

All-staff hui 22 February

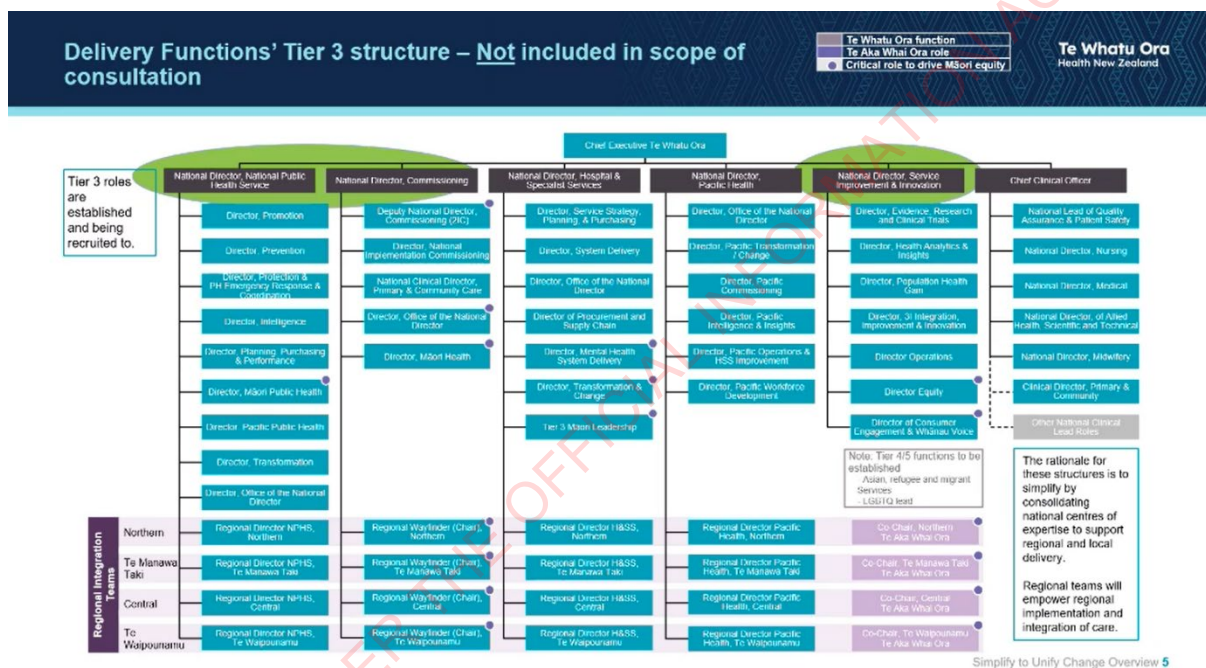
- Extend aroha and thoughts for all our whanau and staff in Hawke's Bay and Tarawhiti affected by adverse weather effects. We understand it is distressing for our people.
- We are rallying to support our colleagues in those areas, thank you to the over 200 who volunteered to go to the areas affected. We have already had 30 deployed via the national Workforce taskforce. It is an ongoing dynamic process based on the needs of our people affected.
- We are at the stage of our change, particularly if you're in enabling services or commissioning, you will see your reporting lines had changed before Christmas to a National executive. We now begin our next phase of changes to simplify to unify.
- The timeline for the delivery of consultation documents is slightly delayed. Starting some business groups, some are more ready than others. The delay was in part caused by the adverse weather effects and a change in Health Minister.
- The Pulse Survey, a third of our kaimahi completed the survey. Alongside National results, you and your team will be getting local results also. We encourage you to reflect on these results. Aim to sort the 'simple stuff' and 'quick wins' soon.
- Main themes of results are the concerns shared over the resources we have available, ensuring leaders are equipped to lead and are given necessary change information, promoting development opportunities, and supporting workplace culture. The other big issue raised was a common understanding of Equity is needed. This is in the DNA of our organisation.
- Priority is recruiting front line resources. We will also ensure working on clear change communication Nationally – all change information will now be one click away from local intranets.
- Diversity and inclusion support nationally including resources for leaders created by the Ministry of Health.
- Introduction to Pete Allsop – office of the CE explains his role and how it fits in to the organisation and how he will work to support our Kaupapa.

