

Aide-Mémoire

Te Aka Whai Ora Hauora Māori Performance Monitoring: Te Whatu Ora Hauora Māori Service Delivery, 1 July to 30 September 2023

Date due	17 January 2024	Priority	Routine
To	Hon Dr Shane Reti, Minister of Health		
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The following departments/agencies have been consulted
Te Whatu Ora Health New Zealand Ministry of Health Manatū Hauora

Attachments	Appendix One: Summary of hauora Māori insights for FY24 Q1 Appendix Two: Summary of issues raised from the FY23 Q4 Performance Report
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Purpose

1. This aide-mémoire sets out Te Aka Whai Ora | Māori Health Authority performance monitoring findings and recommendations in relation to the delivery of hauora Māori services by Te Whatu Ora | Health New Zealand, for the period from 1 July to 30 September 2023. A summary of the analysis is included in **Appendix One** (Summary of hauora Māori insights for FY24 Q1) and **Appendix Two** (Summary of issues raised from the FY23 Q4 Performance Report).
2. You will receive this aide-mémoire in conjunction with Te Whatu Ora Quarterly Performance Report: Quarter ending 30 September 2023 (FY24 Q1 Performance Report) and the relevant monitoring advice from the Ministry of Health | Manatū Hauora.

Background

3. Section 19(1)(l) of the Pae Ora (Healthy Futures) Act 2022 requires Te Aka Whai Ora to monitor the delivery of hauora Māori services provided by Te Whatu Ora and provide public reports on the results of that monitoring.
4. Te Aka Whai Ora hauora Māori monitoring has focused on the extent to which Te Whatu Ora is meeting its obligations as set out in the Māori Health Improvement Plan contained in Te Pae Tata | Interim New Zealand Health Plan 2022 (interim Te Pae Tata Plan).¹ Information to support this monitoring has been gathered from Te Whatu Ora monthly reports and its FY24 Q1 Performance Report.
5. Interim Te Pae Tata Plan priorities were set prior to 1 July 2022 and were not subject to cost modelling prior to adoption. Limited intervention logic has been applied to the full suite of actions.
6. An oversight group from Te Whatu Ora, Te Aka Whai Ora and the Ministry of Health functions to ensure there is strong alignment between the next Government Policy Statement on Health, Te Pae Tata and Budget 2024. This work is important to translating priorities (including hauora Māori) into costed plans for service delivery, which can be effectively monitored over the three-year period from July 2024.
7. The draft FY24 Q1 Performance Report was received from Te Whatu Ora on 18 December 2023, a delay from the expected timeframe for receipt (mid-November 2023). We understand this delay was caused by process changes, data availability, and post quality verification processes. This subsequently delayed Te Aka Whai Ora undertaking its statutory monitoring function.
8. This is the second time Te Aka Whai Ora has undertaken performance monitoring related to the delivery of hauora Māori services by Te Whatu Ora. Feedback was previously shared with Te Whatu Ora for the period FY23 Q4.

Key hauora Māori monitoring findings

9. Te Aka Whai Ora findings for the period from 1 July 2023 to 30 September 2023 are summarised below and in Appendices One and Two. Our work relates solely to the activities of Te Whatu Ora. We note the Ministry of Health's advice to you about Te Pae Tata progress of both Te Whatu Ora and Te Aka Whai Ora (as set out in HR2023033097) for this period.
 - a) Te Whatu Ora performance reporting identifies examples of operational activity being implemented. The initiatives likely to improve health outcomes for Māori include:
 - i. The establishment of the Comprehensive Primary and Community Care teams to introduce a new kaiāwhina workforce that will support whānau Māori access to primary and community care.
 - ii. Activity to improve access to cancer screening for Māori. Effort is being made to target screening programmes in areas where there are high Māori populations such as Tairāwhiti region, where Māori make up 45 percent of the population.²

¹ Some of the actions in the Māori Health Improvement Plan are not included in Te Aka Whai Ora performance monitoring because the actions have been assigned to Te Aka Whai Ora.

