

Agenda

Regional Integration Team: Te Manawa Taki


Date:	Monday 11 December 2023		
Start Time:	1030	Finish Time:	1200
Location:	Microsoft Teams		

Members: Regional Wayfinder **Nicola Ehou (Co-Chair)**; Regional Director Te Aka Whai Ora (Co-Chair) **Stewart Ngatai**; Regional Pacific Health Director **Vincent Tuoti** and Regional Director National Public Health Service **Nat White**

Attendees: Interim Regional Lead Data and Digital Te Manawa Taki **Owen Wallace** and Interim Regional Communications and Engagement Lead TMT **Nick Wilson**

Pending: Te Aka Whai Ora Clinical; Te Whatu Ora Clinical; Regional Lead System Innovation and Improvement




Apologies: Group Manager Office of the Regional Wayfinder **Mike Agnew** and Regional Director Hospital and Specialist Services **Chris Lowry**

Time	Item	Method	Lead	Action
	Karakia			
1030	<ul style="list-style-type: none"> Review minutes and actions from 27 November 2023 	 2023-11-27 TMT Regional Integration T	Co-Chair (RW)	Members to agree previous minutes and actions

Outstanding Actions update:

Meeting Date	Action	By Whom	By when
26/06/2023	RIT Comms: All members to send BIO & photo to Mike Agnew. Please copy in Crystal.	Stewart/Natasha	December 2023
26/06/2023	Regional Health & Wellbeing Plan: Provide fortnightly updates on progress	Nicola	Update to be provided at this meeting
21/09/2023	Proposed RIT Work Plan: Review updated RIT work plan at the next face to face meeting	Nicola/All	Deferred to the New Year
21/09/2023	Regional Immunisation Action Plan: Update on progress	Natasha/Rochelle West	Update to be provided at this meeting
30/10/2023	Delegated authority forms: Complete the authorised delegation form and ensure it is signed off by your Director. Please forward these to Mike Agnew and copy in Crystal.	Natasha/Nicola	01 December 2023
30/10/2023	First quarterly meeting with IMPBs: RIT to attend meeting in Auckland on the 30 th of November. Please indicate your availability ASAP.	All	Completed – Recap to be provided at this meeting
27/11/2023	2024 RIT Schedule: Review the dates and update the meeting series to reflect any changes	Mike/Crystal/Donna	Up for discussion – Every third Thursday of the month from 9 am – 1 pm

27/11/2023	RIT Advance: Schedule an in-person Advance for RIT members in February to discuss internal matters	Mike/Crystal	Up for discussion
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Time	Item	Method	Lead	Action
Standing items				
1030	<ul style="list-style-type: none"> Health & Safety 		Co-Chair (RW)	
1050	<ul style="list-style-type: none"> Immunisations 	Virtual Update  11Dec23 - Immunisation Workplk  Draft - Te Manawa Taki Immunisation Wc	RDNPHS/Rochelle West	
New items				
1110	<ul style="list-style-type: none"> Regional Health & Wellbeing Plan 	Presentation  RIT update 11.12.23 FINAL.pptx	Co-Chair (RW)	
1130	<ul style="list-style-type: none"> IMPB & RIT Recap 30 Nov 		Co-Chair (RW)	
1150	<ul style="list-style-type: none"> Any other Business <ul style="list-style-type: none"> - 2024 RIT series - RIT Advance: 21 & 22 February 		Co-Chair (RW)	
1200	Karakia			

Meeting Minutes

Meeting name:	Regional Integration Team – Te Manawa Taki		
Location:	Microsoft Teams meeting		
Date:	27 November 2023	Time:	10:30am – 12:00pm
RIT Members:	Regional Wayfinder Nicola Ehau (Co-Chair) ; Regional Pacific Health Director Vincent Tuioti ; Regional Director Hospital and Specialist Services Chris Lowry (joined at 11:08) and Regional Director National Public Health Service Rachel Poaneki on behalf of Nat White .		
Attendees:	Interim Regional Communications and Engagement Lead TMT Nick Wilson ; Group Manager Office of the Regional Wayfinder Mike Agnew and Interim Regional Lead Data and Digital Te Manawa Taki Owen Wallace		
Apologies:	Regional Director Te Aka Whai Ora (Co-Chair) Stewart Ngatai		

