

# Maori Health Runanga

## AGENDA

**Venue:** Taneatua Room  
Regional Maori Health Services  
Whakatane Hospital  
Stewart Street  
WHAKATANE

**Date:** Wednesday 24 August 2016, 9:30am

Item No	Time	Item	Page No
	9:30am	<b>Karakia &amp; Mihi</b>	
1.		<b>Apologies</b>	
2.		<b>Interest Register</b> – Amend with Secretary	6
3.		<b>Minutes</b> 3.1 MHR 13 July 2016 3.2 DHB 22 June 2016 3.3 BOPHAC 4 May 2016 3.4 CPHAC/DSAC 1 June 2016	11 23 29 33
4.		<b>Matters Arising</b> 4.1 MHR 13 July 2016 4.2 DHB 22 June 2016 4.3 BOPHAC 4 May 2016 4.4 CPHAC/DSAC 1 June 2016	
5.		<b>Correspondence</b> 5.1 Inward 5.2 Outward	
6.		<b>Maori Health Runanga Planning for 2016</b> 6.1 Draft MHR Workplan 2016 6.2 Utilising Maori Health Dashboard & Trendly information	
7.		<b>GM Maori Health, Planning &amp; Funding Report</b> 7.1 GM, MHP&F Monthly Report	36
	10:30am	<b>Morning Tea</b>	
8.		<b>Health Services Planning Workshop</b> <b>Facilitators: <u>Luke Williams &amp; Chris Mules, Ernst Young</u></b>	47
9.		<b>Chair's Report</b>	
10.		<b>Iwi Reports</b>	
11.		<b>Confidential Agenda</b> 11.1 Resolution to Exclude the Public 11.2 Resolution to Move out of Confidential Agenda	48

		11.3	
	12:00pm	<b>Lunch with DHB Board members</b>	
	1:00pm	<b>Combined DHB Board/MHR Hui</b>	
		<p><b>Next Meetings</b></p> <p><u>9:30am</u>, Wednesday 14 September 2016</p> <p>The Orchard Church 20 MacLoughlin Drive TE PUKE</p> <p><b>Combined DHB Board/MHR</b></p> <p><u>12:30am</u>, Wednesday 23 November 2016</p> <p>Matai Room Education Centre Tauranga Hospital 889 Cameron Road TAURANGA</p>	
	3:30pm	<b>Karakia Whakamutunga</b>	

Month	Activity	Documentation Source	Planning & Funding
<b>August 2016</b>  <u>Combined</u>  Whakatane Hospital	<ul style="list-style-type: none"> <li>• GM Monthly Report</li> <li>• Receive Committee minutes</li> <li>• DHB Dashboard Report</li> <li>• Quarterly Maori Health Plan Dashboard Report</li> <li>• Pae Ora report – Health Literacy</li> <li>• He Pou Oranga combined training (Jozie Karanga/ Jenny Kaka-Scott)</li> </ul>	<ul style="list-style-type: none"> <li>• GMMHPF</li> <li>• GMGQ</li> <li>• GMMHPF</li> <li>• GMMHPF</li> <li>• GMMHPF</li> </ul>	<ul style="list-style-type: none"> <li>• Finance &amp; Performance team</li> <li>• Dr George Gray</li> <li>• Jackie / Sarah Davey</li> </ul>

# MAORI HEALTH RUNANGA

## MINUTES

**Venue:** The Orchard Church  
20 MacLoughlin Drive  
TE PUKE

**Date & Time:** Wednesday 13 July 2016, 9:30am

### PRESENT:

#### Iwi:

Waitaha	Punohu McCausland
Ngai Tai	Linda Steel
Ngati Rangitahi	Mere Butler
Ngati Whare	Daryl Christie
Ngati Whakaue ki Maketu	Manu Pene
Ngati Ranginui	Phillip Hikairo
Ngai Te Rangi	Carlo Ellis
Tapuika	Rutu Maxwell-Swinton
Ngati Manawa	John Porima
Ngati Makino	Stewart Ngatai
Tuhoe	Taane Rakuraku
Whanau Apanui/Ehutu	Astrid Tawhai

