Interim Health NZ/ Hauora Aotearoa

Contract Approval Form

This Contract Approval Form (CAF) must be drafted by the Contract Manager. The form applies to any contractual agreements such as new supplier contracts, Contract renewals, Contract extensions, Contract variations, Statement of Works's (SoW's), AoG Consultancy Service Orders (CSO'S), AoG Recruitment Services Orders (RSO's), leases etc.

То	Helen Mexted	
From	S 9(2)(a)	
Copy to	S 9(2)(a)	
Date	14 June 2022	No
Reference documents		

Supplier

Supplier Name	SOLMedia Ltd	
Registered Address		60,
NZBN		

Contract Summary

Name of contract	ĪNGOA – NAMING HNZ & MHA VIDEO
Background	Cabinet (CAB-21-SUB-0378) agreed that HNZ and the MHA will be statutory entities, responsible for the planning, commissioning and delivery functions for health services. While there was a need to identify establishment names for the new entities, Health New Zealand and the Māori Health Authority were seen as placeholders until such time as suitable names were determined.
le de ser	The Chief Executives sought development of names befitting to both organisations. The appointment of Pou Tikanga (senior tikanga advisor), Rāhui Papa enabled progress to the point of providing names that were then endorsed by the respective Boards and Chief Executives.
	The process followed by the Pou Tikanga and the small expert advisory group convened to consider an appropriate name for the organisation provides important insight into the names that have been agreed. This provides an opportunity to profile the two new organisations, their purpose and the appropriate way they are being identified. It is an opportunity to raise awareness of some key



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	fundaments of the intentions of the legislation, eg. recognising issues of equity in the provision of health care. The opportunity presented can be best exploited by creating a short documentary style video to assist whānau, the HNZ workforce, stakeholders and the general public to embrace and understand the new designs and brands for the two new organisations (Health New Zealand and the Māori Health Authority) and aligning with the narratives that underpin the key messages, communications and stakeholder activity of both entities, while raising awareness about the establishment of the entities, the transition required for Health reforms to be made, and the focus of those reforms.
New contract, extension or variation?	New
Contract term	4 Weeks
Termination notice	
Type of contract	Supply of creative (video) services
Corresponding master agreement	
Commencement date	15 June 2022
End date	10 July 2022
Contract renewal date	
Special clauses, terms or conditions to be noted	
Released under	

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Expenditure

xpenditure		4.		
Value of this \$1 contract or variation	2,420			,
Historic value associated with this supplier				
Whole of life value \$3	0,000		1	10
Cost code 11	83	* Y. Y	4 55.	
Opex or capex			184	N
Compliance				
Compliance with government procurement rules	S		Matilo	
Value for Money Assessment		40		
Risks		:0		
Risks	کی ۔	70,		
ICT / information security risks	O,			
Legal Review	" tille			
Legal review required (y/n)	5			
Legal comments				183
Review completed by				
30				
onflict of Interest Ch				
The parties signing below of in Nation to this contract document. If conflict of into	and provider or rec	ommendations/endo	orsements conta	ined within this
	Interest: Yes/No	Signature Name:		<u>Date</u>

TE ANAMATA O TE ORANGA

Interim Health NZ/ Hauora Aotearoa

Contract manager	Conflict of Interest: Yes/No	Signature	<u>Date</u>
		Name:	
Exemption Approver	Conflict of Interest: Yes/No	Signature	<u>Date</u>
		Name:	, C
Delegated Financial Authority	Conflict of Interest: Yes/ No	Signature	Date
		Name:	

Endorsements

Contract	I have reviewed this section	6:	
	I have reviewed this contract	Signature	<u>Date</u>
manager	and confirm deliverables will	(O)	
	be monitored to ensure that		
	they are delivered in		
	accordance with the terms of	Name: Jacqui Bridges	
	this contract	S 9(2)(a)	
Finance	There is approved Budget for	Signatur	Date
	this: Yes/No		2/1/
		S 9(2)(a)	16/6/2
	() *	3 9(2)(a)	
		Name:	
Procurement	Procurement has reviewed	Signature	Date
	contract and confirms		
	procurement approach is in		
	compliance with iHNZ		
	Procurement Policy and		
	Government Procurement		
	Rules: Yes/No	Name: S 9(2)(a)	