All-staff hui 9 March 2022

- New Appts – Warm welcome to Naomi Ferguson to New Board Chair. Chief Data and Digital Officer Leigh Donohue From 1 May 2023, one of the five system shifts being using data and digital to enable us to provide
- Emphasise on behalf of the board that while the chair has changed our priorities to serve our communities has not.
- We are rallying to support our colleagues in those areas, thank you to the over 750 who volunteered to go to the areas affected. We have already had 142 deployed via the national Workforce taskforce. It is an ongoing dynamic process based on the needs of our people affected.
- Nurses pay equity – We have made the bulk of the payment lift for over 34,000 nurses. Thank you for our nursing colleague's patience for this process. Thank you to the payroll teams to get this work done.
- Midwives pay equity – We are committed to working with MIRAS and the government to settle this claim. We met in mediation last week and we are working to find a pathway towards settlement. Reminding you that you are an important part of our team supporting public health.
- Aiming to remediate Holidays Act this year, most of the country done in the next 18 months.
- Election year – timely reminding that our work is funded by taxpayer dollars. We are politically neutral; we need to separate our work from our own personal political views. We work for the Government of the day.
- Union engagement and data accuracy are the key work that is ongoing in terms of the change process so far.
- Two groups being established – National Clinical Governance network, providing insight into clinical safety from across national and regional colleagues. Clinical Leadership Forum, broader and invites Primary and community services to join to create a broad-church of leadership communities.

All-staff hui 23 March

- Celebrating the National Public Health team, following a Measles outbreak which included contact tracing and supporting patients isolating. We are lifting campaigns to support mahi around getting Tamariki in to catch up on vaccinations.
- There are four teams that will be going out to Consultation on 30 March 2022. This change is about bringing our organisation together. We are not quite yet unified in the way we are working together. Given the size, complexity of change and Winter pressures we are aware of the timeliness of this process.
- We are at the stage of our change, particularly if you're in enabling services or commissioning, you will see your reporting lines had changed before Christmas to a National executive. We now begin our next phase of changes to simplify to unify.



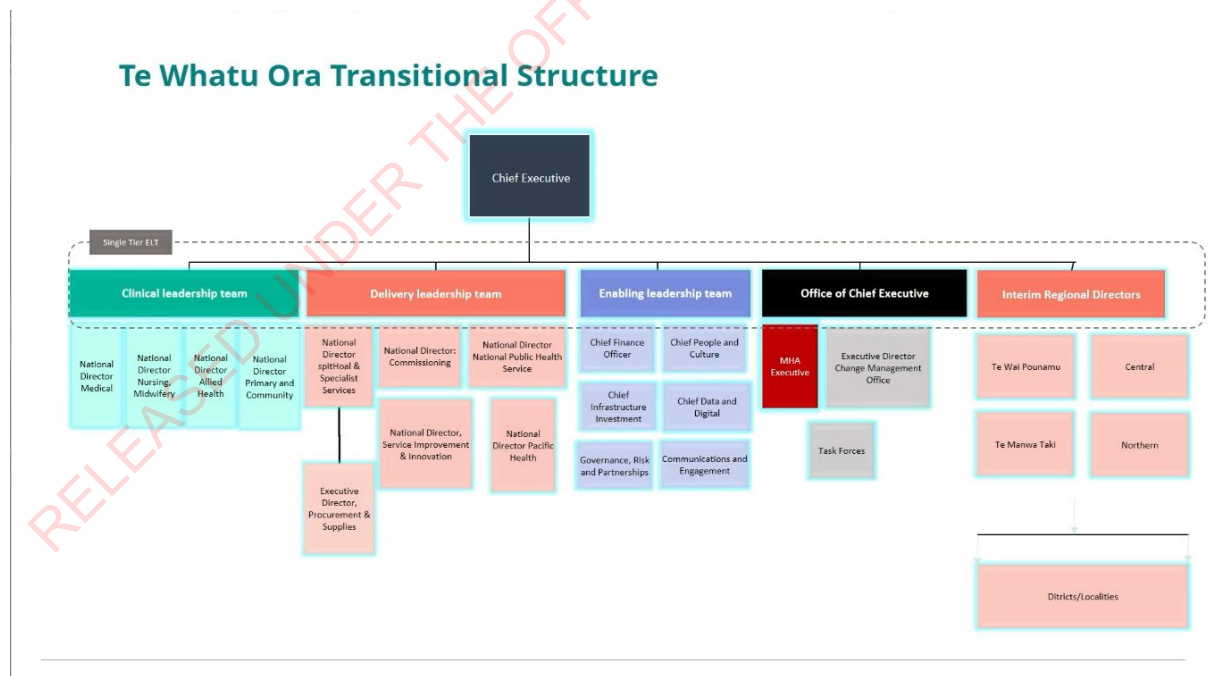
- We are aiming to reduce duplications, with the end aim of doing things once nationally as opposed to 29 times. Green Circle highlights the three business units going first with their consultations.
- Abbe Anderson on Commissioning – Excited about our new proposed team structure. Also apprehensive, we do understand the impact this is going to have and is having on our staff. Consulting on all commissioning group team structure - all tiers at the same time. Greater multi-disciplinary clinical leadership across our team structure.
- Dale Service Bramley on Improvement and Innovation – Newest of the delivery groups. Looking to consolidate the improvement functions across the motu. Developing a code of expectations to support our people and services ensure that consumers and their whanau get the care they need.

