

TATAU POUNAMU

Ki Te Tai o Poutini



MANAWHENUA ADVISORY GROUP

10 December 2015

@ 3.00pm Board Room, Corporate Services

Agenda and Meeting Papers

**ALL INFORMATION CONTAINED IN THESE
COMMITTEE PAPERS IS SUBJECT TO CHANGE**

TATAU POUNAMU ADVISORY GROUP MEETING

Thursday 10 December 2015 @ 3.00 pm

Board Room, Corporate Services

KARAKIA

ADMINISTRATION

Apologies

1. Interest Register

Update Interest Register and Declaration of Interest on items to be covered during the meeting.

2. Confirmation of the Minutes of the Previous Meeting

22 October 2015

3. Carried Forward/Action List Items

4. Discussion Items/Presentations/Presenters

- | | |
|--|---------|
| ▪ Dr Amanda Landers – Palliative Care Services on the West Coast | 3.05 pm |
| ▪ Dr Cheryl Brunton – Community Public Health Update (VC/Teleconference) | 3.45 pm |
| ▪ Mark Newsome – Terms of Reference & Grey/Westland Update | 4.00 pm |
| ▪ Kylie Parkin, Maori Health Profile Update | 4.30 pm |
| ▪ Gary Coghlan – In Committee Update | 4.45pm |

REPORTS

- | | |
|---|-----------------------------------|
| 5. Chairs Update – Verbal Report | Lisa Tumahai, Chair |
| 6. GM Maori Health – Report | Gary Coghlan, Maori Health |
| 7. Alliance/Workstream Updates | Philip Wheble, Planning & Funding |
| 8. Community Public Health | December Report Update |

INFORMATION ITEMS

- 2015 Tatau Pounamu Meeting Schedule
- 2016 Board Meeting Schedule
- Mason Durie Article – Bay Of Plenty Times
- Understand the Impacts of Cancer for Maori – Grey Star

ESTIMATED FINISH TIME 5.00pm

TATAU POUNAMU ADVISORY GROUP MEMBERS INTEREST REGISTER

Member	Disclosure of Interest
<p>Lisa Tumahai (Chair) Te Runanga O Ngati Waewae</p>	<p>Directorships</p> <ul style="list-style-type: none"> Chair - Arahura Holdings Ltd 2005 – currently Chair -Te Waipounamu Maori Heritage Centre 2006 – currently <p>Committees</p> <ul style="list-style-type: none"> Te Waipounamu Maori Cancer Network Committee 2012 - currently Te Runanga O Ngati Waewae Incorporated Society 2001 – currently Chair – Te Here (subcommittee Te Runanga o Ngai Tahu 2011 - currently) Member Maori Advisory Group to Vice Chancellor Canterbury University 2012 - currently <p>Trustee</p> <ul style="list-style-type: none"> West Coast PHO 2013 – currently Poutini Waiora – April 2013 - currently Te Runanga O Ngai Tahu - Deputy Kaiwhakahaere (2011 - currently) Te Poari o Kati Waewae Charitable Trust – (2000 – currently) Husband Francois Tumahai.
<p>Francois Tumahai Te Runanga O Ngati Waewae</p>	<ul style="list-style-type: none"> Chair, Te Runanga o Ngati Waewae Director/Manager Poutini Environmental Director, Arahura Holdings Limited Project Manager, Arahura Marae Project Manager, Ngati Waewae Commercial Area Development Member, Westport North School Advisory Group Member, Hokitika Primary School Advisory Group Member, Buller District Council 2050 Planning Advisory Group Member, Greymouth Community Link Advisory Group Member, West Coast Regional Council Resource Management Committee Co-Chair Poutini Waiora Board Member, Grey District Council Creative NZ Allocation Committee

Member	Disclosure of Interest
	<ul style="list-style-type: none"> ▪ Member, Buller District Council Creative NZ Allocation Committee ▪ Trustee, Westland Wilderness ▪ Trustee, Te Poari o Kati Waewae Charitable ▪ Trustee, Westland Petrel ▪ Advisor, Te Waipounamu Maori Cultural Heritage Centre ▪ Trustee, West Coast Primary Health Organisation Board ▪ Wife is Lisa Tumahai, Chair
<p>Elinor Stratford</p> <p>West Coast District Health Board representative on Tatau Pounamu</p>	<ul style="list-style-type: none"> ▪ Member Clinical Governance Committee, West Coast Primary Health Organisation ▪ Committee Member, Active West Coast ▪ Chairperson, West Coast Sub-branch-Canterbury Neonatal Trust ▪ Committee Member, Abbeyfield Greymouth Incorporated ▪ Trustee, Canterbury Neonatal Trust ▪ Board Member of the West Coast District Health Board ▪ Member of the Southern Regional Liaison Group for Arthritis New Zealand
<p>Gina Duncan</p> <p>Kawatiri</p>	<ul style="list-style-type: none"> ▪ Maori Community Representative – Incident Reporting Group, Buller Hospital ▪ Buller Maori Representative on the Buller Integrated Family Healthcare Workstream ▪ North School Iwi Representative, Board of Trustee ▪ Member of MSD Service Provider for Youth ▪ Buller Reap Youth Co-ordinator
<p>Wayne Secker</p> <p>Mawhera</p>	<ul style="list-style-type: none"> ▪ Trustee, WL & HM Secker Family Trust ▪ Member, Greymouth Waitangi Day Picnic Committee
<p>Paul Madgwick</p> <p>Te Runanga o Makaawhio</p>	<ul style="list-style-type: none"> ▪ Chairman, Te Runanga o Makaawhio ▪ Editor - Greymouth Star, Hokitika Guardian, West Coast Messenger. ▪ Board member, Poutini Waiora
<p>Susan Wallace</p> <p>Te Runanga o Makaawhio</p>	<ul style="list-style-type: none"> • Tumuaki, Te Runanga o Makaawhio • Member, of the West Coast District Health Board • Member, Te Runanga o Makaawhio • Member, Te Runanga o Ngati Wae Wae • Director, Kati Mahaki ki Makaawhio Ltd

