



NURSE MAUDE HAUORA MĀORI PLAN 2021 - 2022

TA MATOU MATAKITE/OUR VISION

“The best community nursing and support services possible, improving the well-being of individuals and their families and helping to build hauora, caring communities.”¹

*Kia eke ngā ratonga nēhi ā iwi ki ngā taumata tiketike e taea ai. Kia whakapiki i te hauora o ngā whānau me te hāpori whānui e ora ai te iwi*²

¹ The Vision statement for the Māori Hauora plan is a re-expression of the organisational vision in a way that gives it most meaning for the Komiti Māori June 2016.

² Nurse Maude acknowledge the support and leadership of CDHB Executive Director Māori and Pacific Hauora, Hector Matthews in the development of this plan

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NURSE MAUDE'S COMMITMENT TO MĀORI HAUORA.

Nurse Maude's vision, of improving the well-being of our kiritaki/kiritaki, their whānau/families and communities through the best nursing and support services possible and is fully inclusive.

Sybilla Maude herself developed strong relationships with Māori in her work to address the devastating impact of tuberculosis in Canterbury.

"Nā te manaaki kairangi ki ngā tāngata Māori o Aotearoa, me te whakaute hoki, ka whakatū mātou i te mauri me te mana o Nurse Maude."

"By providing the best care for the all the people of Aotearoa today, and treating every person with respect, we honour the spirit and mana of Sibylla Maude."

Nurse Maude's Hauora Māori Plan states how we intend to develop and grow as an organisation to achieve our vision for Māori kiritaki, in a context where Māori continue to experience poorer hauora outcomes and have a higher risk of premature death than non-Māori populations.

The plan gives expression to our responsibility as a provider under The New Zealand Public Hauora and Disability (NZPHD) Act 2000, to "recognise and respect the principles of Te Tiriti o Waitangi, ... with a view to improving hauora outcomes for Māori, (including) providing mechanisms to enable Māori to contribute to decision-making on, and to participate in the delivery of, hauora and disability services."

We interpret these obligations as requiring an underlying commitment to equity: i.e. working to achieve the same hauora outcomes for Māori, recognising the need to work differently for different populations, and to work in a way that takes into account, and seeks to address social and economic determinants of hauora and hauora systems' barriers.

The Hauora Māori Plan is designed to ensure that the Māori populations in the regions we serve, benefit equitably from Nurse Maude's services. It is specifically designed to address our own development requirements to ensure our ability to achieve equitable service outcomes for Māori kiritaki.

Equity recognises different people with different levels of advantage require different approaches and resources to get equitable hauora outcomes. This has been recognised in the Nurse Maude strategic plan statement...." the links between poor hauora, ethnicity, social and economic disadvantage and old age, provide us with a continuing mission which transcends profit making.

PARTNERSHIP AND PARTICIPATION

The National Māori Health Strategy, He Korowai Oranga (appendix 2) specifies that in order to be successful, decisions about how we move together in this direction must reflect a partnership between the aspirations and potential contribution of Māori and the Crown. Whakamaua: Māori Health Action Plan 2020-2025 describes the way in which we can be partners to enable the health and disability system to implement actions that can contribute to the Crown meeting its obligations under Te Tiriti o Waitangi and the United Nations Declaration on the Rights of Indigenous Peoples. Pae ora is the Government's vision for hauora Māori and is the platform to support Māori to live with good health and wellbeing in an environment that supports a good quality of life. It is about collaboration and to have vision into the future of how good health can be achieved with quality and effective services for Māori.

The principles focused on by Nurse Maude are

- Equitable Nurse Maude hauora outcomes for Māori.
- Nurse Maude Model of Care 2021
- Maximum support from Nurse Maude for achieving the targets of each of our DHB partners Māori Hauora Plans.

Nurse Maude Māori consumers and stakeholders are invited annually to feed back on the plan and contribute to its revision and ongoing development to take place in the latter part of each year.