Item No.	Details		
	<p>Opening Karakia and Apologies</p> <ul style="list-style-type: none"> Vincent Tuioti opened the meeting Owen Wallace Group Manager for Integration Delivery in Data & Digital, will offer interim support to the Data & Digital function until officially confirmed by the National team. Rachel Poaneki Interim Kaitātaki Group Manager for Health Protection, serves as the delegate for Natasha White Regional Director of the National Public Health Service and is currently on leave. 		
1.	<p>Update on Delegated Authority and New RIT Series</p> <ul style="list-style-type: none"> Discussions were held regarding Delegated Personnel as per the TOR. Mikes team to consider the inclusion of a SOP outlining the acceptable frequency of delegate representation for members. It is now imperative for members to actively incorporate and adhere to these terms. Starting in February 2024, this meeting series will shift to four-hour virtual sessions with an extended in-person meeting every quarter. Members must clarify their availability and commitment to actively participate. It was noted that the RIT has a direct line to ELT that emphasises the unique aspects of the communication channels. 		
2.	<p>Review Minutes and Actions from 16 October 2023</p> <ul style="list-style-type: none"> The minutes were taken as true and accurate. 		
Meeting Date	Action	By Whom	Update
26/06/2023	RIT Comms: All members to send BIO and photo to Mike Agnew. Please copy in Crystal.	All	December 2023

26/06/2023	Regional Health & Wellbeing Plan: Provide fortnightly updates on progress	Nicola	Update to be provided at this meeting by Nicola
21/09/2023	Proposed RIT Work Plan: Review updated RIT work plan at the next face to face meeting	All	In progress
21/09/2023	Regional Immunisation Action Plan: Update on progress	Natasha/ Kaitlin/May/ Rochelle	Update to be provided at this meeting
16/10/2023	Mobile Dental Clinic/Oral Health: Invite Deborah Woodley and team to give an overview of Mobile Dental initiative.	Nicola/Crystal	Actioned
30/10/2023	Delegated authority forms: Complete the authorised delegation form and ensure it is signed off by your Director. Please forward these to Mike Agnew and copy in Crystal.	All	01 December 2023
30/10/2023	First quarterly meeting with IMPBs: RIT to attend meeting in Auckland on the 30 th of November. Please indicate your availability ASAP.	All	30 November 2023
30/10/2023	RIT visit to Lakes: RIT to attend final face to face meeting in Rotorua.	All	Actioned

Standing Items

3. Health & Safety (Nicola)

- No issues raised

4. System Pressures (Nicola)

- This item can now be removed as a standing agenda item

5. Immunisations (Rochelle West)

- A key update in the indicators space for this month is the appointment of a Regional Intelligence Manager for Te Manawa Taki, indicating progress with a sense of urgency. The focus includes developing a more comprehensive monitoring solution for the agreed-upon indicators. Initially providing monthly updates, the aim is to enhance the reporting once a solid understanding of the indicators document is established. Additionally, the work plan includes incorporating recommendations from the signed-off future state immunisation project and conducting a six-month review of ongoing activities.
- Concern raised: "The final draft of Reimagining the Future State Immunisation project is with the Regional Directors NPHS and Te Aka Whai Ora for joint sign off," and this will be addressed with a follow-up.
- Following sign-off, there is a plan to incorporate those activities into the work plan and in-conjunction conduct a six-month review. There are ongoing discussions about the Public Health Nursing Workforce, in regards to supporting childhood immunisation, which has progressed slower than anticipated. These challenges were discussed with Natasha and Chris and there was support from HSS but will be an ongoing piece of work. In regards to the AIR rollout, it is currently a top priority for all local teams. The rollout, initially delayed by one week, is now scheduled for the 2nd of December.