Contract Approval

Delegated	NAME Helen Mexted	APPROVED
Financial Authority	TITLE	YES / NO
(DFA) holder	Communications Lead, iHNZ	<i>[]</i>
	SIGNATURE S 9(2)(a)	

FUTURE OF HEALTH TE ANAMATA O TE ORANGA

Interim Health NZ/ Hauora Aotearoa

<u>DATE</u>	61	5	122	

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Interim Health New Zealand/ Hauora Aotearoa

AoG Consultancy Service Order (CSO)

Part A- for Participating Agency (client) to complete

The Participating Agency (referred to as the client in Parts A - E of this Consultancy Services Order) will complete this and email the entire form (including all Parts) to the Provider.

	_		
Today's Date	15 June 2022	CSO or Project name	Tngoa - Naming HNZ & MHA Video
Agency	Interim Health New Zealand (iHNZ)	Provider	SOLmedia
Agency contact	S 9(2)(a)	Provider	S 9(2)(a)
name & title	Communications & Engagement Lead, interim Health New Zealand	name & title	S 9(2)(a)
Nominated Personnel	S 9(2)(a)	Nominated Personnel	
Agency email address	9(2)(a) dpme.govt.nz dpmc.govt.nz health.govt.nz	Provider email	S 9(2)(a)
Agency phone #	9(2)(a)	Provider phone	S 9(2)(a)
Sub Catagory			
GC700 Assurance			
Protective Security Services Sub Panel			

A1. Purpose and any background information

The Cabinet [CAB-21-SUB-0378] agreed that HNZ and the MHA will be statutory entities, responsible for the planning, commissioning and delivery functions for health services.

While there was a need to identify establishment names for the new entities, Health New Zealand and the Maori Health Authority were seen as placeholders until such time as suitable names were determined.

The Chief Executives sought development of names befitting to both organisations. The appointment of Pou Tikanga (senior tikanga advisor), Rahui Papa enabled progress to the point of providing names that were then endorsed by the respective Boards and Chief Executives.

The process followed by the Pou Tikanga and the small expert advisory group convened to consider an appropriate name for the organisation provides important insight into the names that have been agreed. This provides an opportunity to profile the two new organisations, their purpose and the appropriate way they are being identified. It is an opportunity to raise awareness of some key fundaments of the intentions of the legislation, eg. recognising issues of equity in the provision of health care.

The opportunity presented can be best exploited by creating a short documentary style video to assist whanau, the HNZ workforce, stakeholders and the general public to embrace and understand the new designs and brands for the two new organisations (Health New Zealand and the Maori Health Authority) and aligning with the narratives that underpin the key messages, communications and stakeholder activity of both entities, while raising awareness about the establishment of the entities, the transition required for Health reforms to be made, and the focus of those reforms.

This work is important to build trust and public confidence in the new health system by demonstrating the historical and contemporary depth of the process and the names' narrative, and the links to modern and future Aotearoa New Zealand. The video will also be a legacy item that provides important archival footage of this significant event in New Zealand's history.

A2. Specific questions / instructions for Provider

- Create a 2-minute video in Te Reo Maori with subtitles in English telling the story of:
 - o Process for naming
 - o The 'narratives' behind both names
- · Allow for alternative formats and subtitles in other languages
- Allow for a 'long-form' 4-5-mintue version and/or a joint video with an external partner (eg. Maori
 TV)
- Complete (short-form), including approvals, by 30 June 2022

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Interim Health New Zealand/ Hauora Aotearoa

A3. Additional Information e.g. risks to client, additional contact information

Briefing, and client and project management on behalf of iHNZ and iMHA is provided by:

S 9(2)(a)

@dpmc.govt.nz

S 9(2)(a)

@dp mc.govt.nz

A4. Client specific requirements

Released under the Official Information of the Official In

A7. Outputs of the Services

- A short-form video with alternative formats, in Te Reo
- · Potential for a long-form video

Scope of Work

Pre-Production:

- Producer - client services, project management, story outline

Production:

- Producer client services, project management, shoot supervision
- DP Camera operation, lighting, sound.