KEY MĀORI HAUORA STRUCTURES AND ROLES WITHIN NURSE MAUDE

Nurse Maude Kaumātua – Sally Pitama

Nurse Maude Kaihautū Māori Advisor – Annette Finlay

Nurse Maude Māori Liaison – Hinetewai

Hauora Tūhono – Rona Tusa

Clinical Nurse Managers – Tracey Crofts / Kelly De Castro

Neehi Maude Komiti Māori – members all Māori staff of Nurse Maude

NURSE MAUDE PARTNERS FOR HAUORA MĀORI

1. *Māori Kiritaki of Nurse Maude*

With approximately 400 kiritaki in any year who identify as Māori, Nurse Maude are a significant provider for Māori individuals and whānau in Canterbury. We survey Māori kiritaki annually for feedback, and our Kaihautū Māori, Kaiāwhina and Liaison work hard to ensure that Māori kiritaki feedback is sought appropriately in response to any complaint or critical incident. All feedback informs this plan.

2. *Key Community Stakeholder Groups*

Nurse Maude Māori staff with our Senior Management Team (SMT) maintain active relationships with the following key community organisations or networks; participating with them in regular forums and coordinating response to Māori hauora needs at a regional level.

- Now provide a COVID vaccination clinic at McDougall House – low sensory focus
- A view to starting a Mobile COVID Vaccination Clinic
- Hauora Tūhono

Canterbury	Capital and Coast	Hutt Valley
Mana Whenua Ki Waitaha, (Ngāi Tahu Rūnanga hauora collective).	Whānau Services (CCDHB Service)	TBC
Canterbury Clinical Network Māori Caucus	ORA Toa Health Services, Cannons Creek, Porirua	Nga-Tekau Health services, Lower Hutt
CHDB Hauora of Older Persons Te Tairanga Kaumātua Collective.	ORA Toa Poneke Medical Centre, Mt Cook, wellington	Māori health unit, Hutt Valley Hospital
Ara Roopū Kawawhakaruruhau Roopū (Māori Advisory Group for Nursing & Human Services)	ORA Toa Takapuwahia Medical Centre, Titahi Bay Porirua	Te-Awhakairangi Health Network. Wellbeing services for Māori and Pacifica. Lower Hutt
Kahukura Kaumatua Birdlings Flat Project	Hora-Te-Pai Health Services, Kapiti, wellington	Te- Pae-Pae Ārahai Trust, Health Point
Te Puawaitanga ki Ōtautahi	Vaka Atafaga, Pacific Nursing services, C & C DHB, Wellington	Te Awakairangi-Outreach Nurses , Lower Hutt
Tangata Atumotu	New Zealand Translation Centre	Pacific Nursing Services HVDHB, Lower Hutt
He Waka Tapu		ORA-Te Herenga Tangata-HVDHB
Te Aho o Te Kahu (Māori Cancer Strategy)		
Te Putahitanga Whānau Ora		

3. *Hauora Māori providers*

Working in partnership: Service managers and te Kaihautū Māori maintain relationships with a wide range of Hauora Māori Providers contracted in each DHB region. Clinical staff are encouraged to use the Māori roles within NM as a resource based on kiritaki need. The clinical staff are expected to work in a kiritaki and whānau focus when working with these organisations.

4. *General Practice*

As a provider of home and community services, a key partnership for Nurse Maude in the care of each of our kiritaki is with their general practice. Nurse Maude's mahi with individual general practices is supported by strong relationships with PHO's Hauora Māori roopū.

Within each PHO, there are a number of general practices that actively target and work in partnership with Māori communities, whose enrolled population reflect this commitment, and others with have a higher percentage of Māori kiritaki by virtue of their geographic location. In working to meet the needs of Māori kiritaki, Nurse Maude will give priority to building partnerships with all practices who have a significantly higher % of shared Māori kiritaki than others:

MĀORI HAUORA ACTION PLANNING APPROACH

Nurse Maude will use the Ministry of Hauora He Korowai Oranga Framework to integrate Pae ora into our planning approach.







Planned actions address our organisational development requirements in terms of the underpinning enablers:









- Whānau Ora: – staff understand how to deliver services to support wellness for the whole whānau in particular in relation to priority areas for Māori hauora gain.
- Wai ora: - Taiao - hauora environments
- Mauri Ora: – Hauora individuals


By addressing these development requirements, we aim to drive change in how we deliver our services (outputs) for Māori and that is how we will contribute to change in hauora Māori at a population level, with the overall aim that all Māori whānau are empowered to be well and engage with te ao hauora.

