



Te Taumata Hauora o Te Kahu o Taonui

Te Tai Tokerau Iwi-Māori Partnership Board

Strategic Positioning Paper
May 2024

*Tuhia ki te rangi, tuhia ki te nuku, tuhia ki te ngākau o ngā tangata katoa,
ko te mea nui, ko te aroha, tiheiwā mauri ora.
Tuatahi ake, ngā hakaaro nui ki a rātou kua wheturangitia, haere, haere, haere mai haere.
Kei te hunga ora, e Nui, e Rahi, tēnā koutou katoa.*

*Nei Te Taumata Hauora o Te Kahu o Taonui Iwi-Māori Partnership Board e mihi ake ana.
Te manako nui, kia whai hua ai ēnei kōrero e whai ake nei, mā Te Whare Tapu o Ngāpuhi.
Te tini me te mano, koroua mai, kuia mai, rangatahi mai, mokopuna mai.*

Nō reira, tēnā koutou, oti rā, tēnā tātou katoa.

The health landscape in Aotearoa is evolving. There is an opportunity to further shape the roles of Iwi-Māori Partnership Boards to enhance the impact they can make on health system performance for Māori, and to support the priorities and focus of the new Government.

Te Taumata Hauora o Te Kahu o Taonui is strategically positioned to represent the voice and aspirations of whānau, hapori, hapū and iwi in Te Tai Tokerau and Tāmaki Mākaaurau Māori to the Government and the NZ Health system. We are determined to use our long-standing whakapapa and whanaungatanga to the land, the people and the entities active in our communities to make a difference for whānau in the north.

As tangata whenua, we have been here for hundreds of years. As hapū and iwi, we will be here for hundreds more, advocating for the interests of our people, while Governments, agencies, providers and individuals come and go.

This is part of our unique value proposition. As an Iwi-Māori Partnership Board representing Te Tiriti partners to the Crown, we can bring our influence to bear as a key strategic partner for Government, providing informed leadership and shared decision-making to drive meaningful and tangible hauora outcomes for whānau Māori in our takiwā.

The purpose of this paper is to share our vision and views on how Te Taumata Hauora o Te Kahu o Taonui Iwi-Māori Partnership Board ('Te Taumata Hauora') can best give effect to this. It sets out how we seek to position Te Taumata Hauora to be an effective agent at driving better performance of the health system for our local Māori communities. Our intended approach to strategic outcomes-based commissioning is highlighted, including application of whānau-centred commissioning and relevant social investment methodologies to focus health system investment and prioritisation on those services and features that will deliver the greatest value in terms of improved outcomes for our communities, in alignment with the priorities and goals set by the Government.

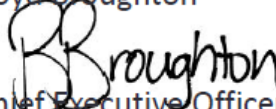
Delivery against our role will be shaped and influenced by our hapori, hapū and iwi in Te Tai Tokerau and Tāmaki Mākaaurau, with the objective of contributing substantially to the improved Māori health outcomes sought by the Government.

Tereki Stewart



Independent Chair,
Te Taumata Hauora o Te Kahu o Taonui IMPB

Boyd Broughton



Chief Executive Officer,
Te Taumata Hauora o Te Kahu o Taonui IMPB



Table of Contents

1.	Executive Summary	p. 4
2.	The Strategic Context	p. 8
3.	Introduction to Te Taumata Hauora o Te Kahu o Taonui	p. 13
4.	Proposed role of Te Taumata Hauora o Te Kahu o Taonui in delivering whānau hauora outcomes	p. 19
5.	Appendices	p. 27



1

Executive Summary

Executive Summary

With the changing roles within the health system, there is significant opportunity to enable the delivery of better, more localised care for whānau Māori through shaping how Iwi-Māori Partnership Boards (IMPBs) might best deliver on their roles. This paper outlines how Te Taumata Hauora o Te Kahu o Taonui Iwi Māori Partnership Board (Te Taumata Hauora) sees its role in supporting the realisation of whānau, hāpori, hapū and iwi hauora ambitions while simultaneously delivering against the Government's health priorities.

Trends in healthcare

Global and national trends in healthcare have significant influence on the availability, accessibility and delivery of Health Services locally, and therefore the ability to eliminate inequities for whānau Māori

Te Taumata Hauora is tracking the global and national healthcare trends that ultimately impact service delivery and equity for whānau Māori in Tai Tokerau – Tāmaki Mākaurau region. This includes rising costs of healthcare, a growing and ageing population, increasing demand (primary, acute, mental health and chronic conditions), and an under-powered (and ageing) workforce.

We note the global shift towards outcomes-based commissioning, focusing on value and innovation to improve health outcomes for whānau. The performance management and optimisation focus within hospital and specialist services seeks efficiency improvements, trying to do more with the same or fewer resources. Advances in personalised care and the trend towards digital, virtual, online and remote care offer to enhance outcomes. And more.

The risk is that these efforts focus on 'middle New Zealand' and lead to increasing inequity for Māori if not targeted, tailored and resourced appropriately. Addressing the shortage of Māori health professionals, Māori care services and models, and Māori provider support is critical to address deeply entrenched disparities in Māori health. Demanding much higher performance and accountability of the whole NZ health system for Māori health outcomes is key. Te Taumata Hauora aims to do so by bringing a more discerning and data-informed influence to health system leadership in our rohe.

Government health priorities

Government has articulated its intention for our health system to become more outcomes-driven and to deliver demonstrable improvements in value for the significant investment placed in health

This renewed focus on health targets and accountability for performance is welcomed, as the health system has consistently underperformed for Māori in our rohe (and across Aotearoa).

Ministerial ambition to 'power up' IMPBs to assist the health system in lifting health outcomes for Māori whānau and communities is also welcomed. We share the expectation that the system lift its performance and deliver better value for the significant investment made.


IMPB value proposition

Te Taumata Hauora is well placed to lean in here, bringing the voice and aspirations of whānau, hāpori, hapū and iwi to the system, giving effect to Te Tiriti o Waitangi

The unique value proposition of Te Taumata Hauora, is anchored in being the prime recognised channel for Iwi Māori in Te Tai Tokerau – Tāmaki Mākaurau. Our collective voices helps to give effect to and amplify the voices of whānau, hāpori, hapū and iwi in the health system. It is further amplified by the relationship our members have as Tiriti partner to other social service agencies, meaning we can bring influence to inter-agency discussions that Te Whatu Ora cannot. We will also build and hold institutional memory for many generations to come, while others come and go.

Mandated by Te Kahu o Taonui, Te Taumata Hauora represents eleven iwi and around 180,000 Māori (20% of all Māori) in the Tai Tokerau – Tāmaki Mākaurau rohe. As the IMPB with the largest Māori population, our whānau, hāpori and hapū are spread over a wide geographical area, with 28% in rural areas (compared to 9% for non-Māori). We are ideally placed to prototype or pilot initiatives with far-reaching potential to make a positive impact on whānau health outcomes.

We have a responsibility to represent and advocate for the voices of our people, and intend to ensure that their needs, concerns and hauora aspirations shape the regional and local health strategies, plans, priorities, commissioning and service delivery in the rohe. The role of iwi in listening to, understanding, and representing these needs is longstanding and unique, and cannot be replicated by other structures.



This value is further supported by our deep and far-reaching relationships not only within Te Tai Tokerau, but also with those within and outside the health sector, and our proven history of utilising these relationships to function and deliver for whānau health outcomes.

To more effectively embed and enable this work and exercise our rangatiratanga in pursuit of better outcomes, we seek strategic engagement and collaboration with the Health Minister, Manatū Hauora, Health NZ - Te Whatu Ora, alongside relationship building with regional and local community hauora and primary healthcare providers (including PHOs), and other social sector agencies and entities.

Proposed whānau-centred commissioning model

Te Taumata Hauora plans to create positive impact for whānau through a whānau-enhanced commissioning model, enhanced when appropriate by social investment methodologies

With the disestablishment of Te Aka Whai Ora, the IMPB leadership role as representatives of Tangata Whenua – Te Tiriti partner across the health system becomes more vital. It requires deep support and genuine opportunity to drive significant change.

Te Taumata Hauora is ideally positioned to help lead this out in the Northern Region, using a whānau-centred commissioning model that prioritises the long-term health outcomes defined by whānau, iwi, and communities across sectors.

The whānau-centred commissioning model we propose decentralises traditional commissioning, placing whānau at the core of healthcare decisions. It is characterised by four key features:

- **Outcomes-Driven:** Targets long-term hauora outcomes as defined by whānau, iwi, and communities, encouraging innovation.
- **Whānau Voice:** Builds in continuous involvement of whānau throughout the commissioning cycle, allowing them to shape the services they need.
- **Inter-generational Focus:** Empowers whānau and communities to be self-determining and supports hauora providers to reach their full potential.
- **Principles of Transparency and Accountability:** Operates with a clear commitment to transparency, accountability, and responsiveness to the unique needs of whānau.

We see this model as being supported by social investment approaches, where applicable/appropriate, with rigorous monitoring and evaluation mechanisms that provide a feedback loop for ongoing improvement.

Implementing this model will allow Te Taumata Hauora to influence effective resource allocation, foster excellence, and prioritise investment in innovative, preventative solutions that deliver meaningful outcomes and value for whānau. It also enables collaboration with whānau, practitioners, and providers to co-design services, ensuring a stable, well-resourced, and culturally safe delivery system. This approach supports the growth of local wellbeing systems and guides better decision-making in commissioning, enhancing the visibility and value of these decisions.

