

Te Pūrongo o Te Aka Whai Ora
Te Kaupeka Tuatoru 2023/24

Te Aka Whai Ora Quarter Three Report 2023/24

Kohitātea – Poutūterangi 2024
(January – March 2024)



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TE AKA MATUA FOREWORD

This will be the final quarterly report produced by Te Aka Whai Ora | Māori Health Authority. In line with the government's plan, effective 1 April 2024 Te Aka Whai Ora kaimahi, funding and key functions were transferred to Te Whatu Ora | Health New Zealand and Manatū Hauora | the Ministry of Health.

Te Aka Whai Ora will be formally disestablished on Sunday 30 June 2024.

Te Aka Whai Ora was set up to drive and support change in a system that has underserved Māori. Our focus was to create settings that would ensure the entire health system understands and responds to the health and wellbeing needs of whānau Māori. A transformational redesign rather than incremental changes to the status quo and settings for our kaupapa Māori partners to thrive and flourish.

The goal was to have a health system that works for all people; and a new way of pursuing hauora Māori outcomes. While we will not now be taking the pathway we had planned, the goal of a health system that works for all people and integrates and promotes Te Ao Māori solutions remains.

The achievements made in such a short time by Te Aka Whai Ora have taken us a step closer to that goal.

In Quarter 3 these included:

- **Finalising Ki te Whaiao** – Understanding kaupapa Māori approaches to compulsory mental health care; a report that finds approaches grounded in te ao Māori are highly effective at de-escalating inpatient situations and helping to avoid the use of seclusion and restraint in compulsory mental health care.
- **Two Iwi-Māori Partnership Board (IMPBs) National hui** were held in Quarter 3. The second hui was attended by the Minister of Health who shared his vision for the IMPBs.
- **Publishing the Ethnicity Data Action Plan and Considerations for Māori Data Analyses.** The report sets out suggested actions for central health agencies including Te Whatu Ora and Manatū Hauora, and for local and regional providers to address the issues as outlined in the report.
- **The Hauora Māori Internship Fund** allocated funding for 257 internship placements which will support pathways for taura Māori into health careers.
- **New Māori-specific Preventing and Minimising Gambling Harm** regional public health and or local clinical services were entered into contract across Aotearoa.
- **\$2m was allocated** toward initiatives designed by Māori, for Māori, supporting **FASD** initiatives.

I am proud of how Te Aka Whai Ora has demonstrated new ways of working and elevated the voice of whānau, who are at the centre of all that we do. The challenge now is to not lose momentum and build on our progress.

It is clear we must act for future generations but to do so we must be bold and reimagine our systems and trust the voice of our communities.

Riana Manuel



Te Aka Matua | Chief Executive

STRUCTURE OF QUARTERLY REPORT

Our Business Plan for the 12 months to 30 June 2024 provides an operational snapshot of the key activities Te Aka Whai Ora will undertake throughout this year to meet the performance measures and requirements set out in our various accountability instruments. In addition to our *Statement of Performance Expectations 2023/24* (SPE), these include:

- Interim Government Policy Statement of Health 2022-2024
- Te Pae Tata | Interim New Zealand Health Plan (individual and joint with Health New Zealand |Te Whatu Ora 2022-2024 (Te Pae Tata)
- Pae Tū | Interim Hauora Māori Strategy 2023-25 (Pae Tū)
- Whakamaua: Māori Health Action Plan 2020-2025 (Whakamaua)
- Te Aka Whai Ora Statement of Intent 2022-2026
- Ministerial Letter of Expectations for 2023/24
- System Reform Integration Office Reforms Roadmap (the roadmap)
- Recommendations from the Ministerial Advisory Committee on health reform implementation
- Recommendations within the Hauora Māori Advisory Committee (HMAC) rapid assessment.

This report is organised by SPE output classes and displays the variety of activities that we undertake in accordance with our core functions under the Pae Ora (Healthy Futures) Act 2022 (Pae Ora Act).

The SPE output classes

1. System performance and outcomes – includes our external monitoring function on the health system to ensure health outcomes agreed by whānau, hapū and iwi Māori are met.
2. Facilitating mana motuhake – facilitating and developing policies, strategies and actions that are responsive to meeting whānau, hapū and iwi Māori health outcomes and needs.
3. Te ao Māori, mātauranga Māori, and rongoā commissioning (hauora Māori) – direct commissioning, co-commissioning and partnered commissioning approach to improve and increase the number of hauora Māori partners and mātauranga Māori services offered.

The SPE performance measures are intended to show the impact that Te Aka Whai Ora is having in terms of improving equitable health outcomes for Māori. They reflect a combination of impact and activity assessment on the outputs and outcomes that we intend to deliver. While these performance measures do not cover the full breadth of work that Te Aka Whai Ora performed this quarter, it is intended that these performance measures give an indication of our progress as we work towards the realisation of our vision, that whānau, hapū, iwi and hapori reach pae ora.

CLASS 1: SYSTEM PERFORMANCE

This output class is about our **external monitoring function**. Outside of Te Aka Whai Ora, we will monitor the performance of the health system including policy, planning, outcomes, delivery, workforce, performance, and reporting. External monitoring ensures the system maximises the collective to eliminate health inequities that exist and delivers health outcomes for whānau, hapū, iwi and Māori. We will measure and monitor progress throughout 2023/24 as we work towards achieving our strategic objectives over time. **Table 1** below identifies key performance measures for this output class, noting that Te Aka Whai Ora will also undertake other external monitoring related activities to meet the requirements of Te Pae Tata (individual and joint), Whakamaua and HMAC recommendations.

Table 1: Progress against SPE Measures for System Performance and Outcomes 2023/24

Description of performance measure	Progress status from last quarter (Q2)	Progress status for Q3
Māori data sovereignty and data governance from Te Aka Whai Ora will be adopted by Te Whatu Ora and Manatū Hauora Ministry of Health	Māori data sovereignty and data governance frameworks have been approved by Te Aka Whai Ora ELT and are ready for consultation and testing with other agencies / iwi / IMPBs. Although this important kaupapa remains a priority for Te Aka Whai Ora, we recognise that next steps may depend on the readiness and ability of our stakeholders, including government and community partners, to engage at this time.	Our data sovereignty framework and related implementation resources have been developed as per expectations. However, we do not expect these will be fully adopted across stakeholders by 30 June 2024.
Te Aka Whai Ora will produce a baseline report and a series of insight reports on Te Whatu Ora services delivered to Māori	This action has been completed.	This action has been completed.
Te Aka Whai Ora will begin monitoring the overall performance of the health system to reduce health inequities for Māori using the agreed Oranga Whānau Outcomes Framework	<p>The proposed monitoring agreement with Te Whatu Ora has been replaced by the Waka Hourua Kawenata – the relationship agreement which gives the commitment of the two Boards to work together.</p> <p>This quarter saw a series of Monitoring products completed including our:</p> <ul style="list-style-type: none"> • Monitoring Strategy; • Monitoring Directorate Operating Model, Intervention Logic approach; and • Core Hauora Māori Monitoring Deep Dive Methodology. The first deep dive is currently in draft planning stage. 	<p>With the disestablishment of Te Aka Whai Ora, monitoring staff and budget have transferred to other agencies.</p> <p>A close-out report has been prepared and monitoring resources have been shared with partners as appropriate.</p>

Te Aka Whai Ora transition

In February, Parliament passed legislation to disestablish Te Aka Whai Ora. This confirmed that Te Aka Whai Ora will be officially disestablished by 30 June 2024 when the Act comes into force. All staff and funding transferred to either Manatū Hauora or Te Whatu Ora at the end of March 2024.

Ensuring the safe and respectful transfer of staff was a priority for the Board and Executive Leadership Team during the quarter. All efforts were made to keep staff informed and support them throughout the process.

To recognise the formal transition of Te Aka Whai Ora kaimahi within the health system and to welcome our staff to their new organisations, a pōwhiri was held at Pipitea Marae, Wellington on 2 April 2024. Immediately following the pōwhiri, Te Karakia Korowai Manaaki Tāngata was led by Rāhui Papa, to adorn all Te Aka Whai Ora kaimahi with a korowai of manaakitanga for transition.

The transition will see Manatū Hauora and Te Whatu Ora continue to focus on Māori health outcomes as a priority for both agencies with the mahi of Te Aka Whai Ora to continue beyond the existence of our organisation.

In the period between 1 April and 30 June 2024, the Boards of Te Aka Whai Ora and Te Whatu Ora have agreed that the new Hauora Māori Service directorate will provide support to the Board of Te Aka Whai Ora to deliver on its responsibilities under the Pae Ora (Healthy Futures) Act 2022 and the Crown Entities Act 2004 through to disestablishment.

Monitoring Hauora Māori

With the disestablishment of Te Aka Whai Ora, responsibilities for monitoring the performance of the health system in relation to hauora Māori will sit across Manatū Hauora, the Hauora Māori Advisory Committee, Te Whatu Ora and Iwi Māori Partnership Boards (IMPBs).

The monitoring programme developed by Te Aka Whai Ora has been shared with relevant agencies. The programme included a three-year strategy, operating model, monitoring framework and approach, intervention logic, and deep dive methodology. Work was also completed on the content and applicability of qualitative monitoring methodologies to specific monitoring environments. These monitoring foundations balanced international monitoring better practice and tirohanga Māori approach to partnering to uplift performance.

All relevant monitoring artefacts, such as quarterly hauora Māori services performance briefings, monitoring plans and IMPB support offerings have also been made available to our monitoring partners.

Hauora Māori Advisory Committee recommendations

The Hauora Māori Advisory Committee provided a report to the Minister of Health and the Associate Minister of Health in May 2023 with the Committee's assessment of the progress Te Aka Whai Ora in its first 9 months of operation.