	<p>Teams have expressed concerns about the release date and access to the supporting platform, Whaihua. The Interim Regional Immunisation Lead for NPHS is addressing these concerns with the National Prevention Directorate.</p> <p><u>Further comments/questions:</u></p> <ul style="list-style-type: none"> • In terms of 8-month coverage, the rates presented in the report differ from those displayed in Quick. To provide an accurate overview, it was noted that the data needs to be compared based on how the report was generated. • There is an upward trend in 8-month coverage for tamariki Māori observed from September to October, while Pasifika shows a downward trend. One of the challenges identified is that the reporting mechanism lacks the necessary complexity to provide explanations for these trends. Efforts are underway to address this issue by working with the Intelligence Manager to implement a more robust solution. • The National Team is set to evaluate the 24-month rates, and it will be influenced by the timing of immunisation days. Any missed dates will not be incorporated into the report. The Collaborative has explored incorporating the definition of overdue in the report and understanding the impact of advance outreach pathways on that milestone. The Prevention Directorate, in collaboration with the Intelligence Directorate nationally, is determining the aspects to monitor, aiming to minimise data complexity or interference in the process. The intent behind creating these indicators was to establish clear definitions for the region and devise a customised solution for effective oversight. • It was emphasised that presenting a narrative alongside hard data is crucial in the reporting process. • Question raised: Are there any concerns related to AIR that might be affecting data and the appearance of immunisation rate dashboards? The previous dashboards indicated a notable improvement for Pacific in Waikato, but this doesn't seem reflected in the report. <ul style="list-style-type: none"> ○ Rochelle has a meeting with Tamati Peni to discuss the data differences ○ In terms of AIR readiness, teams have had to ensure that Māori Hauora Providers and others using AIR have business continuity plans in place. This is crucial as, during the go-live period, there will be blackout periods of 48 hours where both the NIR and AIR won't be available. Teams need alternative methods to record immunisations during this time.
6.	<p>Planned Care (Chris)</p>
	<ul style="list-style-type: none"> • The primary focus is on reducing cases exceeding 365 days to zero by the end of December. As of last week, there were approximately 60 cases remaining out of several thousand. The remaining cases involve complex ENT cases in Tairāwhiti and Waikato, requiring additional time for resolution. Despite potential challenges, the target is expected to be very close, with less than a 1% variance. The Northern region has about 14 remaining cases, mainly complex ones, while the central region and South Island have approximately 250 and 350, respectively. The clinical staff and teams have performed well, engaging in addressing the challenge of balancing clinical urgency with waiting times. The focus is on patients who have been waiting for over a year, emphasizing the commitment to treating them and honouring that priority commitment. • The team was acknowledged, recognising the significant and challenging nature of this mahi.
	<p>New Items</p>
7.	<p>Regional Health & Wellbeing Plan</p>
	<ul style="list-style-type: none"> • A presentation provided an overview of the Regional Health & Wellbeing Plan. • Ongoing efforts to outline more specific actions beyond the presentation's content are in progress, with adjustments planned. • The next draft of the plan is scheduled for December 2023.

	<ul style="list-style-type: none"> Active work on the plan has been ongoing since October, with a focus on distilling true priorities for the coming year. Meetings have been initiated with PHOs, localities, and IMPBs for feedback and progress updates. Emphasis is placed on making the plan user-friendly and avoiding complexity. The IMPBs and RIT are set to meet on Thursday, November 30th, in Auckland for a final review of the plan.
8.	Comprehensive Primary Care Teams
	<p>The CPCT is part of a system designed to assist both the front and back end of General Practice and is a new evolving system aiming to reduce visits to general practice for non-urgent cases.</p> <ul style="list-style-type: none"> CPCT involves a range of clinical and kaiāwhina support, providing services beyond general practice. The clinical roles are identified based on community needs and are considered as part of localities, bringing together various players to determine the best roles to support CPCT teams. In Te Manawa Taki, around 120 new clinical roles have been identified to support the expansion of general practice. CPCT teams are intended to be community-oriented, providing early clinical assessment, review, and case management. The co-design process has involved engaging with communities and health providers to understand the best placement of CPCT roles. Although the impact on system pressures may not be immediate, the expectation is to see differences over the next three or four months as CPCT teams alleviate pressure on general practice teams dealing with acute care. The work involves a significant shift in commissioning functions, aiming for more engagement with the broader community to identify optimal placements. The implementation has been challenging, but progress is being made, and support is needed to manage change and build relationships between CPCT teams and existing health services. Discussions around System Level Measures funding for PHOs post-COVID, aligning Flexible Funding Pool for better support in primary care, and considering ongoing use. Uncertainty surrounds CPCT funding beyond the next 12 months, prompting talks on future funding utilisation and sustained health system support. Efforts are being made to address after-hours and urgent care issues in the region. A proposed approach, pending approval from ELT, involves collaboration with PHOs for short-term solutions until a reimagining programme is established. Details will be shared once approved, with future considerations for a more deliberative approach in the New Year.
9.	CONFIDENTIAL: BIM
	<ul style="list-style-type: none"> The draft BIM was shared prior to the meeting <p><u>Comments/Questions:</u></p> <ul style="list-style-type: none"> The report aligns with public health expectations and Regional Health and Wellbeing plans. On Page 12, Tairāwhiti is incorrectly placed within the Central Region and should be updated to reflect its correct location in the Te Manawa Taki Region. Pacific section is well-represented Highlighted the need for a stronger narrative on equity, particularly in Māori representation.
10	Any other Business
	<u>2024 RIT Series</u>