Required enablers, capabilities and functions

To deliver on these aspirations, Te Taumata Hauora needs to be 'powered up' to engage meaningfully

Investment in several key functions and capabilities is required to deliver effectively on our role and give effect to whānau-enhanced commissioning in the region. The key functions we are focussed on include:

- **Strategy Development** – To inform, support and guide hauora Māori and other strategies that impact the wellbeing of our people in the region, advocating for our whānau and community health priorities.
- **Strategic Planning** – To identify and develop priorities and plans for enhancing hauora Māori at all levels, in partnership with local and regional sector leaders.
- **Commissioning and Development** – To lead and/or influence strategic commissioning and financial decisions to advance hauora Māori priorities.
- **Community and Whānau engagement** – To identify and advocate for whānau health needs, ensure Māori-led service design, participate in co-design, and grow our strong community networks/presence.
- **Innovation** – To identify and support innovative care models, programmes and initiatives to address Māori health issues and enhance providers' innovative capabilities in our region.
- **Policy Development** – To support Manatū Hauora when appropriate with advice on hauora Māori strategies, priorities and opportunities for whānau and community health in our rohe.

- **System improvement** – To champion system quality improvement for equitable outcomes and analyse regional service performance
- **Partnerships** - Foster strong relationships with local iwi, communities, service providers and cross-sector agencies for collaborative initiatives, holding our role as representatives of Te Tiriti o Waitangi partners to the health system
- **Local intelligence and monitoring** – To develop high quality data analytics, social investment and outcomes-based commissioning capabilities to assess needs, inform priorities, set performance expectations and targets, guide commissioning, monitor Māori health outcomes, and evaluate local/regional health sector performance

The development of a robust, independent data analysis and processing capability is of strategic importance to Te Taumata Hauora, and we seek support to achieve this. We must be empowered to bring our unique views, interests and experience to the shaping of analyses and how we extract our own insights from data. Similarly, we need to be able to apply our particular lens to how we evaluate programs and influence resources allocation effectively within a whānau-centred outcomes-based commissioning framework. This autonomy in data analytics is pivotal to enhancing our role and influence in health system decision-making and investment, to ensuring solutions are tailored to the unique cultural context of Tai Tokerau – Tāmaki Mākaaurau whānau, and to fostering local Māori innovation and excellence in service planning and delivery.

Currently, Te Taumata Hauora is under-resourced in terms of capacity and capability to carry out the above functions and deliver the high impact required for our population. Te Taumata Hauora is currently operating with 4 FTE, with shared back-office capabilities. It is clear this is insufficient to meet the full suite of current and anticipated demands from Health NZ - Te Whatu Ora, Manatū Hauora, our own communities and iwi. Without the requisite investment and resourcing, we will struggle to provide high quality, well-informed, evidence-based advice, influence and decision-making.

We will need support and resourcing to engage more effectively and decisively with our communities and to engage effectively on their behalf with providers, professionals, Health NZ - Te Whatu Ora and other sectors/commissioning agencies. This support request is also crucial to allow us to progress the whānau-centred commissioning model proposed here, in order to deliver greater health outcomes for whānau.

Next steps

Te Taumata Hauora is ready to work alongside the Minister, Ministry of Health (Manatū Hauora) and Health NZ - Te Whatu Ora to lift outcomes for Māori in the Te Tai Tokerau – Tāmaki Mākaaurau takiwā.

The role hapū and iwi have in advocating for and promoting better outcomes for whānau is unique. As Tiriti-partners, our iwi members have durability, inter-agency influence, and inter-generational horizons. As the prime recognised mechanism through which the health system is required to engage with Iwi Māori, we are keen to collaborate and partner with the Minister and system leaders above, and other agencies/sectors as required to strengthen this role, to bring about positive change for whānau.

To make progress, one must start. We wish to bring our collective resources and capabilities to bear on **an early and bold prototype: the joint development and implementation of an innovative, inter-sectoral, whānau-centered 'Ngā Puāwai' plan that focuses enabling and supporting whānau health through the first 2000 days of a child's life, leveraging our iwi influence, networks and relationships to bring others to the table, with a focus on delivering breakthrough gains and outcomes/value in our region.**

The young composition of our Māori population and our significant population size (largest Māori population of any IMPB) means we can make meaningful impact to a large group of whānau through this work. We are ideally placed to help facilitate this and would welcome the opportunity to pursue it with vigour.

Te Taumata Hauora invite a conversation with the Minister, Ministry of Health, Health New Zealand - Te Whatu Ora to refine and progress the aspirations and intent raised in this paper.



2

The Strategic Context

Current Health System Priorities

As the Government health priorities and emerging policies take shape within the health system, there is an opportunity for Iwi-Māori Partnership Boards (IMPBs) to determine how best to deliver on their own roles in order to influence significant gains in local Māori health outcomes.

New Zealand's health system has recently undergone a series of major reforms, including the amalgamation of 29 entities into Health NZ - Te Whatu Ora. Two years since establishment, a degree of uncertainty remains in the implementation of reforms, ensuring the presence of local voices in decision making and responsiveness towards better health outcomes, particularly for priority populations.

In response to this, the Government has articulated its intention for our health system to become more outcomes-driven with the return of Health Targets, including the first suite focussed on **Faster cancer treatment, Improved immunisation for kids, Shorter stays in emergency departments, Shorter wait times for first specialist assessment, and Shorter wait times for treatment.**

The intent to increase focus on performance and accountability is welcomed. For far too long, the health system has been able to consistently under-perform and under-deliver for Māori with minimal consequences. As a result, Māori continue to experience a disproportionate burden of poor health outcomes across Aotearoa. These health inequities are experienced across a range of indicators and outcomes, including the health targets noted above.

Tribunal principles

This was borne out by the Waitangi Tribunal in its WAI 2575 Interim Hauora report³, where it found the Health and Disability System failed to consistently state a commitment in achieving equitable health outcomes for Māori. It also articulated four key Te Tiriti principles, noting:

- **Partnership** – the relationship with the Crown needs to appropriately balance tino rangatiratanga (autonomy over taonga, resources, and people) and kāwanatanga (the right of the Crown to govern). The Crown needs to recognise the right of Māori to choose how they organise and express themselves, address the power imbalance through providing resources, Māori decision making rights and responsibilities and power sharing (e.g., control of funding, deciding on services delivered).

- **Active Protection** – the Crown must protect Māori decision making (autonomy, tino rangatiratanga and mana motuhake) rights at all levels and ensure Māori can access culturally appropriate health services that reasonably and adequately address inequitable hauora Māori outcomes.
- **Equity** – the Crown must 1) ensure freedom from discrimination and 2) positively promote equity. They must also make a reasonable effort to eliminate barriers to services that may contribute to inequitable health outcomes.
- **Options** – the Crown has a duty to enable Māori to choose their own social and cultural path – this means providing for, and properly resourcing, kaupapa Māori services in the social sector. The Crown must also ensure that all health and disability services are delivered in a culturally appropriate manner.

The combination of entrenched disparities, disproportionate burden of ill-health, limited accountability and consequences for poor performance, and under-investment in the Māori sector is unacceptable to Te Taumata Hauora. We are deeply motivated to change this and create better outcomes for Māori whānau and communities in our region. We seek to bring urgency to the role, exerting strategic influence on the health system and other sectors to bring about this much needed change.

"I am encouraged by the passion and dedication [IMPBs] have to support Māori Health outcomes. I believe you, I believe in you and I will back you"
– Rt. Hon Minister Reti²

1. Reti, Shane. "Health Targets Will Deliver Better Outcomes for New Zealanders." *The Beehive*. March 08, 2024. <https://www.beehive.govt.nz/release/health-targets-will-deliver-better-outcomes-new-zealanders>.

2. Ibid.

3. Waitangi Tribunal. 2019. "Hauora: Report On Stage One Of The Health Services And Outcome Kaupapa Inquiry". WAI 2575

Roles of IMPBs in the health system

IMPBs have been legislated by Government and ratified locally by Iwi Māori to be a critical vehicle for whānau voice, and give effect to Te Tiriti o Waitangi within the health system

Te Taumata Hauora has a mandate from Te Kahu o Taonui to represent the aspirations and priorities of the eleven iwi within the Tai Tokerau – Tāmaki Mākaurau region, alongside representing the whānau, hapori and hapū that reside there.

Te Kahu o Taonui was established in 2006/7, as a collective of iwi in Te Tai Tokerau, with the purpose of utilising the collective power of iwi to create more opportunities to benefit whānau, hapū and marae. Te Taumata Hauora was established in 2022 as the Iwi-Māori Partnership Board to represent the collective, and the region of Tai Tokerau – Tāmaki Mākaurau.

Te Taumata Hauora is committed to listening to and championing the voices of whānau, iwi, and the community, and using solid data and evidence to support these voices and bring about real change. Te Taumata Hauora has a clear mandate to act on behalf of whānau to ensure tangata whenua voices are heard, and local health services reflect those who need and use them. Whānau expect that Te Taumata Hauora will strategically engage with planning and commissioning of services in the region to deliver positive hauora outcomes, and enable hapori, hapū and iwi to exercise rangatiratanga in our rohe.

This relationship between whānau, hapori, hapū and iwi has existed before, through and beyond health sector reforms. This is part of the unique proposition that Te Taumata Hauora brings to the current system - we will leverage Te Tiriti-based relationships with health and social sector agencies to advance hauora for whānau.