Post-Production:

- Producer client services, project management
- Editor edit footage into desired output.
- Motion Graphics Designer animate assets and add music

This cost estimate is for the production of a video to accompany the announcement of the new names of the Health New Zealand and the Maori Health Authority.

Create a 2-minute video in Te Reo Maori with subtitles in English telling the story of:

- Process for naming .
- The narratives behind both names.

Allow for alternative formats and subtitles in other languages

Allow for a long-form 4-5-minute version and/or a joint video with an external partner (eg. Maori TV)

Project Management (SOLmedia) - \$3,450

- Planning, scripting and storyboarding
- WIP meetings with production team
- Overseeing of project and liaising with Managenent team for regular WIP meetings to ensure delivery of information is on time, reviewing of footage and ensuring project is on track.

Production Fee (Cornerstore) - \$8,970

- Producer \$1980
- DOP \$1750
- Editing \$1100
- Motion Graphics \$1300
- Production Music \$50
- Archive \$250
- Sub-title overlay and contingency \$2,540

Total Cost: - \$12,420

Cost Estimate Excludes:

- Location Fee
- -Talent Fee
- Filming permits

48. Tables

FUTURE TEANAMATA OTEORANGA

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ationAction

A9. Provider liability cap

Part B - for Provider to complete

The Provider will complete Part 8 and email theform back to the client

B1. Specific Services to be provided

- Project management
- Production management
- One day multi-camera shoot Editing (2-minute main output in landscape 16:9 and 4:5)
- Editing (Long version in landscape 16:9 and 4:5)
- Subtitles (english)
- Subtitles (contingency for 3 additional languages)
- Released under - Production music (all formats)

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	gory and rie	to be Provided				
Selection	Sub-cate	egory of Services				Tier (1/2/
	Account	ing				
	Assurance	ce			i	
	Audit					X
	Finance	and economics				
	Procure	ment and logistics				
	Taxation	1				
	Business	change		×		
	Human	resource		\sim		
	Marketin	ng and public relations		10,		
	Operation	ons management and r	risk	0		
	Policy, re	esearch and developm	ent			
	confirm that	the timeframe is acco	eptable?			
	And the state of t					
Yes		*1/0°				
	d Start and	Date Date				
Parties Committee						



B6. Estimate / Quote (excluding GST, if any)				
Fees	\$12,420			
Administration Fee (Tier 1 and 2 only)	\$			
(Optional) The above Fees are apportioned				
Project Management	\$3,450			
Producer	\$1,980			
DOP	\$1,750			
Editing	\$1,100			
Motion Graphics	\$1,300			
Production Music	\$50			
Archive	\$250			
Sub-title overlay and contingency	\$2,540			
Fixed Fee (Job Level 4)	\$			
Fixed Fee (Job Level 5)	\$			
Monthly Retainer	\$			
Subcontracting	\$			
Expenses	\$			
Total Charges	\$12,420			
Identify whether the Total Charges is an				
Estimate / Quote and the method that	P 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
the Charges have been calculated				
Additional information/ assumptions:				
3				
7,0				

Job Level	Indicative Characteristics
Level 5	 15+ years of extensive professional experience in their specialised field in a consultancy role. An industry leader and key influencer who is respected for their professional proficiency and knowledge. Recognised as a trusted adviser to ministers and/or senior executive teams. Acts as the senior responsible person on major client engagements. Able to be accountable for leading complex projects/programs. Responsible for leading a high performing team of professionals, including the coaching and mentoring of colleagues at Levels 1-4.
Level 4	 10+ years of substantial professional experience in their specialised field in a consultancy role. Strong theoretical base in subject area, with ability to apply best practice principles to the subject matter context. Senior team leader with the ability to deputise for the senior responsible person and coach and mentor more junior staff. Ability to coordinate contributions of other specialists to complete a joint project. Can engage with clients at strategic/management level if required.
Level 3	 3-10 years of notable professional experience in their specialised field in a consultancy role. A trusted performer on a wide range of client-facing consultancy projects in both the private and public sectors. Thorough knowledge of functional area, combining a broad grasp of relevant best practice principles. Ability to participate in multi-disciplinary teams and to work independently (with limited supervision). Performs professional level analysis requiring technical skills and independent initiative within a well-defined program of work. Contacts with clients predominantly at a working level.
2000 2000 2000 2000 2000 2000 2000 200	 1-3 years of demonstrable professional experience in their specialised field in a consultancy role. 1. Previous experience on a range of client-facing consultancy projects, preferably in both the Iprivate and public sectors. 1. Has a theoretical base in subject area, possibly supplemented through recent study, with 1 the ability to translate theory into practice 1. Performs a variety of analytical tasks requiring independent initiative and knowledge. 1. Interacts with clients predominantly at the working level.
Level 1	 0+ years of relevant professional experience in a professional environment. Evidence of prior contributions to consultancy engagements.

