



Manawhenua ki Waitaha

Trustee Board Hui Minitī Tuesday 21 August 2018 from 1053 till 1440
 @ 15 Show Place, Te Whare o Te Waipounamu, Aoraki Room, Ōtautahi

Karakia Timatanga	Nau mai, karakia timatanga and karakia mo te kai by Wendy Dallas - Katoa	
Kai Te Hui Present	Wendy Dallas – Katoa Michelle Turrall Toriana Hunt Ana Rolleston Ruth Chisholm	Ōnuku Trustee Tuahiwi Trustee Taumutu Trustee Wairewa Trustee (arrived 1050) Kaiawhina
Manuhiri	Henare Te Karu Hana O'Regan Amber Clarke	CDHB Kaiarahi Matua, Te Korowai Atawhai Ngāi Tahu Oranga General Manager Ngāi Tahu Oranga
Tuku Aroha Apology	Ngaire Briggs Elizabeth Cunningham Christina Henderson Jaana Kahu Hector Matthews	Koukourārata Trustee Koukourārata Alternate Rāpaki Trustee Kaikōura Trustee CDHB Executive Director Māori and Pacific Health
Nga Mate	Rick Pitama, Liz Maaka, Tini Takao (Tahi's wife), Pete Mason. Ka mihi matou ki te wareware matou ki te mahara ki etahi kua pahemo	
Trustees Only Session	1.0 No Upcoming Hui Declared 2.0 Disclosure of Conflict – Taumutu regarding kororero on cultural responsiveness 3.0 No Health and Safety Issues – nothing reported to Kaiawhina 4.0 No new Rūnaka Rep Appointments 5.0 Policy and Procedures – additional clause re change of bank account account 6.0 Subkomiti 6.1 Workforce Development (Ōnuku, Rāpaki, Wairewa) 6.2 Scholarship (Ōnuku, Tūāhuriri) 6.3 Ngāi Tahu Health Summit (Koukourārata, Kaikōura, Tūāhuriri, Rāpaki) 6.4 Strategy (Taumutu, Tūāhuriri, Kaikōura)	
Previous Minitī	7.0 Previous miniti dated 17 July 2018 Minitī adopted and corrected as a true and correct record. Moved Tūāhuriri./Taumutu Carried. 7.1 Actions noted. Burwood issues to be discussed at next Board Hui 7.2 Kaiawhina to be reimbursed \$50 to send flowers to Liz Maaka's Whānau 7.3 Cultural responsiveness – Cathy Sweet, Iranui Stirling, Mel Tainui	

	<p>7.4 Further discuss at Board Hui regarding subkomiti & other Manawhenua 7.5 Await Tu Maia invoice of \$10,000</p>
<p>Manuhiri</p>	<p>8.0 Henare Te Karu (1116) was invited to attend MKWT. Mihi gven. Response by Henare with mihi.</p> <ul style="list-style-type: none"> - Discussions held: - New role with whakawhanaungtanga and building relationships essential. - Better utilising Te Pūkenga Atawhai role. Encourage and influence change. This occurred three years ago. What this might look at with a common goal within management level. Six months a document tabled – April 2018. Proposal of change quite surprising eg Whanautanga Day (every Thursday) as a crucial support ropu removed along with a proposal for change of Te Pūkenga Atawhai role to be moved into becoming a clinical workforce - currently 803 whanau members have utilised the service yet cared by 13.3 FTE Te Pūkenga Atawhai practitioners. - Note: - Funding resources from Ministry of Health was not allocated towards providing care for Māori. - MKWT asked numbers of Māori who haven't been included in data collection. Te Koro Atawhai have their own statistics to compare data. - Discussion on the Te Koro Atawhai Consultation Document however failed to be forward to Non Government Organisations for feedback. Two Te Pūkenga Atawhai attended the enquiry. One at Tūāhuriri was initially closed then opened to all. Awaiting response. - Over 50 submissions received in April. Now in August/September with no response as yet. Good support from psychiatrist, social workers, occupational therapists all stating “where’s the partnership”. - MKWT interested with statistics with data around Māori that are not recognised or counted. As Iwi Partnership to CDHB, one of a key role is to ensure relationships occur throughout senior management at a service level. - Submission included service Māori management “taken seriously” as a “Māori clinical head”. - Henare was asked from a community Māori health provider manager how did he define “devolution”. Devolution for Henare is encouraged BUT for iwi to decide. - Maurice Gray (CDHB Board Kaumutua) and Ruru Hona (Advisor). It is important Pou Whirinaki is aware of his role and responsibilities. - What is our next step as MKWT and how can we support. Itemise a letter to Toni Gutschlag. At the moment there is no Māori at mental health senior management level. - Issues around resource financially Te Pūkenga Atawhai roles. - New: - CDHB CEO David Meates to hui with MKWT. Awaiting CDHB Board Chair meeting. - Facility Development Hui attended by Tumuaki. New design team – rebuild of mama and pepi unit to be built in Hillmorton Hospital. Unsure what cultural narratives around Hillmorton Hospital and involvement with Taumutu/Tūāhuriri are. - Essential to influence cultural matters. Facility Development Hui had Māori representation such as Pou Whirinaki and CDHB Executive Director for Māori and Pacific as well as MKWT Tumuaki - all present.