“As IMPBs, you will have a stronger voice in local decision making, powering up communities to lead and shape the health system to work for them – alongside the needs of the wider community – We can shift the health system to be more outcomes-driven, and provide greater devolved decision-making to communities”

– Rt. Hon Minister Reti ⁴

To help realise the potential of IMPBs in a time and resource efficient manner, Te Taumata Hauora want to agree a clear approach and ways of working with the Minister and other key participants in the health sector.

As an IMPB, Te Taumata Hauora can leverage local expertise, relationships and influence to help move care closer to the community, supporting more timely and tailored access to a better mix of quality healthcare, and ultimately contributing to achieving more positive health outcomes for our people and communities.

Our wider, more holistic view of health and wellbeing extends to ensuring government health and social sector agencies understand our perspectives on the inequities and barriers experienced by our communities and how they can be addressed.

Engaging with local whānau and hapū to understand health needs and performance within our area of influence, we will represent local Māori perspectives on:

- their needs and aspirations regarding health, wellbeing and hauora Māori outcomes;
- the design and delivery of services within the region;
- how the health sector is performing in relation to those needs and aspirations.

In addition to engaging with local whānau and hapū, we will work closely with Health NZ - Te Whatu Ora to jointly develop priorities, strategies, plans and targeted actions to improve hauora Māori outcomes. We will also work with other government agencies and sectors to agree plans and actions that support a broader, more concerted approach to lifting health outcomes in our region.

*Note: The IMPB legislative context, including purpose, functions and recent law changes, is set out in **Appendix A**.*

3. Reti, Shane. “Govt reinforces commitment to Māori health.” *The Beehive*. March 06, 2024. <https://www.beehive.govt.nz/release/govt-reinforces-commitment-māori-health>

4. Reti, Shane. “Dr Shane Reti’s speech to Iwi-Māori Partnership Boards, Christchurch.” *The Beehive*. March 07, 2024. <https://www.beehive.govt.nz/speech/dr-shane-retis-speech-iwi-māori-partnership-boards-christchurch>

This paper outlines how Te Taumata Hauora plans to give effect to its role in the health system going forward.



We want to be positioned to effectively respond to national and global trends and impacts in healthcare.

Global and national trends in healthcare are challenging and transformative for outcomes-based commissioning structures and could enable IMPBs such as Te Taumata Hauora to deliver greater health outcomes for whānau.

Te Taumata Hauora operates within, and is affected by, a broader context and healthcare industry. The New Zealand health sector is being significantly impacted by a number of health system trends and challenges, many of which are still being felt in the wake of the Covid-19 pandemic. These trends are powerful, transformative forces that have strong impacts on the operation of the health system at a community, regional and national level. Examples include:

- **Rising cost of healthcare and focus on value** - As the cost of healthcare increases, so does the focus for funders, providers, patients and whānau in finding and delivering value, increasing quality, improving outcomes and optimising patient experience whilst reducing costs. This value can come in many forms, such as a push for early intervention to reduce long-term healthcare costs, and better data collection techniques to prove treatment efficacy.

One outcome of this focus on value is a system shift towards outcomes-based commissioning, which seeks to commission for outcomes, rather than services and FTEs. For Te Taumata Hauora, the impact of this trend is to promote innovation, and to ensure investment prioritises effective health services that deliver measurable benefits to patients and whānau. Strengthening the ability of whānau to take control of their own health must be central to outcomes-based approaches.

- **Digital health and care closer to home** - The Covid-19 pandemic has rapidly accelerated the healthcare system's shift to digital, with more patients and providers turning to online and virtual service models, such as telehealth and remote monitoring for their healthcare needs. This digital healthcare ecosystem provides opportunities for greater connection between patients / whānau and providers, and more sustainable and flexible models of care. Additionally, new data streams from these digital sources provide an opportunity to deliver better health outcomes through preventative and personalised care based on more holistic and longitudinal patient data.

However, while there are opportunities associated with increased digitisation, Te Taumata Hauora has concerns that these advances can increase health disparities unless Māori whānau, communities, providers and services have adequate resources and infrastructure (e.g., internet coverage, mobile monitoring devices, secure data servers, etc.) to benefit from this. These opportunities need to be made available to those who need them most.

- **Precision medicine and personalised care** - As health systems learn more about diseases, their molecular basis and their mechanisms of action, the ability to diagnose and treat patients effectively improves. Advancements in technology, such as artificial intelligence and genomics, create new opportunities to deliver more targeted, effective treatments. Ensuring that the right patient is able to access the right treatment at the right time not only improves the standard of care but drives efficiencies in the healthcare system and could address long-standing health inequities.

These advances must be implemented with consideration to current biases and inequities in resources. Without inclusive datasets that accurately reflect the health experiences of marginalised and underserved communities, and robust ethical frameworks, these advancements may reinforce or worsen existing disparities. Care must also be in the collection and storage of personal data associated with care to ensure it upholds Māori Data Sovereignty rights.

Te Taumata Hauora is committed to building the data and research capability of the Tai Tokerau – Tāmaki Mākaaurau region, and to supporting the development of new treatments that target areas of highest need in our whānau and communities, where there is greatest potential to see significant impact. This means ensuring new technologies and approaches are accessible and tailored appropriately to the needs, realities and cultural norms of Māori whānau and communities in our region.

We want to ensure these are locally tailored to our communities.

- **Workforce shortages** – The healthcare sector, as well as the wider social sector is under increasing pressure, with the gap between the number of people currently working in the sector and those required steadily widening. This has been exacerbated by the Covid-19 pandemic, as well as increased attrition from the sector, increasing the burden of work on those remaining in the system.

Within the wider workforce story, Māori health professionals are under-represented in the system, making it difficult to match the workforce to our communities and provide the best care that is highly attuned to Māori realities.

Māori health providers have also been consistently under-staffed and underpaid. This lack of pay parity makes it difficult for Māori Health providers to retain and develop their workforce and deliver a wider range of culturally appropriate care to meet the pressing needs of our communities. Greater investment is required to grow and support Māori health providers and enable the ongoing recruitment and development of Māori health professionals.

Whānau, and the wider community, also play a significant role in caring for patients. These contributions are an essential and often unrecognised pillar of healthcare delivery. Strong, supportive whānau can ease the demands on a stretched health system.

Locally led and whānau-centred solutions that support and enable the retention and growth of Māori communities in the health sector will be vital to addressing these disparities and building a more sustainable health system.

The Māori health sector also faces a number of unique challenges and barriers in the planning and delivery of their services. Sapere reported on some of these in their 2021 report in Māori primary care funding, noting:⁵

- **Funding** - Funding allocation based on national census results often under-counts/ under allocates for high needs populations and has resulted in chronic underfunding of Māori Health. Reduced funding and co-payment income limits service provider growth

and development. A more equitable funding framework should be led by the communities it applies to and consider the unique social determinants of health present within these communities, allowing service providers and commissioners to innovate and support new health organisations and services to become established.

- **Partnership** – Some national and regional health plans that impact Māori health are developed without an adequate level of informed and effective Māori community input. Current Māori health plans also have an emphasis on episodic individual needs and do not focus on building whānau capabilities and hauora. As a result, Māori-targeted investment is often limited to discretionary or marginal funding. Māori Health commissioners and providers should be closely involved in the development of any national and regional funding formulae, programme planning and commissioning, and monitoring structures relating to Māori health.
- **Accountability and reporting** - Accountability is an important tool to effect change in the health system. Māori Health Commissioners require access to high quality, open and available data to better assess the quality of service whānau are receiving, quantify inequities and issues in their community, and amplify positive outcomes where applicable. Results should be regularly publicly reported against accountability measures which have been co-developed in partnership with Māori to ensure they are meaningful and impactful. This data system should contribute to the development of a more permissive health eco-systems for evidence-, whānau-voice-, and data-informed innovation.

Global and national trends in healthcare present both challenges and opportunities for Te Taumata Hauora in delivering on whānau hauora aspirations. The level and direction of each trend, and its impact on hauora Māori, will depend on the ability of Te Taumata Hauora, the Māori health sector, the health system and the wider social sector to respond and adapt accordingly.

5. Sapere Research Group. 2021. "Methodology For Estimating The Underfunding Of Māori Primary Health Care."12.



3

**Introduction to Te Taumata
Hauora o Te Kahu o Taonui**

Our vision for Te Tai Tokerau – Tāmaki Mākaaurau takiwā is to have whānau who are thriving and their health outcomes are being met.

Te Taumata Hauora o Te Kahu o Taonui is the largest IMPB in the country, in terms of Māori population covered, made up of many iwi and Māori with diverse views and needs, spread over a large geographical area. Our vision, purpose, aims and principles are all focussed on delivering better hauora outcomes for whānau in our takiwā.

Te Taumata Hauora and its members continue to build on the aspirations and practices reflected in He Whakaputanga me Te Tiriti, while being guided by the words of the Poropiti (prophet), Āperahama Taonui.

Te Taumata Hauora is dedicated to working together with iwi and hapori Māori in a way that is grounded in mutual respect through a shared vision, purpose and goals in order to achieve mutually beneficial outcomes. By taking a long-term, forward-thinking approach, intergenerational investment can be made to achieve Māori health outcomes and advance Māori well-being across the Tai Tokerau – Tāmaki Mākaaurau region.

Vision

The vision of Te Taumata Hauora is Toitū te mana o ngā whānau o Te Tai Tokerau, kia toa, kia mārō, kia puāwai. This vision speaks to the importance of strengthening and, in many cases, restoring the mana of whānau to enable greater well-being.