Te Aka Whai Ora developed a 31-point action plan in response to these recommendations. The last remaining actions in this plan were completed in Quarter 3. Our final monitoring report which provides an overview of all 31 actions is included as Appendix 1.

CLASS 2: FACILITATING MANA MOTUHAKE

This output class includes a focus on developing and sustaining mutual respect and shared understanding of different perspectives, roles, capacity, and capabilities within the system. Te Aka Whai Ora is committed to developing robust policy and actions which are informed by the voice of Māori to enable Māori to manage their own affairs autonomously.

Table 2: Progress against SPE Measures for Te Aka Whai Ora facilitating mana motuhake 2023/24

Description of performance measure	Progress status from last quarter (Q2)	Progress Status for Q3
Level of support provided by Te Aka Whai Ora to IMPBs meets the action plans or service support memorandum as agreed between IMPBs and Te Aka Whai Ora	Planned support to IMPBs is progressing well with regular engagement occurring, working groups established and IMPB health status profiles provided. Te Aka Whai Ora is also responding to potential options to expand the role and level of functionality expected of IMPBs.	Regular forum and engagement with s continued to ensure the planned level of support was provided and IMPB / Te Aka Whai Ora current obligations were met. Two National IMPB hui were undertaken in the quarter. Each IMPB was also supported to implement the Capability Support Tool and develop workplans for required capability build.
Te Aka Whai Ora and Manatū Hauora will deliver the interim Hauora Māori Strategy to the Minister of Health within the agreed timeframe	This action has been completed.	This action has been completed.
<p>Percentage information requests met within required timeframes to Ministers for:</p> <ul style="list-style-type: none"> • Ministerial correspondence: 95% • Ministerial official information requests: 95% • Written parliamentary questions: 95% <p>Percentage of agency official information requests met within required legislative timeframe: 100%</p>	<p>Our monitoring has confirmed that in the year-to-date our responses to Ministerial correspondence, written parliamentary questions and Ministerial OIAs have exceeded the 95% expectation for timeliness.</p> <p>In the year-to-date 97.3% of agency OIA requests have been responded to within the legislative timeframe. One OIA response did not meet the required timeframe.</p>	<p>In the year-to-date responses to Ministerial correspondence, written parliamentary questions and Ministerial OIAs have continued to exceed the 95% expectation for timeliness.</p> <p>In the year-to-date 98.6% of agency OIA requests have been responded to within the legislative timeframe.</p>
Ministerial satisfaction with policy advice received from Te Aka Whai Ora	Further to the government’s intention to disestablish Te Aka Whai Ora, we do not envisage undertaking a Ministerial satisfaction survey at this time.	N/A

Independent Te Aka Whai Ora Policy Advice

Ki te Whaiao Report: Understanding Kaupapa Māori approaches to Compulsory Mental Health Care

Te Aka Whai Ora has finalised Ki te Whaiao, its report on understanding kaupapa Māori approaches to compulsory mental health care. In summary, the report concluded that kaupapa Māori approaches are highly effective alternatives to restrictive practices such as seclusion and restraint, and that kaupapa Māori approaches should be supported and promoted as a means of eliminating those restrictive practices. On that basis, the report finds that the Bill should include a 5-year deadline for the elimination of seclusion, and that mechanical and chemical restraint should be eliminated immediately the Bill has passed.

We are aiming for a proactive release date for the report of Friday 26 April.

Deep Dive Meetings with the Minister

Advice was provided through the quarter to support three additional deep dive meetings:

- Primary and community care
- Acute care
- Aged care

Gateway Review – Oranga Tamariki

The Gateway Review is at a key milestone. The engagement report has been drafted. It will accompany the main briefing to the Minister which discusses the review and proposes next steps and recommendations. The briefing is currently underway with Te Aka Whai Ora providing advice, support and wording. The briefing is expected to be with Minister Chhour late April/early May. It will be sent to the Minister of Health and Education at the same time.

Rongoā Māori Action Plan

Te Aka Whai Ora attended the Rongoā cross-agency hui, held by ACC on 15 February 2024. It was agreed at the hui that Te Aka Whai Ora will hold the pen on a cross agency Rongoā action plan – now underway. It was agreed that the cross-agency hui should be held every 3-4 months, with the next hui to be hosted by Manatū Hauora. Te Aka Whai Ora also convened a cross-agency Rongoā communications hui on 13 March where agencies endorsed the communications plan we prepared to support this work. Work continues on understanding how to grow the investment into Rongoā Māori.

Iwi-Māori Partnership Board national hui

Two IMPB National hui were held in Quarter 3. The first two day hui from 23 to 24 January 2024 in Gisborne and the second in Ōtautahi on 6 March 2024, which included an address from the Minister of Health. These hui provide an opportunity for information sharing, collaboration and transparency between IMPB Chairs and Te Aka Whai Ora, Te Whatu Ora and Manatū Hauora officials.

Priorities to emerge from the most recent hui included:

- Transition arrangements for relationships - with Te Aka Whai Ora retaining governance responsibility for IMPBs to June 2024 before this is then transferred to Te Whatu Ora. A draft Kawenata (relationship document) is in development.
- Preparing advice which considers strategic commissioning opportunities.
- A report on IMPB readiness, focused on the current statutory functions of IMPBs. This is due to be completed in early April 2024.

Action plan for achieving high quality ethnicity data

High quality ethnicity data is fundamental to a health system that aims to improve Māori health and eliminate health inequities. In 2023 Te Aka Whai Ora commissioned a report from Dr Ricci Harris and Dr Melissa McLeod (prepared

with support from Te Aka Whai Ora staff): *'Action plan for achieving high quality ethnicity data in the health and disability sector'* (the Action Plan). This report was published on our website during Quarter 3.

The Action Plan outlines key priority areas, including roles and responsibilities that should be assumed by Te Aka Whai Ora and the wider health sector related to ethnicity data quality, under the areas of leadership, knowledge, compliance, accountability and monitoring. Key aspects of the action plan include:

- Agreeing a lead agency with oversight of ethnicity data to co-ordinate an ongoing improvement programme for quality.
- Improving understanding of what ethnicity data is, and why it is important for Māori health and ethnic health inequalities and improving knowledge of the Ethnicity Data Protocols¹.
- Ensuring that the collection and recording of ethnicity data and IT systems are compliant with the Ethnicity Data Protocols.
- Monitoring compliance with Ethnicity Data Protocols with associated accountability mechanisms.
- Monitoring quality of ethnicity data at national, regional and local levels.

Te Aka Whai Ora is working with Te Whatu Ora and Manatū Hauora in relation to the recommendations.

The Grand Round

A joint Te Aka Whai Ora and Te Whatu Ora initiative commenced in February 2024 to bring together health researchers and those working in the New Zealand health and wellbeing sector. This is a new monthly online initiative called 'The Grand Round'. This initiative provides a platform to share research and ideas that will hopefully help transform the health system and improve outcomes for our whānau and communities.

There were two sessions in the quarter:

- Professor Bev Lawton, founder and director of Te Tātai Hauora o Hine, the National Centre for Women's Health Research Aotearoa at Victoria University of Wellington, led a panel of other researchers to discuss "Cervical Cancer: Getting the Job Done". Other panel speakers included Charles Lambert, Dr Kendall Stevenson, Dr Karen Bartholomew and Prof Sandy Morrison.
- Presentations from keynote speakers: Dr Mataroria Lyndon, and Dr Karen Brewer, Dr Sandra Hanchard and Rochelle Ellison-Lupena presenting their work on driving equity action for Māori and Pacific communities in Aotearoa.

Recordings of the sessions are made available to all Te Whatu Ora and Te Aka Whai Ora staff.

Data Digital and Knowledge Systems Update

The Data Digital and Knowledge Systems (DDKS) team within Te Aka Whai Ora has always worked closely with Te Whatu Ora to provide an intelligence and insight function that ensures Te Ao Maori and Mātauranga Māori world views are reflected in the use of health intelligence. A number of significant work programmes were progressed in Quarter 3.

- IMPB reverse briefs – the team has been engaging with each IMPB individually to develop a reverse briefing, focusing on the needs of the respective IMPB in relation to their Data, Digital and Analytical needs. These enable IMPBs to engage with the system on their needs and how these can be met.
- IMPB health profiles - DDKS have completed Volume 1 of the IMPB Health Profiles. These are a set of quantitative Māori health profiles for each of the IMPBs. A second volume, which will be delivered in 2024,

¹ The Ethnicity Data Protocols describe the standard procedures for collecting, recording and using data on the ethnicity of people treated by, or working in, the New Zealand health and disability sector.

contains health service use and outcomes measures, with a focus on four health priority areas: the first 1000 days, cancer, long term conditions, and mental health and addiction.

- Data sharing - IMPBs have expressed a need to have robust streamlined processes in place to access data to support them achieve and deliver on their legislative functions. DDKS worked with teams in both Te Whatu Ora and Manatū Hauora to understand what processes can be established for this. DDKS aims to ensure there is a clear and simple process outlining roles and responsibilities to provide this essential service to IMPBs.
- Māori data sovereignty – the focus of recent activities has been on developing resources to assist organisations and teams to action the principles of Māori Data & Digital Sovereignty. This has seen the development of a Tool to allow leaders to assess their capabilities and then target actions to increase capability. Socialisation and testing is ongoing to ensure the development of the Tool is robust, comprehensive and is easy and efficient to use.

The New Zealand Health Plan 2024-2027 | Te Pae Waenga update

Te Aka Whai Ora and Te Whatu Ora have worked together to develop the content for the New Zealand Health Plan (2024-2027) | Te Pae Waenga, with Te Whatu Ora taking the lead and primary responsibility for developing the document. We have also been working with Manatū Hauora to ensure strong alignment between Te Pae Waenga and government priorities as expressed in the draft Government Policy Statement on Health. We are also helping to ensure that Te Pae Waenga aligns well in terms of Māori health content with other accountability documents required, notably the Statement of Intent and Statement of Performance Expectations.

