strategy owned jointly by Chief Executives;
 - c. a Cabinet-mandated Chief Executive Group;
 - d. an Interagency Executive Board (IEB); or
 - e. a formal Safety in Care system leadership group set out in primary legislation.
16. Officials consider the Cabinet-mandated Chief Executive Group to be the best option, at least initially. This is because it offers the maximum flexibility needed at this stage and can be established quickly by building off existing governance arrangements. An IEB would involve significantly more bureaucratic processes and it would take longer to establish. The option of a more formal arrangement such as an IEB would still be available if it was later decided that a more formal structure was required.
17. Officials do not recommend establishing this function in an independent entity on the basis that it would have potential to create an adversarial relationship between the new agency and its independent Board and those providing services. This may create tensions with policy departments over regulatory settings and create uncertainty around who drives work programme priorities.
18. The proposal to develop consistent core safety expectations across all care sectors would address all the strategic objectives and facilitate work on many other recommendations that relate to safeguards and workforce. It would be progressed in parallel with work on a joint data and reporting framework. This will address the strategic objectives for system coherence and strengthened monitoring and oversight and accountability.
19. The proposed approach is less rigid than the option for a single top-down national regulatory framework and would focus on the baseline level of expectations. It would consider the baseline level of standards and expectations for settings that have similar levels of risk across different sectors. Following the establishment of the baseline expectations, advice will be provided around whether regulatory change is needed to

support their implementation and enforcement. Agencies and sectors would be expected to have their own (tailored or clinical) standards that sit on top of the baseline expectations. These expectations could be built on over time if it was decided that more is needed.

20. These initiatives will pave the way for further work and form the foundation from which individual agencies can then develop their sector specific safety functions. They will also provide a baseline for implementing other recommendations on issues such as safeguarding and workforce, while the 'Safety in Care' System Leadership Group will facilitate work to respond to recommendations like those concerning Care Safety Principles, a Care Safety Strategy and a Care Safety Act.

Joint work can be funded from within existing baseline and contingency funding and commence immediately following Cabinet decisions

21. The joint initiatives can be funded from within the CRO baseline or (if necessary), the Crown Response contingency, along with contributions of relevant agency expertise and resource. The work can progress immediately following Cabinet decisions. It is proposed that the Leadership Group would provide a detailed joint agency work programme to Care Ministers by mid-February 2026.

Initial design and analysis has been completed on agency-specific initiatives, of which some are funded and underway while others would require new or re-prioritised funding

22. Up to 35 agency specific initiatives have been identified for filling gaps and maturing existing care safety functions. Consistent with the findings of the functional analysis and key informant interviews, many of these initiatives focus on vulnerable adults, establishing safeguards, and complaints, audit and monitoring functions.
23. Some of these initiatives are already underway through baseline funding, including funding provided through Budget 2025. Some would require new or re-prioritised funding.

The next stage of work will advise on which agency-specific initiatives should be prioritised based on benefits, feasibility and costs

24. There is an opportunity to progress some of these initiatives drawing on what remains of the \$28.4 million contingency (once decisions are made on wider and non-state redress) and potentially some of the workforce contingency. ^{9(2)(f)(iv)}

25. The next stage of work will entail identifying priority care safety initiatives based on the benefits of the initiatives (measured against the six strategic objectives, the ability to implement the initiatives (including speed and level of disruption)); and cost.

26. Advice on priority agency initiatives and options for funding these through contingency funding would be provided to Care Ministers by April 2026.

Engagement with the newly established Ministerial Advisory Group is proposed before Cabinet decisions are sought in November

27. The Lead Coordination Minister has recently established a Ministerial Advisory Group (MAG) to provide advice on the Crown Response work programme. Although stakeholder engagement was conducted at the information gathering and analysis stages of this work (referred to in para 7 above), this focussed on internal agency stakeholders and external monitoring or oversight bodies. It did not involve academics, service users, care experienced people or their advocates, some of whom are represented on the MAG. It also did not involve consultation with Māori or any form of Treaty partnership arrangement.
28. The MAG will offer an opportunity to test these proposals with a wider group of stakeholders prior to the Cabinet discussion.

Next Steps

29. It is proposed that officials:
 - a. draft a Safety in Care System Cabinet paper, based on Ministers' decisions on this paper and including background analysis and information to support those decisions, to respond to the Cabinet direction to provide advice in November 2025 that is referred to in paragraph 6;
 - b. commence the joint agency programme of work (set out under components one and two in Appendix One), subject to Cabinet agreement, and bring back a detailed plan for this work to Care Ministers by mid-February 2026; and
 - c. provide Care Ministers with advice on priority agency initiatives for delivering on the objective of making care safe (as per component three in Appendix One) by April 2026.