- Margie Apa Public Health Service – Seeking innovative ways of our public health campaigns. Emergency response continues to be a focus building on work already started on following COVID and Measles.
- Enabling Functions: Rosalie Percival on Finance – All staff in enabling functions are now reporting to tier two leaders. A big shoutout to the finance teams who have already implemented new finance systems.
- We are inheriting 270 Tier 2 roles across the organisation from the 28 ex agencies, this change will move us to an estimated 110 Tier 2 and 3 roles.
- Four Weeks for consultation, give you as much time as possible. Normal practice is 4 weeks for this feedback. We are here to support you through this change and establishing a career transition centre. Your local People & Culture team will be reaching out.

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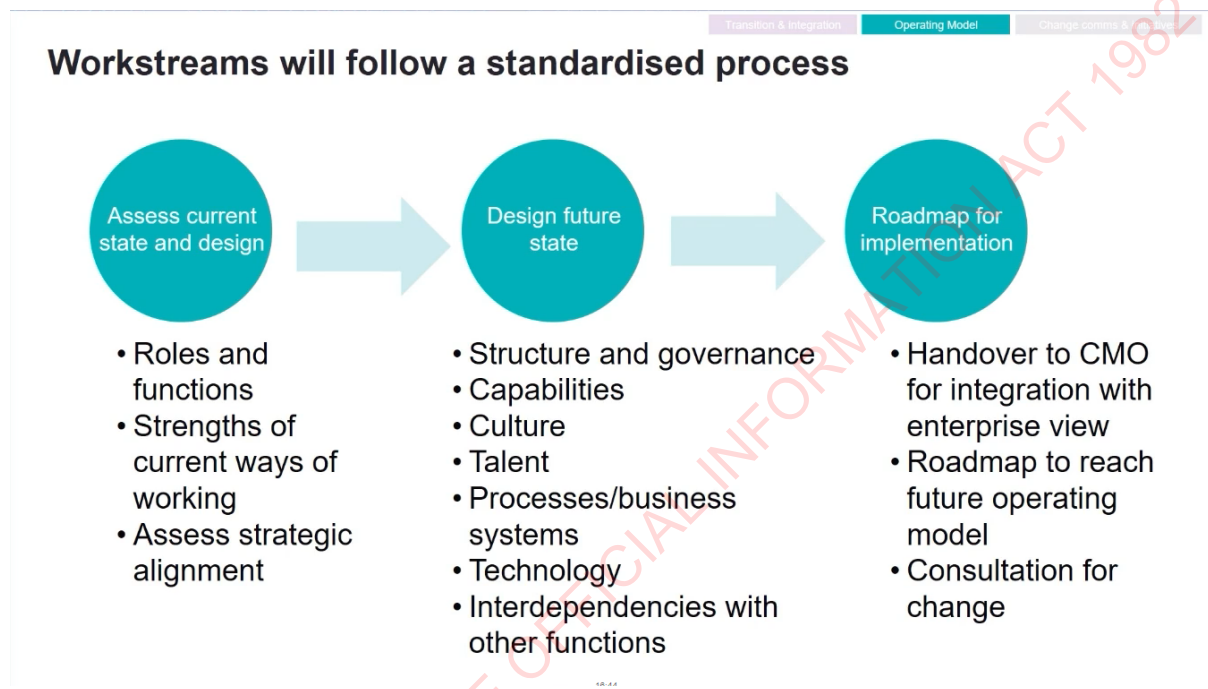
5 Key Shifts