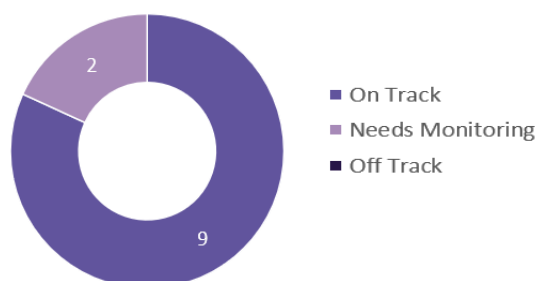
We are helping to shape the plan and advise on hauora Māori priorities such as long-term conditions, mental health and addictions, maternity and early years, Cancer, Te Ao Māori population health, Mātauranga Māori solutions and Māori workforce development. There is also a need to focus the health system on improving outcomes for Māori and confirming IMPBs as active partners and local decision-makers that are enabled to ensure achievement of health outcomes for whānau and communities.

We are engaging with relevant Māori organisations, including IMPBs, Te Whiri Kaha (Māori Clinical Senate) and our Hauora Māori partners. We will work to ensure feedback is captured in Te Pae Waenga.

Te Pae Tata – Lead Delivery Actions

Te Aka Whai Ora shares responsibility with Te Whatu Ora for the delivery of the actions set out in Te Pae Tata, the interim New Zealand Health Plan. This includes 11 actions for which Te Aka Whai Ora is primarily responsible, and a further 45 actions for which we maintain shared responsibility. Of our 11 lead actions, 9 of these are on track with 2 actions requiring active monitoring to mitigate risks to achievement.

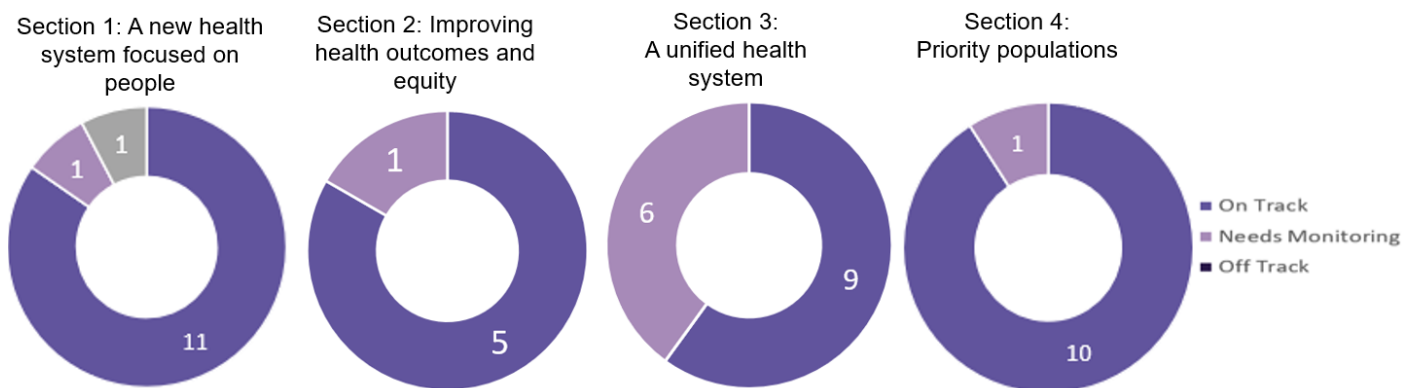
An update for all Te Aka Whai Ora-led actions can be found in Appendix 2 of this report.



Te Pae Tata Partner Action Delivery

The image below shows current progress against the 45 Te Pae Tata actions delivered by Te Whatu Ora and Te Aka Whai Ora in partnership. This information is collected and reported by Te Whatu Ora and we have compiled the graphic below based on the latest complete reporting information available (February 2024).

Overall, 35 of these partner actions are on track with 10 actions reported as not on track. Of those 10 actions, 2 have made less progress than planned by March 2024, but are still assessed as being on-track to be achieved by 30 June 2024. The remaining 8 actions identified as not on-track to be achieved by June 2024 are described further in Appendix 3 of this report.



Whakamaua: Māori Health Action Plan 2020-25

Whakamaua is a five-year action plan that guides the health sector to implement the aims of He Korowai Oranga – Māori Health Strategy (Manatū Hauora 2020) and encompasses the Crown’s response to the recommendations of *Hauora – the Report on Stage One of the Health Services and Outcomes Kaupapa Inquiry* (Waitangi Tribunal 2019).

Te Aka Whai Ora contributes to several actions within Whakamaua and these actions align with our expectations under the GPS and reflect the plans we have made as part of Te Pae Tata.

Please refer to Appendix 4 for the full list of our actions taken with regard to Whakamaua.

CLASS 3: TE AO MĀORI, MĀTAURANGA MĀORI, RONGOĀ COMMISSIONING (HAUORA MĀORI)

This output class seeks to ensure resourcing to achieve health outcomes and the wider aspirations of whānau, hapū, iwi and Māori is equitable. Accordingly, the following outputs are designed to increase access to, and improve the experience of Māori in relation to the health system.

Table 3: Progress Against SPE Measures for Te Aka Whai Ora Commissioning 2023/24

Description of performance measure	Progress status from last quarter (Q2)	Progress Status for Q3
Increase the number of hauora Māori service providers operating under Te Ao Māori service provision and workforce training	Hauora Māori service provider numbers have increased as Te Aka Whai Ora has reached out to a larger audience through Budget 22 Initiatives and our Request for Proposal procurement programmes.	As at May 22 (when the number of contracted providers was first calculated by Te Aka Whai Ora) there were 209 contracted providers. As at January 2024 the number of contracted providers has increased to 380.
Hauora Māori service providers are covering a larger geographical area	Expansions to service delivery and coverage are underway. Notable expansions include: <ul style="list-style-type: none"> - Kia Piki Te Ora Māori Suicide Prevention Services (expansion to national service coverage) - Māori Specific Preventing and Minimising Gambling Harm Services (expansion to national service coverage) Cancer Coordination Services (expansion and increase in capacity for services across multiple Districts)	Geographic coverage of hauora Māori service providers has increased as per comments from last quarter. In addition, 91 new contracts have been agreed for mātauranga Māori services.
Increase the number of hauora Māori service providers providing mātauranga Māori services as part of their overall health service		
Increase wrap-around health support for wāhine hapū antenatal and birthing care that include longer-term intervention and prevention services	Kahu Taurima contracts are in place, with services currently at implementation and early service delivery stage. A series of wānanga have been held which has provided opportunity for partners to work together, learn and support across the motu.	Hauora Māori Partners (HMP) continue to deliver services to whānau from densely populated urban settings to remote isolated regions. A small number of HMPs have needed to have support from the Kahu Taurima Commissioning team to progress to service delivery.
Increase in support for new models of taurite specialist Māori mental health and addiction services	Procurement has been advertised on GETS and through Request for Tender to hauora Māori Partners. Phased roll out of new initiatives and establishment to commence early 2024.	Two new Hapai Ngā Rangatahi services are in establishment phase. They are expected to begin service delivery during April 2024. An evaluation provider has been identified to undertake an evaluation of He Kete Whaiora, which will commence in April.
Percentage of Māori under 25 years-old who have access to specialist mental health or addiction services within three weeks from referral	Hāpaitia visits have been completed and a draft report on these has been presented to the General Managers of the units visited for review. A final draft will be available in February 2024.	A final draft report on specialist mental health services has been prepared. Our next steps are to seek feedback on this report from our partners in Manatū Hauora and Te Whatu Ora.

Percentage of hauora Māori service providers that are meeting their key milestones	Agreements are being managed according to contract milestones. Aggregated reporting across B22 initiatives is being prepared so a percentage for this measure can be reported in Q3.	Data from Quarter 1 shows that >85% of B22 initiative partners were meeting their key milestones.
Percentage of hauora Māori scholarship places in 2023/24 that have been taken up	Reporting the percentage of scholarships taken up for 2024 will be reported in Q3. Rongoā was added to the eligible study programmes.	The scholarships are being expanded into a wider coverage of health professions this year. Currently working through communications, digital platform changes, FAQs, Guidelines and Privacy Statement.

Commissioning

A focus for commissioning teams during the quarter was on the next steps for Hauora Māori commissioning, including progressing contract renewals for Budget 22 investments. Many contracts funded from Budget 22 investment expire on 30 June 2024.

Communications were developed on the next steps for contracts funded under Budget 22 and were sent to Hauora Māori partners during March 2024.

Key commissioning documents were also updated and approved during the quarter which fine-tuned the commissioning approach and refreshed commissioning policies and processes for Te Aka Whai Ora kaimahi to follow. The documents included:

- Commissioning strategy - based on the Commissioning for Hauora Māori Outcomes Framework (Oranga Whānau Outcomes Framework) the strategy outlines the vision, outcomes and priorities for future commissioning activities.
- Commissioning policy - sets out the principles, approach and steps for kaimahi to take when commissioning hauora Māori services.
- Procurement policy - complements the Commissioning policy and has been developed to meet recommendations made by Audit NZ.
- Commissioning plan template – a mandatory template for use by kaimahi for all proposed commissioning work prior to receiving the appropriate approval.
- Commissioning control environment - reflects the quality assurance procedures in place to ensure that data and information from our commissioning activities remain accurate and reduce the likelihood of fraud or human error.

Immunising our Tamariki

Māori have the lowest immunisation rates in New Zealand, particularly among our pēpi and tamariki.