NURSE MAUDE MĀORI HAUORA ACTION TABLE

KEY	
 Rangatiratanga – Leadership for Māori Hauora	 O tātou Kaimahi – Developing our workforce
 Whānau Ora	 Wai Ora – Cross-sector collaboration/social and economic determinants
 O tātou tangata – Understanding our population	 Mauri Ora – Equity/Access

Objective	Enabler	Planned Action	When
1. All clinical staff will understand the national targets for Māori hauora gain and their and Nurse Maude's role within a Whānau ora model		<p>Develop and roll out an organisation wide education programme to ensure staff understand the priorities for Māori hauora gain and can act with confidence in their and Nurse Maude's role as a whānau ora model i.e. Promoting hauora behaviours, identifying unmet need, promoting primary care engagement and/or referral to and collaboration with the appropriate Māori hauora service provider.</p> <p>Targets and actions:</p> <ul style="list-style-type: none"> • Lower rates of avoidable hospitalisation and ED attendance • Tamariki Hauora whāngote /breastfeeding child health • Mate manawa/ cardiovascular Disease • kai paipa/smoking • Tuku awhikiri/Immunisation • rūmātiki /Rheumatic Fever • Hauora Hinengaro/ Mental Hauora • Social and economic determinants of hauora • COVID-19 Vaccination Clinics 	ongoing
2. Māori community know about NM services and how to access them.		Continue all current Māori stakeholder group participation and continue to look for new opportunities in all DHB areas.	Ongoing
		Participate in any appropriate community event involving hauora promotion capacity – emphasising how to access community care; and assess other Māori community engagement opportunities on a case-by-case basis.	Ongoing
3. Lift rates of smoking status data collection across organisation		<p>Establish base line KPI's for smoking status - data recorded and set targets to encourage improvement. Report by service.</p> <p>Ensure all services have smoking status data recording improvement target and associated action plan embedded in their annual quality plans</p>	Sept 2021

Objective	Enabler	Planned Action	When
4. NM services are developed and delivered in a way that is appropriate for Māori		Work with NM Board to give expression to the Māori Hauora Action Plan regarding Māori community representation at a governance level for the organisation.	Ongoing
		Continue to host a regional Nurse Maude Māori Hauora stakeholder Hui to seek input into the 1 st review of our Māori Hauora Action Plan.	November 2021
		Update Te Tiriti o Waitangi NM policy to guide new initiative and service development processes within the organisation to include a review of impact on equitable service delivery to Māori	Completed and review of policy Ongoing
		Meet with Nurse Maude CRM reference group for a presentation of anticipated CRM mobile PMS impact on kiritaki service delivery and a discussion of how these impacts might affect equitable outcomes for Māori.	Project Hauora Tūhono started September 2021
		Mainstream appropriate use of Tikanga and te reo Māori within Nurse Maude e.g. <ul style="list-style-type: none"> NM Waiata words and recordings available on Nurse Maude Intranet Incorporate te reo Māori appropriately into NM community and staff newsletters, web material, pamphlets Discuss relevant protocol for any key roles with Kaihautū Māori Use art to make a physical environment that demonstrates awahi and tautoko to Māori 	Ongoing
		Continue to engage with NM SMT, service managers and education team to ensure that Nurse Maude achieves targets for cultural competence and te Tiriti o Waitangi education.	Ongoing
		Work with HR manager to develop Māori staff development programme to build the competence of Nurse Maude to work with Māori. Include positive discrimination recruitment policy, Māori staff leadership pathways.	Draft Policy to SMT Feb 2017
			Kaihautū Māori to continue to work with services to ensure services are relevant and safe for Māori
5. Work with primary care to ensure that Māori kiritaki are referred equitably for community care.		Review the NM Māori Hauora Plan with PGs. Include data on shared kiritaki ethnicity in GP reports. Emphasise evidence of lower rates of referral for Māori – especially at lower threshold of need.	ongoing
		Work with identified primary care practices with higher Māori enrolments to encourage and support appropriate referral for NM services.	Ongoing
6. Support Nurse Maude staff to refer appropriately to and work collaboratively with Māori Providers		Kaihautū Māori to work with appropriate service leaders to develop a pathway/resource for clinical staff for supporting referral to appropriate Primary care/Māori providers.	ongoing
		Kiritaki satisfaction survey will measure whether they perceive Nurse Maude involvement to be whānau-focused and supportive of primary care engagement and that NM encourages collaboration with Māori Providers.	ongoing
7. 100% ethnicity data collection.		Quality will work with Service Managers and ensure all services have ethnicity data recording improvement targets and associated action plan embedded in their annual quality plans.	ongoing