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- · Performs a range of administrative tasks to support the wider team.
- · Work is performed under the guidance of colleagues at Levels 3-5.

B7. Conflict of Interest declaration and Additional Information

I, [name of authorised signatory of Provider] have made diligent inquiry whether [name of Provider]) as any actual, potential or perceived Conflict of Interest were it to provide the Services described in this Consultancy Services Order and I have disclosed any actual, potential or perceived Conflict of Interest and how it will be managed below:

Admised that no conflicts exist

B8. Additional information

[Use this section for any specific requirements - e.g. security, health or other policies and procedures, confidentiality requirements etc.]

B9. Signatures				
Helen Mexted, iHNZ Co	xted, iHNZ Communications Lead			
S 9(2)(a)	16/6/22			

Consultancy Services Order	Yes	
Name of client's authorised signatory	S 9(2)(a)	
Signature of authorised signatory	S 9(2)(a)	
Date of acceptance	14June 2022	
Client's job reference or purchase order number	[if required]	

For the former New Zealand Health Partnerships offices, level 1, 7 Central Park, 666 Great South Road, Auckland

Replacement of NZHP branded lanyards with non branded plain lanyards	\$ 278.26
Update visitor and staff carpark signage - sign printing costs and installation	\$ 2,970.00
Replace internal glass signage (new logo) (x3)	\$ 579.51
Replace NZHP branded wall wraps (x3)	\$ 1,797.42
Printed branding updates for visitor kiosk panels	\$ 271.10
Internal signage installation and setup fees	\$ 960.00
Graphic design	\$ 867.39
Total	\$ 7,723.68

For Level 9, 481 Moray Place, Dunedin Branding and signage - \$1,523.75

For 83 Molesworth Street, Wellington Branding and signage – \$2,220.65

For Spark Central, 42-52 Willis Street, Wellington Branding and signage - \$5,088.75

For former healthAlliance office, 660-670 Great South Road, Auckland – NB this is a quote the work has not been completed to date.

Branding and signage – \$8,823.33

For former TAS office, 69 Tory Street, Wellington Branding and signage - \$12,587.00

For former Health Promotion Agency, Wellington Office Replacement signage - \$5,210.00



Sent: Monday, 23 May 2022 8:14 pm

To: S 9(2)(a) @dpmc.govt.nz>; S 9(2)(a) @dpmc.govt.nz>

Cc: S 9(2)(a) @health.govt.nz>

Subject: FW: Visual Treatment options and Talking Points

Importance: High

S 9(2)(a)

Thanks the one-pager and below are a couple of other areas I mentioned to (a) oday, and a few areas that DHBs asked for last week and again today. Could we ask Scenario to w p on the system use and transitional requirements, including:

- 1. An audit and applications across national, local and other services (a), the channel audit that Jade did last year could be a starting point or this may have already been completed
- 2. Advice on the new name and naming changes for DHBs and other parts of our organisations
- Guidelines for application of the new name and ID
- 4. A campaign and content for DHBs and other partners to apply to their channels for the interim period while they rebrand

Happy to discuss any of the above, or any other needs you think we have.

