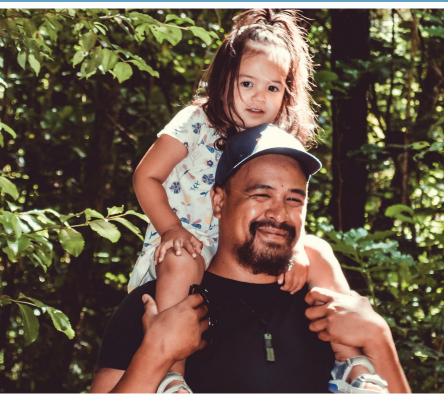
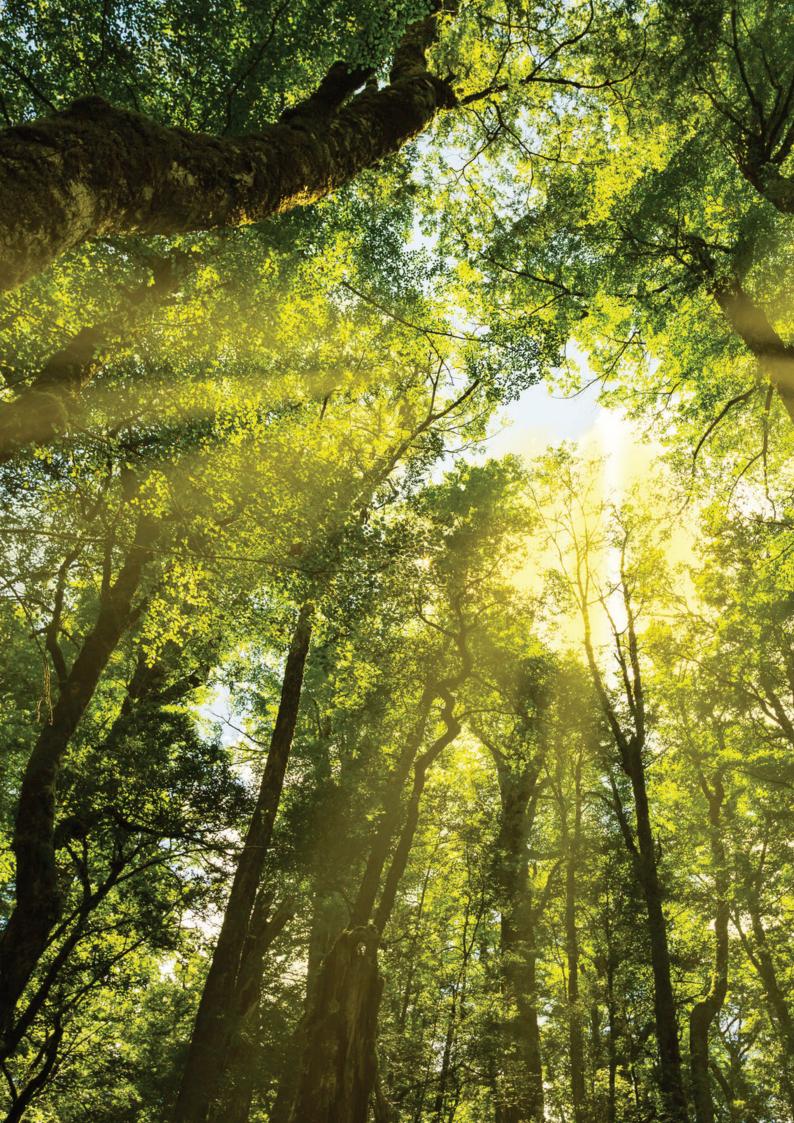