Appendices

Appendix One: Care Safety System – Proposed key components

Appendix Two: High-level timeframe for a Care Safety System work programme through to June 2026

CARE SYSTEM LEADERSHIP: PROPOSED KEY COMPONENTS

CARE QUALITY

CARE SAFETY

The care safety work is a subset of broader, ongoing agency work to improve care quality

1. ESTABLISH A NEW ‘SAFETY IN CARE’ SYSTEM LEADERSHIP GROUP

SETTING STRATEGIC DIRECTION

SYSTEM-WIDE POLICY ADVICE

SYSTEM PERFORMANCE & REPORTING

BEST PRACTICE GUIDANCE

COLLECTIVE RESPONSIBILITY

- Provide system leadership, set strategic direction for care safety. Includes responding to RC recommendations related to leadership and strategic direction.
- Complement strategic planning, policy advice and CE accountability that sits in individual care sectors.
- Recommended to be located within the public service to be close to Ministers, given the nature of the policy decisions needed.
- Governed by joint care CEs and Ministers through a direct Cabinet mandate (with an option to change to an Interdepartmental Executive Board (IEB)).
- Would be supported by performance expectations for care agency CEs by the Public Service Commissioner.
- Could be temporary until care safety systems are fully mature.
- Function could sit initially in the Crown Response Office, with decisions taken in 2027 about an ongoing home.

EDUCATION

ORANGA TAMARIKI

DISABILITY SERVICES

MENTAL HEALTH

AGED CARE

2. SET CONSISTENT CORE SAFETY EXPECTATIONS ACROSS ALL CARE SECTORS

- Consistent baseline care safety expectations to focus on fundamentals needed across all settings to ensure safety from abuse and neglect.
- Core safety expectations across all settings could be for functions such as vetting, reporting, data collection, penalties and sanctions. Would complement wider care and workforce quality standards that are unique to each care context.
- Could potentially include care safety principles and provide for a care safety strategy and action plans.
- May involve amending existing legislation or passing new legislation.
- Could provide for strengthening information sharing across sectors.

3. STRENGTHEN SAFETY FUNCTIONS WITHIN INDIVIDUAL CARE SECTORS

- Functions that need to be tailored to specific care settings/professional groups would continue to operate on a sector by sector basis.
- Some of these functions sit in care agencies and others sit with independent entities.
- Gaps in functions would be filled, and existing functions matured, where necessary.
- Opportunities for greater alignment, collaboration or consolidation across sectors.