² [Tairāwhiti - our health profile | Hauora Tairāwhiti \(hauoratairawhiti.org.nz\)](https://www.hauoratairawhiti.org.nz)

- iii. Working with Sport New Zealand and the Ministry of Education to implement policy interventions to address obesity and diet.
- b) There is a lack of quantitative and qualitative information related to the progression of the interim Te Pae Tata Plan actions. Where there is adequate reporting on a health activity (for example, improving access to cancer screening in Tairāwhiti region), there is often no quantitative data to demonstrate how, and how much, that activity is leading to improved outcomes for Māori. This issue persists in underlying management performance reporting.
- c) Te Whatu Ora has implemented examples of whānau Māori contributing to its service design and transformation as recommended in previous Te Aka Whai Ora performance monitoring. Māori should be more consistently involved in service delivery design and improvement.
- d) Te Whatu Ora is working with other entities in the wider health system to implement many of the Māori Health Improvement Plan actions. However, reporting does not consistently identify the explicit role of Te Whatu Ora in delivery of these actions and how it is tracking to meet its Māori Health Improvement Plan actions.
- e) Te Whatu Ora performance reporting does not currently provide confidence that the Māori Health Improvement Plan will be fully implemented before 30 June 2024. This puts Te Whatu Ora at risk of not delivering on its commitment to hauora Māori.

Key forward recommendations for Te Whatu Ora

10. Te Whatu Ora hauora Māori performance monitoring requires attention and investment. Te Aka Whai Ora recommends that ongoing performance monitoring outputs include more focused and deliberate descriptions of:
 - a) Hauora Māori activities (as outlined in the Māori Health Improvement Plan), and those outlined in the New Zealand Health Plan from July 2024) including a breakdown of agency responsibility, cost modelling, and expenditure.
 - b) How hāpori Māori have been involved in the development, implementation, and continuous improvement of hauora Māori services.
 - c) Qualitative and quantitative data underpinning the progress made to achieve the objectives and indicators in the interim Te Pae Tata Plan to June 2024 and the New Zealand Health Plan from July 2024.
11. Te Whatu Ora has reviewed this document and accepted these recommendations.

Next steps

12. A summary of Te Aka Whai Ora hauora Māori monitoring for the period from 1 July to 30 September 2023 (as contained in this aide-mémoire, including the Appendices) will be made available on Te Aka Whai Ora website in February 2024.
13. Te Aka Whai Ora will continue to work with Te Whatu Ora to strengthen its hauora Māori delivery implementation and performance monitoring.