# Tihei Takitimu Programme Plan







# Ngā Kai o Roto Contents

Whakapapa	3
Foundations of our Partnership Board	4
Vision - our aspiration	4
Mission - our purpose	4
Values - our guiding principles	4
Our role as Strategic Commissioners	5
IMPB Function 1: Assessing Needs and Aspirations of Whānau	6
IMPB Function 2: Health Service Planning and Priority Setting	8
IMPB Function 3: Strategic Procurement	10
IMPB Function 4: Strategic Monitoring	15
Three Year Work Plan	14
Our Strategic Plan 2023 - 2026	14
Our Work Programme 2025 - 2027	16

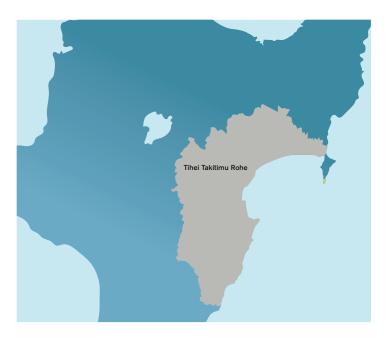
### **Reference Documents**

Reference Document A - Hauora Māori Priorities Report | Tihei Takitimu Reference Document B - Monitoring Framework | Tihei Takitimu Reference Document C - Hauora Māori Investment Plan | Tihei Takitimu

# Whakapapa

The geographical boundary for the Tihei Takitimu Partnership Board covers areas within the tribal boundaries of Ngāti Kahungunu (Heretaunga, Tamatea, Te Wairoa, Te Whanganui-a-Orotū), Ngāti Rakaipaaka, Ngāti Pāhauwera, Ngāti Hineuru, Mana Ahuriri and Maungaharuru-Tangitū Hapū. In this region there are kinship ties to the Takitimu, Kurahaupō and Mataatua waka.

Manawhenua in this region is represented by Tātau Tātau o Te Wairoa Trust | Ngāti Pāhauwera Development Trust | Maungaharuru-Tangitū Trust | Mana Ahuriri Trust | Hineuru lwi Trust | Heretaunga Tamatea Settlement Trust | Ngāti Rakaipaaka | Te Taiwhenua o Te Wairoa | Te Taiwhenua o Te Whanganui-a-Orotū | Te Taiwhenua o Heretaunga | Te Taiwhenua o Tamatea | Ngāti Kahungunu lwi Incorporated. We also recognise mātāwaka and relationships with iwi or stakeholders. These include but are not limited to Rongomaiwahine and Ngāti Kahungunu tribal connections to Tāmaki-nui-a-Rua and Wairarapa that have joined other lwi-Māori Partnership Boards.



TIHEI TAKITIMU IWI-MĀORI PARTNERSHIP BOARD AREA

# Foundations of our Partnership Board

## **VISION - OUR ASPIRATION**

Whānau voice - shaping the evolution of hauora

### **MISSION - OUR PURPOSE**

We will continually engage with whānau and hapū, evaluate the health system, determine priorities, engage on priorities with Te Whatu Ora | Health NZ and monitor outcomes.

### **VALUES - OUR GUIDING PRINCIPLES**



#### He Kanohi Hōmiromiro

Rights based focussed and determined to create change for the betterment of Māori.



#### He Kanohi Kitea

Connected, accountable, and responsive to mana whenua and Hapori Māori.



#### He Pononga mō te lwi

Committed to its role as a servant of the communities, and the attainment of whānau, hapū, and iwi health aspirations.



#### He Mana Motuhake

Dedicated to elevating the rangatiratanga of whānau, hapū and iwi in the design, develop and monitor the delivery of health services within the region.



#### He Ringa Hora

Dedicated to manaaki, and ensuring Māori and non-Māori that live within the region, are well cared for.

# Our role as Strategic Commissioners

There are many 'models' of commissioning so we have selected a generally accepted model that is recognisable within the health system - and includes the four key processes of commissioning:

- · Assessing need and engaging whānau
- · Setting priorities and service planning with Health NZ
- Informing procurement by Health NZ to respond to priorities
- Monitoring performance of the health system

The functions of Iwi-Māori Partnership Boards are outlined at Section 30 of the Pae Ora Act 2022 and have been mapped to this commissioning model to demonstrate our status as strategic commissioners.