- Our Health workforce will be valued and well trained, ensuring we have enough skilled people to meet future needs – we are mindful that we have a massive workforce shortage in our system at the moment. There are some short-term things we can do better as one unified organisation, so we don't need to do lots of training, placements, and organising where people go as individual districts of regions. We can facilitate a lot of that pipeline work. We are mindful of the winter pressures, especially on those working in acute settings. We have some initiatives to try expand what is available to our communities in primary care settings so that people are getting the advice and help they need before going to a GP practice / ED department.
- The health system will uphold Te Tiriti o Waitangi – Te Aka Whai Ora is not the Iwi partnership of that Te Tiriti partnership. We are a crown entity but will behave in a way that upholds those principles and we will work with Iwi Māori Partnership Boards to make sure that Iwi and the Crown are represented in the reformation of our health system. It will drive the need to make sure our services are focused on equitable outcomes for all people and services reach into those places more readily and it isn't dependent on where you live.
- People and whānau will be supported to stay well and connected to their communities
- Digital services and technology will provide more care in people's homes and communities
- High quality specialist and emergency care will be equitable and accessible to all when it is needed



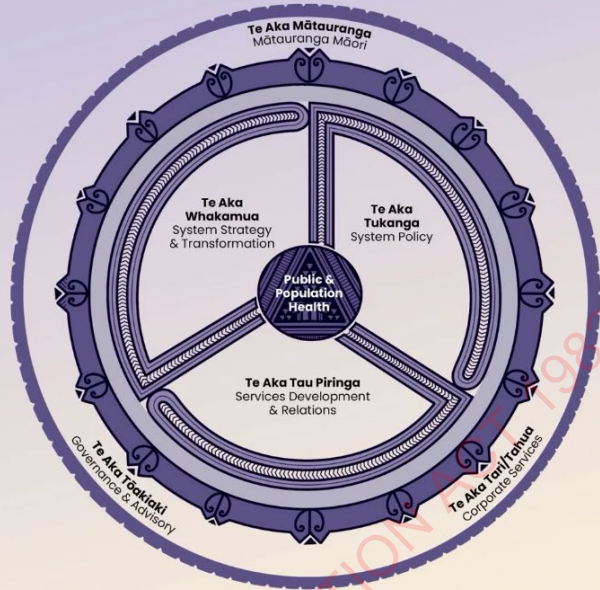
This is where we are sitting as an interim organisation structure. Many of you are working in district health boards. You will see we have put in place some interim national leadership roles – I want to shout out Dr Nick Chamberlain who has been appointed as the permanent National Director for National Public Health Service. All districts are reporting into four regional directors to make sure

you have representatives from each region at the executive leadership team table so that we have regional voice influencing the way we are thinking about standing up services at a national level. We are not going to send out any consultation documents on change until September because we will pace change, so we are not putting unnecessary pressure on our system when our focus right now is to care for you, our staff and our patients. We have a change hub section on our website where you can go to get updates and we have stood up a working group with the aim of talking to colleagues about how we organise ourselves from a hospital specialist perspective. Every function will have some national process where we are inviting you to talk to us and share ideas with each other about how we might organise ourselves differently.