On 21 December 2023, you announced a two-year \$50 million package to support Māori health providers to lift immunisation rates. Te Aka Whai Ora has been working throughout Quarter three to implement this package.

Procurement for this initiative has been completed and 34 contracts in the North Island and 24 contracts in South Island are in place. This is in addition to services that are being established by the Whānau Ora Commissioning Agency.

The majority of the North Island and South Island contracts will come into effect from April 2024. Te Aka Whai Ora expects this investment to start stabilising the immunisation activity of our Hauora Māori Partner network that has been slowly reducing since July 2023 due to the end of the substantial amounts of COVID-19 funding.

This initiative is critical to improving equity and contributing towards the target of 95 percent of all children fully immunised at 24 months of age.

Māori Tertiary Bursaries

Te Aka Whai Ora, in partnership with Te Whare Wānanga o Awanuiārangi, has launched a new health scholarship programme, aimed at building the Māori health workforce. The scholarship, Te Rau Wānanga, will contribute up to 75 percent of course fees and will be available for at least 25 students in 2024. The internship is aligned to the Health Workforce Plan 2023/24 priority ‘Work with Tertiary providers to increase student retention across all health programmes, particularly Māori and Pacific students.’

Te Rau Wānanga is designed to build Māori health workforce capacity by supporting students who are enrolled, or plan to enrol, at Te Whare Wānanga o Awanuiārangi. A range of bespoke Māori health support initiatives (such as wānanga, webinars and presentations) will also be available to scholarship recipients as part of the Te Rau Wānanga programme.

Selection priority will be given to students who are able to demonstrate clearly that their chosen course of study will make a contribution to Māori health development. Students in any year of study from Certificate to Postgraduate levels can apply.

Hauora Māori Internship Fund

A key priority within the 2023-24 Health Workforce Plan is to streamline pathways for taura Māori into health careers. Internships are an excellent way for our taura Māori studying health to gain exposure, learn how to work in various work settings, strengthen skills and make important contributions to their own hāpori and whānau with their newly developed skills and knowledge. This is a co-commissioning initiative between Te Whatu Ora and Te Aka Whai Ora administered by Te Rau Ora.

The Fund opened on 18 December 2023 and closed on 7 February 2024. Following review by an expert panel, 51 applications were recommended which would support 257 internship placements. This is a combined value of \$2.57 million.

Notifications have been sent to providers and contracts are being generated.

Ngā Manukura o Āpōpō

Te Aka Whai Ora Chief Clinical Officer Midwifery, Heather Muriwai and Chief Nursing Officer, Nadine Gray recently joined nurses and midwives from across the motu for a noho at Te Hokowhitu-a-Tu Marae in Whakatāne.

Held on 12 - 13 February 2024, the noho was part of Ngā Manukura o Āpōpō: Clinical Leadership Programme that offers a marae-based kaupapa Māori leadership development course to aspiring and established Māori clinical leaders in nursing and midwifery.

Participants from across the motu including Gisborne, Whakatāne, Whanganui, Rotorua and Tauranga attended as part of their leadership development, grounded in mātauranga Māori.

Te Aka Whai Ora funding has enabled the programme to develop more leaders in the nursing and midwifery workforce in line with the goals of the Health Workforce Plan. The programme training consists of four two-day noho marae over a four-month period, with sessions designed to stimulate learning, discussion, debate, and action, including completing and presenting a health-based project demonstrating their leadership.

Ngā Manukura is a well-established programme and the Te Aka Whai Ora investment into Ngā Manukura aligns with the Health Workforce Plan which outlines the current challenges facing New Zealand’s health workforce and the opportunities to address them now and in the future.

Kahu Taurima – Manaaki Mats

In February 2024 a bereavement care initiative was launched as part of the Kahu Taurima – maternity and early years programme. Te Aka Whai Ora is leading an initiative with Manaaki Mats Limited for the provision of a culturally responsive bereavement care resource (cooling mats) to support bereaved whānau experiencing pēpi loss.

The cooling mats slow down the natural changes that occur after death. It is intended that the mats will enable whānau extended time with their pēpi to create memories which, evidence suggests, can assist with the grief process.

Manaaki Mats are available now in 26 hospitals across New Zealand, providing this resource to non-governmental organisations: SANDS, Baby Loss New Zealand and Angel Casts. Hauora Māori Partners are engaging with this initiative and providing whānau with this resource. Te Aka Whai Ora continues to work with Manaaki Mats Limited to support the extension of this initiative across the country.

An evaluation of the Manaaki Mats system for its effectiveness and the impact and benefits it has on whānau will be carried out as part of this initiative. The insights from the evaluation will inform the development of the national Bereavement Care Pathway, which is being led by Te Whatu Ora for whānau experiencing pregnancy loss, still birth and other deaths, including pēpi loss.

Remote Patient Monitoring

Te Aka Whai Ora is working in partnership with Te Whatu Ora to implement whānau-led pilots to test remote patient monitoring for whānau living with long term conditions in remote rural areas. Whānau-led remote patient monitoring involves kaiāwhina support for whānau to use digital technology to monitor and manage their long-term condition and plan their clinical escalation pathway.

Te Aka Whai Ora has contracts with 4 Hauora Māori Partners to lead the pilots in Te Tai Tokerau, Tairāwhiti and on the Chatham Islands. A total of 75 people will be set up and trained to use remote patient monitoring technology to monitor their long-term condition, and access clinical support when they need it.

In 2023, 30 whānau in Te Tokerau and Tairāwhiti were set up and trained to use remote patient monitoring technology to manage their long-term condition. A further 15 whānau in the Chatham Islands were set up in quarter 3.

An evaluator to assess the impact of the remote patient monitoring pilots on rates of hospitalisation and visits to emergency departments and GPs for participating whānau is currently being selected.

Preventing and Minimising Gambling Harm

Nineteen hauora Māori Partners have entered into contracts to deliver new, enhanced, and equitable Māori specific Preventing and Minimising Gambling harm regional public health and or local clinical services across Aotearoa. These contracts commenced in January 2024.

The 19 hauora Māori partners successfully completed a 2-month co-design process in which they worked with their communities on the design of the proposed new services.

As part of the procurement process, each new local clinical health service is supported with the provision of scholarship funding towards workforce development.

Partners are now in the three-month establishment phase of the new services. During this period we will be creating a reporting template with the partners for the new services going forward. At the conclusion of the establishment phase, partners will also provide a report on this period and next steps as the new services are stood up.

Oranga Hinengaro – Future pathways

Work commenced in Quarter 3 on the design and development of an Oranga Hinengaro (mental health and addictions) pathway that will inform the foundation for future commissioning and service development. It is intended that the pathway will capture the key principles and themes that need to be embedded in te ao Māori Oranga Hinengaro service models through engagement with whaiora and their whānau.

The aim of this project is to help whānau navigate pathways within health services and improve equitable outcomes for whānau to achieve Māori health equity within Oranga Hinengaro.

The expected outputs of this work are the development of a report to identify:

- Innovative oranga hinengaro pathways for tāngata whaiora and their whānau across the continuum of service need and provision.
- Future pathways and the services needed to provide new te ao Māori solutions, increased options, improved accessibility and enable hauora Māori partners to support whānau.

This will come from a te ao Māori lens, collectively drawing on the valuable insights from Māori with lived experience and including whānau perspectives, altering the system from one of transaction and re-traumatising to one that focuses on healing and oranga.

Allocation of Alcohol Levy

Te Aka Whai Ora received \$2 million of Alcohol levies collected in the 2023/24 financial year. Alcohol harm presents a complex and pervasive challenge that affects individuals, whānau, and communities across our nation. Within Māori communities, there exists a pressing concern with Foetal Alcohol Spectrum Disorder (FASD) due to the disproportionately high prevalence of alcohol related issues and harm.

The \$2 million allocation for Te Aka Whai Ora in 2023/24 is being directed to initiatives designed by Māori, for Māori, supporting FASD initiatives. This work will contribute to the actions, outcomes and priorities included in the action plan: 'Taking Action on Foetal Alcohol Spectrum Disorder: 2016-2019'.

A kaupapa Māori approach will determine the most relevant information in relation to FASD in Māori communities and define perspectives that reflect and build upon Māori value and knowledge systems. The work will include:

- Supporting a FASD Māori programme which includes the development of a comprehensive programme for whānau and caregivers tailored to their cultural and support needs at all stages of FASD.
- A national FASD Prevention Campaign which will focus on alcohol harm and behavioural change for future parents (Youth) including raising awareness of FASD impacts in pregnancy and on whakapapa.
- A comprehensive evaluation process will be implemented by an external evaluator.

Commissioning for outcomes

Outcomes based commissioning is a model that enables hauora partners to be innovative and flexible, focussing on results and activities instead of processes. To shift thinking from how a service operates (what it does) to what it can accomplish.

Te Aka Whai Ora are focussed on an outcomes-based commissioning model where the approach is whānau centred. The outcomes roadmap for the period March to June 2024 has three key areas:

1. Detailed plan for the outcome's roadmap, including an implementation plan
2. Review whānau outcomes defined in mini business plans
3. Review partner logic models and partner outcome frameworks

Te Aka Whai Ora have completed 16 in-person regional workshops and over 30 online workshops to support 200 hauora Māori partners to move to an outcomes-based agreement for the 2024/25 year. The new agreements will enable the tracking of the achievement of outcomes of whānau, in addition to any mandatory service data that will continue to be collected including Tamariki Ora, PRIMHD and the health of older people.

Drafting the Integrated Agreement template together with comprehensive workshops across the country were held over the January to February period. At this stage, there are less than five percent of our hauora partners who require intense support with moving to the new agreement framework.