CAPABILITY AND SKILLS

VETTING & REGISTRATION

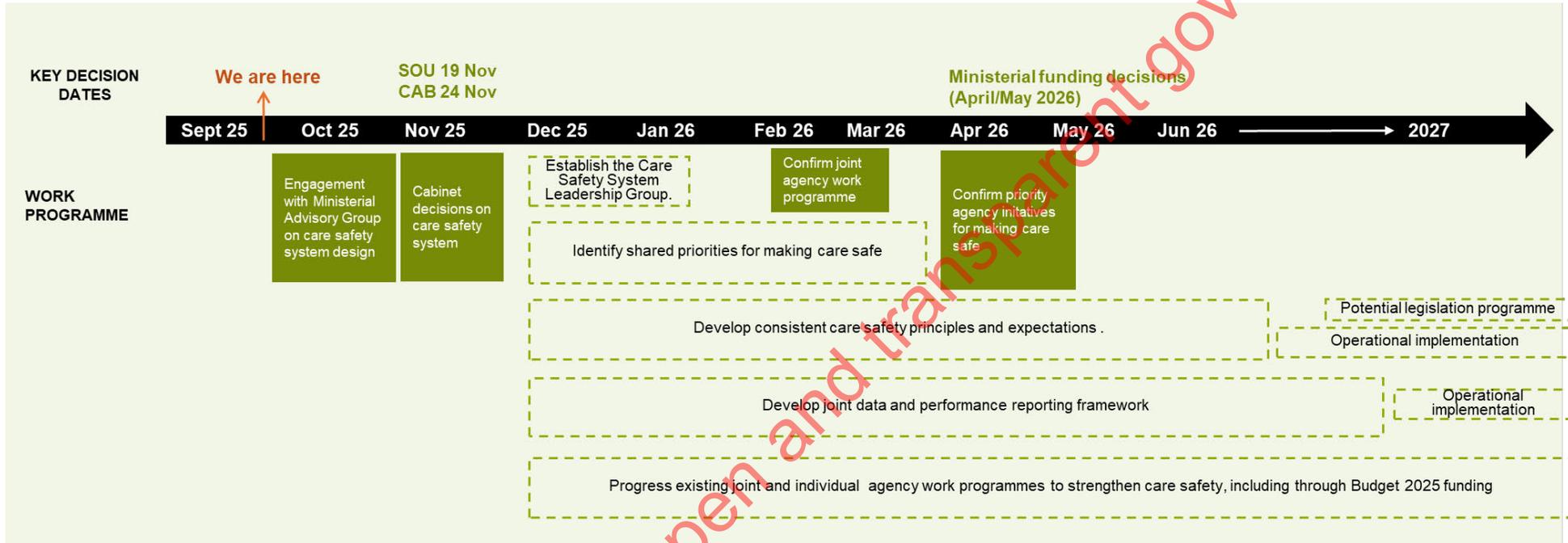
PROVIDER ACCREDITATION

CONTINUOUS IMPROVEMENT

COMPLAINTS & ADVOCACY

MONITORING & SANCTIONS

Appendix Two: High-level timeframe for Care Safety System work programme through to June 2026



Proactive release - open and transparent government



Briefing

Item 2: Options for wider State and non-State redress

For: Care and Redress Ministers – Crown Response to the Abuse in Care Inquiry **Security level:**

Meeting Date: 7 October 2025

Tracking No: CRACI 25/108

Purpose

1. This paper seeks your decisions on options for next steps for wider State and non-State redress.
2. It recommends first establishing a single point of connection for wider State and non-State survivors and organisations, and prioritising further advice,^{9(2)(f)(iv)}

Recommendations

3. It is recommended that you:
 - a. **note** Appendix One provides four options for enhanced support for claims by wider State and non-State survivors;
 - b. **note** these options have all been designed to operate within the parameters that have already been agreed by Crown Response Ministers for this phase of work:
 - i. options must build from decisions Cabinet has already taken on redress for the core State;
 - ii. options must have a limited and manageable impact on current core State redress development and delivery;
 - iii. options will be designed to ensure that non-State entities carry their weight financially; and
 - iv. engagement with wider/non-State entities will not include co-design for high level policy decisions, but co-design could be included in specific aspects of detailed design and implementation, if appropriate;

- c. **agree** to progress Option One of establishing a single point of connection for State, wider State and non-State survivors and organisations, noting this can be funded from within the existing tagged contingency, subject to the agreement of Cabinet and drawdown Ministers;

Minister of Health YES / NO

Minister of Education and Lead Coordination Minister YES / NO

Minister for Social Development and Employment YES / NO

- d. **direct** officials to provide further advice by 30 November 2025 on Options Two (increased support for wider State and non-State redress schemes) and Three (partial integration with the State redress scheme),^{9(2)(f)(iv)}

Minister of Health YES / NO

Minister of Education and Lead Coordination Minister YES / NO

Minister for Social Development and Employment YES / NO

- e. **agree** this further advice be limited to schools, Health New Zealand, and non-government organisations that are currently delivering social services;

Minister of Health YES / NO

Minister of Education and Lead Coordination Minister YES / NO

Minister for Social Development and Employment YES / NO

- f. **note** this advice will reflect decisions made by the Minister of Health and Minister of Education on redress priorities specific to their portfolios ahead of 30 November 2025;

- g. **agree** to defer decisions on Option Four (full integration) until Phase Two;

Minister of Health YES / NO

Minister of Education and Lead Coordination Minister YES / NO

Minister for Social Development and Employment YES / NO

- h. **note** the Lead Coordination Minister has agreed officials provide an update on this work to the Ministerial Advisory Group at a planned October meeting; and
- i. **note** the Lead Coordination Minister proposes to announce the single point of connection on the National Day of Reflection on 12 November, subject to Cabinet agreement.



Rajesh Chhana
Chief Executive, Crown Response Office
Crown Response to the Abuse in Care Inquiry

Hon Simeon Brown
Minister of Health

01 / 10 / 2025

/ /

Hon Erica Stanford
Minister of Education and Lead Coordination
Minister for the Crown Response to the Royal
Commission's Report into Historical Abuse in
State Care and in the Care of Faith-based
Institutions

Hon Louise Upston
Minister for Social Development and
Employment and with transferred
responsibilities from the Minister for Children
for redress matters

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Current redress for wider State and non-State survivors is fragmented, inconsistent, and impossible to access or navigate for many survivors