Member	Disclosure of Interest
	<ul style="list-style-type: none"> • Mother is an employee of West Coast District Health Board • Father member of Hospital Advisory Committee • Father employee of West Coast District Health Board • Director, Kōhatu Makaawhio Ltd • Appointed member of Canterbury District Health Board • Co-Chair, Poutini Waiora Board ▪ Area Representative-Te Waipounamu Maori Womens' Welfare League

MINUTES OF THE TATAU POUNAMU MANAWHENUA ADVISORY MEETING



MINUTES OF THE TATAU POUNAMU MANAWHENUA ADVISORY MEETING West Coast Primary Health Care Organisation (PHO) Greymouth, on Thursday 22 October 2015 @ 3.00pm

PRESENT: Lisa Tumahai, Te Runanga O Ngāti Waewae (Chair)
Francois Tumahai, Te Rūnanga O Ngāti Waewae
Paul Madgwick, Te Runanga O Makaawhio
Elinor Stratford, West Coast DHB Representative (*Arrived 3.52pm*)
Susan Wallace, Te Runanga o Makaawhio (*Arrived 3.52pm*)
Gina Robertson, Maori Community Kawatiri

IN ATTENDANCE: Gary Coghlan, General Manager Māori Health
Kylie Parkin, Maori Health
Cheryl Brunton, Community Public Health
Karen Bousfield, Director of Nursing
Philip Wheble, Manager Planning & Funding
Mal Robson, Manager Maori Mental Health

APOLOGIES: Wayne Secker, Maori Community Mawhera
Mark Newsome, General Manager Grey/Westland

MINUTE TAKER: Megan Tahapeehi, Maori Health

WELCOME / KARAKIA
Gary Coghlan

AGENDA / APOLOGIES

1. DISCLOSURES OF INTEREST

Elinor Stratford advised in her role as President of the NZ Federation of Disability Information Centres that some of the meeting dates in 2016 may conflict with Tatau Pounamu as these don't meet on the day of the other committee meetings always. For noting.

2. MINUTES OF THE LAST MEETING

Moved: Francious Tumahai **Second:** Paul Madgwick

Carried

3. Carried forward/Action List Items

No. 4 – Tatau Pounamu MOU

Still waiting for Greg Brogden. No signals as yet.

ACTION: Megan to follow up

No. 4 – Maori Representative Appointment Requests

Older persons Health Workstream - confirmation was requested around who are the Maori representatives on this workstream. Gary attends this meeting however meetings are extremely inconsistent.

ACTION: Gary to provide an update

9. DNA and Discharge Planning

Ongoing. Julie Lucas presenting today.

10. Health Services for Westland

Ongoing

11. Rangatahi

Ongoing

A G E N D A

Dr Cheryl Brunton – Community Public Health (CPH)

Report taken as read.

Updates as follows:

- Ministry of Health – ROI for Regional/Local Stop Smoking Services was cancelled and the Ministry reissued a new slightly changed version. Claire Robertson and John Caygill are working on this. The PHO and Poutini Waiora are happy with the approach. The Canterbury Registration of Interest is managed by the clinical network.
- Mana Tamariki Sessions – Aligned work with Poutini Waiora.
- Bruce Bay Hui – Continuing to work on a date for the New Year.
- Community Nutritionist – Appears to be a need on the West Coast. Partners alongside Healthy West Coast. **ACTION: Kylie and Gary to talk further around the community investment of this.**

4. Mal Robson, Maori Mental Health Manager – Suicide Prevention Update

Mal delivered a follow up presentation from his initial introduction to Tatau Pounamu in August. The purpose of this presentation was to ensure that Tatau Pounamu were informed about the Suicide Prevention Plan 2015-2017.

It was requested that engagement with Tatau Pounamu continue to ensure an appropriate Maori member for the Suicide Prevention Action group was appointed, and to also ensure that a lead agency/organisation was identified to provide leadership for Maori in suicide prevention activity.

All of the above would be run through the usual Tatau Pounamu selection process as well as getting the Chairs of Poutini to take this back to Poutini Waiora for consideration.

Philip Wheble Grey/Westland Update

Grey/Westland Update

- The appointment of Fletcher Construction for the pre phase of the Hospital Rebuild has been confirmed.

- Mental Health – There is a new project manager who's role is to support the implementation of the mental health services review and work with the Governance team for mental health review implementation.

ALT Report

- A question was asked around the Integrated Family Health Service and is there a level of data collection around the measures for Maori access and utilisation of care ensuring that screening and assessments are current and up to date and is that level of ethnicity data being collected correctly? All general practice data includes ethnicity data.

Kylie advised that there are PHO quarterly reports and also practice level data however it would be good to look at other ways of collecting the more qualitative information and to see how that has impacted on the quantitative outcomes. She will work with P&F, Poutini Waioara and the PHO to look at how we might be able to present this effectively.

ACTION: Kylie to work with Planning and Funding and the PHO on this and provide update at next meeting

Alliance Update

The Alliance Leadership Team Meeting held on November 12th will focus on a workshop to begin the annual planning process for 2016/2017. Tatau Pounamu are invited to attend a pre meeting with a Planning and Funding analyst from CDHB and other planning and funding members to identify Maori priorities for the 2016/2017 annual plan. These priority areas will be feed back to the workstreams to ensure a targeted approach is evident within the areas identified.

ACTION: Megan to confirm meeting time and members The Chair asked that Tatau Pounamu be included in all discussions around the process and in particular any follow on work .

Nursing Update – Karen Bousfield

- Consultation Paper – Nursing contracts about updating flexible working environments. A clean up to support our model of care going forward. This is a way of supporting the appropriate skill set of where the care should be focused
- Safe staffing workforce – enabling nursing to move from somewhere else in the system to the area of need.

7. Cancer Screening Pathway – Kylie Parkin

Ministry RFP – Te Tau Ihu were successful in their proposal to the Ministry to undertake research into the Maori Cancer Pathway as a part of the Faster Cancer Treatment (FCT) funding. A report has been produced that highlights significant inequalities throughout the entire cancer pathway for Maori. The Nelson Marlborough DHB have been successful in gaining funding for the second phase of the proposal which will focus strongly on cultural competency, health literacy and working alongside other South Island DHBs to identify needs and opportunities specific to their rohe within the Maori Cancer Pathway. Dr Melissa Cragg is coming to the DHB in November to report the findings to a number of audiences along with a community forum

There were some critiques given on the report and while this report has very useful information in it the Chair commented by saying if this is expected to be rolled out along our West Coast region it is important to talk to our communities and manawhenua group. When you are talking about pathways aligned to cultural competencies this information needs to come from the relevant manawhenua within regions. Important that consultation is done properly.