The workshops have been an opportunity to connect with communities of hauora Māori partners, share ideas and concerns. The first set of workshops are the beginning of ongoing workshops to discuss outcomes commissioning, discuss tools of measurement and approaches in this new approach.

Te Aka Whai Ora are on track to have this approach deployed across our hauora partners by calendar year's end.




STAFF UPDATE

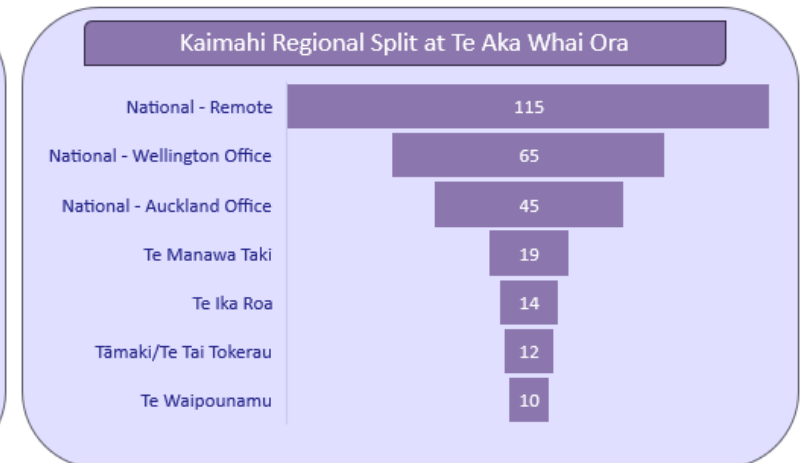
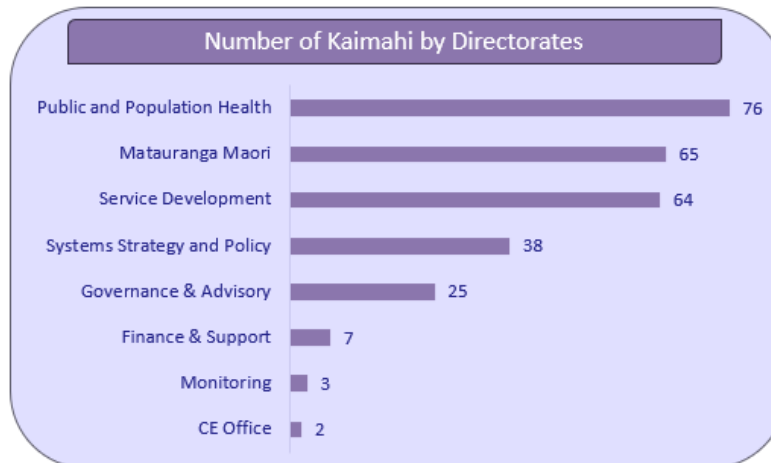
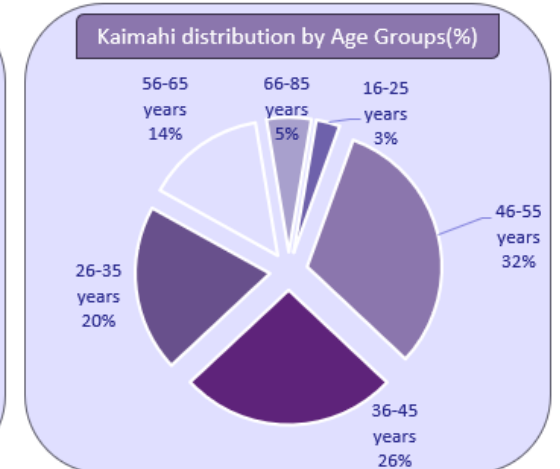
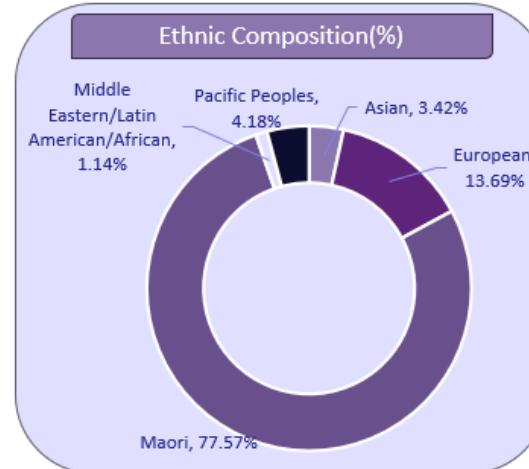
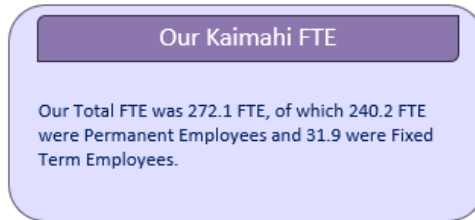
Summary

As of 28 March 2024, we had 280 employees. 61% were based in Regions and other locations nationally with 39% kaimahi based in Wellington and Auckland offices.



Spotlights

 280	272.10
# Headcount (excl contractors and secondees in)	# FTE (excl contractors and secondees in)
 66.4%	77.6%
Female Workforce	Identify as Maori
 14.2%	45.6
% of Tier1-3 to Total Kaimahi	Average Age (Years)

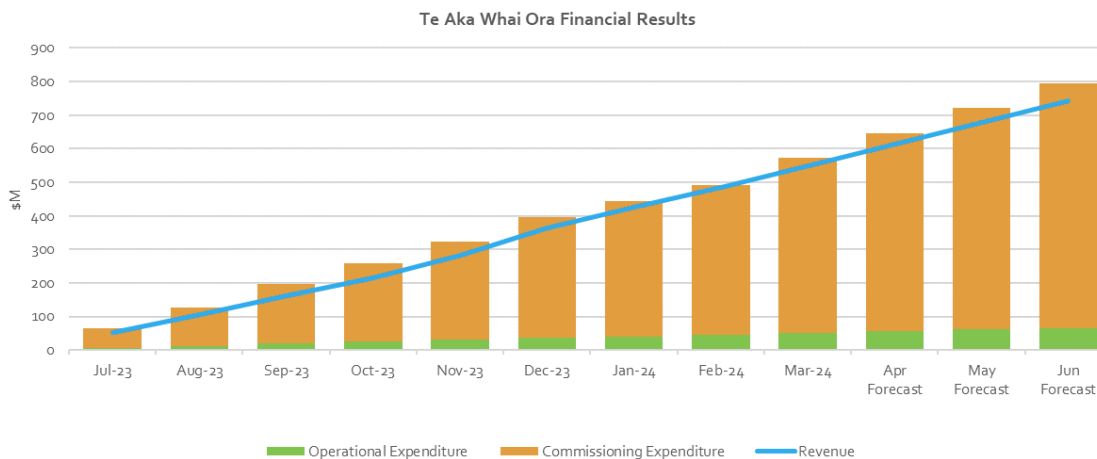


Data Notes: Data provided for Te Aka Whai Ora employees excludes secondees and contractors in line with Workforce data definitions. Please note that seconded in are officially counted in their home organisation. All this data is extracted connecting multiple datasets across Te Aka Whai Ora.

FINANCIAL PERFORMANCE

Te Aka Whai Ora is currently forecasting a planned deficit for 2023/24 reflecting the catch up of prior year underspends.

Legislation was passed under urgency which will disestablish Te Aka Whai Ora on 30 June 2024. However, the transfer of staff and funding to Te Whatu Ora and the Manatū Hauora was actioned by 31 March 2024. All staff and funding has been ‘lifted and shifted’ from Te Aka Whai Ora to Te Whatu Ora and Manatū Hauora, there continues to be a focus on core and critical workstreams.



March YTD budget variance, favourable \$32.4 million

- March YTD budget variance (\$23.1m), which is \$32.4m favourable to budget, due to:
 - Total revenue YTD \$13.5m favourable to budget mainly due to \$4.5m received for Hauora Māori Partner Internships Programme, which was not in the budget, and \$6.1m higher interest earned.
 - Total personnel costs of \$43.9m is \$3.0m favourable to budget. This is mainly due to a recruitment freeze that came into effect from November 2023 with the Government’s decision to disestablish Te Aka Whai Ora. The transfer of staff and funding was actioned by 31 March 2024.
 - Board fees of \$0.7m is (\$0.4m) unfavourable to budget. This is mainly due to the budget being set before the cabinet increase in fees was agreed for the current year. Also, contingency days are not included due to the uncertainty around these days being utilised.
 - Other Operating costs of \$8.2m is \$3.1m favourable to budget due to less spend than budgeted on consultants and travel.
 - Commissioning expenditure of \$520.2m is \$12.8m favourable to budget due to underspends, mainly in Budget 2022 catch up of prior year spend. This is offset by provisioning of TAWO specific costs to IMPBs still in establishment, quarterly payments for some contracts and commencement of the Southern Winter Preparedness contract.

Full year forecast deficit of (\$51.8 million) reflects the catch up in spend from 2022/23

- Please note that due to transfer of all staff and funding to Health New Zealand, Te Whatu Ora at 31 March 2024, the full year forecast from 1 April 2024 relates to the Hauora Māori Services Directorate.
- Full year forecast net deficit is (\$51.8m) this reflects the planned catch up in spend from 2022/23. It is \$19.4m favourable to budget, reflecting lower operational spend due to the disestablishment plus interest revenue.
- The forecast assumes a steady level of FTE for the remainder of the year, albeit with a number of vacant roles, partly offset by maintaining some contractor backfill for core and critical work.
- Commissioning spend is assumed to be spent by the end of the financial year. Further forecasting work is currently underway.