4. In addition to State care, wider State and non-State organisations have also had care of children and vulnerable adults. Wider State organisations are Crown entities – State and State-integrated schools, and Health New Zealand. The non-State organisations are faith-based organisations and non-government organisations that deliver social services.
5. Current systems to respond to wider State and non-State survivors are fragmented, often difficult to connect with, and can lack capability and capacity to respond.
6. Channels to raise claims of abuse in wider State and non-State systems can be difficult to locate. For example, Health New Zealand is responsible for responding to harm that occurred after 1 July 1993, but does not provide public-facing information on making claims or how to access a redress process, or a clear contact point. This contrasts with the Ministry of Health, which is responsible for claims for harm from before 1 July 1993. The Ministry of Health has an established redress system and clear public-facing information.
7. Non-government organisations providing care have often acted on behalf of the State or received State funding for their service delivery. In a context where the State held statutory custody for a child and the non-government organisations provided for their day-to-day care, State agencies have developed some informal agreements around taking on responsibility for the resolution of elements of an abuse claim. In other contexts, non-government organisations have provided care independently of the State, and the liability and responsibility for a claim is with the non-government organisation itself.
8. Some faith-based organisations have multiple channels for different contexts (e.g. faith-based schools, and different regional administrative divisions).
9. Some organisations have significant experience with supporting survivors and making decisions on claims, while others have limited or no experience. Organisations often face difficulty in understanding their responsibilities and accountabilities, and how to manage claims alongside other service delivery responsibilities.
10. The Crown Response Office (CRO) has undertaken engagement with non-State organisations,¹ and more limited engagement with survivors. The Ministry of Education has undertaken some engagement with peak organisations in their sector.
11. During this engagement, advocates advised that survivors often rely on getting information about redress by word-of-mouth from other survivors, and can struggle to understand their options for making redress claims. Non-government organisations would like more funding, resources, support and guidance on redress.

There are a wide range of options on redress for wider State and non-State survivors

12. On 11 August 2025, multi-Ministers agreed the following phasing for the development of policy options:
 - a. Phase One involves options that can be implemented without legislative change or major system re-design; and

¹ This has included engagement with faith-based organisations (the Catholic, Anglican and Presbyterian churches, and the Salvation Army) and non-government organisations (Stand Tū Maia, the Open Home Foundation, IHC and Blind Low Vision NZ).

- b. Phase Two will consider options that may require legislative amendments and/or major system changes.
13. **Appendix One** outlines the range of options for wider State and non-State redress that can be progressed with Phase One:
- a. *Option One*: a single point of connection for wider State and non-State survivors to understand the support and redress systems they could apply for, and for wider State and non-State organisations to understand how the State redress system operates;
 - b. *Option Two*: increased support for separate wider State and non-State redress systems (e.g. guidance and/or financial support);
 - c. *Option Three*: partial integration with the State’s redress service offerings; and
 - d. *Options Four*: full integration with the State’s redress service offerings.
14. **Appendix Two** further outlines the agreed parameters and phasing, and other previous Ministerial and Cabinet decisions.
15. Key considerations for the options are:
- a. level of connection with the State (e.g. for schools, Health New Zealand, and faith-based organisations);
 - b. the impact of the status quo and alternative options on contemporary service delivery;
 - c. maintaining accountability for historical abuse (including accountabilities with wider State and non-State organisations);
 - d. cost of delivering the option and funding availability; and
 - e. the level of certainty about future demand, and opportunities to increase understanding of demand outside the core State redress agencies.

We recommend Option One – a single connection point as a first step

16. Cabinet has previously agreed to implement a single point of entry to the State redress system, across all the core State redress agencies.² This is planned to be in place by the end of June 2026. We recommend building off this single entry point, so that it also provides a single connection point for wider State and non-State survivors.
17. The purpose of the single connection point would be to provide information both to survivors and wider State and non-State organisations. However, it would not recommend particular options to either survivors or organisations.
18. A single connection point (by phone or email, or access to information via a website) would help survivors understand and explore the options available to them. These would include seeking support through mainstream systems (e.g. ACC), accessing legal services, reaching a support group, and accessing a wider State or non-State redress process (e.g. through a faith-based organisation or non-government organisation). It would not advise on what is the best option for the survivor.
19. Where a survivor chooses to take up any of these options, the single connection point would offer to ‘handshake’ the survivor to this service (e.g. by finding the right point of contact to make a claim to an individual school).

² The Ministry of Education, Ministry of Health, Ministry of Social Development, Oranga Tamariki (Ministry for Children), Te Puni Kōkiri, and the Department of Corrections.

