

Tihei Tākitimu Partnership Board

Expression of Interest

Information Pack

April 2022

1. EXPRESSIONS OF INTEREST (EOI)

The Establishment Steering Group are calling for expressions of interest to form the inaugural Iwi-Māori Partnership Board which will be known as the Tihei Tākitimu Partnership Board.

The core function of the Tihei Takitimu Partnership Board is to work at a strategic commissioning level to influence priorities, outcomes, and allocation of the overall locality budget into priority areas.

The Tihei Tākitimu Partnership Board will be made up of seven members who whakapapa to iwi within the Hawkes Bay region and relevant treaty settlement Areas of Interest, have skills and experience which align with the competencies that are listed and are committed to ensuring the best healthcare services for Māori in their region. However, the Establishment Steering Group will have the discretion to amend the numbers appointed to the IMPB commensurate to the talent that is revealed in the recruitment process (a minimum of five members and a maximum of nine members).

Tihei Tākitimu covers areas within the tribal boundaries of Ngāti Kahungunu, Ngāti Pāhauwera, Rongomaiwahine, Ngāti Rakaipaaka and Ngāti Hineuru .

View here a map of the area covered by Tihei Tākitimu

<https://www.google.com/maps/d/u/0/edit?mid=1M1Usl4GhQMSjg01r7cxZrSFZDyAxHpCO&usp=sharing>

In line with the requirements of the Pae Ora Bill, the board will include a mātāwaka representative, and that one or more of the elected members have the appropriate hauora Māori expertise and experience.

The position description, application form and background information can be downloaded from www.atahaia.com

Interested applicants are required to submit an application form, a covering letter that as one of its components covers proposed ideas of how applicants will look to demonstrate value and

contribution to the aspirations of their IMPB rohe and curriculum vitae (CV) to: Lyn Harrison at atahaia@actrix.co.nz

Applications close on Tuesday 17 May 2022. (Late applications will not be accepted)

2. IWI MĀORI PARTNERSHIP BOARDS

“The Māori Health Authority and Iwi Māori Partnership Boards represent a new way of working to shape the future health system. Our collective challenge is to influence the new system in a way that sustains change, achieves equity of outcomes, and elevates the voice of whānau to be direction-setters not just service users”. Sharon Shea, Co-Chair of the interim Māori Health Authority Board.

Tihei Tākitimu Partnership Board

Specifically, the geographical area encompasses all the areas of interest for the entities listed below:

1. Rongomaiwahine Iwi Trust
2. Tātau Tātau o Te Wairoa Trust
3. Ngāti Pahauwera Development Trust
4. Maunga Haruru-Tangitu Trust
5. Mana Ahuriri Trust
6. Hineuru Iwi Trust
7. Heretaunga Tamatea Settlement Trust
8. Ngāti Rakaipaaka
9. Te Taiwhenua o Te Wairoa
10. Te Taiwhenua o Te Whanganui-a-Orotū
11. Te Taiwhenua o Heretaunga
12. Te Taiwhenua o Tamatea

It is important to note that Ngāti Kahungunu tribal connections extend to Tāmaki-nui-a-Rua, and to Wairarapa. These two areas have identified that they will be part of other IMPB however are committed to maintaining connections to Tihei Tākitimu.

In addition, it is acknowledged that Rongomaiwahine Iwi Trust is also engaging with the Tairāwhiti exploring possible participation with their IMPB. There is also the opportunity for other neighbouring iwi to participate in the IMPB later if desired and is considered appropriate.

The Establishment Steering Group who will oversee the recruitment of the Tihei Tākitimu Partnership Board include representatives from the following organisations.

1. Te Taiwhenua o Heretaunga
2. Heretaunga Tamatea Settlement Trust
3. Te Taiwhenua o Tamatea
4. Te Taiwhenua o Te Whanganui a Orotū
5. Te Taiwhenua o Te Wairoa
6. Maunga Haruru-Tangitu Trust
7. Mana Ahuriri Trust
8. Hineuru Iwi Trust
9. Rongomaiwahine
10. Kahungunu Executive ki Te Wairoa Charitable Trust
11. Tātau Tātau o Te Wairoa Trust
12. Ngāti Pahauwera Development Trust
13. Ngāti Rakaipaaka

3. BACKGROUND TO THE HEALTH REFORMS

In 2018 the New Zealand Government commissioned the Health and Disability System Review to identify how to strengthen the health system to ensure every New Zealander can access the right care at the right time. A comprehensive process of consultation and engagement with a diverse group of communities and stakeholders occurred throughout New Zealand and the final report was passed to government in March 2020.