TE AKA WHAI ORA

Financial Results as at 31 March 2024

\$000's	Q1 Actual	Q2 Actual	Q3 Actual	Q4 Actual	YTD Spend	YTD Budget	YTD Variance
Revenue							
Crown Revenue – Operational	17,308	19,167	18,239	-	54,714	54,714	-
Crown Revenue – Commissioning	138,079	180,819	164,012	-	482,910	480,972	1,938
Interest Revenue	2,046	1,987	2,101	-	6,134	-	6,134
Other Revenue	3,244	1,800	424	-	5,468	-	5,468
Total Revenue	160,677	203,773	184,776	-	549,226	535,686	13,540
Operational Expenditure							
Internal Personnel	11,246	12,296	11,696	-	35,238	43,101	7,863
Contractors/Outsourced Personnel	4,898	1,725	2,112	-	8,735	3,891	4,844
Total Personnel Costs	16,144	14,021	13,808	-	43,973	46,992	3,019
Other Operating Costs							
Audit Fees	78	77	265	-	420	188	232
Board Member Fees	190	221	300	-	711	338	373
Consultancy Costs	2,862	1,213	179	-	4,254	7,301	3,047
Travel	468	453	403	-	1,324	2,196	872
Other Operating Costs	283	384	801	-	1,468	1,211	257
Total Other Operating Costs	3,881	2,348	1,948	-	8,177	11,234	3,057
Total Operational Expenditure	20,025	16,369	15,756	-	52,150	58,226	6,076
Commissioning Expenditure							
New Initiatives	49,325	41,130	6,274	-	96,729	133,088	36,359
Te Whatu Ora contracts/transfers	6,578	15,044	28,337	-	49,959	36,907	13,052
IMPBs	1,924	3,302	13,037	-	18,263	12,877	5,386
Problem Gambling	1,080	939	2,509	-	4,528	4,347	181
Legacy DHB/MoH contracts	117,886	123,569	109,252	-	350,707	345,763	4,944
Total Commissioning Expenditure	176,793	183,984	159,409	-	520,186	532,982	12,796
Total Expenditure	196,818	200,353	175,165	-	572,336	591,208	18,872
Net Surplus/(Deficit) from Operations	36,141	3,420	9,611	-	23,110	55,522	32,412

APPENDIX ONE: TABLE OF ACTION ITEMS IN RESPONSE TO HMAC RECOMMENDATIONS

Theme	Rec #	Report recommendations	Status	Final Response
Commissioning and co-commissioning	1.1	Develop an urgent commissioning management plan, process and resourcing to address the impending high volume of Māori provider contract renewals.	Complete	A Commissioning plan was developed to guide investment decisions for Budget 22/23. All Provider contracts were renewed for one year.
	1.2	Prioritise the build of significant capability in the commissioning team and the associated development of commissioning model/frameworks. If required, include an injection of temporary capability and expertise to establish these frameworks, as well as exploring opportunities arising from Te Whatu Ora consultation process.	Complete	Commissioning functions were centralised to align with priorities outlined in the 2023/24 Business Plan. Additional resources were allocated to Commissioning. Further internal resource allocation is aligned with achievement of the accountabilities in the 2023/24 Business Plan.
	1.3	Include greater coverage of the FY23/24 commissioning plan and associated progress reporting in Ministerial reporting.	Complete	As part of the Commissioning plan, year two (2023/24) funding was committed. Progress across our commissioning functions is included in the regular weekly, monthly and quarterly reporting to the Minister.
	1.4	Develop a robust Year Two commissioning implementation plan, ahead of 30 June 2023 including deep consideration of resourcing, timing and delivery implications.	Complete	As part of the Commissioning plan, resources were enabled to ensure that year two (2023/24) funding was committed and contract management supported.
	1.5	Rollover the contracts coming up for renewal under existing terms and conditions to avoid/minimise any changes unless absolutely unavoidable. This will buy time to build internal capability, while providing certainty for providers.	Complete	All contracts were renewed for one year.
	1.6	Phase in co design and revamp of those contracts over time, in a manageable and prioritised manner.	Complete	Development of an outcomes-based commissioning model for all legacy (former DHB/Manatū Hauora) contracts is underway for implementation from 1 July 2024. As part of this work an integrated agreement is being developed that will simplify agreements post 1 July 2024 and align services into one agreement per partner.

Theme	Rec #	Report recommendations	Status	Response/Action
Iwi-Māori Partnership Boards and localities planning	2.1	Urgently boost the capacity and capability of the Te Aka Whai Ora IMPB support functions to ensure critical assistance is available to get IMPBs underway.	Complete	All IMPBs have Capability Support Contracts in place. Focus areas to accelerate IMPB operationalisation and enactment have been endorsed by IMPBs. The IMPB relationship managers are working directly with IMPBs to support their operating models. IMPB Working Groups commenced in November 2023. Regular six-weekly Board / IMPB Chair hui are being held.
	2.2	Clarify the tripartite agreement and expectations between IMPBs, Te Whatu Ora and Te Aka Whai Ora and their respective roles in the system.	Complete	Advice was submitted to the Joint Leadership Group in February 2024. With the intention to disestablish Te Aka Whai Ora, some aspects of this advice may change post-transition.
	2.3	Develop a clear roadmap by June 2023 for the activation of each IMPB, including how each will be supported to develop their operating models, build confidence in Te Aka Whai Ora as a backbone service provider, establish their thinking, and input into locality plans, strategies and policies.	Complete	Each region has a dedicated IMPB relationship manager. The Board approved the operating model for the Iwi Māori Relationships team in August which has enabled the team to focus on three key workstreams pertinent to the success of IMPBs: IMPB operating model, engagement planning and IMPB subcommittee.
	2.4	Prepare and support IMPBs to engage with (and respond to multiple requests from) Te Whatu Ora, including participation in appropriate locality and sector planning.	Complete	As noted in 2.1 and 2.3, support is in place for IMPB operating models.
	2.5	Bring together, engage and support IMPBs across the motu on their role in informing Te Aka Whai Ora strategy work, and monitoring Te Aka Whai Ora performance against Iwi/Māori expectations.	Complete	As noted in 2.1 and 2.3, support is in place for IMPB operating models.

Theme	Rec #	Report recommendations	Status	Response/Action
Monitoring with particular regard to Te Whatu Ora	3.1	Prioritise the implementation of an initial monitoring framework by June 2023 covering Te Whatu Ora progress and performance against their Māori Health Plan (as embedded within Te Pae Tata).	Complete	An initial Monitoring Framework was completed to guide the Monitoring function. Further monitoring strategies and methodologies have been developed. Quarterly monitoring reports on Te Whatu Ora Hauora Māori performance are being produced.
	3.2	Urgently build resource and capability within the monitoring team, including recruiting a permanent Deputy Chief Executive.	Complete	Deputy Chief Executive in place. Operating model and structure agreed. Final implementation of the directorate structure has been impacted by the intention to disestablish Te Aka Whai Ora, but function being resourced via internal secondments and retention of some contractors.
	3.3	Engage with Audit NZ on an appropriate and reasonable level of independence for the monitoring function at Board and executive levels, and the separation between the monitoring and learning functions and that of commissioning.	Complete	As an Independent Statutory Entity Te Aka Whai Ora is sufficiently independent to fulfil its monitoring function. The Board established a separate Monitoring Committee to bring a focus to monitoring. Formal independence from the Board or CE and Executive would require legislation and is not under consideration. Any perceived conflicts in our monitoring role will be dealt with if they arise.
	3.4	Develop a detailed Relationship Agreement with Te Whatu Ora that defines how both parties will work together (at national, regional and local levels) on interfaces between the two operating models, agreed operational activities and frameworks, commissioning and co commissioning, performance measurement, and the management of conflicts that may arise (including from a monitoring perspective).	Complete	Kawenata agreed with Te Whatu Ora. Ongoing relationship management and engagement to ensure best practise.

Theme	Rec #	Report recommendations	Status	Response/Action
Implementation plan for years one and two.	4.1	Develop a comprehensive and robust Year Two implementation plan, ahead of 30 June 2023, to form the basis of Board oversight and monitoring, strategic prioritisation, individual accountabilities, workplans, and reporting to Ministers.	Complete	The 2023/24 Business Plan was developed. The Business Plan set the focus on the top priorities for delivery in 2023/24. It set out how Te Aka Whai Ora will deliver on its Statement of Intent, Statement of Performance Expectations and other accountabilities. Management commenced reporting against the accountabilities in the Business Plan from the August 2023 period.

	4.2	Re establish an ePMO (or equivalent) to oversee and track Te Aka Whai Ora progress against key priority deliverables. (ePMO = Enterprise Programme Management Office).	Complete	ePMO considered with a decision made that equivalent options be adopted.
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Theme	Rec #	Report recommendations	Status	Response/Action
Delivery against Budget 22 announcements.	5.1	Early development and approval of a clear commissioning investment plan for FY23/24, inclusive of the 'effective' one-off spend carried over, by 30 June 2023.	Complete	As part of the Commissioning plan, year two (2023/24) funding is committed.
	5.2	To then be translated into internal workplans, with resourcing, timeframes and accountabilities.	Complete	As part of the Commissioning plan, year two (2023/24) funding is committed. Resources were enabled to ensure that year two (2023/24) contracting and contract management is supported.

Theme	Rec #	Report recommendations	Status	Response/Action
Development of Hauora Māori Strategy with Manatū Hauora.	6.1	Reset the relationship with Manatū Hauora Strategy team (as was done with the monitoring function). Go back to the reform intent and work forward from there, identifying opportunities to align approaches and leverage the strengths of both parties.	Complete	Hauora Māori Strategy completed. Joint policy work programme underway, and kaupapa hui established. Communication channels agreed and operating.