20. State redress policies and processes would also be publicly available through the single connection point. Wider State and non-State organisations would be able to access this information, and could also reach a staff member at the single connection point who could assist them to access and understand these materials.
21. Some survivors have redress claims with both the State and non-State organisations, and access to information on State redress would assist wider State and non-State organisations to understand the State's process, when managing these survivors' claims. Information on the State redress process could also inform the development of redress policies and processes by wider State and non-State organisations, including where the organisation does not currently have a redress scheme. Some non-State organisations have already indicated an interest in accessing this information so they can consider aligning with or benchmarking themselves against the State redress system.
22. The single connection point will also provide greater visibility of the number of wider State and non-State survivors seeking support, and any gaps in the support systems available for them. This can be used to inform later decisions about wider State and non-State redress.
23. This option will not shift an organisation's accountability or liability to the State. It may be perceived as providing a level of State responsibility, but this risk can be managed by ensuring that the design and delivery of the single connection point gives a full span of options, and does not provide advice (refer to paragraphs 36-40 on risks and mitigations).
24. We estimate that developing, delivering and administering the single connection point will cost approximately \$10 million over four years. This is within the Crown Response tagged contingency, subject to decisions by tagged contingency Ministers.
25. We recommend taking a proposal to Cabinet to establish the single point of connection for wider State and non-State survivors. If Cabinet agrees to the proposal, work to develop the single connection point will begin immediately, with delivery to begin at the same time the single entry point into the State redress system commences operation.

We also recommend you commission further advice on Options Two and Three – limited to schools, Health New Zealand, and non-government organisations

26. Option Two (increased support for wider State and non-State redress schemes) would include bespoke guidance or advice, and potentially additional funding, for wider or non-State organisations to manage redress separately from the core State system. For example, this could include guidance tailored to State schools, to enable them to manage redress separately from the State.
27. Some of these interventions may be possible within baselines, while others would require additional funding.
28. Option Three would provide partial integration with the State redress system. This would mean providing some State redress service offerings, beyond the single connection point, to wider State and non-State survivors. For example, these could include support services such as counselling, and assistance to access care records. There are a wide range of choices for Option Three, on the services provided and the sectors to be included (e.g. schools and non-government organisations). Without legislative change, organisations' partial integration with the State system would generally be expected to be on a voluntary basis.

29. The choices for Option Three are likely to require additional funding, with initial cost estimates ranging from approximately \$10 million to \$60 million over four years. However, some initiatives in particular sectors may be possible within baselines.
30. We recommend commissioning further advice on both Option Two and Option Three, but limited to schools, Health New Zealand, and non-government organisations that are currently delivering social services. We recommend prioritising these sectors on the basis that it offers the opportunity to:
- focus on organisations which have the closest connection with the State – i.e. organisations that are part of the wider public sector (State and State-integrated schools, and Health New Zealand) and non-State organisations that deliver government-funded services;
 - help to mitigate impacts of an organisation’s redress costs on the delivery of government-funded services (e.g. State schools using their operating balance to fund redress);
 - address gaps in the capability and capacity of schools, non-government organisations, and Health New Zealand to effectively manage redress;
 - better respond to claims where accountability may sit across both State and non-government organisations, or where accountabilities may be unclear; and
 - enable the State system to be extended initially in a targeted way, to manage pressures on system capacity.
31. If Ministers wish to progress further advice on Options Two and Three, officials will provide this to redress Ministers by the end of November. This advice will reflect decisions to be taken by the Ministers of Health and Education on redress priorities specific to their portfolio responsibilities.
32. Considering further advice on Options Two and Three does not commit Ministers to progressing further work on wider State and non-State redress. It is open to Ministers to not progress any further, other than the single connection point.

We recommend deferring further advice on Option Four until Phase Two of work on wider State and non-State redress

33. Option Four would provide full integration with the State redress system across all sectors, and has an initial estimated cost of approximately \$75 million over the same period. ⁹⁽²⁾
[REDACTED] (f)
(iv)
34. We recommend deferring providing further advice on full integration (Option Four) until the start of Phase Two on wider State and non-State redress, when more is known about demand, and this option can be considered alongside potential legislative and system changes.
35. This would mean that there would be no decisions taken on potential integration of faith-based entities into the State redress system until Phase Two (with some possible exceptions, such as integrated schools).
36. Many of the larger faith-based organisations already have redress systems operating. Overall, these provide a faster response than the State system and are tailored to the faith-based context. There would be considerable complexities in including faith-based organisations in the State redress system at this stage of the redress system design. It may also require legislative change. Faith-based organisations have advised that they wish to

retain their separate systems, and so would be unlikely to opt-in to full integration with the State system.

37. The Presbyterian Church recently made its public apology to those harmed, abused, and neglected by the Church or its people. This apology was developed in collaboration with survivors, and included an announcement that the Church is launching a holistic redress system. The Government's decisions on redress should not prevent wider State and non-State organisations taking responsibility and accountability in this way.
38. Given the complexity of extending the State system to faith-based organisations, this should be considered when Ministers make decisions on the Phase Two priorities and workplan, after the Phase One roadmap is confirmed and has begun delivery.
39. Many survivors of faith-based organisations are likely to be disappointed that decisions have not yet been made about faith-based organisations, beyond the single connection point.