#### Attendees:

Janet McLean, GM, MHP&F  
Sandra Potaka (Secretary)

Item	Discussion	Action	By whom
	<b>Karakia</b> – Phillip Hikairo		
	<b>Mihi</b> – Taane Rakuraku		
1.	<b>Apologies</b>  Ngati Awa                      Pouroto Ngaropo & Amohaere Tangitu Ngati Whakahemo              Margaret Williams Whakatohea                      Jozie Karanga Tuwharetoa ki Kawerau        Karilyn Te Riini  CEO, BOPDHB                      Helen Mason  <b>Motion:</b> that the Apologies are received Moved: Ngati Ranginui Seconded: Ngai Te Rangi Carried		
2.	<b>Interest Register</b>  Amend with Secretary		

Item	Discussion	Action	By whom
3.	<p><b>Minutes of MHR hui held 13 July 2016</b></p> <p><b>Amendments</b></p> <p>Nil</p> <p><b>Minutes of DHB hui held 25 May 2016</b> Noted</p> <p><b>Motion:</b> that the minutes of the Maori Health Runanga meeting held 13 July 2016 are confirmed and the minutes of the DHB hui held 25 May 2016 are noted</p> <p>Moved: Ngati Ranginui Seconded: Ngai Tai Carried</p>		
4.	<p><b>Matters Arising: MHR hui held 8 June 2016</b></p> <p><u>Item 3:</u> Issues raised by the Runanga regarding whanau affected by Autism and by neuro-genetic disorders; this matter was referred to the appropriate teams by the GM and a response to be emailed directly to MHR members</p> <p><b>Note:</b></p> <p>a) the MHR minutes are confirmed at our meetings, then sent to CEO's office to tabled at DHB Board meetings</p> <p>b) the MHR agenda and documents are sent to the Board Chair and CEO at the same time they are sent to the MHR members</p>	Response emailed to MHR members	MHP&F
5.	<p><b>Matters Arising: DHB hui held 25 May 2016</b></p> <p>Item 6.1 Pat Cook and team are interested in presenting to MHR; will have to check the workplan for an appropriate time</p>		MHR Chair/ GM MHP&F
6.	<p><b>Correspondence</b></p> <p>Inward</p> <ul style="list-style-type: none"> <li>• BOPDHB Mental Health consultation document</li> </ul> <p>Outward – nil</p> <p><b>Motion:</b> That the Correspondence In is received</p> <p>Moved: Waitaha Seconded: Ngai Tai Carried</p>	Follow up with DHB team	GM, MHP&F

Item	Discussion	Action	By whom
7.	<p><b>GM, MHP&amp;F Report</b></p> <p>The report was taken as read. The GM advised that she had to leave early for a meeting with Ministry of Health officials who are in Tauranga this morning. GM also advised that CEO had intended to attend MHR hui but was unwell today so gave her apologies</p> <p><u>Discussion:</u></p> <p>a) “Good to Great” presentation – was endorsed at June 2016 MHR meeting; it is important that MHR utilise information received from Trendly, Maori Health Dashboard and other reports to identify priorities for each of our Iwi and confirm MHR priorities that we want DHB to focus on; what MHR identifies as important (on behalf of our Iwi) has to be promoted in combined meetings with the DHB Board; we should also proactively advise the Board on how to engage more effectively with our Iwi and how to ensure Iwi and Maori targets are achieved; will focus on this area in preparation for next combined meeting</p> <p>b) Some Iwi groups are meeting with DHB officials; important that the MHR member for those Iwi are kept informed of those meetings and that MHR representatives should be involved in those discussions; confirmed that MHR is Treaty partnership group alongside DHB but Iwi have the right to seek a relationship directly with the Crown (Minister/Ministry of Health) or its agencies including DHB; DHB may not be fully aware of relationships between Iwi providers and their Iwi or Iwi entities</p> <p>c) MHR members stressed the importance of He Pou Oranga workshops with DHB Board and the planned hikoi (MHR and DHB Board/Senior staff) to Iwi and community</p> <p>d) MHR members keep their Iwi informed about the MHR meetings and issues are raised on their behalf at these hui, and any issues of interest are reported to the respective Iwi</p> <p>e) Concerns were raised about the way that the MOH is contracting nationally for some services which affects local Kaupapa Maori providers who are now not contracted and are required to exit their clients then transition them to other</p>	<p>MHR Chair to discuss with DHB about them meeting with Iwi without informing the MHR representative</p>	<p>MHR Chair</p>