- One Te Pūkenga Atawhai practitioner for Ward C – x5 beds for Te Waipounamu. Henare welcomed to stay on however he had other commitments.

9.0 Discussion held with senior Ngāi Tahu health and wellbeing leaders. At 1200 Hana O'Regan then Amber Clarke at 1211 arrive. Tumuaki welcomes Hana and Amber and acknowledges Board members who send their apologies.


Tumuaki states its timely to hui for not only Ngāi Tahu but for the wider catchment for Māori. How best to work. Hana asks how MKWT is going. Relationship between MKWT and CDHB Board appears to be gate wayed. Discussion for MKWT to include supporting Iwi Māori Representative rather than Ministry Appointments. MKWT has the mandate of Ngāi Tahu. Ngāi Tahu has an external appointments process which reflects skills matrix which in turn seeks a recommendation to Rūnanga, Te Parangi – voting process on Iwi Board. Forward Iwi process – local, regional (rūnaka – Canterbury region), Iwi. Recommendations to PKOP not runanga. Process for Ngāi Tahu to endorse over Government Appointments. SNI – Ngāi Tahu to lobby – currently 87 komiti. Two levels – TWP MKWT reps would support and second, identified as Iwi representative. Not the other way round where MKWT approaching CDHB.

Action Letter to Ta Mark concerned with no attempt to meet MKWT by Kaiawhina.

MOU and unsure whether John Wood aware. Amber to discuss further takiwa (SNI). A letter from MKWT can assure action. Ngāi Tahu kaupapa could provide Ngāi Tahu specific. One person who links e.g. Amber for health. Influence at Board level and direct engagement is through MKWT not CDHB Board. Te Kahui o Kakakura Chairs has relationship with MKWT. Meets regularly with Puamaria. Sits on the Greater Health Christchurch (initially Healthy Christchurch) with Iwi now Te Kahui o Kakakura Chairs. MKWT Tumuaki sits there and reports to Puamaria (Administrator). Continued discussion from Ngāi Tahu four hauora summits accepted at TRONT. Ngāi Tahu population is 60,000:

- Grant for funerals e.g. funeral insurance, kaumatua concerns with burdening whanau
- Tamariki grant under 18 years e.g. SEED for paying school/sports fees. Different as before at regional level. This one is to encourage exercise. Open grant i.e. refine criteria recommended such as sport, music, school camp. Avoid income and hardship compared to Ngāi Tahu Inheritance Right. Not a social service response but rather Iwi future response. In eligibility usually <20% won't apply. Make sure those that do need it – apply. Work with navigator. Still entitled.
- “Bang For Your Buck”
- Direct purchasing of services via alternative means e.g. charity hospital for those that aren't eligible
- Subsidised health insurance e.g. discount and Iwi subsidies
- Everyone has contributed. Different look to health plan development for CDHB.
- Professional network – scholarships at masters level with hauora focused e.g. relevant for Iwi and Hapu/Whānau.
- MKWT charged with CDHB scholarship – if Ngāi Tahu can refer to Te Parangi. How to connect and give back. Priority for Māori
- Whānau are leading their own needs
- Stakeholders e.g. Oranga Tamariki to be signed off at national level (strategic leadership) and TWP Oranga Tamariki (support Kairanga position). Pilot with Christchurch East – Tri-pathed.
- Submission – Strategy (mental health addiction) and tax submission (healthy food), reduction of poverty, NHI standards, health and disability review panel, housing.