The main reason we see ourselves as 'strategic' commissioners is that we set high-level direction with HNZ based on whānau-affirmed priorities. We (currently) do not undertake transactional procurement functions including contracting and monitoring of providers. Similarly we undertake strategic monitoring of system performance - not individual provider or contract performance.



# Strategic commissioning aligned to IMPB Legislated functions

Sn 30 (1)(a)

To engage withwhānau about local health needs and communicate the results and insights to HNZ.

#### Sn 30 (1)(b)

Evaluate the current state of Hauora Māori for the purpose of determining priorities for improving Hauora Māori.

#### **ASSESSING NEED**

Understanding population needs and aspirations, service needs and gaps, research, whānau voice.

#### **PLANNING**

- Service models and approaches
- Innovation
- Provider selection
- Setting priorities

#### Sn 30 (1)(c)

Work with HNZ in developing priorities for Hauora Māori

#### Sn 30 (1)(d)

Monitor the performance of the health sector in a relevant locality.

#### **MONITORING**

Assessing outcomes, quality performance, whānau experience impacts on health and wellbeing outcomes

#### PROCUREMENT

- Allocating budget
- Pricing / funding
- Procuring services
- Contracting for performance

Sn 30 (1)(f)

Report on Hauora Māori activities of HNZ to Māori in the IMPB Locality

### Sn 30 (1)(e)

Engage with HNZ to support stewardship of Hauora Māori and priorities for Kaupapa Māori investment and innovation.

# Assessing needs and aspirations of Whānau

#### Legislative mandate

Pae Ora Act 2022 Section 30(1)(a) to engage with whānau about local health needs and communicate the results and insights to HNZ.

### Our Role - Amplify Whānau Voice

One of our roles is to gather whānau voice across the Tihei Takitimu rohe. We completed a round of engagement in 2023 – 2024 resulting in our first whānau voice report, and this was added to and informed the Hauora Māori Priorities Report (Appendix A). Whānau voice was summarised in our Whānau Engagement Report and through an online survey. As well as the whānau voice, we also analysed needs of whānau from IMPB profiles provided by Te Aka Whai Ora and other evidence such as the findings (and whānau voice) from Hawke's Bay maternity care services review; research on Māori uses of medicines, plus research on Māori and palliative care.

Tihei Takitimu IMPB continues its whānau voice programme of work, to ensure future issues of our Whānau Voice report(s) are informing our strategic commissioning and monitoring functions moving forward. Our engagement team is in the process of initiating Round two of whānau engagement at the time of writing this plan.



#### Whānau voice

Key findings of the Whānau Voice process exposed multiple barriers to accessing health care services particularly in primary and community care such as cost and poor access to GP services, insufficient time allowed for appointments, financial costs of the services as well as time away from work, and lack of after-hours and weekend services. Whānau report that the historical experiences and distrust in the health systems adds to the challenges of navigating a complex disjointed system with comments such as:

"GP and medication cost, access to primary care due to shortages with specialist staff, overworked staff, under-resourced system, hospital that is not fit for purpose and cannot cope with increased population and diverse cultures"

Whānau have shared that they want to enhance services delivered by Māori for Māori and emphasise respect for cultural practices and provide culturally safe care, including access to Rongoā Māori and traditional practices and provide more Preventative Services including more dietary and nutritional advice, access to good quality and affordable food and exercise / sport / recreation options.

"Good health comes from good food.

And good exercise. We're into our exercising, kickboxing, and we go hunting together. For me, the biggest thing would be food and where we source it from.