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	<p>providers</p> <p>f) Concerns raised that the MOH is decreasing their investment in waha kura and pepi pods despite the reduction in SUDI (Sudden Unexplained Deaths in Infancy) which whanau have attributed to using waha kura and pepi pods; BOPDHB have reported nil SUDI since introducing them; MOH has reduced the target of SUDI but BOP DHB position is to keep the target at current level</p> <p>g) GM and Stewart Ngatai attended Tumu Whakarae hui last week; which was very productive</p> <ul style="list-style-type: none"> <li>o Important to keep pushing cultural issues; DHB Boards need Iwi and Maori to continue giving cultural advice</li> <li>o Need for Iwi to advocate strongly for issues that are important to Iwi</li> <li>o Reference to the “Good to Great” presentation – there are opportunities for us to set targets that improve our performance on behalf of Iwi Maori</li> </ul> <p><b>Motion:</b> that the GM, MHP&amp;F Report is received  Moved: Ngai Tai  Seconded: Waitaha  Carried</p>		
8.	<p><b>Whanau Ora Assessment Report, Dr Richard Vipond</b></p> <p>The Runanga welcomed Dr Vipond and we advised that he will be leaving soon to take up a full-time position at Waikato; MHR acknowledged the work he has done while at BOP DHB. The updated report was circulated by email; the final report will be available shortly:</p> <p>a) This document is one that has been referred to the MHR throughout its development; it is an initiative that has been overseen by the MHR; have been part of internal peer review process; MHR Chair will write the mihi for the document</p> <p>b) This report includes customised information for BOP DHB geographical area; discussed information on Maori Health Profiles for each of our Iwi</p> <p>c) Adopted the Pae Ora framework and used its interconnected elements to explain</p>		

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	<p>some of the data; identified areas of inequity and analysed some of the root causes of that inequity</p> <p>d) Discussed key findings reported in this document</p> <ul style="list-style-type: none"> <li>○ Prioritising equity which will be a challenge regionally and nationally</li> <li>○ Health literacy is a problem within the health system, it is not the patients of whanau who have the problem</li> <li>○ Integration across organisations and between stakeholders is only way that Whanau Ora will be successful</li> <li>○ Pae Ora indicators need to be developed by Iwi and Maori to ensure they are meaningful and can be monitored effectively</li> <li>○ Building on what we have already done is as important as developing new initiatives</li> <li>○ Need to use the appropriate indicators and measures e.g. sometimes use %, when a number is a better indicator of how successful an initiative is (and vice versa); lifting a target by 5% is easier to achieve with a larger population so more resources might be invested in non-Maori because Maori are “harder” to find (rural, isolated communities)</li> <li>○ MHR would like to have clear data on how much of the mainstream funding is utilised for Maori whanau (e.g. through access to mainstream services) as only 3% of health funding is invested directly into Kaupapa Maori</li> <li>○ Demographics indicate the changing age structure of the future; need to ensure that there are services in place to cope with e.g. elderly services, e.g. ante-natal and early childhood; also need to be aware of where the population will be living, EBOP showing a population decline over past few years – will be a challenge to ensure smaller populations in rural and isolated communities are catered for</li> </ul> <p>e) The report also highlights some areas of improvement including some improvement</p>		