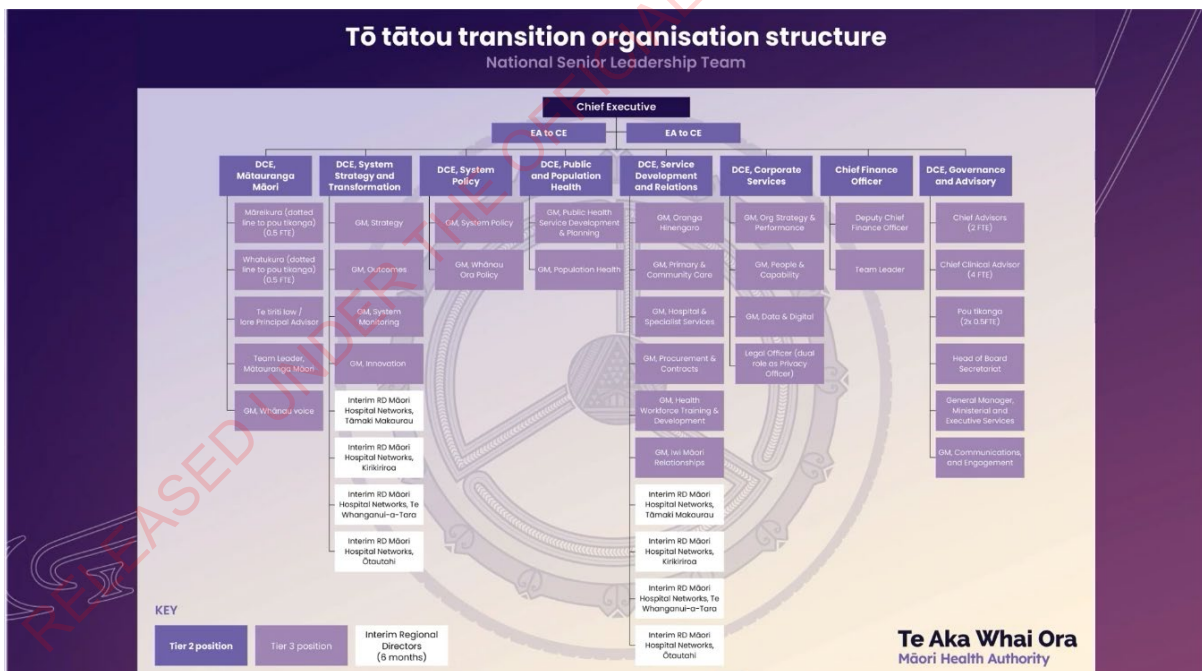


This is laying out the steps that each workstream will go through. The Change Management Office's job is to support all these working groups to make sure that they are stepping through these stages carefully and that we are being consistent in the way that we are thinking about them, and then making sure that we bring it all together so that our operating model is really clear. I do just want to emphasize that we aren't waiting for this process before we change the way we work. We are working consistently nationally in 2 really important areas. One in planned care, and this is picking up advice from the planned care task force who've recommended a set of actions that we can take to ensure that we are prioritizing people who have been waiting too long for their planned care, but also making sure that we take a regional approach to how we bring our planned care waitlists down or look at our demand together. It is important that we take an equity lense to how we prioritise and book people, so that we offer certainty to people who are vulnerable and have high clinical need. The other directive is enabling functions. These are functions and services that are about supporting our front line. Before we leap to filling vacancies or starting new projects, we want to make sure that we are working together to take opportunities to work best as a region.

Tō tātau transition organisational structure



Te Aka Whai Ora’s organisational structure is inclusive and not hierarchical. Service development is the commissioning group – they are the people that will go out and work with the 155 Kaupapa Māori providers that we will directly commission with, and make sure that we try and simplify that whole process by contracting for outcome and the monitoring and reporting we expect.