Most of our food comes from the bush, the sea We buy very little from New World"

# Health Service Planning and Priority Setting

### Legislative mandate

Pae Ora Act 2022 Section 30(1)(b) evaluate the current state of Hauora Māori for the purpose of determining priorities for improving Hauora Māori. Section 30(1)(c) work with HNZ in developing priorities for Hauora Māori

### Our Role - collaboration for change focus

To drive health system transformation, our role is to collaborate with Te Whatu Ora | Health NZ to advocate for the priorities for Hauora Māori as determined from our whānau engagement and data analysis. Our expectation is that this collaboration achieves high quality community-led culturally responsive health care in Tihei Takitimu rohe, and that local solutions are led by local communities, to address local priorities. In particular it is our desire that health planning and priorities are disaggregated to more local areas:

- Te Wairoa
- Ahuriri
- Heretaunga
- Tamatea

The Wairoa community was selected as a locality prototype after the 2021 Health reforms, and as a result, developed a Locality Plan from engagement with that community and its providers. The Wairoa community is still committed to that plan as the issues for them have not changed. In fact, some issues have since been exacerbated by weather-related events. We have included specific Wairoa focus areas in our Hauora Māori Priorities report.

The key findings highlighted in the Hauora Māori Priorities report are wide ranging from system enablers, models of care, to personal health complexities just to name a few. We have organised themes and priorities for health planning and prioritising with Te Whatu Ora | Health NZ, since this is how the system is generally organised. For instance:

- Public and population health services and programmes are overseen, funded, partially delivered and commissioned by the NZ Public Health Service (NZPHS) so it is important we engage closely with NZPHS leaders to advocate for the interests of whānau in our rohe.
- Primary and community care is managed and commissioned (and partly delivered) by the Regional Commissioner for Te Whatu Ora | Health NZ, so it is vital that we have a strong working relationship with this leader, to ensure they understand the issues facing our whānau and reflect this in their budgeting, service planning and procurement practices
- We also need to have a strong relationship with leadership for hospital and specialist services in the district, to influence the quality of care for Māori, as well as equity of access, utilization and outcome. A key area for discussion with both the hospital leadership and PHOs will be to undertake a 'deep dive' into emergency department presentations and to determine how much of this is impacted by lack of access to primary care.
- Enablers such as workforce development and quality data / information.

In response to these findings, the IMPB will take a multi-pronged collaborative approach with HNZ and the broader health sector and Hauora partners to inform the planning and strategic commissioning process. Thorough planning, inclusive of whānau voice is needed in order to ensure that future mainstream health services and development of new models of care meet the needs of our whānau.

# Strategic Procurement

### Legislative mandate

Pae Ora Act 2022 Section 30(1)(e) Engage with HNZ to support stewardship of Hauora Māori and priorities for Kaupapa Māori investment and innovation

### Our Role - collaboration for change focus

An essential function and role of the IMPB is to support Health NZ in the procurement, development and delivery of Hauora Māori and priorities for Kaupapa Māori investment and innovation. Within this function, we see two roles with Health NZ, and we intend to add a further strategic commissioning role to influence investments by other sectors into the social determinants of health.

- 1. The first role is working with Te Whatu Ora's Hauora Māori services in relation to the Hauora Māori Appropriation, inherited from the former Te Aka Whai Ora. We know from evidence and tracking by Manatū Hauora that generally the Hauora Māori Appropriation (primarily the expenditure on Māori providers or initiatives specifically addressing Māori inequities) is around 3% of Vote Health.
- The second role is working with Te Whatu Ora's
  Regional Integration Team (RIT) to influence, co-design
  and co-decide priorities for Hauora Māori across the
  services that Te Whatu Ora both provides and
  commissions. This effectively is where the other 97% of
  Vote Health lies.