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	<p>in mortality statistics, increasing level of educational achievement (NCEA); however closing the gaps will require commitment from everyone and all organisations</p> <p>f) Aware that Pacific Island communities are tracking better than Maori; would like to understand how that is being achieved, perhaps its because they are mostly located within large urban areas</p> <p>Motion: that the Whanau Ora Assessment Report is received and endorsed</p> <p>Moved: Ngai Tai Seconded: Tuhoe Carried</p>		
9.	<p><b>Terms of Reference document – Maori Health Runanga</b></p> <p>The document was reviewed at the August 2015 workshop; the revised document was tabled. There was a brief discussion and it was agreed that the MHR would continue to review and revise the document on a regular basis.</p> <p><b>Motion:</b> that the revised MHR Terms of Reference document is confirmed</p> <p>Moved: Waitaha Seconded: Whanau Apanui Carried</p>		
10.	<p><b>Chair's Report</b></p> <p>The Chair acknowledged the unusually high number of tangihanga we have attended recently.</p> <p>The submissions to the Ministry of Health on issues related to whanau access to and management of the Tupapaku of deceased whanau members have now closed, but this issue is an important one. The Chair asked that each Iwi discuss it and find other ways to ensure their views are included in policy change.</p> <p>The Chair also attended the Te Pou Matakana Conference (Whanau Ora hui) in Auckland this week. There have been a number of political decisions which will affect how Whanau Ora will be delivered in the future; it</p>		



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	<p>is clear that Maori Health is going to be largely influenced by how well Whanau Ora is implemented.</p> <p>Linda also attended; she reported on hui:</p> <ul style="list-style-type: none"> <li>• High expectations of commissioning agencies</li> <li>• Presentations on measuring outcomes, etc.</li> <li>• Collective funding is an issue</li> <li>• Derelict homes</li> <li>• Politicians gave their political views, e.g. Te Ururoa Flavell, Nanaia Mahuta, Marama Fox, Bill English</li> <li>• Lot of people will be challenging Whanau Ora because it is a change to what they currently do/delivery</li> <li>• Concerns raised that Government agencies don't want Whanau Ora to work because it will show up what they are not doing; the government can't do what whanau can do</li> </ul> <p>“if I dream it is my dream, if we all dream together then we will move together”</p>		
11.	<p><b>Iwi Reports</b></p> <p>(a) Ngati Makino</p> <ul style="list-style-type: none"> <li>• Following up the 2015 wananga with a Reo wananga, supported with funding from Te Taura Whiri</li> <li>• Recruiting a new GM</li> <li>• Moving slowly but surely, have a good plan, we are working on delivering on the promises made, and aspirations of our people</li> <li>• Iwi can't invest in fixing the 'bottom of the cliff' issues as we don't have the resources to do that; focus is on balancing between investing in the immediate needs vs future needs and long term benefits</li> </ul> <p>(b) Ngati Whare</p> <ul style="list-style-type: none"> <li>• What was reported last week is still continuing</li> <li>• Next week there is a hui “Te Oniao” (Mauri o te Wai) conference being held in Rotorua; more information is available from <a href="http://www.waikatoregion.govt.nz/te-oniao-conference">www.waikatoregion.govt.nz/te-oniao-conference</a> or <a href="http://www.boprc.govt.nz/te-oniao-conference">www.boprc.govt.nz/te-oniao-conference</a>; there will be facilitated workshops and there are some very well-known speakers; he is involved one of the workshops about</li> </ul>		