<ul style="list-style-type: none"> Starting in February 2024, this meeting series will shift to four-hour virtual sessions with an extended in-person meeting every quarter. It was initially set to occur every third-Thursday of the month, however this will need to be reviewed due to conflicts. <p><u>Structures</u></p> <ul style="list-style-type: none"> Concerns arising from different structures (national, regional, and local) within various delivery and enabling functions. There is a need for clarity on key points of contact for HSS within commissioning, especially during the transition and appointment of regional positions. This clarity is crucial for effective communication and coordination, given the multiple levels and diverse structures involved. An advance was suggested in February to work through these matters. <p>Action Point 1 – 2024 RIT Schedule: Review the dates and update the meeting series to reflect any changes</p> <p>Action Point 2 – RIT Advance: Schedule an Advance in February</p>
<p>Closing Karakia</p> <ul style="list-style-type: none"> Vincent Tuioti closed the meeting

Action Register

Meeting Date	Action	By Whom	By when
26/06/2023	RIT Comms: All members to send BIO & photo to Mike Agnew. Please copy in Crystal.	All	December 2023
26/06/2023	Regional Health & Wellbeing Plan: Provide fortnightly updates on progress	Lisa/Mara	December 2023
21/09/2023	Proposed RIT Work Plan: Review updated RIT work plan at the next face to face meeting	Nicola/All	Deferred to the New Year
21/09/2023	Regional Immunisation Action Plan: Update on progress	Natasha/Kaitlin/May/Rochelle	Receive monthly
30/10/2023	Delegated authority forms: Complete the authorised delegation form and ensure it is signed off by your Director. Please forward these to Mike Agnew and copy in Crystal.	All	01 December 2023
30/10/2023	First quarterly meeting with IMPBs: RIT to attend meeting in Auckland on the 30 th of November. Please indicate your availability ASAP.	All	30 November 2023
27/11/2023	2024 RIT Schedule: Review the dates and update the meeting series to reflect any changes	Mike/Crystal/Donna	11 December 2023
27/11/2023	RIT Advance: Schedule an in-person Advance for RIT members in February to discuss internal matters	Crystal	11 December 2023

Te Manawa Taki Immunisation Workplan Update

To:	Regional Integration Team
From:	Te Manawa Taki Immunisation Collaborative
Subject:	Immunisation Workplan for feedback
Date:	December 2023

Purpose

The purpose of this update is to provide the revised Immunisation Workplan to the Regional Integration Team for feedback. Note, at this stage only the regional activities section has been reviewed.

Background

The regional activities in the Workplan have been reviewed and updated to align with the recommendations of the Reimagining the Future State Immunisation report. Where possible, it has been signalled what will be able to be progressed within quarters three and four of this year, what is dependent on work being led at a national level and where different parts of the system will be working together on activities.

Leads from Te Aka Whai Ora and Commissioning have contributed to the review. The Workplan remains a live document and further changes will be made in the coming weeks to give more detail to some of the activities.

A review of local activities is still underway, including the development of monthly reporting templates for the teams to use. Depending on the amount of change to planned local activities for quarters three and four, the Workplan may come for further review in January.

Other updates

1. Development of a monitoring dashboard is still underway. AIR has created some issues with data quality and there is a possibility for the next few weeks, that any rates reported are not completely accurate. Teams are working hard to escalate issues and maintain data accuracy at a local level.
2. Public Health Nurse Managers came together for an online regional hui this week. Managers shared progress made in PHN's supporting immunisation delivery and also outlined barriers/challenges they're continuing to experience. Regional Immunisation Lead will continue to work closely with HSS management to escalate and propose solutions to challenges.
3. Recent updates from the NPHS Prevention Directorate (previously National Immunisation Programme):
 - a. Access to childhood immunisations via pharmacies may soon be possible. Input is being sought from the regions about what support would be required to encourage uptake of this option by pharmacies. The possibility of a regional pharmacy engagement lead, from within existed Covid-19 funded resource in the Hauora a Toi team, is being worked through.
 - b. The Immunisation Taskforce 6-month Programme review Dec23 has been shared with the regions. Feedback and questions are being sought from the Regional Immunisation Collaborative.