ACTION: Kylie to update further

6. GM Maori Health Report

Gary talked to his report. Made mention about Maori smoking rates reducing for the West Coast.

Rangatahi Placements – what is the process of getting interested students? Follow up with Kia ora Hauora.

ACTION: Invite Kia ora Hauora to a meeting to update

The Chair asked about the breastfeeding rates for Maori and how these are not great. A lot of work is occurring to improve the breastfeeding rates for Maori however Kylie stated that this will not be a quick fix. We need to identify with the Mums their reasons and influences for breastfeeding or deciding not to and the reasons for stopping early. The mention of Mana Tamariki project – which could provide an opportunity for feedback and also positive health messaging. The project has been running for some time now are we not seeing any trending? Kylie is also working with Poutini Waioara and the Mama and Pepi service on a small research project that will ask a series of questions regarding breastfeeding to try and ascertain influences as above.

Also discussed the Maori long term conditions increase and how this has come about. Kylie said that it is more than likely due to the increased activity in the practices from Poutini Waioara staff.

ACTION: Kylie to provide some updated information.

Hospital Rebuild/IFHS

Took part in a meeting at Arahura which was positive and will continue to be involved as it progresses. The rebuild is still in its early stages and there is a good passionate team with great ideas. There are some great opportunities for Maori to be involved in regards to improving the patient experience..

Bruce Bay Hui

Bruce Bay hui discussion to be arranged with Maakaawhio. Community Public Health are leading this hui and will engage with Maakaawhio.

Maori Health Profile Report

Analysis of the plan led by Bridget Robson will be presented to interested parties in November. There appears to be some inconsistencies within the data ie, average of 92 Maori babies born from 2008-2013 – seems high.

ACTION: Gary will do some follow up on the accuracy on some of this data. There is a definite parallel from the 2008 profile and this current one.

Whanau ora update – Gina Lee Duncan

Gina presented on Te Ha O Kawatiri – Whanau Ora project. Gina will distribute the presentation and any further questions can be discussed at the next meeting.

DNA & Discharge Update – Julie Lucas

Julie Lucas presented the most recent analysis of the DNA data and identified some of the major issues and talked through some of the improvements that have already occurred and updated on the strategy for implementing change.

ACTION: Further update in the New Year

December Tatau Pounamu Meeting

It was requested that we change the final meeting from the 3 December to the 10 December.

ACTION: Megan to update the calendar and members to confirm their availability.

Meeting finished at 5.30pm

TO: **Members**
 Tatau Pounamu Advisory Group

SOURCE: **Chair**

DATE: **10 December 2015**

Report Status – For: Decision ☐ Noting ☒ Information ☐

1. ORIGIN OF THE REPORT

The verbal update.

2. RECOMMENDATION

That the Tatau Pounamu Advisory Group notes the report.

A verbal update will be given at the meeting.

TO: Chair and Members – Tatau Pounamu Manawhenua Advisory Group

SOURCE: General Manager, Maori Health

DATE: 10 December 2015

Report Status – For:	Decision <input type="checkbox"/>	Noting <input checked="" type="checkbox"/>	Information <input type="checkbox"/>
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1. ORIGIN OF THE REPORT

This report is provided to Tatau Pounamu Manawhenua Advisory Group as a regular update

2. RECOMMENDATION

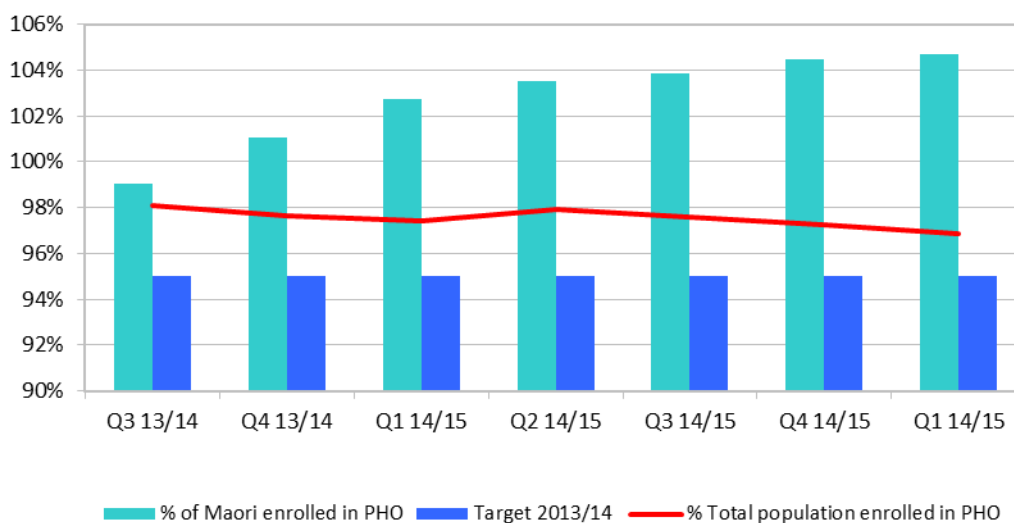
That the Tatau Pounamu Manawhenua Advisory Group notes this report
i notes the General Manager Maori Health Update

Maori Health Quarterly Report – Q1, 2015/16

Access to care

Percentage of Maori enrolled in the PHO

PHO enrolment using 2013 Census population data



* 2006 census population was used as the denominator.