	<p>Action Amber to correspond to Kaiawhina Ngāi Tahu health submissions.</p> <ul style="list-style-type: none"> - Professional network and advocacy Ngāi Tahu to create platform. SNI will respond or not. Now correspondence process over past 4 weeks. Missed opportunities. The final is true collaboration – this is important and how we phrase, learn peoples languages. - MKWT primary stakeholder – really clear (localised). It is clear as overarching Ngāi Tahu. - Strengthening research analysis – really hone it. Localised and national pilot and commissioned into Ngāi Tahu Research Team. If MKWT can see trends. CDHB data is significantly flawed. - Iwi affiliated data – if new systems. NHI standards. PICs comes out in two weeks. Only collects Iwi not Hapu data. South Island Alliance – IT alliance e.g. Kairaitiana Tickell. <p>Action Letter to SI IT Alliance regarding Iwi/Hapu data collection by Kaiawhina.</p> <ul style="list-style-type: none"> - Clean data – what MKWT know will support Iwi data. New data team – how do we use it. - Platform of engagement and support and empower to redirect. Strategic advocacy. - Key messages onto MKWT may contribute to Ngāi Tahu e.g. 31% under 25 years are Ngai Tahu - Open access to Dr Matthew Reid to Southern. Multi complex data (AU). Seven indicators – local neighbors. Ngāi Tahu to be the only persons so meaningful information to feed and change Māori health. - Hana states initiative developing kaumatua services e.g. kete of care, resource physical and online. Ipad pre loaded in future. Dr Lawrence Sullivan – access. Don't know where to go – what's available. Availability on Google. Mapped out project. Pre, In, End Kaumtua. Best practice – to sit with kaumatua e.g. accommodation, cheap hearing aides (making it easier). Care givers for kaumatua. - School starter packs for x450 tamairiki. Hauora pack – calendar for exercise, skipping rope, nit comb (3 months throw away) - not plastic, pounamu, tablet, lunch box, jacket, eligible if July 2017 turned 5years. Pepi pack, School starter pack, kete of care. - Baby book – school can send positive life story (journal). - Network of care – advocacy and support care e.g. for Kaumatua caring for mokouna. - Wahakura – pre registration online, prior to birth - SEI outcome – hauora phase of focus, whanau opportunities. Areas of identity – health literacy, housing etc. - National level Boards MKWT Board members on. - Other Southern DHB Manawhenua groups are not Manawhenua – likely employees. MKWT stronger position – co identify x5 key messages. Consider hauora representative rather than CDHB or from another Manawhenua. Think about hui just before financial year. <p>Action Agenda January Board Hui feasibility prior to June 2019/20 by Kaiawhina.</p>
Reports	

Tumuaki	10.0 Verbal Report.
Kaitiaki Moni	11.0 Invoices and Financial Reports for July 2018 approved as a true and accurate record and payments approved and paid. Moved Taumutu/Tūāhuriri Carried.
In – Komiti	11.1 – 11.11.
Kaiawhina	12.0 Presented as workload activities for May/June.
General Business	<p>13.0 Kaiawhina performance review planned for 12th September 2018 at 0900 at Te Putahitanga and to be conducted by Taumutu, Ōnuku, Tūāhuriri.</p> <p>14.0 IoD training to be open wide as provider or through MKWT own funding. Separate kaupapa. Initially accepted this contract for a MKWT governance training.</p> <p>15.0 South Island Child Health WS vacancy – MKWT Board members to consider despite this not being a CCN process.</p> <p>16.0 Child and Youth WS vacancy – Michelle has indicated her stepping down. Wairewa has expressed interest.</p> <p>17.0 Selwyn SLA vacancy – still ongoing</p> <p>18.0 IT rūnanga personnel to be approached.</p> <p>Action Kaiawhina to approach each rūnanga, Costing to be concluded.</p>
Karakia Mutunga Closing Prayer	<p>Karakia Mutunga by all Katoa. Hui closed at 1440.</p> <p>Next MKW Trustee Board Hui to be held on 18 September 2018 at Te Whare o Te Waipounamu starting 1030.</p> <p style="text-align: center;"></p> <p>Tumuaki Signature _____ Date <u>18 September 2018</u></p>