Purpose

The purpose of Te Taumata Hauora is to act as a revolutionary catalyst for change in Te Tai Tokerau, transforming hauora and well-being systems. It is focussed on elevating Māori well-being in the Tai Tokerau – Tāmaki Mākaaurau region and is centred on He Whakaputanga and Te Tiriti o Waitangi, reflecting the genuine aspirations of tūpuna.

Aims

Te Taumata Hauora aims to:

- place whānau and iwi at the heart of the hauora system and ensure equitable support for isolated communities and empowerment to shape their collective priorities with solutions.
- facilitate mana motuhake, always ensuring that whānau and Iwi are at the core of decision-making,

resourcing, and funding;

- advocate for innovative technology and other progressive whānau-led solutions to address and elevate the health and wellbeing determinants of whānau in the Tai Tokerau – Tāmaki Mākaaurau region;
- monitor the performance of all crown entities, and Ministries within the region to ensure equity of access, outcomes, and investment within the region.

Principles

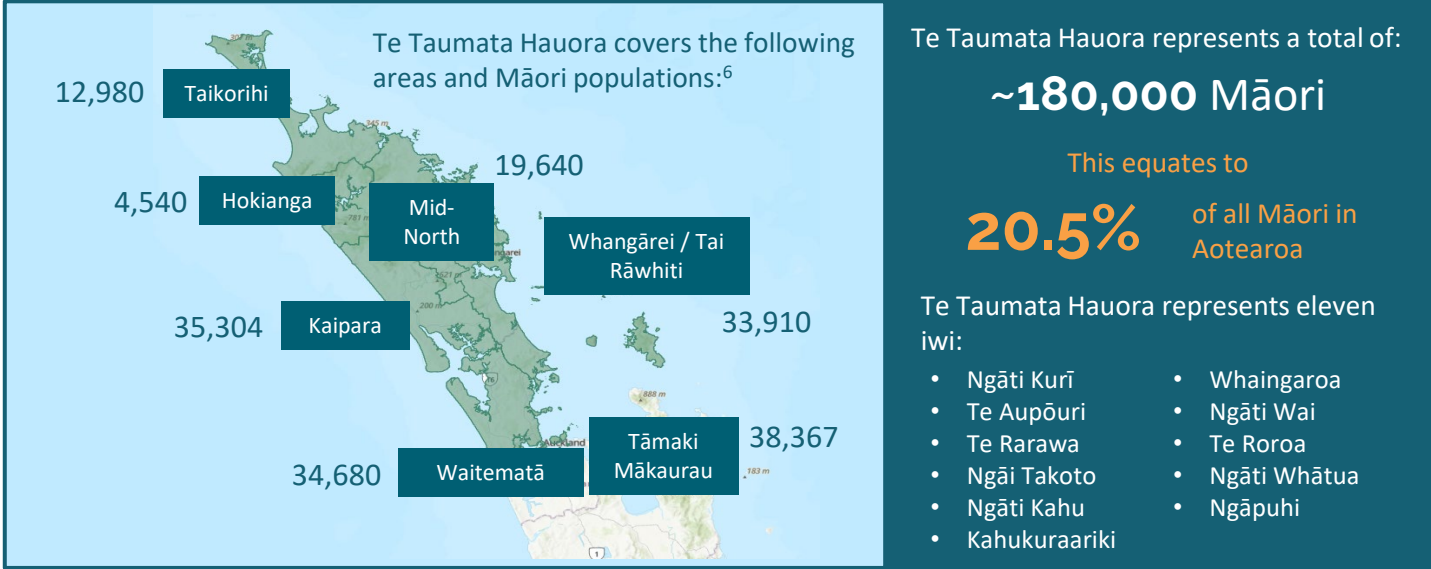
Te Taumata Hauora draws on the same four principles of Partnership, Active Protection, Options and Equity, promoted by the Waitangi Tribunal, to guide how it operates and partners with other organisations and the Crown.

The Māori population in Te Tai Tokerau – Tāmaki Mākaaurau is comparatively large (in relation to other IMPBs) and young, with a greater proportion living rurally (compared with non-Māori).

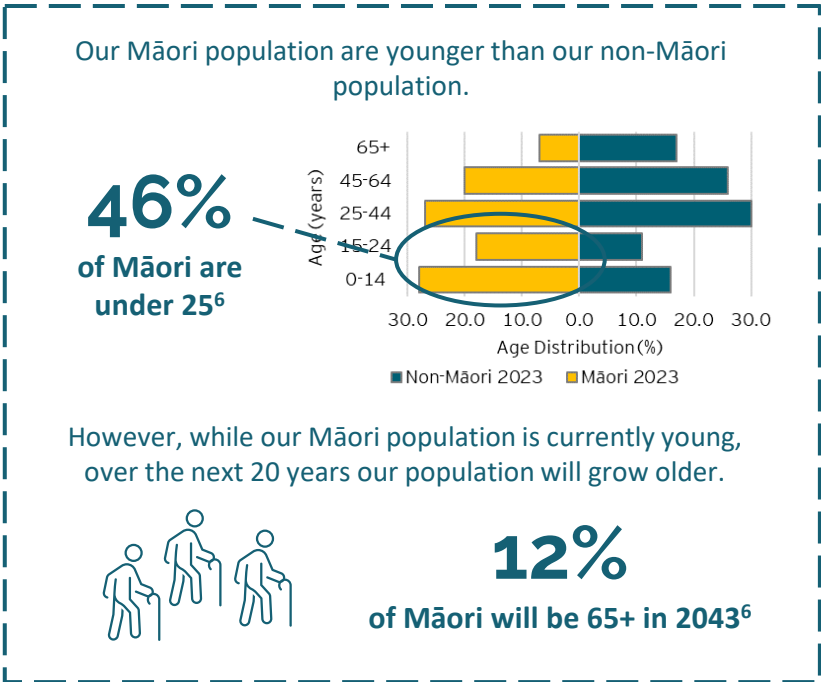
These whānau face greater challenges than non-Māori in terms of the social and economic determinants of health and the current health burden they carry. A snapshot of this is presented on the following pages.

Te Taumata Hauora o Te Kahu o Taonui takiwā has a significant proportion of the Māori population.

Te Taumata Hauora represents eleven iwi from the Far North to the Tāmaki Mākaurau border, encompassing a significant proportion of the total Māori population, as well as the nation's most populous city.



Te Taumata Hauora represents the largest Māori and total population of all IMPBs. Te Taumata Hauora's Māori population is ~56,000 larger than the next largest IMPB (Ngā Pou Hauora o Tāmaki Mākaurau)



What this means:

- We need to ensure there are culturally appropriate services available to support our tamariki, rangatahi and pakeke.
- There needs to be equitable and accessible services, particularly for our rural population
- We also need to look to the future and identify what existing services may require expansion or scaling up to support this population as it ages. For example, home-based support services, aged residential care, community support services, primary and secondary care etc.

Whānau in our takiwā experience disproportionate inequities across the social determinants of health.


As the social determinants of health have a greater impact on health than the delivery of health services, we are clear that interventions must take a holistic understanding of the context that surrounds whānau in order to deliver better, more equitable hauora outcomes for Māori.

Māori in Te Tai Tokerau - Tāmaki Mākaurau experience:

Relatively lower socio-economic determinants	Inequity in health behaviour risk factors	Inequitable access to care	Lower quality of care
<p>Hapori Māori experience persistent inequities in the socioeconomic determinants of health</p> <p>1.93x more likely to be unemployed than non-Māori⁶</p> <p>1.62x more likely to live in a home that was sometimes or always damp than non-Māori⁶</p> <p>18.4% less likely to have achieved a Level 2 Certificate or higher than non-Māori⁶</p>	<p>Inequities in distribution of health behaviours may negatively impact outcomes</p> <p>2x less likely to live in smoke-free homes when babies than non-Māori⁷</p> <p>In Metro Auckland, Māori have the highest proportion of hazardous alcohol users among past year drinkers⁷</p> <p>3.3x more likely to be a current smoker than non-Māori⁶</p>	<p>Health services are less accessible for Māori than non-Māori</p> <p>15% less likely than non-Māori to be enrolled with a primary health care provider⁶</p> <p><71% of two-year old tamariki have been immunised⁷</p> <p>60% of enrolled tamariki Māori have not been seen by oral health services⁷</p>	<p>Across the board, non-Māori receive a higher level of care than Māori</p> <p>13.8% of Māori experienced racial discrimination—the highest of all ethnicities⁸</p> <p>Experiences of racism can lead to poorer healthcare experiences and outcomes due to higher unmet need, lower satisfaction, and more negative experiences of healthcare.⁹</p>

These inequities manifest in poorer health outcomes for whānau

Māori in the Tai Tokerau – Tāmaki Mākaurau region have a shorter life expectancy than non-Māori, and are dying earlier from avoidable and treatable conditions:

<p>The life expectancy gap for Māori in Te Tai Tokerau and Tāmaki Mākaurau is:⁷</p> <p>-6.9 years for women</p> <p>-7.4 years for men</p> <p>Potentially avoidable Māori death rates are 2.7x higher than non-Māori in the region⁷</p>	<p>49% of all deaths among Māori in 2016 were potentially avoidable through effective and timely care.⁷</p> <p>That's 386 people, or 5.5 busloads</p>	
<p>The leading causes of death for Māori in the region are:</p>		
<p>Ischaemic Heart Disease</p>	<p>Between 2014-2018, around 1 in 6 preventable Māori deaths each year in the region was from ischaemic heart disease.⁷</p>	<p>3.2x higher than non-Māori</p>
<p>Cancer</p>	<p>In 2022, cancer was responsible for approximately 31% of all deaths among Māori in the Northern region.⁷</p>	<p>4.2x higher than non-Māori</p>
<p>Diabetes</p>	<p>Māori have the highest proportion of people with glycaemic control that puts them at increased risk of worse outcomes.⁶</p>	<p>6.4x higher than non-Māori</p>
<p>Suicide</p>	<p>A significant percentage of Māori report mental conditions and / or were assessed as having significant psychological distress⁷</p>	<p>2.3x higher than non-Māori</p>
<p>COPD</p>	<p>The disproportionate exposure to smoking is likely the leading risk factor contributing to inequities in COPD deaths in Māori.⁷</p>	<p>3.9x higher than non-Māori</p>

There are therefore significant opportunities to address unmet needs and reduce inequities in Māori health outcomes in the area through the provision of preventative, accessible, high quality local care that contributes to achieving the government's health targets.