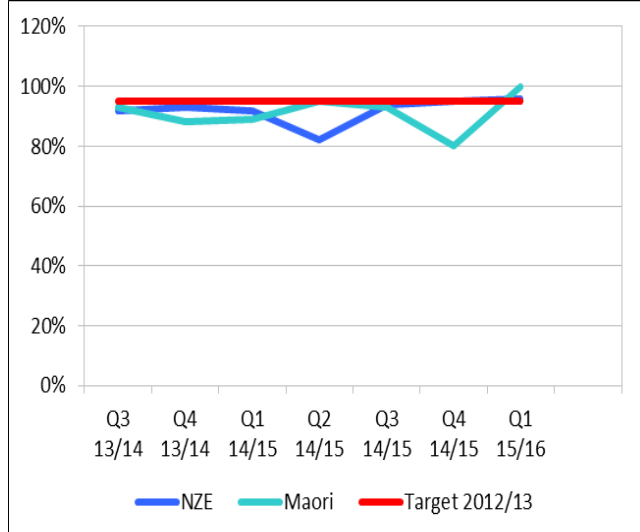
ACHIEVEMENTS/ISSUES OF NOTE

Enrolment in PHO: Using the 2013 population census figures 104% of Maori were enrolled with the PHO as at 30 September 2015. 3319 Maori were enrolled in quarter 1 compared to 3312 in quarter 3 an increase of 07 and an increase of 61 over the last 4 quarters.

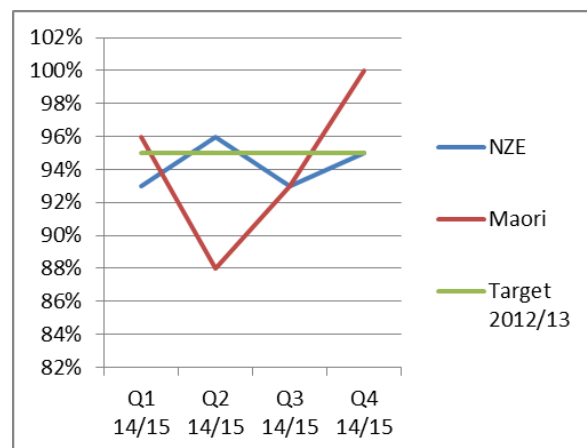
The Census data shows total Maori population is 3171.

Child, Youth and Maternity

NEW Immunisation HT: Eight-month-olds fully immunised



Immunisation: Two-year-olds fully immunised

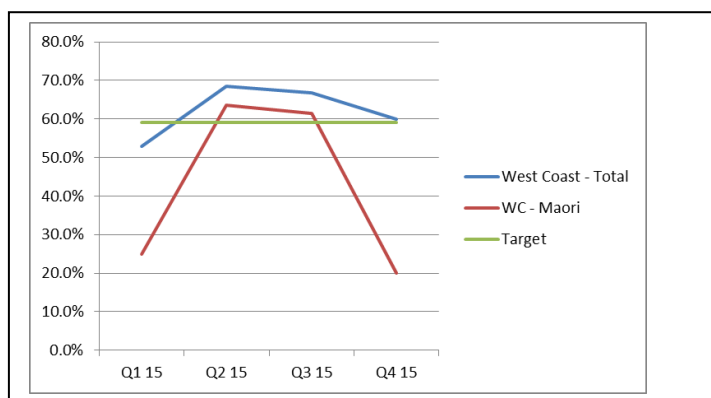
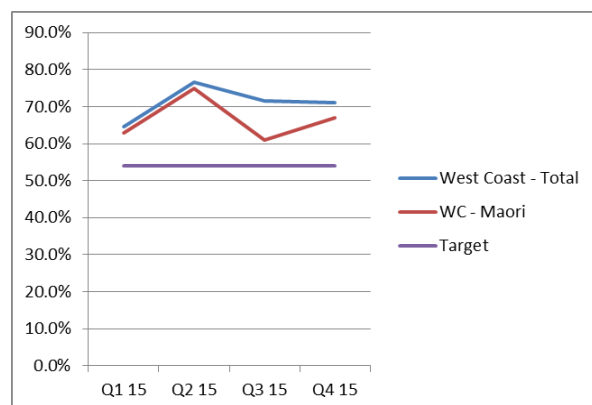


Eight-month-old immunisation: 100% of Maori babies have been immunised on time at 8 months of age in quarter 1 – 20 babies out of 20 eligible for this quarter which is a significant improvement from Q4. This is compared to 96% of non-Maori babies where 47 from 49 eligible babies have been immunised.

Two-year-old immunisation: 89% of Maori 2 year olds have been immunised on time in Quarter 1 – 17 from 19 eligible babies. This is compared to 95% NZ European babies - 53 from 56 eligible babies.

Excellent results for Maori with 100% of 8 month olds immunised on time in Quarter 1.

Percentage of West Coast babies fully/exclusively breastfed at 3 months and at 6 months



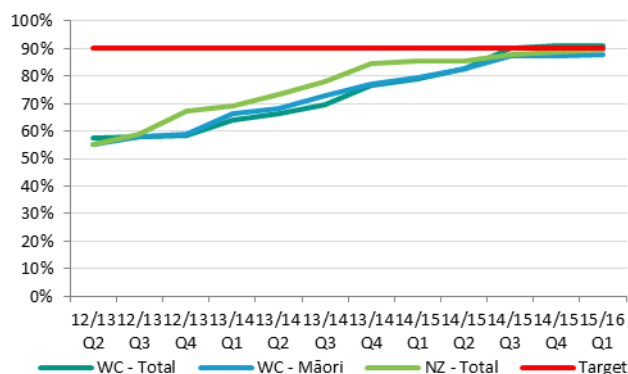
Breastfeeding Support: The community lactation consultancy and breastfeeding advocates continue to be in contact with all new-born's Mums through the Newborn enrolment process. There have been 57 new and return advocacy clients, including 7 Maori and 50 other. The rate of Maori Mums still breastfeeding at 6 months old has declined to 20% which is a concern. We are currently working with Poutini Waiora Mama and Pepi service to look at a small research proposal that will aim to gain valuable information about the influences on Maori women when looking at breastfeeding options. The breastfeeding Lactation Consultant is also looking at options for working alongside the Mana Tamariki Mana Mokopuna group of Mums to provide some health literacy around breastfeeding.