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	<p>a Matauranga Maori project which involved interviews with hunters and gatherers; they were asked to talk about what is Matauranga Maori, what it means to us, and to emphasise its value</p> <p>(c) Ngati Ranginui</p> <ul style="list-style-type: none"> <li>• Treaty settlements ongoing; submissions have closed for the first reading of the settlement legislation</li> <li>• Mauri Ora programme going well under leadership of their CEO</li> <li>• Restructuring social services contracts; have improved their relationship with agencies e.g. MSD and CYF; will be recruiting new staff</li> </ul> <p>(d) Ngai Te Rangi</p> <ul style="list-style-type: none"> <li>• CEO of the Runanga has resigned and a recruitment process will start soon</li> <li>• Reports MHR issues to their Board; has kept the focus on He Pou Oranga and Trendly</li> <li>• Need to position the Iwi the Iwi Health Plan (due for review) and to support MHR objectives through utilising the Dashboard and other data to influence decision-making</li> <li>• Indicated that Ngai Te Rangi may need support of MHR as the BOP Regional Council have approved some activities and the emissions levels have been exceeded affecting the whole community including marae, Kaumatua Flats, Kohanga</li> </ul> <p>(e) Ngati Rangitahi</p> <ul style="list-style-type: none"> <li>• Treaty settlement process is ongoing</li> <li>• Currently working with GM, MHP&amp;F team to ensure health services are available in Matata; Kohanga has hosted the breast-screening, etc. at their location; no kaumatua services are available but hoping to improve that; have a nurse clinic once a month but that will be increased; currently don't have a GP service, patients travel to Edgecumbe or Whakatane</li> </ul> <p>(f) Ngati Whakaue ki Maketu</p> <ul style="list-style-type: none"> <li>• Healthy Homes Project completed</li> <li>• New Hauora building was opened last week; acknowledged Pouroto Ngaropo who carried out the pre-dawn karakia and Hon. Te Ururoa Flavell who officially opened the building; the Runanga and the Hauora have a good</li> </ul>		

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	<p>relationship, the Hauora are currently part of Te Arawa Whanau Ora group</p> <ul style="list-style-type: none"> <li>• Lot of work being done on the Ongatoro Estuary at Maketu, intend to divert the Kaituna River; also work being done on re-establishing wetlands to improve fishing grounds, etc.; emphasis on health of the moana is directly related to health of the people</li> <li>• Attending Takitaimoana Koeke hui tomorrow</li> </ul> <p>(g) Tuhoe</p> <ul style="list-style-type: none"> <li>• Tuhoe Hauora joining Eastern PHA in October 2016</li> <li>• Te Uru Taumatua discussing health sectors primary health capitation system (PHO funding)</li> <li>• Each community is surveying their marae and housing needs so they can better target resources</li> <li>• Intention is to establish a housing programme across their communities</li> <li>• GM has moved on</li> <li>• Carpentry course has been going for past 6 months; have seen the positive progress of the trainees and improvement in their confidence as well as building skills; their training includes pepeha, waiata, korero</li> <li>• Kaumatua meet regularly, need to record their stories and the history of our people for use at the kura and future generations</li> </ul> <p>(h) Whanau Apanui/Te Ehu</p> <ul style="list-style-type: none"> <li>• Reports to the Runanga; encouraging them to take reports to their hapu, make aware of Trendly, etc., and issues around DNA's</li> <li>• Making progress on working through issues such as drug, alcohol, gangs, family violence</li> <li>• Good kaumatua programmes in place</li> <li>• Came together to support holiday programme for up to 10 year olds, they have had a variety of activities; is very successful</li> <li>• Looking at local industry and the impact on water and the environment</li> <li>• Have been discussing issues such as who owns the water/awa?</li> <li>• Amalgamation of 3 kura into a Kura-a-lwi; have recently met; kaupapa is around "ahuatanga o korero o te hau kainga" – this is an important aspect</li> </ul>		