Te Whatu Ora
Health New Zealand

Regional Health and Wellbeing Plan

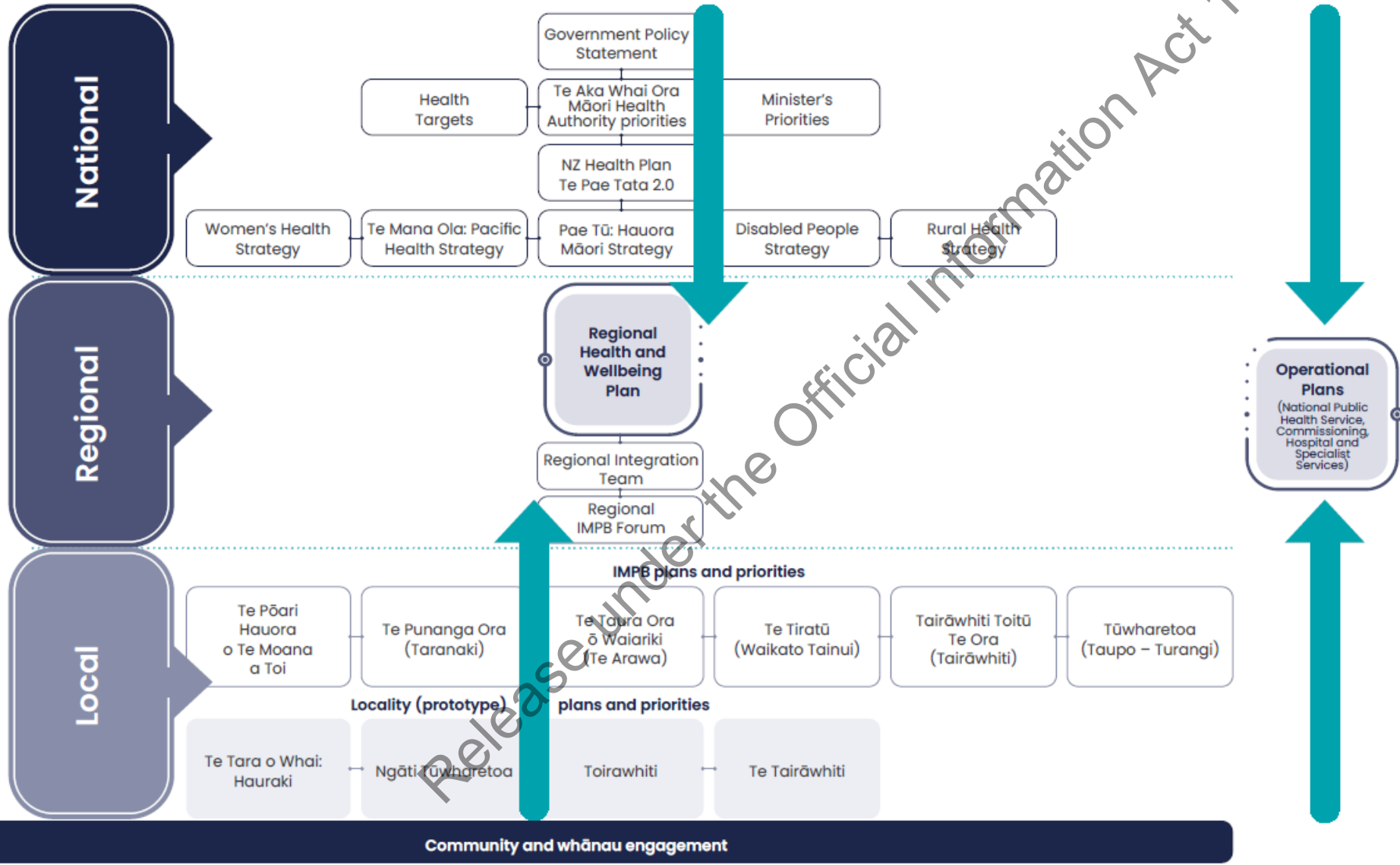
Te Manawa Taki Iwi Regional Integration Team

11 December 2023

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Regional health and wellbeing plan - the wider context

Te Tiriti o Waitangi (Tino Rangatiratanga, Equity, Active Protection, Options, and Partnership)



Operational Plans
(National Public Health Service, Commissioning, Hospital and Specialist Services)

Community and whānau engagement

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Structure & approach

Structure:

- Introduction
- Regional demographics, determinants, risks and pressures
- Regional IMPBs
- Whānau & community voice
- Locality prototypes
- The life course approach
- The RH&WP (Pae Ora, Starting well, Living well, Mentally Well, Ageing well)

*All other information to be held in the appendices

Approach:

- Take the life course approach rather than Te Pae Tata alignment
- Engage with IMPBs and locality prototypes
- Regional narrative and activity only
- Led by community and whānau voice
- Readable, accessible, focused on responding to priorities

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Pae Ora

Priorities:

- Embed system transformation and eliminate racism
- Build community and whānau voice into service planning and delivery
- Work cross-sector to address the determinants of health
- Prepare to respond to emergencies and climate change

How?