Te Aka Whai Ora

Māori Health Authority

Appendix One: Summary of hauora Māori insights for FY24 Q1

Māori Health Improvement Plan indicators	Te Aka Whai Ora performance monitoring findings
<p>Improve mate pukupuku (cancer) for Māori</p> <ul style="list-style-type: none"> • Take a pro-equity approach to age thresholds for access to screening and removing barriers to primary care to improve early detection. • Continue to explore programmes for lung cancer early detection and improve funding for pharmacological treatments. • Ensure access to timely best-practice treatment once cancer is diagnosed with auditing to ensure deviations are justified. 	<ul style="list-style-type: none"> • Te Whatu Ora monthly reporting outlines the progress made to improve access to cancer screening for Māori and there is evidence that some health districts are taking a pro-equity approach to age thresholds for access to bowel screening. Reporting includes the effort being made to target screening programmes in areas where there are high Māori populations such as Tairāwhiti region where Māori make up 45 percent of the population.³ No additional qualitative data or quantitative data has been provided in relation to these programmes in the FY23 Q4 Performance Report. • Early detection of lung cancer and improved funding for pharmacological treatments is reported as a work in progress and there is a lack of information to understand how well Te Whatu Ora is ensuring access to timely better practice treatment once cancer is diagnosed.
<p>Improve māuiuitanga taumaha for Māori</p> <ul style="list-style-type: none"> • Redesign primary care to remove barriers to access for Māori and to provide more comprehensive options for whānau. 	<ul style="list-style-type: none"> • Te Whatu Ora monthly reporting indicates that Te Whatu Ora, with Te Aka Whai Ora and the Ministry of Health, is progressing work focussed on a future primary and community care system that will better respond to the needs and aspirations of communities. There is a lack of information to determine how this initiative is tracking, including what progress has been made on removing barriers to access for Māori and the provision of more comprehensive options for whānau. No additional qualitative data or quantitative data about this activity has been provided in relation to these programmes in the FY23 Q4 Performance Report.
<p>Improve oranga hinengaro for Māori</p> <ul style="list-style-type: none"> • Ensure the effective links/ pathways between mental health crisis services, New Zealand Police (the Police), and other social services in rural and urban areas to address the needs of people who present as acutely distressed. • Increase the availability of, and trial, new models of taurite specialist Māori mental health and addiction services. 	<ul style="list-style-type: none"> • Te Whatu Ora monthly reporting indicates that work has commenced to link mental health crisis services and the Police. It is not clear whether the milestone to establish a steering group and a working group alongside the Police has been met. No additional qualitative data or quantitative data about this activity has been provided in relation to these programmes in the FY23 Q4 Performance Report. • Te Whatu Ora has reported on an initiative called Rangatahi Well aimed to address mental health for rangatahi. Initiatives are also underway in Te Tai Tokerau and Whangarei to support increased mental health access for Māori. However, there is no data provided that informs the success of these initiatives in relation to Māori. (Q1 Report p.19. bullet point 5-6) • Although Te Whatu Ora has provided quantitative data that shows the number or percentage of Māori accessing specialist and primary mental health services, the data is

³ [Tairāwhiti - our health profile | Hauora Tairāwhiti \(hauoratairawhiti.org.nz\)](https://www.hauoratairawhiti.org.nz)

	<p>limited and lacks context to understand how, or if there are, tangible improvements for Māori with mental health needs. (Q1 Report p.26 - 27)</p> <ul style="list-style-type: none"> Limited qualitative data and no quantitative data has been provided to understand how and how well Te Whatu Ora is increasing the availability of, and trial of, new models of taurite specialist Māori mental health and addiction services.
<p>Strengthen and grow iwi Māori leadership - more Māori are in leadership and decision-making roles in Te Whatu Ora</p> <ul style="list-style-type: none"> More Māori in leadership and decision-making roles in Te Whatu Ora. 	<ul style="list-style-type: none"> No information has been provided that would enable insights into whether Te Whatu Ora is growing Māori leadership.
<p>Grow iwi and Māori research and evidence including mātauranga Māori</p> <ul style="list-style-type: none"> Establish intelligence and insight leadership that ensures Te Ao Māori, mātauranga Māori, Pacific and Tāngata Whaikaha disabled people's world views are reflected in the use of health intelligence. 	<ul style="list-style-type: none"> A joint sector wide Data and Intelligence Oversight Group has been established with Te Whatu Ora, Te Aka Whai Ora and the Ministry of Health, but more information is required around progress against this indicator. (Q1 Report p.14. bullet point 1)
<p>Implement evidence-based policies for prevention</p> <ul style="list-style-type: none"> Implement evidence-based policy interventions to address health priorities for Māori, including tobacco control, alcohol, obesity, and diet. 	<ul style="list-style-type: none"> Te Whatu Ora is progressing the obesity and diet aspects of this action through the Healthy Active Learning initiative. The findings will be used to plan future programmes with Sport New Zealand and the Ministry of Education to promote better health outcomes. (Q1 Report p.15. bullet point 5) There are no updates on the progress of initiatives related to evidence-based preventive policy in the areas of tobacco control and alcohol harm.
<p>Develop primary and community care that works for Māori</p> <ul style="list-style-type: none"> Fund Māori providers fairly, valuing their role in primary care and maximising the value of comprehensive models of service delivery. Where there is good performance, we will develop longer-term and more flexible contracts to improve outcomes. Commission comprehensive primary and community care services for Māori populations that improve access. Commission a wider range and greater volume of Te Ao Māori health services. 	<ul style="list-style-type: none"> A highlight for Q1 is the work occurring to implement the Comprehensive Primary and Community Care teams (the introduction of the new Kaiāwhina workforce into those teams). (Q1 Report p.89. Paragraph 2) The procurement process for a national rural clinical telehealth service was reported to be underway and expected to begin in late October 2023. Data collection will be required from commencement of this service so Te Whatu Ora can understand if this service is responding to the needs of Māori in rural communities. (Q1 Report p.9. Paragraph 4)