Theme	Rec #	Report recommendations	Status	Response/Action
Other matters of significance Cross cutting issues that can guide Te Aka Whai Ora	7.1	Undertake an urgent assessment of current priorities and delivery requirements, against current capacity and capability constraints and risks. Work with the executive on an agreed, stripped back plan through to 30 June 2023 and into early FY23/24.	Complete	The 2023/24 Business Plan has been developed. Management commenced reporting against the accountabilities in the Business Plan from the August 2023 period.
	7.2	Prioritise strategic risk identification and management, through the Audit, Accountability & Assurance Committee (or equivalent), with a focus on capability and capacity challenges impacting core functions.	Complete	A Board session on strategic risks was held and critical risks were identified. Resourcing plans implemented for core functions. Focus has shifted to that of identifying and mitigating transition-related risks. These include strategic, functional, and operational risks leading up to transitioning the critical functions and services from Te Aka Whai Ora to other parts of the health system.
	7.3	Implement and act upon a strengthened performance accountability framework and measures for the Chief Executive and the executive. Focus areas include planning, commissioning and monitoring functions; capability and capacity development; bedding in of critical enabling systems and processes; and shifting the baseline organisational work patterns from reactive (urgent, unplanned, overloading) to planned, prioritised and resourced.	Complete	The 2023/24 Business Plan has been developed. This expresses the existing accountabilities for the Executive. Performance agreements for Executives are in place. Reporting against the accountabilities in the Business Plan commenced from the August 2023 period.
	7.4	Undertake a formal governance review, covering the matters raised in this high-level assessment.	Complete	A Self Review template was developed. The Board is currently focused on supporting the Executive in the development of effective transition arrangements for all Te Aka Whai Ora critical functions and services. It is not contemplating undertaking a self-review exercise at this stage.
	7.5	Implement an urgent remediation plan for enabling functions including HR, Planning and Finance.	Complete	Remediation plan completed (identified what needed remediating and resourced accordingly).
	7.6	Prioritise an immediate boost to HR capability to support onboarding and effective induction of new staff and teams into their roles and functions within Te Aka Whai Ora.	Complete	HR fully resourced. Recruitment plans on-track during mid – late 2023. Recruitment paused due to confirmation of the Government’s intention to disestablish Te Aka Whai Ora.
	7.7	Prioritise resourcing of critical capabilities Te Aka Whai Ora requires for delivery on Government commitments and strategic priorities (i.e., Planning, Commissioning, Monitoring and IMPBs).	Complete	Additional resources were allocated to Commissioning, Monitoring and IMPBs. Further internal resource allocation aligned with achievement of the accountabilities in the 2023/24 Business Plan.
	7.8	Commit additional support to plan and manage the significant increase in the commissioning workload anticipated with the impending renewal of existing provider contracts. Use this to drive team development and creation of critical business processes and controls.	Complete	Commissioning team was resourced to enable all provider contract renewals to be completed.

	7.9	Strengthen the communications function to deliver a greater level of strategic focus, support and delivery for the Board, executive and business.	Complete	Communications structure was finalised and resourced. Processes included a focus on professional development.
	7.10	Increase capacity in the communications team to proactively release relevant information to prevent these requests.	Complete	Structure established with capacity built in (Minister's office support and Government Advisory team in place). Proactive release policy in place. Comms team and support functions upskilled on policy and implementation. Ongoing training. Support where necessary through external specialists.
	7.11	Build temporary additional capacity in the organisation to respond to Ministerial requests in a timely manner.	Complete	Embedded structure and processes as per 7.10

APPENDIX TWO: PROGRESS TOWARDS TE PAE TATA ACTIONS 2022-24

#	Action	Current Status	Commentary for March 2024	Risk / explanation	Go-To-Green Plan (where applicable)
1	Te Pae Tata 2.5.2 Design and expand Te Ao Māori and Pacific mental health service solutions, including primary mental health and wellbeing, access and choice services.	On track	Ongoing phased roll-out of services. Approval has been granted to progress identifying the allocation of underspend across the Kaupapa Māori Access and Choice Programme, along with the renewals of Agreements that end June 2024.	No immediate risks.	Not applicable.
2	Te Pae Tata 3.1.6b Develop sustainable and integrated funding arrangements for existing and new iwi and Māori organisations and Pacific providers reaching 25 percent of eligible providers in the first year and 50 percent in year two.	On track	In February 2024 completed 16 in-person regional workshops and over 30 online workshops to support nearly 200 Hauora Māori Partners to move to an outcomes-based agreement for the 2024/25 year. The new agreements will enable the tracking of the achievement of outcomes of whānau, in addition to mandatory service data that will continue to be collected. At this stage, there are less than 10 partners (5%) who require intense support with moving to an outcomes based agreement.	No immediate risks.	Not applicable
3	Te Pae Tata 4.1.1a* Partner with IMPBs to develop interventions that are tailored for Māori, build community capability and ultimately work for Māori.	On track	We continue to work with Manatū Hauora to support the capacity and capability build of IMPBs. Development of a IMPB Capability Support Tool is complete which outlines the pathways to progressive growth for each aspect of IMPB development. Alongside Manatū Hauora we are working with each IMPB to implement the tool and understand what the individual and collective capability and capacity build will require.	No immediate risks	On track

#	Action	Current Status	Commentary for March 2024	Risk / explanation	Go-To-Green Plan (where applicable)
4	<p>Te Pae Tata 4.1.1b</p> <p>Work with the Public Health Agency to develop and implement evidence-based public health and legislative interventions that reduce harm from alcohol and other drugs.</p>	On track	<p>Working closely with the Public Health Agency across a number of initiatives:</p> <ul style="list-style-type: none"> • providing review support for the Alcohol levy that PHA are conducting • supporting this with contribution towards the FASD briefing for Minister Reti • completing service level agreement to include three agencies PHA, TWO and TAWO for the current allocation of the \$11.5 million alcohol levy 2023/2024. 	No immediate risks.	Not applicable
5	<p>Te Pae Tata 4.1.1c</p> <p>Review the national approach to Māori suicide prevention and construct suicide prevention approaches consistent with mātauranga Māori to reduce the rate of suicide and suicidal behaviour.</p>	On track	Final report completed. Awaiting publication of the report. Preparing for implementation workplan to implement report findings and recommendations.	No immediate risks.	Not applicable
6	<p>Te Pae Tata 4.1.10d</p> <p>Assess and improve the cultural safety of healthcare organisations.</p>	Needs Monitoring	<p>This is being considered as part of the development of He Rongoā Te Reo (a strategy to improve Te Tiriti responsiveness, culturally safety and equity of services). The team expects to have an interim strategy and plan in place prior to 30 June 2024.</p> <p>The interim strategy has been tested with Pou Tikanga from across Te Whatu Ora. This was well received, and an engagement plan is being developed to test with other interested parties prior to finalising in June (including IMPBs). A cultural standards stocktake is also underway to inform the 2024/25 plan to support He Rongoā te Reo.</p>	The implementation of the strategy will not commence this financial year.	The interim strategy has been tested with Pou Tikanga from across Te Whatu Ora. This was well received, and an engagement plan is being developed to test with other interested parties prior to finalising in June (including IMPBs). A cultural standards stocktake is also underway to inform the 2024/25 plan to support He Rongoā te Reo..

#	Action	Current Status	Commentary for March 2024	Risk / explanation	Go-To-Green Plan (where applicable)
7	Te Pae Tata 4.1.11c Embed Māori sovereignty frameworks and practice for governance of data and information, privacy, and security. Ensure appropriate data and protection standards are in place.	Needs monitoring	We continue to develop the framework and implementation resources as per expectations. Have tested and refined the framework alongside a number of Te Whatu Ora groups including - the DDI committee, D&D joint oversight group and D&D SLT. The framework remains on track to be delivered by end of June where implementation planning will begin.	Although this important kaupapa remains a priority for Te Aka Whai Ora, we recognise that next steps may depend on the readiness and ability of our stakeholders to engage at this time.	Our data sovereignty framework and related implementation resources have been developed as per expectations. However, we do not expect these will be fully adopted across stakeholders by 30 June 2024.
8	Te Pae Tata 4.1.4a* Provide wrap-around support for wāhine hapū antenatal and birthing care, including identifying ways to provide longer-term intervention and prevention services.	On track	Hauora Māori Partners (HMP) continue to deliver services to whānau from densely populated urban settings to remote isolated regions. A small number of HMPs have needed to have support from Kahu Taurima Commissioning team to progress to service delivery.	No immediate risks.	Not applicable
9	Te Pae Tata 4.1.4b* Design immunisation and Well Child Tamariki Ora (WCTO) services that work for Māori and build off a strongly integrated maternity service.	On track	Te Whatu Ora is leading procurement of providers to test the redesigned WCTO schedule. Four of the 6 Providers selected in the RFP process to test the redesigned WCTO Growth and Development service schedule are Hauora Maori Partners from the Te Āo Māroi Service Delivery Model of care. They are still in negotiation of contract phase and plan to move into service delivery in April 2024.	No immediate risks.	Not applicable
10	Te Pae Tata 4.1.4c* Develop whānau-orientated interventions that provide intensive support for maternity and the early years.	On track	Similar to 4.1.4a, Hauora Māori Partners (HMP) continue to deliver services to whānau from densely populated urban settings to remote isolated regions. A small number of HMPs have needed to have support from Kahu Taurima Commissioning team to progress to service delivery.	No immediate risks.	Not applicable

#	Action	Current Status	Commentary for March 2024	Risk / explanation	Go-To-Green Plan (where applicable)
11	Te Pae Tata 4.1.6a IMPBs are in place and engaged locally, regionally and nationally.	On track	Regular forum and engagement with IMPBs continued to ensure planned level of support is provided and IMPB / Te Aka Whai Ora current obligations are met. Convened 6 March National IMPB hui and provided support for the Minister’s attendance. Worked with each IMPB to implement the Capability Support Tool. Workplan summaries for individual IMPB capability build and modelling costings options currently being developed.	No immediate risks.	Not applicable