	Action	By Who	By When	Completed/Update
July/August Update	New clause in Policy Procedure Manual re change of bank account- an electronic note to Kaitiaki Moni then miniti	Kaiawhina/Kaitiaki Moni	July	Update
September Update	Agenda Jan Hui feasibility DHB (5) Manawhenua Hui prior June 2019/20	Kaiawhina	January	Update
	Contact Ngāi Tahu IT re iPad access for purchase	Kaiawhina	September	Update
July/August	F/U Matthew Reid access to health pathway and Māori Dashboard	Kaiawhina	August	Completed

	MKWT Rep to sit on System Level measurement committee	Kaiawhina	August	Completed
	Letter to CDHB Board requesting hui with Tony Wood & Mark Solomon	Teputi Tumuaki/Tumuaki	August	Completed
	Riccarton GP Clinic opening to be referred to Ngāi Tūāhuriri	Tūāhuriri	August	Completed
	TWP Manawhenua x5 DHB arrangements	Subkomiti	August	Completed
	Hui arranged for each subkomiti	Kaiawhina	August	Completed
	Confirm Rangimarie's fee	Kaiawhina	August	Completed
	Invite ECan, PHO, Ramon, Norm/Henare in December	Kaiawhina	August	Completed
	Hui with planning & funding re scholarship	Tumuaki/Teputi Tumuaki	August	Completed
	Ngāi Tahu Summit Draft Strategic Health to MKWT	Tumuaki	July	Completed
	Original name for Burwood Hospital and pounamu	Tūāhuriri/Taumutu	July	Pounamu – "Te Hongo Nga O Te Tahi/Te Hongo Nga O Te Rua"
September	Letter to Ta Mark re no attempt to meet MKWT	Kaiawhina	September	Completed
	Amber to correspond re Ngāi Tahu health submissions	Kaiawhina	Ongoing	Completed
	Letter to South Alliance IT re Iwi/Hapu data collection	Kaiawhina	September	Completed
	Hui 6 monthly with Ngāi Tahu	Kaiawhina	February	Completed

	Conflict Of Interest Register
Ōnuku Wendy Dallas-Katoa (Tumuaki)	<i>MKWT Ōnuku Representative (Chair), Ōnuku Rūnanga member, IHI Research – researcher, Rapaki Branch MWWL, NZBA Māori Advisor Board, He Hono Wahine (RANZCOG), CDHB – CPHAC, Te Kahui o Papaki ka Tai (Māori Primary Health Advisory Group), Greater Healthy Christchurch, Māori Development Research Komiti, Population and Access (Otago University – Canterbury), Population Health & Access SLA, CCN Māori Caucus Group member</i>
Tūāhuriri Michelle Turrall (Teputi Tumuaki)	<i>Alternate Representative TRONT; PHO Director – Christchurch PHO; Executive Committee Tūāhuriri; Child and Youth Workstream; Grievance Panelist Te Poutama Arahī Rangatahi</i>
Kaikōura Jaana Kahu	<i>Te Rūnanga o Kaikōura member; Rural work stream CCN; Te Tai o Marokura Trustee; SIA Child Youth SLA; Te Rōpu Arahī (Gov. NZRGP Network); Māori caucus CCN</i>
Taumutu Toriana Hunt	<i>Family Advisory Committee; CDHB employee</i>
Koukourārata Ngaire Briggs	<i>Te Rūnanga o Koukourārata member; Oral Health Service Development Group</i>
Rāpaki Christina Henderson	<i>Alternate Representative TRONT; Te Hapū o Ngāti Wheke</i>
Koukourārata Elizabeth Cunningham	<i>Te Rūnanga o Koukourārata Manawhenua Alternate; Representative on TRONT for Koukourārata; Councillor Environment Canterbury; Chair Rapaki Branch M.W.W.L</i>
Wairewa Ana Rolleston	<i>Christchurch Primary Health Organisation; CDHB Hospital Advisory; Manawhenua Ki Waitaha Wairewa representative</i>