- Regional anti-racism strategy implementing Ao Mai te Rā
- Regional cross-sector approach to health equity in all policies to address the determinants of health
- Respond to needs and aspirations of communities through IMPBs and localities, collaborating on identified priorities, resourcing, and empowering community leadership
- Develop a regional approach to emergency response and climate change (psychosocial support, sharing of resource and knowledge)
- Build effective regional network(s) to share resource and expertise and support local best practice in communicable disease control, environmental health.

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Disease prevention

Priorities:

- Improve Immunisation rates
- Improve screening rates (bowel, cervical, breast, lung)
- Re-emergence of mātauranga Māori approaches

How?

- Co-design immunisation services with priority populations
- Develop and implement advanced outreach pathways for tamariki Māori and Pasifika
- Increase the options for hapū māmā accessing antenatal immunisations
- Support the re-emergence of mātauranga Māori approaches to help reduce communicable disease
- Increase the number of authorised vaccinators in local areas.
- Support opportunistic hospital-based immunisation
- Review and improve screening services based on priority population needs (breast, cervical, bowel and lung). Align with mātauranga Māori.
- Implement recommendations from Rongohia Te Reo, Whatua He Oranga - The Voices of Whānau Māori Affected by Cancer

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Starting well

Priorities:

- Care that is integrated, accessible and timely
- Good Dental Care
- Sufficient Workforce
- Better housing and food

How?

- Midwives, doctors, well child tamariki ora, mum and baby are well connected and care is seamless
- Shift OIS to the community
- Recruit more midwives and dental therapists – new regional training programmes
- Recruit a mobile outreach team of dental therapists
- Mobile dental outreach team
- Re-design and re-commission all child health services with health partners and communities (Kahu Taurima)

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Living well

Priorities:

- Better access to quality care for rural and remote communities
- The same access, no matter where you live
- Appropriate end of life care

How?

- Introduce Comprehensive Primary Care Teams (CPCT) that will design and agree with community and sector partners what future primary care services will look like
- Implement the regional Renal and Cardiovascular service plans to improve treatment and management of these chronic conditions
- Improve access for rural and remote communities through virtual care tools and virtual hubs
- Explore feasibility of patient monitoring by family and whānau.
- Deliver consistent, quality, pain management and end of life care (palliative care) in every locality

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Mentally well

Priorities:

- Better access to, and choice of community mental health services
- Well-coordinated services that are convenient for people
- Provide in-patient facilities that promote well-being

How?

- Improve access to, and support localities to become self-reliant in managing mild to moderate mental distress]
- Increase the range and access of tamariki and rangatahi (child and youth) mental health services, including Mana Ake School Based Mental Health Services
- Develop a new regional pathway for high and complex need whānau across the region, starting with Waikato
- Commission residential rehab structures that deliver more individually tailored, wrap around support for tangata whaiora
- Strengthen partnerships between specialist services and community providers to ensure a better journey towards recovery
- Complete the new builds and upgrades to mental health facilities, to ensure they are therapeutic, and designed with consumers in a way that enhances well-being
- Engage with community and whānau to understand the lived experience of those who suffer from addiction issues. These stories will inform service design

Ageing well

Priorities:

- Better support for people to remain in their home of choice, no matter where they live
- Easy to access support and accommodation options for people with dementia

How?

- Consistent and quality rehab and in-home support no matter where you live
- Ensure there are specific kaupapa Māori and Pacific responses to older people needing support to remain at home
- Review the age of access criteria and promote early intervention for in-home support
- Identify current supports for those living with dementia in each locality and the gaps that exist
- Develop a locality approach to the national dementia programme (Mate Wareware).
- Develop and implement a regional plan to increase the number of beds for older people in the dementia unit

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Next steps

Engagement with localities and IMPBs will be ongoing

Next draft due December 22 – for national review

Watch for new Govt priorities

Life-course/Locality planning touch points

Any feedback? Send to cara.dibble@waikatodhb.health.nz

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