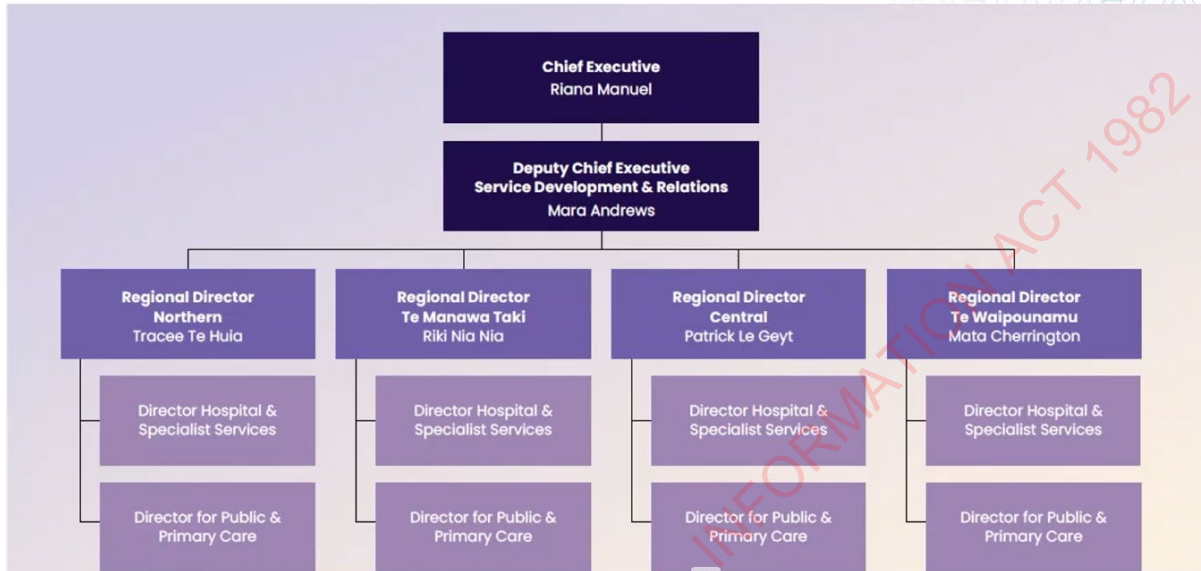
Our Regional Directors (white boxes) are only temporary positions to help assist with the restructure and reform of the system. They will work with the Regional Directors at Te Whatu Ora to help support the initiatives that are happening and to make sure that we drive through those good workforce programmes. We’ve got a lot of work to do in terms of building up our Māori workforce and there will be many different leavers we have to work on to get that. The other tier threes will also be responsible for helping stand up our Iwi Māori Partnership Boards to make sure that they’ve

got the right kind of supports that they need out there to make them successful. The Iwi Māori partnerships will help frame up our localities.

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- The four big ones which have been going for some time now are data and digital, infrastructure, hospital and specialist services, and commissioning.
- The key challenge for us is that while we are developing all these individual components, we make sure they come together as a unified organisation.

Te Aka Whai Ora Regional Directors organisation structure



- We have a lot being done in the workforce development space and one of the key things for us is ensuring that we are increasing the number of Māori in both the clinical and non-clinical spaces throughout the sector
- The Iwi Māori Partnership Boards are continuing to work through their recruitment processes

27 September 2022

- Te Aka Whai Ora appointments
 - Merewaakana Kingi - Deputy Chief Executive for Finance and Support Services
- Te Whatu Ora appointments
 - Dr Dale Bramley – National Director for Improvement & Innovation
 - Rosalie Percival – Chief Financial Officer
 - Abbe Anderson – National Commissioner
 - Markerita Poutasi – National Director for Pacific Health
- Te Whatu Ora has been formed by bringing together 29 different organisations. We've brought together the 7 shared service agencies, 20 District Health Boards (DHBs), many functions transferring from the Ministry of Health and the Health Promotion Agency.
- This is now a single crown entity with a total funding revenue of \$24.6B (budget expenditure set at same level).

Personnel – \$10,262m

Primary and Community Services - \$8,029m

Infrastructure and non-Clinical Services - \$2,750m

Clinical Supplies - \$2,264m

Outsourced Services - \$1,333m

Funding pathway and budget

Government budget: a multi-year approach to funding the health sector.

- Initial two years to 2024
- Then proposed three years – 2024-2027 aligned with a 3-year health plan

Te Whatu Ora has been given a 2-year funding path for 2022/2023 and 2023/2024.