This is further endorsed by the 12 August Cabinet paper describing IMPB functions at Clause 40:

"To embed whānau, hapū and community voice in service planning and design, and improve the quality of investment, IMPBs need to be well integrated into Health NZ's business planning, service design and monitoring processes, alongside other groups that represent community needs"

# Directing the Hauora Māori Appropriation (the 3%) – Innovation and investment focus

This is the appropriation inherited by Health NZ from Te Aka Whai Ora. Prior to that Te Aka Whai Ora inherited the contracts and resources from former DHBs and the Ministry of Health after the 2021 Health reforms (known as Legacy Agreements), and new appropriations to Te Aka Whai Ora from 2021 – 2022 annually have since been added to the appropriation.

At present we do not yet have a line of sight over the allocations made within the appropriation for our area for 2024 – 2025 but we do have information from Te Aka Whai Ora on their 2021 – 2024 investments in our rohe (see Appendix). It is unclear at this point what the more recent investments (2024 - 2025) has been targeted toward and whether this meets the identified health needs outlined in this plan. The investment to June 2024 shows that just over \$38m was invested in our district. This is approx. 8% of the total investment held of \$620.328m nationally. The October 2023 report indicated that the \$38m was invested as follows:

SERVICE / DOMAIN	INVESTMENT 2023 - 2024	% SHARE
Mental health	\$9,108,149	24%
Public and population health	\$8,627,346	23%
Primary care	\$8,150,845	21%
Kahu Taurima	\$7,014,215	18%
Addictions	\$2,163,861	6%
Mātauranga Māori	\$1,453,557	4%
B22 Cost pressure funding	\$906,511	2%
Health of older people	\$901,399	2%
Total	\$38,325,883	100%

We would expect transparency over the 2024 – 2025 investments made over and above this sum, in our district, so that we have the full picture and can generate solutions and decisions based on complete information for investment priorities beyond 1 July 2025.

# Co-commissioning with Te Whatu Ora | Health NZ (the 97%) – collaboration for change focus

The collaboration with Te Whatu Ora | Health NZ is essential to maximise the IMPB's influence over the services delivered and commissioned from the remaining 97% of Vote Health. Ultimately, we expect to see the investment in Hauora Māori services increasing to focus on the many inequities across the system including key government priorities. The results of this collaboration will see the Hauora Māori priorities embedded into the Ikaroa Regional Health and Wellness Plan.

Work with Health NZ's Regional Integration Team (RIT) has already begun with our representation at that table, to influence the prioritisation of their current investments and service delivery models, toward Māori inequities and priorities inherent in the data and whānau feedback. At present Health NZ delivers the vast majority of hospital and specialist services in our area – yet we still have significant numbers of emergency department presentations; avoidable hospitalisations and whānau who are missing out of specialist appointments and planned care.

We will continue to gather whānau voice over time, and to enable local leadership to inform us on how future health investment meets the needs and priorities of whānau in our rohe.

Equally, HNZ's role is to ensure the IMPB is involved and kept abreast of the end-to-end process of planning, strategic commissioning and procurement of Hauora Māori and Kaupapa Māori services. A collaborative approach to planning supports a shift in decision-making and resources closer to communities. A key enabler will see Te Whatu Ora | Health NZ supporting community-led and localised approaches for:

- Te Wairoa
- Ahuriri
- Heretaunga
- Tamatea

### **Alignment with Government Priorities**

The Government has identified 15 health priorities (known as the 5+5+5) which are described below. It is our assumption therefore that Te Whatu Ora | Health NZ will focus on these priorities in order to meet its obligations as a Crown agency – but it is also incumbent on our IMPB to work alongside Te Whatu Ora | Health NZ to give effect to addressing inequities for Māori in the process.

We have already identified that these priorities matter to Māori – as inequities for Māori exist across all of these priorities. It will be our expectation that Te Whatu Ora I Health NZ will work with us on designing solutions to meet the targets, and we will also be monitoring these 15 health priorities across our 4 Hapori through regular IMPB-specific reporting.

We have already identified that these priorities matter to Māori – as inequities for Māori exist across all of these priorities.