<i>Objective</i>	<i>Enabler</i>	<i>Planned Action</i>	<i>When</i>
<p>8. We will constantly seek to understand how our service outcomes for Māori could improve, (in particular where the priority areas for hauora Māori gain directly intersect with NM contracts and service population). NM will use detailed performance data to refine our planned actions in consultation with kiritaki and Māori stakeholders.</p>		<p>Improve all monitoring of clinical indicators of NM performance to include understanding clinical performance by ethnicity.</p> <p>Review NM kiritaki hospital admission rates by ethnicity and establish a programme of continuous clinical case-review to identify opportunities to avoid admissions. N.B. A proper case review does review the cultural aspects</p> <p>Ensure innovation projects targeting kiritaki with heart failure include appropriate Māori kiritaki participation and have established a working relationship with Cardio Respiratory Outreach.</p>	<p>Ongoing</p>

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MONITORING PERFORMANCE & ACHIEVEMENT

In addition to tracking and reporting activity against specific planned actions, a key performance indicator (KPI) dashboard³ has been established to monitor improvement relative to specific enablers.

1. *Access to care: Mauri Ora*

1.1. Māori should be represented within the NM population proportionately as they are in the regional population.

1.2. Māori kiritaki will express at least the same level of satisfaction as the Nurse Maude general kiritaki population.

1.3. Māori representation in our staff will be proportionate to their representation in the community we serve, i.e 9.1% in Canterbury

2. *Understanding our population: O tatou tangata*

1.4. 100% ethnicity data recorded for all services.

Measure	NM Cnty	% HVSCC	% CCCCC
% of population with ethnicity data recorded	81%	95.36%	76.22%

NM Canterbury ethnicity data recorded by service

Monitoring against these KPIs will be completed annually and will be presented to

- Te Nehi Maude Komiti Māori
- The Nurse Maude senior management team and board.

The annual dashboard and Nurse Maude action plan review will be shared with Manawhenua ki Waitaha, Te Kāhui o Papaki Ka Tai and the CCN District Alliance's Māori Caucus.

3. *Nurse Maude Hauora Māori Outcomes. Pae Ora*

By collecting and reporting on ethnicity data we will improve our ability to report all our clinical indicators of quality and service outcomes by ethnicity and understand how well we do in terms of comparable outcomes for Māori in relation to other hauora organisations.

References:

Whakamaua 2020-2025 (MOH Māori Hauora Action Plan)

³All of the baseline data in this Plan (unless otherwise stated) has been calculated on data from the 2014/15 calendar year. Appendix 4 contains a full discussion of each of the chosen KPIs.