Erin Turley, PHO Breastfeeding advocate provided the below data and advised that plans are underway with MTM to run a M4M course early next year. It is hoped an increased number of peer counsellors will help with these rates

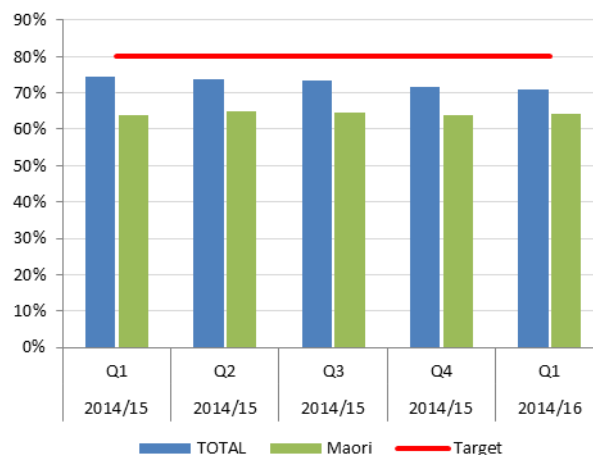
TARGET	MAORI	NON MAORI
68 % 6 weeks	57.14	77.78
54 % 3 months	66.67	71.43
59 % 6 months	20	60

More Heart & Diabetes checks

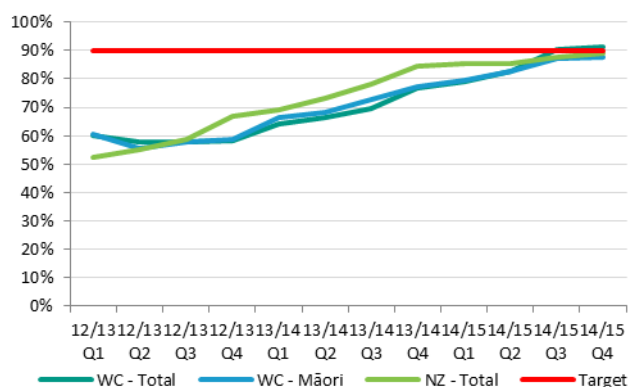
Diabetes Annual Review: % of people estimated to have diabetes who have had an annual check during the year



Diabetes Good Management: % of people who have HBA1c levels at or below 8.0 when assessed at their annual check



More Heart and Diabetes Checks Health Target: % of eligible PHO population having had a CVD risk assessment in the last 5 years



Diabetes

Maori still continue to show a good rate of access to Diabetes Annual Reviews. 14 Maori have participated in a Diabetes Annual Review for the first quarter. 79% of Maori with diabetes have had Retinal Exams, 64% show HBA1c levels at or below 8.0, 100% are non-smokers and 100% are on statins.

CVD Health Target

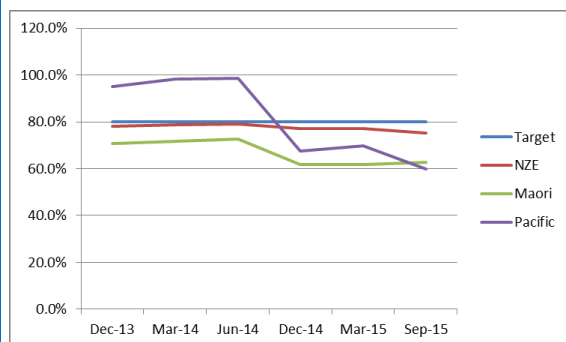
West Coast general practices have maintained coverage this quarter, with 91% of the eligible enrolled West Coast population having had a cardiovascular risk assessment (CVDRA) in the last 5 years. We are pleased to continue to meet the target.

Maori make up 5.7% of CVRAs this quarter. By comparison, Maori make up 6.3% (1026) of the eligible cohort for CVRA on the West Coast. (The eligible age range for Maori is male 35-74 years and for female 45-74 years). 88% of those eligible have been screened: this includes 84% of eligible males and 92% of eligible females.

The smoking profile for CVRAs completed this quarter for Maori is 58% not smoking compared with other ethnicities screened not smoking 87%.

Green Prescription: Quarter 1 data shows from 113 referrals to the Green Prescription programme in the Grey/Westland district 6 were for Maori, 29 total referrals were made in the Buller district with 1 being for Maori. The major group of conditions this quarter is people with elevated body mass index (BMI), followed by depression/anxiety

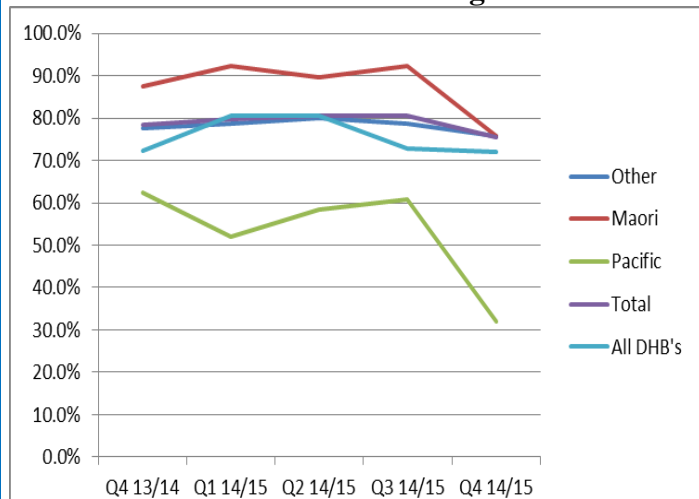
and cardiovascular disease.



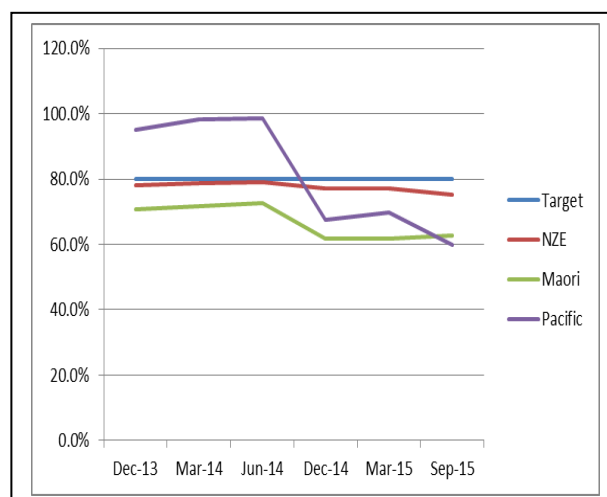
Long Term Condition Management (LTC): 236 Maori are enrolled in the Long Term Conditions programme as at Sept 30 2015 an increase from 233 in quarter 4, Maori enrolments makes up 6.4% of all enrolment in the LTC programme. The target is 7.6%. For comparison Maori make up 6.3% of the enrolled population at the primary practices aged 45 years and above.