# **GOVERNMENT'S HEALTH PRIORITIES**

5 x Health Targets	Faster Cancer treatment - 90%	Improved Immunisation for children - 95%	Shorter stays in ED-95%	Shorter wait times for first specialist assessment - 95%	Shorter wait times for treatment-95%
5 x Pathologies	Cancer	Cardiovascular disease (CVD)	Respiratory Disease	Diabetes	Mental health (see specific targets below*)
5 x Modifiable Behaviours	Smoking	Alcohol	Diet	Exercise	Social cohesion
*Mental Health and Addictions Specific Sub-Priorities	Faster access to specialist MH&AS-80%	Faster access to primary MH & AS-80%	Shorter MH & Addiction-related stays in ED-95%	Increased MH&A workforce development	

# HAUORA MĀORI ADVISORY COMMITTEE (HMAC) PRIORITIES

PRIORITY DOMAIN	ALIGNMENT
Māori are protected from communicable diseases across the life course (eg, immunisation rates at 2 years)	Part of existing immunisation priority
Māmā and pēpi receive consistent quality care during pregnancy and into the early years (eg, enrolment with a primary care provider in the first trimester of pregnancy)	Tautoko. We have identified this as a key engagement activity with the community midwives
Early prevention of long-term illnesses for tamariki and rangatahi (eg, ambulatory sensitive hospitalisations for respiratory disease in 0-5)	Tautoko. This will be part of our review of hospitalisations as well as support for Kahu Taurima
Rangatahi experience stronger mental health and resilience (eg, timely access to mental health and addiction services)	Tautoko. This is on our primary mental health and addictions priority list
Rangatahi are engaging in healthy behaviours and are surrounded by protective social factors (eg, smoking prevalence)	Tautoko. Identified as part of the 'modifiable behaviours mahi with NZPHS
Identification and treatment pathways for cancer are faster, timely, comprehensive and effective (eg, patients receiving cancer management within 31 days of decision to treatment)	Part of existing government priority for faster cancer treatment.  We have also identified cancer screening as a priority
Pakeke are accessing primary and community healthcare early, with positive outcomes and experiences relating to diabetes and cardiovascular disease (eg, people with diabetes regularly receiving any hypoglycemic medication in the relevant year)	Primary care enrolment (vs utilisation) and non-enrolment is a key priority for us
Kaumātua are supported to live well through managing complex co-morbidities (eg, rate of polypharmacy in over 65s)	As above
IMPBs are well supported to deliver on their roles and respond to hapori and whānau wellbeing needs (e.g., resourcing and capability)	Tautoko. We await notification on what additional support will be provided to add capability once strategic commissioning has been formally conferred. A key strategic focus for us is to "grow capability" as evidenced in our strategic plan.

# **Strategic Monitoring**

### Legislative mandate

Pae Ora Act 2022: Section 30(1)(d) Monitor the performance of the health sector in [the IMPB] Locality Section 30(1)(f) "Report on Hauora Māori activities of HNZ to Māori in the IMPB Locality

#### Our Role - collaboration for change focus

Our role is to monitor the performance of the health system at a strategic level – not to monitor individual providers and their contracts (that is operational monitoring which is the function of Te Whatu Ora). To perform our strategic monitoring role – we need access to high quality and relevant data.

The Hauora Māori Priorities Report is an initial step towards understanding the current state of health services and whānau experiences of health service delivery in the rohe. The weakness of our first Hauora Māori Priorities report is that the data we received was variable (different dates / scope); the data was primarily for the Hawkes Bay (former DHB) boundary and not the IMPB boundary, and the data did not meet our needs for locally tailored information:

- Te Wairoa
- Ahuriri
- Heretaunga
- Tamatea

Our role is to maintain a continued focus on monitoring whānau experiences, Hauora Māori outcomes and health system performance. We will report to Māori in our rohe on the results of our monitoring efforts.