Risks and mitigations

40. There is a risk that by delivering some aspects of redress for wider State and non-State survivors, the public, survivors and organisations may perceive that accountability or liability for claims and redress is being shifted from the responsible organisation (e.g. a school or non-government organisation) to core State agencies.
41. Adjacent to this is the risk that State support for wider State and non-State redress raises expectations about the quality or capability of the wider State and non-State redress schemes, or is seen to endorse those systems.
42. A single connection point (Option One) will not shift accountability or liability to the State, but could still be seen as providing a level of State responsibility. However, the State will continue to have no ability to control or monitor the performance or availability of non-State redress schemes. To some extent, this risk already exists as some State redress schemes already provide some information and support for survivors to contact wider State and non-State organisations.
43. This risk can be mitigated by ensuring that survivors are informed on the full range of options available to them (e.g. support through mainstream systems and accessing legal services) and not limited to a particular pathway. The service design, capability building, and communications on the single connection point will need to ensure survivors understand its purpose and limitations.
44. A further risk with Option One for wider State and non-State organisations is that the accessibility of the single connection point may increase demand for redress beyond existing service capacity. This would, however, be a result of people seeking support and redress for their experiences, and receiving information on options available. The key mitigation would be to ensure organisations are well informed and engaged on the single connection point before it launches, so they can then manage their own risks.
45. If Option One is not progressed, there will still be a need to manage risks on perceived State accountability, and potential demand for non-State organisations. This is because wider State and non-State survivors, and survivors with both State and non-State claims, are likely to contact the State redress system's single entry point.
46. Not progressing Option One will also raise additional different risks, around the lack of a response to wider State and non-State survivors. Survivor advocates have previously indicated concern that the government has made decisions on State redress, but has not

made decisions or provided a policy response for wider State and non-State survivors. Not progressing any option for these survivors is likely to result in significant further concern.

47. Overall, we consider that progressing Option One has lower risks than not progressing any options.
48. We will provide advice on possible mitigations for Options Two and Three in the advice proposed for the end of November.

Budget 2026

49. 9(2)(f)(iv)

50.

51.

Timeline

52. **Appendix Three** provides a high-level timeline for the wider State and non-State redress work programme. This includes the following key decisions:
 - a. 5 November 2025 – Cabinet decisions on a single connection point, and the scale of further options to be considered, including whether to prioritise certain sectors;
 - b. 12 November 2025 – subject to Cabinet agreement, announcement on the single connection point on the National Day of Reflection;
 - c. by 30 November 2025 – advice to Redress and Care Ministers seeking decisions to inform any potential Budget bid; and
 - d. April/May 2026 – Budget 2026 decisions, and a finalised roadmap for wider State and non-State redress Phase One initiatives.

Communications

53. Subject to Ministerial and Cabinet decisions, the Lead Coordination Minister plans to announce the decision to establish a single point of connection for wider State and non-State survivors and organisations as part of announcements on the National Day of Reflection on 12 November.
54. Before announcements, there are choices on informing key stakeholders, including the organisations and survivors that have been engaged on the high-level options. This includes organisations included in the recent engagement, as well as the Ministerial Advisory Group (MAG) which was appointed on 15 September.
55. We recommend that the Lead Coordination Minister make decisions on the organisations to inform ahead of a public announcement on the single connection point, including how to engage with the MAG. Any updates to organisations and survivors will be incorporated

into communications and engagement planning as part of the National Day of Reflection announcements.

Next Steps

56. If you agree to the recommendations in this briefing, the next steps are to:
- a. prepare a Cabinet paper seeking agreement to your direction on Options One and Four, and to progress further advice on Options Two and Three;
 - b. if you agree to progress Option One, work with the Treasury to progress the draw down from the tagged contingency. The Minister of Finance's support for the proposal will be sought via a letter from the Lead Coordination Minister to the Minister of Finance, which must be gained prior to Cabinet consideration;
 - c. 9(2)(f)(iv) [REDACTED]
 - d. following Budget decisions, confirm the roadmap for wider State and non-State redress Phase One initiatives.

Appendices

Appendix One: Options for wider State and non-State redress in Phase One

Appendix Two: Previous Ministerial and Cabinet decisions

Appendix Three: High-level timeline for wider State and non-State redress Phase One work programme

Appendix One: Options for wider State and non-State redress in Phase One

OPTIONS

This A3 sets out four options that could be progressed in Phase One of the wider State and non-State redress work (changes that can be implemented without legislative amendment or major system change). There are a range of choices open to Ministers about how the options are scoped and what sectors are prioritised for intervention. There are choices as to whether interventions for wider State and non-State redress are broadly applied to all sectors or focus on particular sectors or cohorts (e.g. focusing on State and State-integrated schools and Health New Zealand due to their closer relationship to the State, or focusing on organisations where current service delivery could potentially be impacted due to redress claims – e.g. by State schools using their operating balance for redress). All costs are approximate over four years.