7. Herbet, Sarah, Doane Winnard, Wendy Bennett, et al., 2019. Northern Region Māori health status review: Background document for Te Aka Whai Ora and Iwi Māori Partnership Board planning.

8. Manatū Hauora Ministry of Health. Racial Discrimination 2011/12, 2016/17 and 2020/21: New Zealand Health Survey. Wellington: Ministry of Health, 2023

9. Harris, Ricci, Donna Cormack, Andrew Waa, Richard Edwards, and James Stanley. "The impact of racism on subsequent healthcare use and experiences for adult New Zealanders: a prospective cohort study." BMC Public Health 24, no. 1 (2024): 136.

We have clear short- and long-term commitments and priorities.

The creation of stronger connection to whānau and communities, iwi-led procurement, partnerships with funding teams, and stronger accountability structures provide a strong platform for Te Taumata Hauora to work from.

The progress and achievements of Te Taumata Hauora, and its predecessor Kōtuiti Hauora, has been enabled by a number of success factors, including:

- **A strong connection to whānau and communities** – Close ties to whānau and communities in need enabled swift and targeted investment decisions, ensuring that resources were directed to areas requiring immediate support.
- **Iwi led procurement** – Our proactive approach to service procurement, guided by iwi and district leadership, facilitated coordinated and direct actions. This ensured that services were aligned with community needs and effectively delivered to those in need.
- **Partnership with District Health Board Funding Teams** – Collaboration with district health board funding teams provided valuable support in clinical expertise, financial management, and contract management. This partnership bolstered our capacity to implement initiatives efficiently and effectively.
- **Strong accountability structures** – Robust accountability mechanisms were established, allowing for transparent reporting on resource allocation and outcomes achieved. This fostered trust and confidence among whānau, service providers, and government agencies, ensuring that investments achieved tangible results and met community needs effectively.

Te Taumata Hauora's proactive engagement in regional commissioning, unwavering advocacy for involvement in health funding discussions, strategic workforce development, and robust cross-sector relationships have laid a strong foundation for delivering holistic health outcome improvements for whānau.

As external trends continue to evolve, Te Taumata Hauora's ability and experience in working across sectors within and outside of healthcare delivery will be crucial in shaping positive outcomes for whānau Māori and hāpori, ensuring that investments and initiatives are responsive to the dynamic needs of the Tai Tokerau – Tāmaki Mākaurau region.

Early whānau/community engagement by Te Taumata Hauora identified the following priorities :

1. **Kia Tika, Kia Kounga Hoki Ngā Ratonga Hauora** – Timely access to quality hauora services.
2. **He Whare Oranga, He Whare Māori** – Warm, dry, secure, and affordable housing.
3. **Te Āpōpōtanga** – Māmā and Pēpi.
4. **Oranga Hinengaro, Oranga Wairua** – Living mentally well and free from addictions

To date, Te Taumata Hauora has also invested significantly in supporting local provider networks and whānau to collaboratively develop short- and long-term outcomes that are responsive to their unique local needs, character, and challenges. These outcomes and aspirations vary by their local context, with common themes including:

- **Whānau have access to appropriate, safe, healthy homes**
- **Taitamariki are able to achieve their full potential and see a positive future for themselves**
- **Whānau have access to locally-available secure, well-paid training and work**
- **Whānau are healthy, and have equitable health outcomes**
- **Whānau have their own oranga strategies, and are supported to implement them**

As Te Taumata Hauora forges ahead with its mission to uplift Māori well-being by addressing key priorities and fostering community-driven health strategies, it is essential to consider the broader context in which it operates.

Work to date with Te Whatu Ora in serving our takiwā.

Since its establishment Te Taumata Hauora has been supporting whānau aspirations, advocating and actively pushing for new infrastructure and investment in the Tai Tokerau – Tāmaki Mākaaurau region. This has manifested in four key areas of focus: regional commissioning and planning; funding; workforce development; and cross-sector relationships.

There has been a significant focus on working across sectors to input and influence delivery of greater outcomes for whānau, recognising that many of the determinants of health are driven by factors outside of the health system.

A key focus for Te Taumata Hauora for the past 12 months has been supporting the establishment of the localities. Given the size, scale and diverse needs of whānau Māori and hāpori in the Tai Tokerau – Tāmaki Mākaaurau region, this was a complex process to navigate. Te Taumata Hauora has also progressed the following projects alongside this work:

- **Regional commissioning and planning**

Te Taumata Hauora has consistently been reaching out to Te Whatu Ora to proactively indicate interest in contributing to conversations around regional &/or national commissioning. There has been little uptake on these requests for involvement, but Te Taumata Hauora is committed to building these relationships, particularly at a regional level. Local relationships are strong, and therefore involvement is easier. There have been some recent instances where Te Taumata Hauora input has been sought out, for example by National Public Health Service, to discuss commissioning activities.

- **Funding**

Te Taumata Hauora has been unequivocal in its request to be involved in any kōrero relating to health funding in the Tai Tokerau – Tāmaki Mākaaurau region. National Public Health Service has recently reached out seeking advice from Te Taumata Hauora on where to direct investment based on need.

- **Māori workforce development plans**

Workforce shortages have a significant impact on service providers in the takiwā. There have been a number of workforce development plans that Te Taumata Hauora has been involved in recently, with a focus on expanding the skills and roles of allied health professionals and identifying how to make areas within the region (particularly Te Tai Tokerau) an

attractive place to train and to work for nurses and doctors. Some of these workforce development plans include increasing the Social Worker workforce and leveraging lived experience within the takiwā. Te Taumata Hauora have also collaborated with Te Aka Whai Ora and Te Pūkenga to support the development of a Bachelor of Nursing Māori. Aimed at increasing the number of Māori nurses in Te Tai Tokerau with an anticipated start date of February 2025, content is being drawn from local hauora and mātauranga Māori expertise.

- **Cross-sector relationships**

Te Taumata Hauora participates in the Auckland Regional Leadership Group, which has representatives from government agencies, Auckland Council and mana whenua. It provides the opportunity to be involved in discussions and making decisions on matters that are important within Tāmaki Mākaaurau.



4

**Proposed role of Te Taumata
Hauora o Te Kahu o Taonui in
delivering whānau outcomes.**

Te Taumata Hauora proposes a whānau-centred commissioning model and strengthened leadership role in our health system.

“I want to see IMPBs with the ability to have commissioning authority. I will empower local health decisions and Māori health providers with more autonomy than they have had for some years”

– Rt. Hon Minister Reti.⁴

Whānau-centred outcomes-based commissioning and social investment approaches

Our proposed whānau-centred model decentralises the standard commissioning cycle, and places the values, wellbeing needs, and aspirations of whānau and future generations at the heart of decision-making about the care system around them. It shifts away from provider-centric funding practices which typically lack input from iwi, hapū, or whānau, and are characterised by short term, narrowly focused initiatives. It instead fosters greater transparency and inclusivity for whānau in the overall commissioning process and focuses on commissioning for outcomes that deliver meaningful impacts for whānau hauora.

To enable this focus on outcomes, we see this model also utilising social investment methodologies and practices, where appropriate. That includes taking a deeper look at the data from multiple sectors on our people and building a sophisticated model that can help map and understand the predicted longer-term impacts of different innovative initiatives. This will enable a more nuanced approach to whānau-centred commissioning, with a particular focus on outcomes and a greater ability to compare the benefits of different options. It will be supported by continuous monitoring and evaluation. This builds supporting evidence which is then applied systematically as a control cycle to provide a critical feedback loop.

This approach will support the Government and commissioning agencies to achieve objectives that balance cost and outcomes for citizens over time, through investing in evidence-based programs and policies, and employing a feedback loop to anticipate needs and prioritise early intervention for long-term impact. An intentional approach to learning and evaluation of services enables a deliberate investment programme over time that supports successful service innovation for whānau.

Therefore, by taking a system-wide perspective, this social investment-supported, outcomes-based commissioning approach enables commissioners to

identify where and how to intervene, and support agencies to work together to deliver outcomes.