In summary, the review confirmed the following:

- The needs of Māori have not been served well and Māori continue to have persistently poorer health outcomes
- Pasifika and a number of priority populations have also been underserved
- Consumer preferences of where and how services should be delivered has consistently not been met
- The system is very fragmented, overly complicated, and
- Is facing significant financial pressures that are impacting its sustainability.

In response to the reviews findings, in April 2021 the government confirmed its decision to embark on a once in a generational health and disability system reform.

4. HEALTH AND DISABILITY SYSTEM REFORM

At a whole of system level there are four major changes that will help manage the reform agenda. This also includes the creation of new organisations to ensure the new system provides consistent, high-quality health services for everyone, particularly for Māori and groups who have been traditionally underserved and have poorer health outcomes than other New Zealanders.

The four major changes are as follows:

MINISTRY OF HEALTH

The Ministry of Health will be responsible for advising the Government and monitoring the performance of the public health and disability system. It will set the strategic direction and develop national policy and it will be responsible for regulation and ensuring financial stability. It will monitor overall system performance, hold organisations to account for delivery, and support the Minister to intervene where necessary. However, it will no longer directly fund and commission health services.

HEALTH NEW ZEALAND

The role of commissioning community and primary care services as well as the delivery of hospital and specialist health services will be the responsibility of a new Crown entity, Health New Zealand. It will replace the existing 20 district health boards.

Whilst nationally governed and led, Health New Zealand will operate on the basis of four regions and will also have district offices throughout the country. Each of the four regional divisions of Health New Zealand will be responsible for overseeing and managing a network of hospitals as well as commissioning primary and community care services in their region.

MĀORI HEALTH AUTHORITY

To ensure equitable health outcomes for Māori are achieved a new organisation, the Māori Health Authority will be established and take its place alongside Health New Zealand and the Ministry of Health.

As well as monitoring the state of Māori health and helping develop health policy, particularly hauora Māori policy, the Māori Health Authority will have the power to directly commission or co-commission health services for Māori and to partner with Health New Zealand in other key aspects of the health and disability system.

PUBLIC HEALTH

A new Public Health Agency will be formed and located inside the Ministry of Health and will lead public health strategy, policy, analysis and monitoring.

There will also be a new national public health service within Health New Zealand, comprising the 12 public health services across the country. The national public health service will commission public health programmes and will provide services that protect and improve the health of the population, particularly in communities with the greatest health needs.

THE MĀORI HEALTH AUTHORITY & HEALTH NEW ZEALAND

The Māori Health Authority & Health New Zealand are proposed to eventually be established as standalone government organisations governed by Boards. The Pae Ora (Healthy Futures) Bill sets the context for the new system and will enable the two entities to become permanent once the reformed health system comes into effect on 1 July 2022.

The Bill also recognises the important role of Iwi Māori Partnership Boards and Māori exercising tino rangatiratanga and mana motuhake when it comes to planning and decision-making for health services at a local level.

THE MĀORI HEALTH AUTHORITY

On the 23 September 2021 the Minister of Health announced the membership of the interim Māori Health Authority as:

- Sharon Shea (Co-Chair)
- Tipa Mahuta (Co-Chair)
- Dr Sue Crengle
- Dr Mataroria Lyndon
- Lady Tureiti Moxon
- Fiona Pimm
- Awerangi Tamihere

- Dr Chris Tooley

On 20 December 2021 the Transition Unit announced the appointment of Riana Manuel, currently Chief Executive of Hauraki Primary Health Organisation and iwi-based not-for-profit Te Korowai Hauora o Hauraki as the Chief Executive of the interim Māori Health Authority.