APPENDIX 1: NURSE MAUDE MODEL OF CARE



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APPENDIX 2: CURRENT KEY MĀORI HAUORA PROVIDERS BY REGION

CANTERBURY	
He Waka Tapu	<ul style="list-style-type: none"> • Cervical and Breast Screening • Whānau Ora • Tāne Ora • Alcohol and Drug counselling • Alcohol and Drug residential service for the South Island • Whānau Link
Purapura Whetu	<ul style="list-style-type: none"> • Shared Clinical RN Support Adult Community Mental Hauora • Infant/Child/Youth Mental Hauora • Whānau Ora Mental Hauora
Te Awa o Te Ora	<ul style="list-style-type: none"> • Like Minds Like Mine • Day Activity • Peer Support • Mental Hauora • Community Support
Te Kakakura Trust	<ul style="list-style-type: none"> • Mental Hauora Residential Community Support Worker, Clinical FTE
Te Tai o Marokura (Kaikoura)	<ul style="list-style-type: none"> • Mobile Disease State Management • Whānau Ora • Tamariki Ora – Wellchild Mama & Pēpi • Alcohol and Drug
Te Puawaitanga Ki Ōtautahi	<ul style="list-style-type: none"> • Breastfeeding advocacy • Mobile Disease State Management • Tamariki Ora – Wellchild, Mama 2 Mama • Outreach Immunisation
Te Rūnanga O Nga Maata Waka	<ul style="list-style-type: none"> • Support Services to Mama and their Pēpi (Mothers and Babies)
Rehua Marae	<ul style="list-style-type: none"> • Kaumātua Day Support • Whānau Ora Community hauora Service
Community & Public Hauora	<ul style="list-style-type: none"> • Aukati Kaipapa • Māori Hauora Promotion
National Cervical Screening Programme	<ul style="list-style-type: none"> • Māori Hauora Promoter
CDHB	<ul style="list-style-type: none"> • Executive Director Māori & Pacific Hauora • Māori and Pacific Portfolio Manager • Māori Diabetes Nurse Specialist and Diabetes Hauora Worker • Cardio Respiratory Outreach • Kaiarahi Roopu Christchurch Hospital • Māori Mental Hauora <ul style="list-style-type: none"> ○ Te Korowai Atawhai Team ○ Pūkenga Atawhai Cultural Support Workers ○ Taua • Older Persons <ul style="list-style-type: none"> • Kaitautoko Kaumātua • Māori Hauora Worker/Māori Clinical Assessor

	<ul style="list-style-type: none"> • Burwood Hospital <ul style="list-style-type: none"> • Kaiwhakahaere Clinical and Cultural Worker • Kaumātua • Āwhina (Support Worker)
GREATER WELLINGTON	
	<i>In earlier document</i>
HUTT VALLEY	
	<i>In earlier document</i>

APPENDIX 3: DISCUSSION OF KPIS, BASELINES AND TARGETS

1. *Equity of access*

1.1 Proportionate use of Nurse Maude services

In order to demonstrate equitable access to Nurse Maude services for Māori our ethnicity data is benchmarked against comparable DHB population data. ***The target is that Māori should be proportionately represented within the NM population as they are in the regional population. This is measured in two ways:***

BY AGE BAND:

E.g. 0-14 year olds make-up a larger % of the CDHB population than they do of Nurse Maude's population. However, despite the fact that Nurse Maude serve very few 0-14 year olds, we should see a similar % of Māori within the population of 0-14 year olds we do serve, as are within that age band across Canterbury. If this is not the case, our services do not appear to be equally accessible to Māori within that age band.

While it is useful to understand by age band, a single measure is also appropriate; e.g. BY % MĀORI KIRITAKI WITHIN OUR OVERALL POPULATION. The Nm target is based on DHB % Māori ethnicity (age adjusted to reflect the age distribution of NM kiritaki relative to that of DHB).

1.2 Māori Kiritaki Satisfaction

High levels of satisfaction when combined with proportionate use of the service can be as an indication that the service meets Māori community needs. Every 2 years a random sample of Māori kiritaki are surveyed to establish their satisfaction with Nurse Maude services. Our target is that Māori kiritaki will express at least the same level of satisfaction as the Nurse Maude general kiritaki population.

2. *Māori Hauora workforce statistics*

2.1 % staff current with cultural competence training:

As a mainstream provider of services for Māori we accept responsibility to ensure the cultural competence of our staff. Our current policy stipulates that all clinical staff will receive cultural safety and Treaty of Waitangi education with 6 months of starting work with NM, and that all staff will have a cultural safety education refresher every 2 years. Is this the training expectations?

2.2 % total staff who identify as Māori:

We additionally recognise that Māori staff provide critical cultural competence to the organisation. Ensuring Māori staff are adequately supported, recognised and recruited in sufficient numbers to enable us to provide appropriate care for Māori kiritaki is an important expression of our commitment to hauora equity for Māori and to Te Tiriti of Waitangi. It is therefore appropriate to set the same target for % Māori representation in our staff as in the community we serve, i.e. 6.7% in Canterbury.

3. *Nurse Maude Ethnicity Data Collection*

Ethnicity data recording for all kiritaki is essential to enable us to target services effectively and to monitor our service provision in terms of equity of outcomes for Māori. ***Our target is 100% ethnicity data recorded for all services.***