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	<p>for our Iwi and hapu; raised some issues around who is “qualified” to teach – we have our own tohunga and experts who know the kaupapa, but they don't always have educational qualifications that are recognised in the education sector</p> <ul style="list-style-type: none"> <li>• Kapa haka, history and whakapapa hui are being held at Omaio in preparation for our centennial for Rutaia in October 2016; encouraging people to come home to learn, has been a positive response from some whanau who have not always come home for hui before; have been learning about who were the original hapu so we can start using their names again after the centennial</li> </ul> <p>(i) Tapuika</p> <ul style="list-style-type: none"> <li>• Have a significant tamariki population; affected by chest and ear conditions and injuries/falls</li> <li>• Hauora focus is on good health not just being about physical</li> <li>• Inundation of agencies coming into Te Puke from outside to deliver services; causing confusion for our whanau</li> <li>• Local foodbank has closed</li> <li>• Working with Nga Kakano to ensure whanau receive services</li> <li>• Transportation is an issue; bus services are regular but not always operating at suitable times</li> <li>• Ongoing discussions with the Council about our rivers; raised concerns about our tamariki swimming in paru water</li> <li>• Homelessness is an issue, there are people sleeping in cars, in parks; soup kitchen has started; trying to find out why we have homeless people</li> </ul> <p>(j) Ngati Manawa</p> <ul style="list-style-type: none"> <li>• Have recently come out of court around CNI issues</li> <li>• Carrying out a review of whole organisation including all entities; there may be some restructuring as a result</li> <li>• Charitable Trust has recently given out 54 education grants (20 secondary and 34 tertiary); also subsidising glasses and hearing aids; looking at oral health; were able to partly fund insulation with Whakatane District Council and BOP DHB</li> </ul> <p>(k) Ngai Tai</p>		

Item	Discussion	Action	By whom
	<ul style="list-style-type: none"> <li>• Aware that TPK have a new housing programme which each Iwi might like to get involved with</li> <li>• Currently have 2 Borads</li> <li>• Ngai Tai have invested in Whakatohea mussel farm</li> <li>• Waitangi Tribunal – checking on the small claims of East Coast Iwi that have not yet been dealt with; hopeful that they will be able to get something through soon</li> </ul> <p>(I) Waitaha</p> <ul style="list-style-type: none"> <li>• Puna Reo Wananga to be held August, September, October 2016; aiming for 50-60 participants</li> <li>• PHO Managers meeting tomorrow</li> <li>• Iwi hui due to be held on Sunday</li> <li>• Corrections Programme was to start alongside Pirirakau Hauora</li> <li>• Reviews of e.g. wastewater are ongoing; need to identify where the infrastructure is being built for e.g. new Papamoa East area; note that Kaituna area is Maori land; concern is where will waste be going to, also that rubbish might be dumped in Te Puke and Katikati to accommodate developments in Tauranga area</li> </ul>		
12.	<p><b>General Business</b></p> <p>a) Good News Story – Maori Health Runanga recommended that a “good news” story be written on achievement of Dr Margaret Williams including:</p> <ul style="list-style-type: none"> <li>○ completing her Doctorate;</li> <li>○ establishment of permanent Vision Matauranga position in the Research &amp; Innovation Office at AUT</li> <li>○ recent work in health research; and</li> <li>○ starting in a new position as a Lecturer in Public Health at AUT</li> </ul> <p>b) <u>BOP DHB Strategic Planning Hui</u></p> <ul style="list-style-type: none"> <li>○ Importance of health in all policies</li> <li>○ Contrast between how health was delivered in the past</li> <li>○ Main focus is Pae Ora/Whanau Ora and whanau/family not patients or individuals</li> <li>○ Discussion had a focus on delivery of services; need to be able to put strategy into action</li> </ul>	GM to contact DHB Communications	
13.	<p><b>Confidential Agenda</b></p> <p><b>Resolution to move into confidential</b></p>		

Item	Discussion	Action	By whom
	<p>Moved: Whanau Te Ehotu            Seconded: Ngati Rangitahi            Carried</p>		
14.	<p><b>Next Meetings</b></p> <p><b>Maori Health Runanga</b></p> <p>9:30am, Wednesday 24 August 2016</p> <p>Taneatua Room            Maori Health Services            Whakatane Hospital            Stewart Street            WHAKATANE</p> <p><b>Combined DHB Board/MHR</b></p> <p>12:30am, Wednesday 24 August 2016</p> <p>Taneatua Room            Maori Health Services            Whakatane Hospital            Stewart Street            WHAKATANE</p>		
15.	<p><b>Karakia Whakamutunga</b></p> <p>Phillip Hikairo closed the hui at 1:35pm</p>		