Benefits

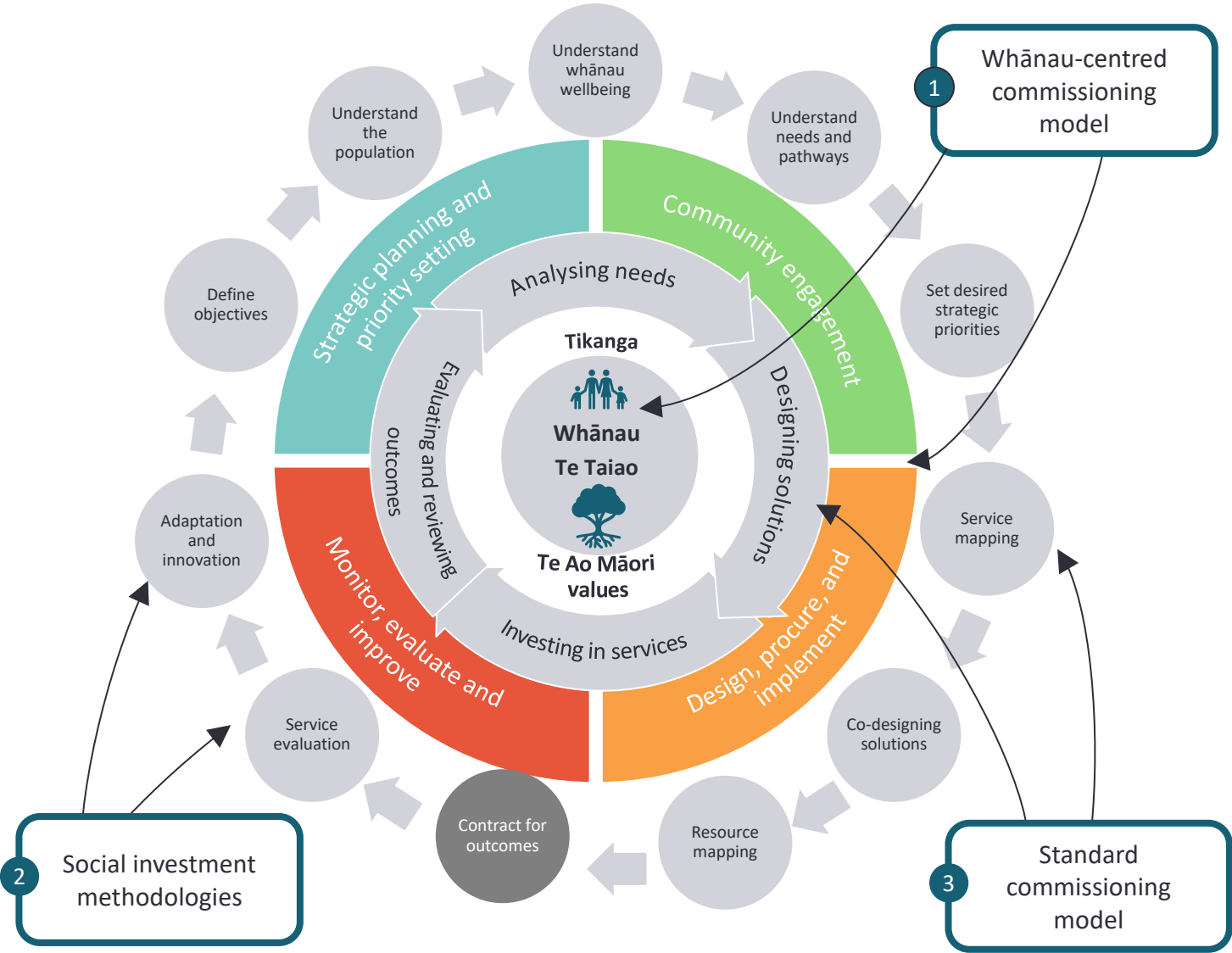
Through implementing a whānau-centred commissioning model, Te Taumata Hauora will be more effective in partnering with Health NZ - Te Whatu Ora and others to:

- **Understand what is working**, and influence resource allocation to support improvement, grow excellence, and cease mediocracy.
- **Improve prioritisation and accountability**, through setting clear performance expectations and targets, then monitoring and reporting against these,
- **Actively invest in and develop** innovative, preventative and high performing services that demonstrate meaningful whānau outcomes.
- **Identify areas of intervention, co-design** service models, and ensure the right mix of service providers are contracted to deliver quality outcomes.
- **Prioritise collaboration with whānau** with lived experience, care practitioners, and provider partners to co-design and -produce the best services and conditions for success (in contracts and other funding mechanisms).
- **Enable** a stable, well-resourced, culturally and clinically safe, collaborative, and outcomes-focused delivery system that whānau Māori can grow to trust and rely on.
- **Foster the sustainable growth** of our local wellbeing system that draws upon the resources and knowledge embedded within our communities and environment.
- **Guide better decision making** in commissioning and enhance visibility of the outcomes and value of these decisions.

Our proposed whānau-centred commissioning model draws from a number of approaches and methodologies.

Our commissioning model brings together a number of complementary models and methodologies to support robust, evidence-informed commissioning that is grounded in te ao Māori and centres the needs of whānau to deliver greater health outcomes. A summary is outlined below.

Appendix B has a more detailed process description.



1

Whānau-centred commissioning

Whānau-centred commissioning centres whānau in decision-making and is grounded in te ao Māori values. Guided by the needs and aspirations of whānau, resources will be allocated in a way which directly addresses these needs, achieving outcomes which contribute to long-term wellbeing.

There are four distinctive features of the whānau-centred commissioning cycle:

- **Focusses on the achievement of hauora outcomes** defined by whānau, iwi, and communities acknowledging that these are inherently long-term, require innovation, and can be resource intensive.

- **Recognises, protects, and enables the whānau voice** throughout the commissioning cycle to shape the system and services that deliver care to them.
- **Is inter-generationally focused**, investing in resources that enable whānau and communities to be empowered and self-determining, with services and practitioners enabled to operate to their full potential.
- **Is guided by principles of transparency, accountability, and responsiveness** to the unique needs and aspirations of our whānau.

2

Social investment methodology

We see an outcomes-based social investment approach as the systematic application of a control cycle that anticipates needs to invest in earlier intervention and prevention, providing readily accessible, targeted, person-centred and evidence-informed supports to optimise wellbeing outcomes for citizens over the long-term.

This process is underpinned by continuous monitoring and evaluation that forms supporting evidence for further decision-making, forming a continuous feedback loop.

Utilising aspects of this approach alongside whānau-centred commissioning enables Te Taumata Hauora and commissioners to understand and identify the needs and risk factors for health outcomes, potential intervention and prevention opportunities, and apply this evidence to inform robust decision making while centring the needs of whānau and te ao Māori.

3

Standard commissioning model

We view commissioning as the process of assessing and identifying needs, and the development of policy and services required to meet these needs effectively.

We also are clear that commissioning and contracting / procurement are two quite distinct things:

- **Commissioning** is the overall process and cycle of assessing and identifying needs, the design and development of policy, priorities and services required to meet these needs effectively, then the monitoring, evaluation and corrective action associated with these.
- **Contracting** and procurement are more narrowly defined and are a subset of the above. These focus on the specific processes of purchasing these services from providers in a timely and efficient manner while meeting the required quality standards in a cost-effective way.

Note:

*Te Taumata Hauora does not intend to work in the **contracting** space at this point in time. Responsibility for the transactional elements of procurement, contracting, contract management and administration, payments and ongoing reporting currently sit with Health NZ - Te Whatu Ora, and for now, Te Taumata Hauora believe Health NZ - Te Whatu Ora are best placed to manage that function.*

A successful whānau-centred outcomes-based commissioning approach requires several key enablers.

System-wide enablers must be in place to support Te Taumata Hauora to implement our desired commissioning approach to deliver lasting impact for whānau. This includes those necessary to support uptake and embedding of relevant social investment approaches in the NZ health landscape

Evidence suggests that successful social investment approaches are typically supported by the following enablers:

- **Sponsorship from leadership:** Strong sponsorship from leadership, including Taumata Hauora, ministerial and central agencies, should be underpinned by effective governance and clear, ongoing communication with staff and stakeholders, to ensure there is buy-in from those implementing change.
- **Clear outcomes and logic:** Outcomes need to be specifically defined and measurable and articulate a theory of change or intervention logic for achieving them which shows the relationship between investment and performance on an ongoing basis.
- **Flexibility of funding:** Allocation of resources should be flexible, and able to be targeted towards more effective solutions at speed.
- **Data and Evidence:** All decisions need to be underpinned by data and evidence that support an assessment of long-term outcomes as a result of interventions. Independent data collection and analysis capability is essential to this
- **Cross-agency partnerships:** Agencies, Community organisations, NGOs and IMPBs should be supported to work across siloes to deliver against shared priorities, multiplying impact and coordination, and minimising duplication of effort.

Strong relationships both within and beyond the health sector will be required to deliver lasting positive impacts for whānau wellbeing. Key relationships include:

- Minister of Health
- Minister for Māori Development
- Te Whatu Ora (Health New Zealand)
- Manatū Haora (Ministry of Health)
- Other government agencies, initially Te Arawhiti, MSD, Te Puni Kōkiri and Kāinga Ora
- Māori Provider sector
- Māori professional bodies
- Te Mana Raraunga
- Local health providers
- Population Health and Wellbeing Networks

Te Taumata Hauora already holds strong relationships with many of these organisations and bodies, and is ideally placed to leverage these to facilitate or lead the development of cross-sector social impact projects that deliver enhanced hauora outcomes for our whānau and communities

Organisational resourcing requirements

Noting the above enablers to underpin successful deployment of commissioning and social investment approaches, Te Taumata Hauora has also focussed on the core functions and capabilities required to implement our commissioning model. There are nine core functions/capabilities. These are described on the following page.