Option One – Single connection point (~\$10 mill)

Build off the single entry point into the State redress system to provide a single connection point for wider State and non-State survivors and organisations. This includes:

- providing information and explaining the range of options available to wider State and non-State survivors and helping survivors connect into those options;
- providing State redress policies and processes which can assist wider State and non-State organisations to understand the State redress system.

This can be delivered within existing contingency under \$10m over 4 years.

Option Two – Increased support for separate wider and non-State redress systems (~\$0-10 mill)

Increased support for wider State and non-State organisations' separate redress systems, to increase their capability or capacity. For example:

- bespoke guidance or advice to help organisations improve their own scheme
- support to establish a scheme where one does not currently exist (e.g. Health New Zealand)
- targeted financial support for an entity to deliver redress in priority sectors in agreed circumstances.

Further work is needed to scope and cost this option. Some elements could be delivered within baselines.

Option Three - Partial integration with State redress system (~\$10-60 mill)

Deliver and fund some elements of redress through the State redress system for some sectors. This would generally be on a voluntary / opt in basis.

There are a range of choices available on the scope of the functions and cost-recovery.

Approximate cost is \$10-60m and will vary based on the functions and sectors to be integrated. Some initiatives in particular sectors may be possible within baselines.

Option Four - Full integration with State redress system (~\$75 mill)

Deliver and fund all elements of redress through the State redress system, 9(2)(f)(iv). This would generally be on a voluntary / opt in basis.

The approximated cost is \$75m over four years. 9(2)(f)(iv)

KEY CONSIDERATIONS

- Key considerations for these options, and further choices about scope and priorities, are:
- level of connection with the State (e.g. for schools, Health New Zealand, and faith-based organisations)
 - the impact of the status quo and alternative options on contemporary service delivery
 - maintaining accountability for historical abuse (including accountabilities with wider State and non-State organisations)
 - cost of delivering the option and funding availability, and
 - the level of certainty about future demand, and opportunities to increase understanding of demand outside the core State redress agencies.

Limited function for all sectors

Additional functions available to some sectors (depending on Ministerial priorities)

All functions for all sectors

RECOMMENDATIONS

Agree to implement Option One now

- This option addresses a known gap in information and access as informed by survivor and organisation engagement. Organisations have expressed interest in the proposal.
- A light-touch intervention that cements and enhances existing practice whereby some State redress schemes help survivors connect to a wider State or non-State scheme (e.g. the Ministry of Education supporting claimants to contact school Boards)
- Accountability and liability for claims remains with wider State and non-State organisations. Perception the State is taking on a greater role managed through service design and communications.

Agree:

- to get further advice on Options Two and Three
- scope of options is limited to schools, Health New Zealand, and NGOs that are currently delivering social services

- Options Two and Three can prioritise consistency where there is a stronger level of connection between the State and organisations (schools, public mental health facilities). Survivors (and the wider public) are unlikely to see a meaningful distinction between redress provided by core public service departments and Crown entities.

- Components of Options Two and Three can feasibly build on the Option One single connection point.

- 9(2)(f)(iv)

- 9(2)(f)(iv)

- 9(2)(f)(iv)

Defer further advice on Option 4 until Phase 2

- There is currently insufficient information to accurately scope and cost this option.
- Would be a substantially new function for State redress system to perform.
- Unlikely to be substantial interest from faith-based organisations in this level of integration as they value having separate processes and decision-making.
- Risk the State is taking on, or seen to be taking on, responsibility for non-State claims.
- Capacity constraints and financial cost.
- Can be considered again as part of Phase Two alongside legislative and system change, and once more is known about demand.

Appendix Two: Previous Ministerial and Cabinet decisions

On 11 August 2025, Multi-Ministers agreed to the phasing and parameters of work on wider State and non-State redress.

The phases are:

- a. *Phase One* – options that can be implemented without legislative change or major system re-design, with implementation likely to start in the current financial year; and
- b. *Phase Two* – options that may require legislative amendments and/or major system changes.

The parameters are:

- a. options must build from decisions Cabinet has already taken on redress for the core State;
- b. options must have a limited and manageable impact on current core State redress development and delivery;
- c. options will be designed to ensure that non-State entities carry their weight financially; and
- d. engagement with wider/non-State entities will not include co-design for high level policy decisions, but co-design could be included in specific aspects of detailed design and implementation, if appropriate.