It would be good to talk to (a) separate.



too, on how we involve MHA in this part of the work, or if we keep this

Helen

From: Helen Mexted <Helen.Mexted@health.govt.nz>

Sent: Monday, 23 May 2022 7:42 pm

To: Margie Apa < Margie.Axx@xxxxx.xxxx.xx >
Cc: Helen Mexted < Helen.Mexted@health.govt.nz >
Cubicata Funda Visual Treatment antique and Talking Bain

Subject: Fwd: Visual Treatment options and Talking Points

Importance: High

Margie, attached is the presentation for the Chair and below are some key points for your conversation, including the system application and considerations. I propose we:

- 1. Confirm support for the general direction, advising that option 2 is our preferred concept, and that we may also explore the use of sentence case in the name device to make it more accessible. People images will also be a key part of the look and feel.
- 2. Advise that we will now apply this concept to sample internal and external channels ie website, intranet, social media, pānui, templates, etc and prepare an update presentation for the board for the 10 June meeting, along with an update on system use and timeframes for transition to the new logo in parts of our entities such as DHB-branded channels. We note this will need to be a phased delivery, which may mean that the DHB names remain on some materials for a period of time.
- 3. Advise that we will confirm how we use this naming device for regional and district levels, and for services within HNZ, and propose that we will use the naming convention alongside the district names as appropriate ie Waitematā, Auckland, Counties Manakau, Tairawhiti, Hutt Valley and Capital and Coast, Canterbury, Southern.
- 4. Note that we will prepare guidelines for DHBs and other entities on transitioning from their logos to the new logo. As transition won't be possible straight away, we will provide material to load to staff and public facing channels from 1 July for a transitional period to announce the new name and explain the transition period.

1. Requirements and the creative concepts

We need a visual treatment of our new name – Te Whatu Ora Health New Zealand –
as part of our day one readiness. This is a 'non-brand' treatment, which will meet the practical needs of Te Whatu Ora Health New Zealand.
practical needs of Te Whatu Ora Health New Zealand.

In time we can carry out a full brand development process for the health system, which will be informed by a range of things, including culture development and the Charter.

☐ Five concepts have been designed by communications agency Scenario and include fonts, colour palettes, and name convention (Te Reo followed by English).

2. Recommendation

☐ The concept that best suits our needs is **concept two with** a suggested rework of the colour palette.

☐ Concept two is a simple, bold, yet effective treatment of the name with a unique and subtle creative expression of the naming narrative. Practically, it meets our needs. We may also consider a 'sentence case' version of the logo to increase accessibility.
While concepts three to five are effective, they are trending towards brand, with visual elements beyond just the words. We are intentionally seeking a non-brand and avoiding a logo.
☐ While concept one is an effective and appropriate treatment, with a favourable
colour palette, its creative provenance is more strongly linked to the narrative of the
Māori Health Authority's Te Reo name.
3. Practical application of the visual treatment and the transfer process
☐ Application of the visual treatment design includes, but is not limited to: i. HNZ stationery
ii. Digital touchpoints, eg. Websites, intranets, social channels, email signaturesiii. External communications or advertising
iv. Internal communications
 It will not be applied to extensive physical signage or material application such as health care services or staff uniforms. This can follow over transitional period as
materials come up for renewal.
☐ The word convention will be applied to all consumer touchpoints where there is
spoken or written reference to the single national health system. For example,
scripts for contact centres or receptionists.
4. Working alongside Te Aka Whai Ora Māori Health Authority
☐ We are working alongside interim MHA to ensure a joined-up process.
☐ IMHA communications — in principle — support the approach and are engaging the
same agency to develop the interim visual identity for the Māori Health
Authority. It's CE has confirmed the Venice's
☐ While the iMHA may not use the same concept, they are supportive of the principles
of this approach and the use of a visual name treatment in the place of a fuller
system brand to meet day one needs.
5. Cost
☐ The total cost of this work is \$50,000, as agreed with the IHNZ Board. This cost
includes the development of the narrative for the initial concepts,
and developing the agreed concept, with use guidelines, and examples of use and
application.
☐ We have briefed the designer on the use and application.
6. Existing names
We are aware of existing te reo Māori names that across DHBs, and we're working
alongside iMHA to agree the best process to ensure that transitions align with tikanga best practice.
7. Dependencies
☐ There are a number of critical deliverables for 1 July that are dependent upon the
name and how it is presented being completed and available.
☐ For example, the entity websites, IHNZ stationery, welcome material for day 1, digital and
social media