We have determined some priorities of our own which we will monitor, and we also expect to receive regular reports (minimum quarterly) from Te Whatu Ora on the status of the government's health targets and priorities as below. The government's health targets align and relate to many of the key themes in our Hauora Māori Priorities report.

A key enabler to ensure we can perform this monitoring role, is to receive quality data that is specific to our coverage area (which is different to the former Hawkes Bay DHB area). Part of the former Hawkes Bay DHB district (Mahia) is now included in the Toitu Tairawhiti IMPB area – yet we continue to receive Hawkes Bay wide data. It is vital that all data we receive from Te Whatu Ora is relevant only to our coverage area, and that our neighbours to the north receive the data for the Mahia community. We will also require data for each of our hapori.



Our role is to maintain a continued focus on monitoring whānau experiences, Hauora Māori outcomes and health system performance.

# **THREE YEAR WORK PLAN**

# Strategic Plan 2023 - 2026

# **OUR FOCUS, AND WHAT MATTERS TO US**

Amplify Whānau Voice	Collaboration for Change
We believe that people power is integral to transformational change.  Our role is to empower and amplify the voice of whānau.  We believe that we can represent an authentic whānau voice through data, research and stories.	To bring about transformational change, we believe that we need to collaborate with key stakeholders - across policy, services and procurement.  Our role is to partner with influencers, change agents, decision makers, and leaders throughout the health and across other sectors.
Innovation and Investment	Grow Capability
We believe that whānau voice must inform innovation and investment in hauora.	We believe that capability in transformational change is key to meeting our aspirations.
Our role is to ensure that policy settings that determine investment are challenged and aligned to whānau wellbeing priorities.	Our role is to be clear about what we will do and what we won't do - and govern and lead with courage.

# **OUR COMMITMENT - WE WILL NOT REST UNTIL WE HAVE**

Amplify Whānau Voice	Collaboration for Change
Listened to and heard the authentic stories of whānau, hapū and iwi.	Built a reputation as trusted, independent and influential partners.
Collated evidence - quantitative and qualitative.	Demonstrated that we have advocated for change
Shared our insights widely, with diverse audiences and importantly, with whānau so that they can validate our insights.	in the health system, by advocating for whānau.
Innovation and Investment	Grow Capability
Ensured that whānau voice influences ongoing investment and innovation.  Enabled experimentation and innovation in hauora.  Shifted and grown investment targeting the priorities for whānau.	Grow an ambitious and whānau-centric team.  Built a lean organistation with the capability to create immediate and lasting impact.  Can demonstrate a board culture that is characterised by learning.

#### **HOW WILL WE MEASURE OUR IMPACT?**

Amplify Whānau Voice	Collaboration for Change
Our understanding of what the priorities are for whānau.  We will have established a centre of intelligence.	Whānau advocacy is tangible. Influenced change.
Innovation and Investment	Grow Capability
Investment is shifting to a needs-based paradigm.  Tangible innovation led by Māori.	Met our commitments to whānau and funding partner(s).  We have a lean and impactful organisation.

Our role is to be clear about what we will do - and govern and lead with courage. We believe that whānau voice must inform innovation and investment in hauora.



### **OUR WORK PROGRAMME 2025 - 2027**

# **Strategic commissioning focus:** Assessing needs and aspirations of whānau **IMPB Strategic focus:** Amplify whānau voice

#### **Year One:** Jan 2025 - Dec 2025 **Year Two:** Jan 2026 - Dec 2026 **Year Three:** Jan 2027 - Dec 2027 • Complete Whānau Voice Phase 2 • Ongoing support for whanau voice Maintaining relationships with - synthesize and share findings. - Phase 2, whānau and continue to explore whānau voices. • Contribute findings to health service • Deliver brand refresh, deliver planning and priority settings website refresh, produce collateral · Aspirational and cultural performance measures for whānau for engagement activity, publish Identify and confirm key priority Health Profile Volume 2, publish areas of focus for year two State of Hauora Report, • Engage with whānau for Monitoring • Update Hauora Māori Priorities Framework on "what matters to Report and work towards key whānau" from a cultural, social and priority areas of focus year 2 Hauora perspective (to feed into Monitoring Framework)