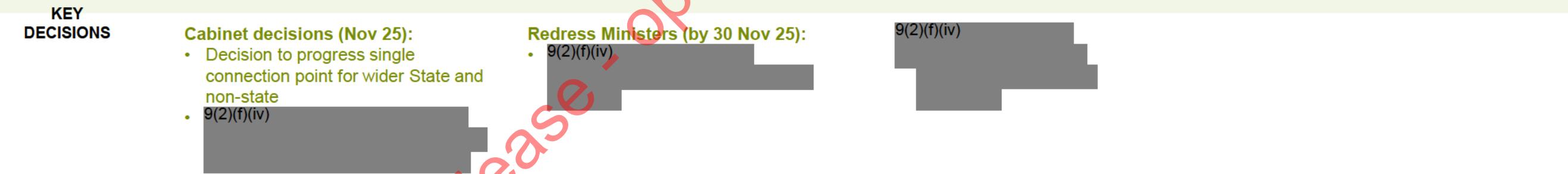
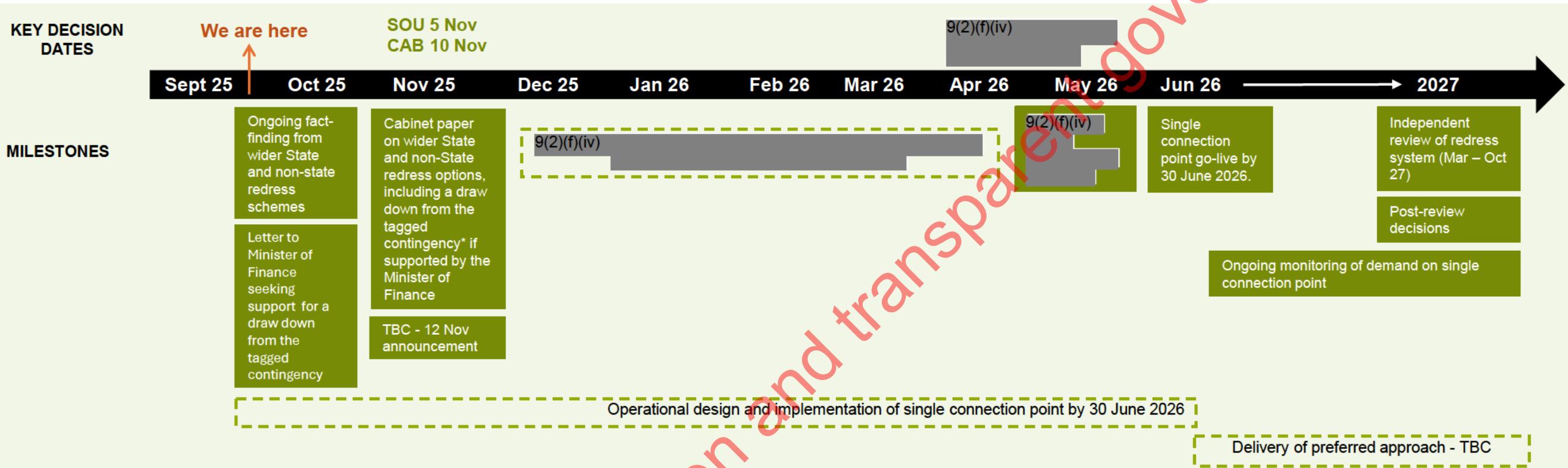
Cabinet has previously agreed the policy objectives for redress generally [CBC-24-MIN-0050 refers]:

- a. deliver accountability for survivors;
- b. support improved outcomes for survivors;
- c. manage affordability, risks, and liability; and
- d. contribute to reducing the negative social, cultural and economic costs arising from the poor outcomes experienced by survivors.

On State redress, Cabinet also previously decided:

- a. to enhance State redress within the existing system; and
- b. to continue the basis for redress as an alternative dispute resolution model, as an options for survivors instead of pursuing a civil claim through the courts.

Appendix Three: High-level timeline for wider State and non-State redress Phase One work programme



	FY25/26 (\$000)			Total across 4 years (\$000)		
	B25 Package	Drawn Down	Balance	B25 Package	Drawn Down	Balance
* BUDGET 2025 CONTINGENCY FUNDING						
Implementing the Government's Response to the Royal Commission of Inquiry into Abuse in Care	7,094	3,914	3,180	28,375	9,164	19,211

Pages 27-39 removed as paper titled High level options to strengthen responses to claims by wider and non-State care institutions can be found in the Joint Minister meeting pack for meeting of 11 August 2025.