Appendix Three: Te Pae Tata Partner actions that need continued monitoring

#	Action	Current Status
1.1.3	Build a platform with Whaikaha Ministry for Disabled People to include Tangata Whaikaha Disabled People voices in the design, delivery and performance of the health system.	This action is being revised. A meeting is scheduled to clarify roles and responsibilities for Whaikaha, Te Whatu Ora and Manatū Hauora.
2.2.10	Implement health sector agreements in the Oranga Tamariki Action Plan to improve outcomes for children in their care.	Te Whatu Ora have previously noted resourcing issues that are being addressed. Following confirmation of resource, this action should be able to progress to completion.
3.3.1	Implement an immunisation and screening catch up programme including those delivered by Māori and Pacific providers.	There has been significant recent progress against this action, including the investment of \$50 million over the next two years to increase immunisation rates among tamariki Māori.
3.7.1b	Implement Hira, a user friendly, integrated national electronic health record, to the agreed level, ensure the expected benefits of the investment are achieved, and taking all practicable measures to ensure that project milestones are met.	Large health IT project with multiple streams being led by Te Whatu Ora Data and Digital. A risk management roadmap is being developed by Data and Digital which, when combined with the new Gateway recommendations, will inform a refreshed approach to risk, assumptions, issues, and dependencies. A Gate 4 (Readiness for Service) Gateway Review of Hira is planned for May 2024.
3.7.1c	Scale and adapt population health digital services developed to support the COVID-19 response to serve other key population health priorities.	Large health IT project with multiple streams being led by Te Whatu Ora Data and Digital. The Data and Digital team is working with the business to manage risks to go-live.
3.7.1d	Improve the interoperability of data and digital systems across the hospital network, and between primary, community and secondary care settings.	Large health IT project with multiple streams being led by Te Whatu Ora Data and Digital. Key risks being managed relating to resourcing, capability and collaboration.
3.7.4c	With Iwi Māori and other stakeholders, co-design a framework for Te Whatu Ora's approach to climate change, service resilience and environmental sustainability.	Work is progressing on building climate health scenarios and the Health National Adaptation Plan. FY23/24 should see a reduction in resource constraints to allow further progress and engagement.
4.1.11b	Set Māori equity key performance indicators within health service delivery and seek action plans for remediation where performance is below the indicator, where there is no existing plan.	Some aspects of this action are on-track. Three of the four Te Pae Tata priority services measures have been designed. We are working within Health NZ Te Whatu Ora and with IMPBs on ethnicity data and data sovereignty. Co-design of new measures with whānau is likely to take longer.

Appendix Four: Progress of Whakamaua | Māori Health Action Plan 2020–2025

#	Action	Current Status	Commentary for March 2024	Risk / explanation	Go-To-Green Plan (where applicable)
1.1	Develop iwi partnerships that support local level Māori development and kaupapa Māori service solutions.	On track	Continuing to work alongside Manatū Hauora as the Crown lead for iwi accords and iwi relationships. Participated alongside Manatū Hauora in the Parihaka inter-Agency hui which was held 6 March. Continue to support IMPBs to identify and progress local priorities.	No immediate risks.	Not applicable
1.2	Review, design and expand effective Māori-Crown partnership arrangements.	On track	The changes required to the Engagement Framework post transition are being explored and the current draft frameworks prepared are being revisited to ensure they are fit for purpose post transition. This will be submitted to JLG for feedback post the transition period.	No immediate risks.	Not applicable
2.1	Deliver leadership networking opportunities for IMPB members.	On track	A regular schedule of hui (online and in person) at a regional and national level are being supported	No immediate risks.	Not applicable
2.3	Design and deliver professional development and training opportunities for IMPB members.	On track	As per 2.1, there are regular networking meetings run by Te Aka Whai Ora for IMPBs, a six weekly Board – IMPB Chair meeting hui and IMPB Working Groups.	No immediate risks.	Not applicable
2.5	Review He Korowai Oranga to ensure its strategic direction meets the future aspirations and needs, including the outcomes of the Health and Disability System Review.	Completed	The review has been completed with Manatū Hauora.	Not applicable.	Not applicable

#	Action	Current Status	Commentary for March 2024	Risk / explanation	Go-To-Green Plan (where applicable)
3.1	Expand existing Māori health workforce initiatives aimed at encouraging Māori to enter health careers.	On track	Additional funding has been allocated to uplift existing initiatives. Compiling year-end reporting. Continuing with support and surveillance.	No immediate risks.	Not applicable
3.2	Support the development of a Māori primary mental health workforce.	On track	Additional workforce development funding for kaupapa Maori access and choice services was implemented in FY22-23 and continues in FY23-24. Te Rau Ora is providing national co-ordination to these initiatives. Roll out of kaupapa Māori access and choice services is on track.	No immediate risks.	Not applicable
3.3	Support Te Whatu Ora districts and the Māori health sector to attract, retain, develop and utilise their Māori health workforce effectively, including in leadership and management.	On track	Continued work designing, commissioning and delivery of workforce initiatives from the Māori Health Workforce Action Plan. Developed business case for commissioning of partners to facilitate two leadership programmes.	No immediate risks.	Not applicable
4.1	Increase the capacity and capability of the Māori health sector through the Māori Provider Development Scheme, the Te Ao Auahatanga Hauora Māori funding and other funds.	Completed	This action point is complete. Following the handover of the Māori Provider Development Scheme to Te Aka Whai Ora, decisions have been made to roll the funding for this programme into a general uplift for Hauora Māori Partners.	No immediate risks.	Not applicable
4.2	Strengthen evidence and expand access to rongoā Māori services in parallel with developing the rongoā Māori workforce.	On track	91 new Mātauranga Māori contracts in place. Rongoā Māori contracts are on track. Contract renewals being prepared in Q3.	No immediate risks.	Not applicable
4.3	Strengthen commissioning frameworks and guidance to increase Māori provider	On track	Are on track with converting legacy contracts to outcomes-based contracts. Collecting outcomes of partners - these will be collected and framed into a	No immediate risks.	Not applicable

#	Action	Current Status	Commentary for March 2024	Risk / explanation	Go-To-Green Plan (where applicable)
	innovation and develop and spread effective kaupapa Māori and whānau-centred services.		share outcomes framework of all Hauora Māori Partners, so that they can use and apply in their outcomes-based agreements in 2024/25.		
4.4	Increase access to and choice of kaupapa Māori primary mental health and addiction services.	On track	Ongoing phased roll-out of services. Approval has been granted to progress identifying the allocation of underspend across the Kaupapa Māori Access and Choice Programme, along with the renewals of Agreements that end June 2024.	No immediate risks.	Not applicable
4.8	Complete and implement the redesign of the Well Child Tamariki Ora programme to ensure equitable access to the programme and improved outcomes for tamariki and whānau Māori.	On track	Te Whatu Ora is leading procurement of providers to test the redesigned Well Child Tamariki Ora schedule. The selection process has been completed and have moved onto orientation and onboarding of providers. Plan to move into service delivery from April 2024.	No immediate risks	Not applicable
4.9	Invest in growing the capacity of iwi and the Māori health sector as a connected network of providers to deliver whānau-centred and kaupapa Māori services to provide holistic, locally led, integrated care and disability support.	On track	The February 2024 workshops with Hauora Māori Partners moving to outcome-based contracts have been an opportunity to connect with local networks, share ideas and concerns. These first set of workshops are the beginning of ongoing workshops to discuss outcomes commissioning, discuss tools of measurement and approaches in this new outcomes approach.	No immediate risks	Not applicable
6.1	Adopt innovative technologies and increase access to telehealth services that streamline patient pathways and provide continuity of care for Māori individuals and their whānau.	On track	We are working with providers delivering Remote Patient Monitoring at sites in Te Tai Tokerau, Tairāwhiti and Chatham Islands. Forty-five whānau have been set up and trained to use RPM devices to manage their long-term condition. An evaluation provider is currently being selected.	No immediate risks.	Not applicable

#	Action	Current Status	Commentary for March 2024	Risk / explanation	Go-To-Green Plan (where applicable)
7.1	Design and implement a Māori health and disability research agenda that contributes to achieving pae ora in partnership with Māori.	On track	Resource has been secured to progress the delivery of the Hauora Māori Research Agenda. The research agenda will provide guidance on priority areas specific to hauora Māori, this will then feed into the overall research priorities for Te What Ora - lead by Service Improvement and Innovation. However, the research agenda is unlikely to be implemented in	Project interdependencies have had implications for the progress of this work during the current financial year.	We are compiling a list of the research outputs Te Aka Whai Ora has been part of and will provide guidance on priority areas specific to Hauora Māori. We will progress this action with less reliance on previous dependencies.
7.2	Develop measures of Māori health and disability outcomes and wellbeing to measure pae ora in partnership with Māori stakeholders.	On track	Outcomes framework is being finalised and socialised with groups now and is available to be operationalised with teams.	No immediate risks	Not applicable
8.5	Ensure that major system funding frameworks consider and adjust for unmet need and the equitable distribution of resources to Māori.	Off track	Te Aka Whai Ora funds are being distributed based on priorities and population across the motu. The goal is to distribute available funding based on what funds we have and the legacy contract levels of previous years. Any new funding distributed is based on unmet needs.	The difficulty in achieving this action is that there is limited funding for hauora Māori services, so while there is intent to consider and adjust for unmet need, hauora Māori services comprise only 3% of the total Health budget.	Te Whatu Ora endeavours to fund services according to identified need. Te Aka Whai Ora are not the primary funder of health services. We will continue to influence the wider system funding decision-making where we can.