# **Strategic commissioning focus:** Strategic procurement **IMPB Strategic focus:** Innovation and Investment and collaboration for change

IMPB Strategic focus: Innovation and Investment and collaboration for change		
<b>Year One:</b> Jan 2025 - Dec 2025	<b>Year Two:</b> Jan 2026 - Dec 2026	<b>Year Three:</b> Jan 2027 - Dec 2027
<ul> <li>Work with RIT to review current Kaupapa Māori services / investment /innovations and possibilities beyond 1 July</li> <li>Review/advise HNZ on current Hauora Māori priorities, and government health targets</li> </ul>	Work with RIT to implement improvement projects focused on whānau voice key priority areas     Work with RIT to monitor implementation of focus areas from Regional Health and Wellness Plan Work with other sectors to identify data readily available on social determinants (housing, education, employment and income) and     Implement improvement projects focused on whānau voice key priority areas	Review progress of year two implement new improvement projects focused on whānau voice key priority areas

# **Strategic commissioning focus:** Strategic monitoring **IMPB Strategic focus:** Collaboration for change

#### **Year One:** Jan 2025 - Dec 2025

- Review/advise HNZ on current Hauora Māori priorities, and government health targets
- Monitor the local performance of the health system and seek qualitative and quantitative input and information from Post Settlement Governance Entities, Councils, Children's Commissioner on health system performance
- Receive reports and monitor Government priorities (5+5+5) as well as identified IMPB priorities for the Tihei Takitimu rohe
- Conduct critical analysis of data and information, share with Te Whatu Ora and publish results. Advocate for targeted efforts in areas of under-performance

### **Year Two:** Jan 2026 - Dec 2026

- Update Monitoring Framework to embed results from whānau engagement in Y1 on what matters to whānau
- Negotiate agreement for IMPB to undertake a similar strategic commissioning role that includes monitoring of socio-economic results and ability to influence their investment decisions
- Monitor the local performance of the health system and seek qualitative and quantitative input and information from Post Settlement Governance Entities, Councils, Children's Commissioner on health system performance
- Receive reports and monitor
   Government priorities (5+5+5) as
   well as identified IMPB priorities
   for the Tihei Takitimu rohe
- Conduct critical analysis of data and information, share with Te Whatu Ora and publish results.
   Advocate for targeted efforts in areas of under-performance

### **Year Three:** Jan 2027 - Dec 2027

- Update Monitoring Framework to embed results from whānau engagement in Y1 on what matters to whānau
- Monitor the local performance of the health system and other systems that influence determinants of health.
- Seek qualitative and quantitative input and information from Post Settlement Governance Entities, Councils, Children's Commissioner on health system performance
- Receive reports and monitor Government priorities (5+5+5), social sector priorities, whānau-led priorities for the Tihei Takitimu rohe
- Conduct critical analysis of data and information, share with Te Whatu Ora and publish results. Advocate for targeted efforts in areas of under-performance

# **Strategic commissioning focus:** Health service planning and priority setting **IMPB Strategic focus:** Amplify whānau voice

#### **Year One:** Jan 2025 - Dec 2025

- Ensure Hauora Māori priorities embedded in Regional Health and Wellness Plan
- Engage with HNZ, health sector and hauora partners to address priorities and dedicate resources

#### Year Two: Jan 2026 - Dec 2026

 Collaborate and plan with HNZ to ascertain funding appropriation/ resource for current and new priorities

#### **Year Three:** Jan 2027 - Dec 2027

- Review/Collaborate with HNZ to plan improvement projects for key priority areas
- Review/collaborate/plan for funding/resource



https://ttpb.maori.nz/