Te Aka Whai Ora

Māori Health Authority

<p>Create a culturally safe workforce, including a strengthened workforce</p> <ul style="list-style-type: none">• Support educational interventions to increase Māori access to health professional training within the tertiary sector.• Support health sector interventions to increase the number and type of Māori health workers within the current workforce.• Build a network of non-Māori practitioners who are mentors and leaders on culturally safe work who can build Te Tiriti o Waitangi awareness and help non-Māori understand their responsibilities to Māori.	<ul style="list-style-type: none">• The development of a Health Sector Tikanga and Te Reo Māori Strategy has begun. This strategy will help improve the cultural safety of healthcare organisations. (Q1 Report p.15. bullet point 4)• No quantitative data has been provided that would enable insights into how Te Whatu Ora is progressing toward achieving a culturally safe and strengthened workforce.
<p>Ensure accountability for results for Māori</p> <ul style="list-style-type: none">• Ensure universal responsibility for monitoring performance by ethnicity and acting on results.• 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.• Ensure ethnicity data is collected according to a common ethnicity data protocol and there is universal responsibility for all parts of the system to monitor performance on equity, with public transparency of performance.• Empower the system to identify and implement solutions to address inequities and monitor the impact of actions.• Ensure we meet the Ministry of Business, Innovation and Employment (MBIE) target that at least five percent of contracts are awarded to Māori.	<ul style="list-style-type: none">• No quantitative or qualitative data has been provided that would enable insights into whether Te Whatu Ora is ensuring accountability for results for Māori. There is a lack of available information to show how the voices of Māori are informing the monitoring function of Te Whatu Ora.• Te Whatu Ora does not demonstrate its roles and responsibilities in management performance monitoring adequately. While collaboration between Te Whatu and Te Aka Whai Ora is positive, monthly reporting for the quarter demonstrates an over-reliance on Te Aka Whai Ora to lead these indicators.• Overall, self-reporting for these indicators is limited.

Appendix Two: Summary of issues raised from the FY23 Q4 Performance Report

Issues raised from the FY23 Q4 Performance Report	Te Aka Whai Ora analysis
<ul style="list-style-type: none">In our informal review of Te Whatu Ora FY23 Q4 Performance Report we recommended demonstration of the tangible improvements being made across Te Whatu Ora services, how these were contributing to hauora Māori outcomes, how whānau voice was being used to influence service redesign and transformation, and what work was being undertaken across agencies to address the determinants of health.	<ul style="list-style-type: none">Development of the National Diabetes Action Plan has commenced in partnership with whānau Māori. (Q1 Report p.21. Paragraph 2-3)There is planning for focus groups with whānau to gather insights to support improvements to its Cardiovascular Disease Risk Assessment and Heart Health Plan risk management service although it is unclear whether Māori will be participating in these focus groups. (Q1 Report p.19. bullet point 3-4)Some Te Whatu Ora districts are working with local councils to address public health issues such as storm recovery and healthy lifestyle options. These activities have not yet been implemented. (Q1 Report p.88. Paragraph 1)