Cancer

Percentage of eligible Maori women (45-69) receiving breast screening examination in the last 24 months ending



Percentage of eligible Maori women (25-69) receiving cervical screening in the last 3 years



ACHIEVEMENTS/ISSUES OF NOTE

Breast Cancer Screening: Approximate 75.47% of all eligible women aged 45-69 age-groups on the West Coast have undergone breast screening for the period ending June 2015. The coverage for eligible Maori women has dropped considerably in this quarter to 75.7 however still continues to be higher compared to all other DHBs. The drop has occurred nationally and is as a result of the new census data.

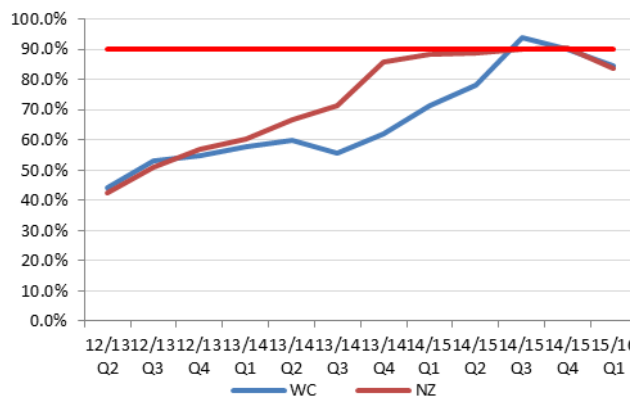
Cervical cancer screening: At the end of September 2015, the preliminary three year coverage result for cervical screening on the West Coast non-Maori was 62.6%. The result for Pacific women was 59.9 and for New Zealand European is 75.3%.

Ongoing work on improving this target for Maori is occurring and we have appointed a replacement for the Maori Cervical Screener. Nyoli Waghorn-Rogatski has been in the role for a just over a month now and has hit the ground running already making contact to work alongside Poutini Waiora and running clinics in the Buller. Two of the Poutini Waiora Whanau ora Nurses are now certified to provide smears and are working hard on reducing the overdue lists with Grey Medical and running community based clinics.

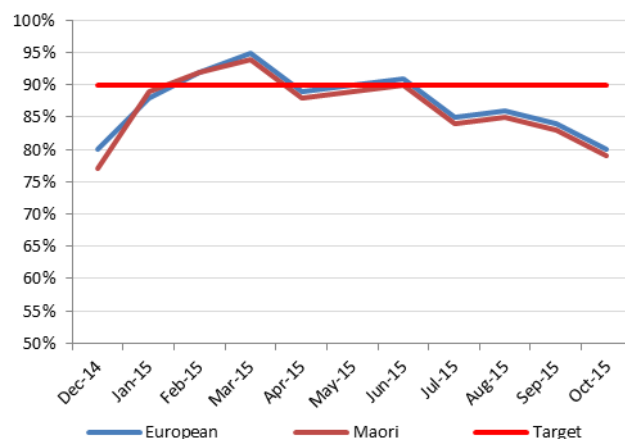
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SMOKING CESSATION

Primary Smokefree Health Target: Smokers attending primary care given advice & help to quit



Primary Smokefree Karo data: Smokers attending primary care given advice & help to quit – by ethnicity



ACHIEVEMENTS/ISSUES OF NOTE

Primary Smokefree Health Target: Smokers attending primary care given advice and help to quit

Aukati Kai Paipa: For the half year from January to June 2015 the AKP service has worked with 126 clients with a 38.3% validated abstinence rate at 3 months. The Aukati Kai Paipa cessation adviser is working more closely with practices and Poutini Waiora which is resulting in increased referrals to the service.

PHO Coast Quit Programme: For the quarter June to Sept 2015 .13% (18) Maori accessed the Coastquit cessation service.

Spirometry Clinics for Maori

4 hui have been held in the Buller 3 in Westport and 1 in Karamea. Poutini Waiora have been working alongside the PHO, Buller Health, DHB conducting Spirometry testing on all Maori patients with a known diagnosis of COPD. Whanau were tested and screened for smoking status with smokers being given targeted advice regarding the benefits of quitting. Additionally nutrition and other lifestyle health advice was made available.

15 referrals have been received through to AKP from the four spirometry clinics so far (3 in Westport and 1 in Karamea).

Also Angela has confirmed today that the clinic on 7th December in Greymouth at the PHO is now full with 13 clients which is great.

The first clinic for Greymouth is being organised for the 7th December and is full with 13 clients booked in to participate. This first clinic in Greymouth is focusing on those Maori registered in the Grey Medical and RAGP clinics.

3. SUMMARY

Understand the Impact of Cancer for Maori

3 hui have been held with over 140 people attending a presentation that was delivered by Dr Melissa Cragg on Understanding the Impact of Cancer for Maori. The audience included a mix of Maori community and health professionals with over 10 doctors and a large number of nurses attending.

The research funded through the Faster Cancer Treatment (FCT) national initiative identifies challenges and opportunities in regard to the cancer pathway and Maori and will provide a good platform for discussion and planning here locally. The key findings are identified below:

- The data that was available for analysis was not of a high quality and difficult to utilise for effective analysis;
- It appears that Māori are presenting late or not at all for diagnosis and treatment;
- It appears that Māori are coming into the system via ED rather than GP referral;
- There are small numbers of Māori on the FCT register;
- There are small numbers of Māori accessing hospice/palliative services; and
- Often Māori patients have co-morbidities that make their case complex.

These findings have been developed into recommendations for implementation and include: improving the quality of ethnicity data, ensuring the health workforce is culturally competent, relationships between services and between services and whānau are improved and patient navigation for whānau is facilitated.

We look forward to being involved the second stage of this project which will be led through the Southern Cancer Network and will include working with other South Island DHBs to improve the availability of ethnicity specific data and to engage with stakeholders consumers, providers, networks to identify issues and options specific to each DHB with the view of implementing service improvements.