While managing current demands for our time and input to health system activities, we are mindful that there is a lot more to come at us (this paper touches on that later). Currently, Te Taumata Hauora is under-resourced to deliver the high quality, evidence-based, effective insight and influence in the health system in our region that we aspire to. We have not been resourced to acquire sufficient capability and capacity. Te Taumata Hauora is currently operating with 4 FTE, with shared back-office capabilities. With no new infrastructure funding expected in the next financial year, the organisation will need additional support and resourcing to develop independent capability with which to prepare and implement our approach and plans for radically improving health and wellbeing outcomes for whānau.

Effective deployment of whānau-centred commissioning will require investment in key functions and capabilities

To enable Te Taumata Hauora to be successful in influencing improved whānau hauora outcomes through our commissioning model, we require additional resource to grow critical functions & capabilities:

Key functions and capabilities

Strategy Development

- Engage with and support the Ministry of Health and Health NZ in their stewardship of hauora Māori
- Develop position statements for the advocacy of whānau and hapū health needs, aspirations and priorities
- Provide insights into the development of regional and local health strategies



Strategic Planning

- Identify areas of priority for improving hauora Māori
- Work with Health NZ to develop priorities and national, regional, and local plans for improving hauora Māori



Commissioning and Development

- Lead the strategic and collaborative commissioning of services to address identified hauora Māori priorities
- Perform commissioning and financial decision making



Community and Whānau Engagement

- Engage and communicate whānau and hapū health needs, aspirations and priorities to Health NZ
- Ensure the design of health services that impact Māori have Māori input, influence, and leadership
- Participate in co-design processes
- Develop wide recognition and presence within the community



Innovation

- Identify Māori health issues which need to be addressed through innovations (e.g. new care models)
- Identify and support the development of innovative care models and services within the region
- Support regional health providers to build innovative capability



Policy Development

- Engage with and support the Ministry of Health in its development of advice to the minister where this relates to hauora Māori
- Develop position statements for the advocacy of whānau and hapū health needs, aspirations and priorities in the Tai Tokerau – Tāmaki Mākaaurau region
- Provide insights and advice into the development of other policies that impact into hauora Māori



System improvement

- Champion quality improvement of the system in relation to improving equitable outcomes
- Conducting regional benchmarking and service performance/ quality analyses, particularly focussed on identifying and exposing inequity



Local intelligence & monitoring

- Develop deep data analytics capability to conduct analysis, need assessment, extract insights, model performance, inform priorities and decision-making
- Co-design a hauora Māori outcomes monitoring framework with whānau
- Monitor performance of regional health sector and report on Health NZ's hauora Māori service performance within the region
- Evaluate and report on current state of hauora Māori
- Develop regional and local needs assessment reports



Partnerships

- Build strong links with local iwi, and understand and champion their aspirations
- Develop strong relationships with service providers
- Develop strong cross-sector relationships with other agencies, and lead joint initiatives and collaborations
- Proactively engage with Health NZ and MoH while preserving its mana Motuhake on behalf of the community, and foster a robust Tiriti o Waitangi relationship





The importance of Data Analytics

The ability to effectively deploy strategic outcomes-based commissioning, including through a whānau-centred and social investment lens, is heavily dependent on having or accessing a robust data analytics capability and function.

It is strategically important to Te Taumata Hauora to develop a robust, **independent** data analysis and processing capability. We have historically had to rely upon the analysis and reporting of our story by government agencies, developed and flavoured by their lens and bias. It is time we are supported to build an independent capability anchored in our worldview, bringing our unique views, interests and experience to bear in collating and extracting our own insights from the data, melding with that from our own data sources and other sector relationships.

This autonomy in data management is central to the exercise of rangatiratanga, including the strengthening of Māori data sovereignty, and of being able to hold the system to account (through an independent monitoring function over performance in our region).

With the right resources and investment, we have identified areas for early action to make a difference for whānau.

Te Taumata Hauora is positioned to play a strategic role alongside Health NZ - Te Whatu Ora, providers and agencies in seeking urgent and improvement significant improvement Māori health outcomes in Te Tai Tokerau – Tāmaki Mākaaurau. We are clear on the strategic outcomes-based commissioning approach we will take, a whānau-centred commissioning model reinforced by social investment methodologies where appropriate. We are clear on the functions and capabilities required to give effect to this. To realise this potential, Te Taumata Hauora requires support and resourcing put this capability in place.

We also anticipate increasing demands of IMPBs from Health NZ, Manatū Hauora and the wider health system. To date, Te Taumata Hauora has been approached to input into the development of a number of regional plans and strategies. We expect these requests will grow over time, over a wide range of work. By way of example, and not limited to this list, our assumptions are requests for input will span such areas as:

- Refresh of Whakamaaua (Māori Health Action Plan)
- Regional and local commissioning strategies and plans
 - Child and maternal health
 - Health of older people
 - Mental health and addictions
 - Home-based support services
- Local and regional hospital and infrastructure development plans
- Local and regional digital infrastructure
- Future 'locality' discussions and configurations
- Future workforce plans
- Improving hospital and specialist services
- Future health strategy (e.g. Te Pae Tawhiti)
- New Zealand Health Plan
- Hauora Māori Strategy
- Pacific Health Strategy
- Health of Disabled People Strategy
- Women's Health Strategy
- Rural Health Strategy
- Housing, Education, Corrections
- Justice, Employment, Social Development

Te Taumata Hauora has a history of successful cross-sector collaboration, driving positive outcomes by addressing comprehensive health governance, including housing, social, and economic determinants of health. To support these efforts, sufficient resourcing for the core functions, capabilities, and processes is essential.


Te Taumata Hauora is ready to work alongside the Minister and others to lift outcomes for Māori in our rohe.

We are keen to partner with the Minister, Health NZ - Te Whatu Ora and other agencies and to act with urgency to develop and drive out our ambitions for better outcomes for our people.

To convert intent to action, we seek the opportunity to bring our collective resources, capabilities and systems to bear on **an early and bold prototype: the joint development and implementation of an innovative, inter-sectoral, whānau-centred "Ngā Puāwai" plan that focuses enabling and supporting whānau health through the first 2000 days of a child's life, leveraging our iwi influence, networks and relationships to bring others to the table, with a focus on delivering breakthrough gains and outcomes/value in our region.**

This prototype would be anchored by our whānau-centred commissioning model and social investment thinking, seeking deeper change in a population influenced by complex social issues. The age profile, size and nature of our Māori population offers the opportunity to make meaningful impact to a large group of whānau through this work. We are ideally placed to help facilitate this and would welcome the opportunity to pursue it with vigour. As noted earlier, this will require additional investment in Te Taumata Hauora capability and capacity.

We have outlined on the next page our early thinking on how we would seek to proceed with developing this plan.



We would like to work with you to prototype a bold, innovative plan to deliver better health outcomes for whānau in the region.

The first 2,000 days from conception to five years old lay the foundation for a child's future. It is a critical period that impacts lifetime health and wellbeing. The development and implementation of an innovative, inter-sectoral, whānau-centred 'Ngā Puāwai' plan that is grounded in whānau realities would therefore enable us to deliver meaningful outcomes that reduce disparities and improve health outcomes for whānau in the region. Importantly, this proposed area for early action aligns closely with the Government's recently announced Health Targets, specifically on childhood immunisation.

Guided by our whānau-centred commissioning model, the following is a quick summary of how the process may unfold in the development and implementation of this prototype plan. Note that we have not attempted to describe the range of actions currently in play or planned, but given we are yet to see demonstrable evidence of major gains and the systematic removal of health inequities for our whānau, we are firmly of the belief that a bold new approach is required. This is what Te Taumata Hauora is focussed on and we plan to use the process below to facilitate a collective and inter-sectoral approach (holistic in manner) and will work closely with Health NZ - Te Whatu Ora to galvanise action on the development of this plan, followed by effective implementation.

1. **Define objectives** - Identify and engage with key stakeholders, including whānau, Māori health providers, primary healthcare providers, PHOs, NGOs, Health New Zealand, and other health and social sector agencies, to build awareness and support for the plan, and understand key whānau needs and aspirations.
2. **Understand the population** – Utilise data analysis and modelling to understand demographic information of the targeted population, including age, sex, geographic spread, etc.
3. **Understanding whānau wellbeing** – Utilise data analysis and modelling to perform both qualitative and quantitative analysis of whānau needs and aspirations in relation to whānau hauora
4. **Understand needs and pathways** – Utilise data analysis modelling, including cohort and trajectory analysis to identify the key determinants, behaviours, risk, and protective factors that lead to improved outcomes for whānau in the region, as well as how they interact to impact hauora outcomes based on an agreed set of assumptions
5. **Set desired strategic priorities** - Identify and prioritise objectives and goals to be addressed by the plan and build a model that will assist in identifying the size of potential impact, and medium and long term outcomes for activities that target each identified determinant. Prioritise areas for activity
6. **Service mapping** – Use data analysis to understand currently available services for areas of priority, and areas of gap between existing services and levels of whānau need. Use this information to prioritise where further commissioning investment is best made to deliver greatest value.
7. **Co-designing solutions** - Work with hauora Māori partners, providers, partnering agencies, and whānau to co-develop services and solutions, as well as accountability measures for outcomes.
8. **Resource mapping** - Understand the resources and workforce required to deliver proposed solutions, including service demand and resource requirements, and a funding approach
9. **Implementation planning** – Develop an implementation plan, including approach to procurement, timelines for delivery, and benchmarks for service and outcome evaluation.