Maori Health Profiles

The DHB Maori Health Profiles 2015 have been released by Te Ropu Rangahau Hauora a Eru Pomare, University of Otago Wellington. The reports focus on the health status of Maori, and in particular where there are inequalities compared to non-Maori and will help to create a picture of our DHBs population at a given time. They will be useful to support the development of the 2016/2017 Maori Health Plans and for planning within our DHB and within other health organisations.

A small group from the DHB, and Community and Public Health, participated in a seminar focused on the newly released Māori Health Profiles. This was led by Bridget Robson and Shirley Simmonds (Eru Pomare Health Research Centre) and provided an opportunity for those across the health sector to focus on the content of the profiles and gain insights from those who developed them and consider next steps in supporting Maori health improvement.

Maori Health Plan 2016/2017

The first planning session for the development of the 2016/2017 Maori Health Plan was held on the 12th November and involved our health partners from the West Coast PHO, Community and Public Health, Poutini Waioara and members of Tatau Pounamu. The purpose of the meeting was to identify top priorities that can be communicated to the Alliance Leadership team to ensure targeted focus on these areas within workstream workplans for 2016/2017.

Matt Reid Planning Analyst, CDHB presented some key findings from the 2015 Maori Health Profile which led the discussion and provided emphasis on those areas that may not already be included in the Maori Health Plan and Annual Plan as part of the Ministry targets.

REPORT TO TATAU POUNAMU COMMUNITY AND PUBLIC HEALTH (CPH)

December 2015

Health Promoting Schools

On 16 November CPH hosted an interactive workshop '*Improving Outcomes for Māori, Pasifika and Minoritised Students and their Families Within our School Communities*'. Laurayne Tafa, a consultant with Cognition Education, facilitated the workshop. There was a positive response from West Coast schools, with the 34 participants representing ten schools including principals, teachers and BOT members; and a good base of school partners such as Resource Teachers of Learning and Behaviour, Social Workers in Schools, iwi representatives and kaiako/teachers. Greymouth High School kindly made their school whare available for this hui, as well as providing valuable student voice. This was a wonderful opportunity for our schools to ask critical questions about why disparity exists for certain groups and then to be courageous about seeking out the answers. It also allowed them to look at what is working, and why; what the next steps may be; and how they can best be supported to achieve significant impact. The participants unanimously asked for Phase II of these interactive workshops to be brought to Te Tai Poutini in Term 1 of 2016, to continue this korero. Phase II invites community organisations and school partners to become involved in supporting school communities to notice inequities, respond with actions by accelerating equity and measure the impact on those who need to benefit the most.

Appetite for Life Hokitika

CPH has recently completed the delivery of an Appetite for Life course in Hokitika. This course was run at Poutini Waiora and the participants in their Hauora Pai programme were invited to attend, along with local kaumātua. It has been very rewarding running this programme and there have been some really positive changes made by participants. For example, at a recent hui at the local marae brown bread was served without butter, and fewer cakes were served. This is a small but very positive step.

Early Childhood Nutrition

CPH has been continuing work with Early Childhood Centres to support the development of healthy kai policies. Recently we visited Scenicland and helped them to develop their healthy kai policy, which they implemented with the goal of achieving a gold standard in the Heart Foundation's Healthy Heart Awards. We also provided some resources with healthy lunch ideas for parents to take home. We are now looking at running a parent question and answer session in the near future, which has worked well in the past.



Alcohol Licensing

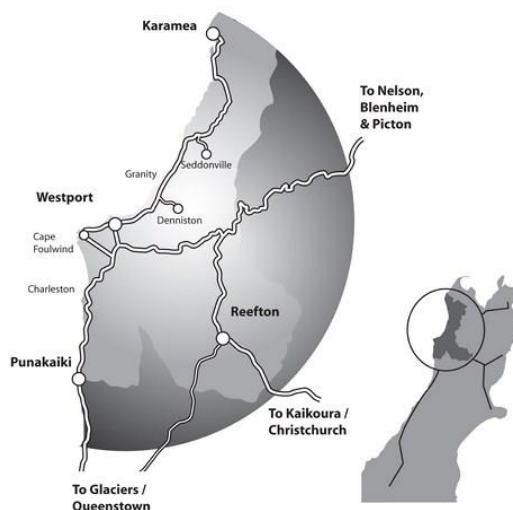
CPH has recently taken the lead in setting up the Alcohol Harm Reduction Groups in the Buller, Grey and Westland. These groups include representatives of all three reporting agencies under the Sale and Supply of Alcohol Act 2012 and the attendees have found them very useful. They have helped to 'personalise' the relationship between Police, District Licensing staff and CPH in each of the districts and during the regular meetings district specific issues can be discussed. At a West Coast regional level, there is already an interagency Liquor Liaison Group which meets three times a year. It met earlier this month and CPH made a recommendation that the New Zealand Fire Service be asked to report on all alcohol licence application, in particular those that involve accommodation. This was agreed and CPH will be approaching the NZ Fire Safety Officer to discuss. The group also to develop and disseminate an Alcohol harm Reduction Newsletter to West Coast licensees. The first of these regional newsletters has been compiled by CPH and disseminated through the three District Licensing Committees to the licensees in their respective districts. This issue has topical advice about host responsibility in the lead up to the festive season and a reminder about alcohol limits for driving.

Smoke-free Enforcement

CPH's newly appointed Smokefree Enforcement Officer attended Smoke-free Enforcement Officers Training in Wellington on 20th and 21st October. At a recent West Coast Tobacco Free Coalition meeting it was decided to make a media release aimed at providing people with information about the law relating to Smokefree workplaces, workplace smoking policies and how to make a workplace smokefree complaint. The release is currently being prepared.

Buller Community Profile

Concern has been expressed by the Buller Inter-Agency group regarding increasing pressure being experienced by local services (including health, social and education) as a result of major job losses and other changes in the community. To help identify how best to support the Buller community, CPH is developing a Buller Community Profile. As well as pulling together available data from numerous existing data sources, local service providers are being interviewed to provide an opportunity to identify local strengths, priorities and develop a set of baseline indicators.



TATAU POUNAMU MANAWHENUA ADVISORY GROUP 2015 MEETING SCHEDULE

DATE	TIME	VENUE
Thursday 29 January 2015	3.00 – 5.00pm	Kahurangi Room, Mental Health
Thursday 12 March 2015	3.00 – 5.00pm	Kahurangi Room, Mental Health
Thursday 16 April 2015	3.00 – 5.00pm	Board Room, Corporate Services
Thursday 25 June 2015	3.00 – 5.00pm	Board Room, Corporate Services
Thursday 20 August 2015	3.00 – 5.00pm	St Johns Meeting Room
Thursday 22 October 2015	3.00 – 5.00pm	Public Health Organisation (PHO)
Thursday 10 December 2015	3.00 – 5.00pm	Board Room, Corporate Services

**MEETING DATES & TIMES
ARE SUBJECT TO CHANGE**

WEST COAST DHB – MEETING SCHEDULE

JANUARY – DECEMBER 2016

DATE	MEETING	TIME	VENUE
Thursday 28 January 2016	CPHAC & DSAC	9.00am	Boardroom, Corporate Office
Thursday 28 January 2016	HAC	11.00am	Boardroom, Corporate Office
Thursday 28 January 2016	QFARC	1.30pm	Boardroom, Corporate Office
Friday 12 February 2016	BOARD	10.15am	St John, Waterwalk Rd, Greymouth
Thursday 10 March 2016	CPHAC & DSAC	9.00am	Boardroom, Corporate Office
Thursday 10 March 2016	HAC	11.00am	Boardroom, Corporate Office
Thursday 10 March 2016	QFARC	1.30pm	Boardroom, Corporate Office
Friday 1 April 2016	BOARD	10.15am	St John, Waterwalk Rd, Greymouth
Thursday 28 April 2016	CPHAC & DSAC	9.00am	Boardroom, Corporate Office
Thursday 28 April 2016	HAC	11.00am	Boardroom, Corporate Office
Thursday 28 April 2016	QFARC	1.30pm	Boardroom, Corporate Office
Friday 13 May 2016	BOARD	10.15am	St John, Waterwalk Rd, Greymouth
Thursday 9 June 2016	CPHAC & DSAC	9.00am	Boardroom, Corporate Office
Thursday 9 June 2016	HAC	11.00am	Boardroom, Corporate Office
Thursday 9 June 2016	QFARC	1.30pm	Boardroom, Corporate Office
Friday 24 June 2016	BOARD	10.15am	St John, Waterwalk Rd, Greymouth
Thursday 28 July 2016	CPHAC & DSAC	9.00am	Boardroom, Corporate Office
Thursday 28 July 2016	HAC	11.00am	Boardroom, Corporate Office
Thursday 28 July 2016	QFARC	1.30pm	Boardroom, Corporate Office
Friday 12 August 2016	BOARD	10.15am	St Johns Waterwalk Rd, Greymouth
Thursday 8 September 2016	CPHAC & DSAC	9.00am	Boardroom, Corporate Office
Thursday 8 September 2016	HAC	11.00am	Boardroom, Corporate Office
Thursday 8 September 2016	QFARC	1.30pm	Boardroom, Corporate Office
Friday 23 September 2016	BOARD	10.15am	St John, Waterwalk Rd, Greymouth
Thursday 27 October 2016	CPHAC & DSAC	9.00am	Boardroom, Corporate Office
Thursday 27 October 2016	HAC	11.00am	Boardroom, Corporate Office
Thursday 27 October 2016	QFARC	1.30pm	Boardroom, Corporate Office
Friday 4 November 2016	BOARD	10.15am	St John, Waterwalk Rd, Greymouth
Thursday 1 December 2016	CPHAC & DSAC	9.00am	Boardroom, Corporate Office
Thursday 1 December 2016	HAC	11.00am	Boardroom, Corporate Office
Thursday 1 December 2016	QFARC	1.30pm	Boardroom, Corporate Office
Friday 9 December 2016	BOARD	10.15am	St John, Waterwalk Rd, Greymouth

The above dates and venues are subject to change. Any changes will be publicly notified.

Healthy outlook



ACADEMIC ROYALTY: Sir Mason Durie speaks about the gains Maori health has made and what needs to be done.

PHOTO/ANDREW WARNER

By Anna Whyte
news@bayofplentytimes.co.nz

WHAT can Maori do themselves? That was the question posed by Maori health expert Sir Mason Durie during a talk on Maori health in Tauranga.

Bay of Plenty Maori health concerns did not stand out from the rest of New Zealand but Tauranga Maori were "enthusiastic for change", through participating in sports such as waka ama and living healthy lifestyles, he said.

"It's a good sign."

Sir Mason outlined the Maori health initiative Pae ora, which incorporates mauri ora (healthy individuals), whanau ora (healthy families) and wai ora (healthy environments).

Sir Mason was asked by Bay of Plenty District Health Board Maori health planning and funding general manager Janet McLean to talk to the board and the wider community groups about the progress Maori health had made in the past 30 years and what needed to be

done. "A wider community and regional response is required for the next 30 years.

"It will require refocusing towards the determinants of health," Sir Mason said.

Sir Mason gave the attentive crowd scenarios

Figures

■ Between 2006 and 2013, the number of Bay of Plenty Maori smokers dropped from 44 per cent to 36 per cent.

of how the Bay of Plenty could continue turning Maori health statistics around.

He suggested that the community recognise the significant gains Maori health had made over the past 30 years, especially in minimising the gap between Maori and non-Maori.

"Do not let the disparities and problems mark the achievements in the last 30 years and get overwhelmed and not recognise the significant

gains," Sir Mason said.

He suggested district health boards and iwis take the lead on Maori health and well-being, rather than leaving it up to the health sector.

Sir Mason's health advice had changed over the past 30 years, from "don't drink and don't smoke", to now telling young Maori, "give it heaps, you can be the best you ever thought you'd be".

His proudest achievement in the past 30 years was that many Maori could expect to live an extra eight years, with the Maori life expectancy moving upwards.

Sir Mason was also extremely happy with the large number of Maori who had kicked their smoking habit, as well as the increasing number who never picked it up.

He attributed this to factors such as sport and fitness, especially in young boys, as a motivating influence to not start smoking.

His thoughts on health for the young people of the Bay of Plenty this summer was "stay well and swim well".