Following development and implementation of the 'Ngā Puāwai' plan, Te Taumata Hauora will also be responsible for monitoring and evaluating progress and outcomes from the plan, and how they have shifted the dial for health outcomes for whānau in the region and apply these learnings both to the ongoing funding of delivered services, and future iterations of the plan.

Te Taumata Hauora invite a conversation with the Minister, Ministry of Health and Health NZ - Te Whatu Ora to refine and progress the aspirations and intent raised in this paper.



5

APPENDICES

APPENDIX A: IMPB Legislative Context

Legislative recognition

While already part of the health system in New Zealand, IMPBs were formally recognised for the first time through the Pae Ora (Healthy Futures) Act 2022 (Pae Ora Act). In addition to identifying the relevant IMPBs for various areas, the Pae Ora Act also identified the purpose and functions of IMPBs, and when they must be engaged with.

15 IMPBs have been recognised under the Pae Ora Act. There are a range of criteria which must be met in order to be recognised as an IMPB, one of the key aspects being that the area covered by IMPBs do not overlap. Te Taumata Hauora is the IMPB responsible for the Tai Tokerau-Tāmaki Mākaurau area.

Summary of purpose and functions

IMPBs are the primary source of the whānau voice with a focus on ensuring government health agencies understand the inequities and barriers experienced by specific communities and how they can be addressed. Engaging with local whānau and hapū to understand health needs within their area of influence, the purpose of IMPBs is to represent local Māori perspectives on:

- their needs and aspirations regarding hauora Māori outcomes;
- how the health sector is performing in relation to those needs and aspirations; and
- the design and delivery of services within their region.

In addition to engaging with local whānau and hapū, IMPBs' functions include evaluating and determining priorities for improving hauora Māori and working with other government agencies to agree plans and support the health outcomes in the local region.

In addition to the legislative requirements, Te Taumata Hauora also have agreed their own terms of reference (Whanaungatanga ki Taurangi), which identifies their purpose, principles, functions, and processes in more detail.

Recent changes

The Pae Ora Act originally intended for IMPBs to work closely with Te Whatu Ora – Health New Zealand and the Te Aka Whai Ora Māori – Māori Health Authority. The introduction of the Pae Ora (Disestablishment of Māori Health Authority) Amendment Act 2024 will see the disestablishment of Te Aka Whai Ora and the absorption of its roles and functions into the Ministry of Health and Te Whatu Ora.

In relation to IMPBs, Te Aka Whai Ora's original role included obligations to:

- support IMPBs to achieve their purposes through providing information and administrative, analytical, and/or financial support where needed; and
- engage with IMPBs when determining priorities for kaupapa Māori investment.

These obligations are shifting to Te Whatu Ora as part of the recent changes to the Pae Ora Act. We see this transition, and the changes to the Māori health sector more generally, as providing a unique opportunity for IMPBs and associate organisations to create a clear platform to support hauora Māori. The specific opportunities for how Te Taumata Hauora can support health outcomes within the Tai Tokerau – Tāmaki Mākaurau area are heavily influenced by the current needs and aspirations of the whānau and communities within that region.

APPENDIX A: IMPB Legislative Context cont...

Recent changes

The Pae Ora Act originally intended for IMPBs to work closely with Te Whatu Ora – Health New Zealand and the Te Aka Whai Ora Māori – Māori Health Authority. The introduction of the Pae Ora (Disestablishment of Māori Health Authority) Amendment Act 2024 will see the disestablishment of Te Aka Whai Ora and the absorption of its roles and functions into the Ministry of Health and Te Whatu Ora.

In relation to IMPBs, Te Aka Whai Ora's original role included obligations to:

- support IMPBs to achieve their purposes through providing information and administrative, analytical, and/or financial support where needed; and
- engage with IMPBs when determining priorities for kaupapa Māori investment.

These obligations are shifting to Te Whatu Ora as part of the recent changes to the Pae Ora Act. We see this transition, and the changes to the Māori health sector more generally, as providing a unique opportunity for IMPBs and associate organisations to create a clear platform to support hauora Māori. The specific opportunities for how Te Taumata Hauora can support health outcomes within the Tai Tokerau – Tāmaki Mākaaurau area are heavily influenced by the current needs and aspirations of the whānau and communities within that region.

Purpose of iwi-Māori partnership boards

The purpose of iwi-Māori partnership boards is to represent local Māori perspectives on:¹⁰

- the needs and aspirations of Māori in relation to hauora Māori outcomes; and
- how the health sector is performing in relation to those needs and aspirations; and
- the design and delivery of services and public health interventions within localities.

Functions of iwi-Māori partnership boards

The functions include:¹¹

- to engage with whānau and hapū about local health needs, and communicate the results and insights from that engagement to Health New Zealand;
- to evaluate the current state of hauora Māori in the relevant locality for the purpose of determining priorities for improving hauora Māori;
- to work with Health New Zealand in developing priorities for improving hauora Māori;
- to monitor the performance of the health sector in a relevant locality;
- to engage with the Health New Zealand and support its stewardship of hauora Māori and its priorities for kaupapa Māori investment and innovation;
- to report on the hauora Māori activities of Health New Zealand to Māori within the area covered by the iwi-Māori partnership board.

Health New Zealand must also support and engage with iwi-Māori partnership boards and:¹²

- take reasonable steps to support iwi-Māori partnership boards to achieve their purpose in section 29 of the Pae Ora Act, including by providing:
- administrative, analytical, or financial support where needed; and
- sufficient and timely information; and
- engage with iwi-Māori partnership boards when determining priorities for kaupapa Māori investment.

10. Pae Ora (Healthy Futures) Act 2022, s 29.

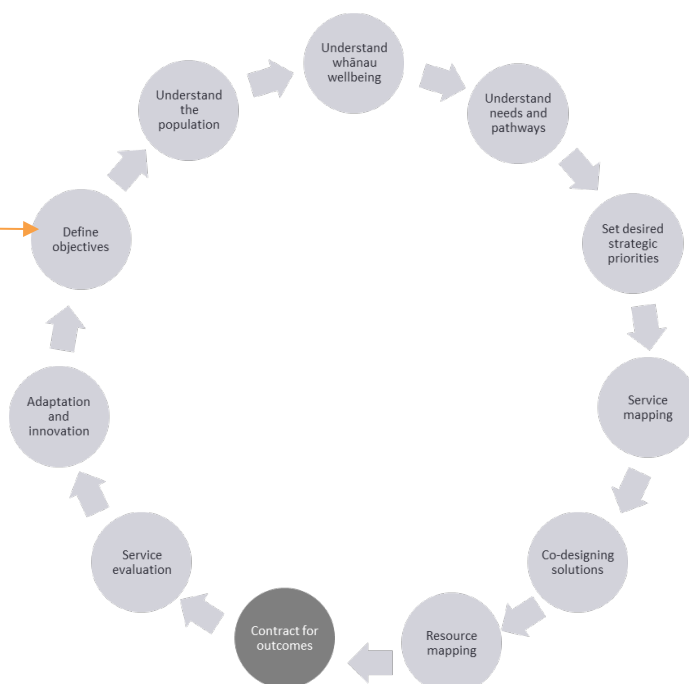
11. Pae Ora (Healthy Futures) Act 2022, s 30.

12. Pae Ora (Disestablishment of Māori Health Authority) Amendment Act 2024, s 15.

APPENDIX B: Our whānau-centred commissioning process.

The key steps in our proposed whānau-centred commissioning model and cycle, as per the graphic on page 21 and highlighted to the right, is described below:

- **Define objectives** - Defining the long-term wellbeing goals for the region
- **Understanding the population** - Understanding demographic information of the population served. It includes data such as population size, sex, age distribution, ethnicity, and location.
- **Understanding whānau wellbeing** - This includes both qualitative (whānau voice, e.g., aspirations, priorities, perceptions of wellbeing) and quantitative (data and evidence, e.g., number of cancer diagnoses, mortality) analysis of whānau needs and aspirations
- **Understand needs and pathways** - Understanding and identifying risk factors, and potential areas of intervention
- **Set desired strategic priorities** - Identification and prioritisation of potential activities and interventions their outcomes, and intended impact to address specified goals
- **Service mapping** - Understanding the overlaps and gaps between existing services and levels of whānau need.
- **Co-designing solutions** - Working with hauora Māori partners, providers, and whānau to co-develop services and solutions, as well as accountability measures for outcomes
- **Resource mapping** - Understanding the resources and workforce required to deliver proposed solutions.
- **Contracting for outcomes** – this involves contract negotiations with hauora Māori partners, the development of service specifications, general contract administration, including payment management, and ongoing reporting and monitoring of the contract. *Note: Te Taumata Hauora does not intend to work in this space currently.*



- **Service evaluation** - Measuring the coverage, impact and integration of a service, as well as outcomes, including any wellbeing, clinical, and population-level outcomes using whānau-defined metrics of success. Includes comparing service performance to the original cost-benefit assessments
- **Adaptation and innovation** - Measuring the coverage, impact and integration of a service, as well as outcomes, including any wellbeing, clinical, and population-level outcomes using whānau-defined metrics of success. Includes comparing service performance to the original cost-benefit asses
- **This work will be enabled by partnerships**, which will be sought within the community, local health agencies and providers, and with other sectors that impact hauora to enable collective progress and a whole-of-system approach to address health inequities experienced by communities.