A multi-year funding path gives us a chance to plan and budget differently.

It gives us certainty around funding overall, enables more flexibility and gives us room to change how we do things.

Funding uplift in operating revenue across all parts of Te Whatu Ora from the 2021/2022 year to the current year is \$2.26 billion.

The increase covers:

- Stabilising the system to remove historic deficits
- Funding for cost and demographic pressures
- Funding for government approved new initiatives

The budget approach for 2023/24 will be standard across the organisation.

Consolidation of financial information and processes

The combined different entities are required to report standardised, consolidated financial information from day one.

The Financial Procurement Information Management (FPIM) Oracle system is already in use in pockets across Te Whatu Ora and is now being rolled out to the whole organisation.

The roll out will take time – in the meantime we have a consolidation instance that captures and standardises data from the various financial systems. For example, we have over 3 million different responsibility centre and account code combinations.

Consolidation enables us to look across the sector in a way that can support decision makers.

FPIM Oracle – Unifying and consolidating systems represents an opportunity to reduce duplication and improve value for money.

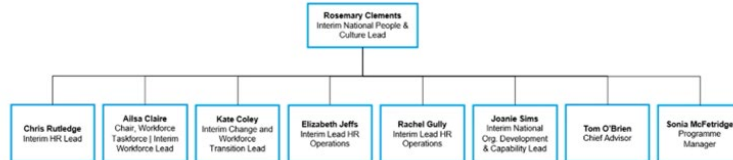
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6 October 2022

- Cyber security is a big focus for our ways of working and boils down to some small things that you can do to keep yourself safe. When you get an email, it helps to run the mouse over the top of the email address, this will show if there is an additional address there.
- Te Aka Whai Ora appointments
 - Juanita Te Kani – Deputy Chief Executive Strategy, Policy, and Monitoring
 - Lucinda Cassin – Clinical Director Oranga Hinengaro
- Staff transfers is something we have been navigating through since February. The first iteration was to transfer staff from Manatu Hauora into Te Aka Whai Ora / Te Whatu Ora.
- When we bought the agencies together, it was then agreed prior to that we would transfer staff from Te Whatu Ora to Te Aka Whai Ora. Our staff affected in this space are our staff from our Māori health directorates.
- The message I really want to send is that we are one national agency, and we are commissioned to do the work for all the people of Aotearoa in one national agency.
- We will have regional parts of that agency and there will also be more localised requirements to make sure that people get the support they need.
- Under the transfers, whether you have a direct reporting line to Te Aka Whai Ora or Te Whatu Ora, please know we are all together on this voyage to Pae Tawhiti
- The first iteration will officially take place on 17 October, so by now our GMs will have had conversations with all their staff to identify how we are going to move through this process. We will have an online hui to commemorate this.
- Rosemary Clements – Interim lead of P&C
- Who are P&C?
 - HR – recruitment, payroll, advice, business partners
 - Workforce – including the Workforce Taskforce
 - Employment relations – union relationships, collective bargaining, pay equity
 - Development – learning and training
 - Culture – including Te Mauri o Rongo
 - Diversity & inclusion
 - Supporting our people through change
 - Health, safety and wellbeing
- This is the interim national team that we've got now, they are interim until we put in a more permanent structure

Our national P&C team

with partnership with Te Aka Whai Ora across all parts of our business



- A few of our key priorities at the moment:
- Workforce – How do we get to a sustainable workforce, where we have the right number of people with the right skills in the right places?
 - Workforce Taskforce: short-, medium-, and long-term initiatives
 - Immigration, education and training, retention
- Culture – How do we transform our culture together to our aspirations – including for equity, Tiriti-centerdness and manaakitanga?
 - Te Mauri o Rongo – our charter for how we work together
 - How do we make them more than just words on the wall?
- Change – How do we unify and simplify how we work so we can best draw on our expertise from across the motu, and work better together as a team of teams?
 - What do we excel at that others can draw on?
 - How do we make it easy to find the opportunities as we shape our future as Te Whatu Ora?
- Individual Employment Agreement (IEA) review process is underway at the moment
- Taking an individualised approach
- Conclude all our reviews by November

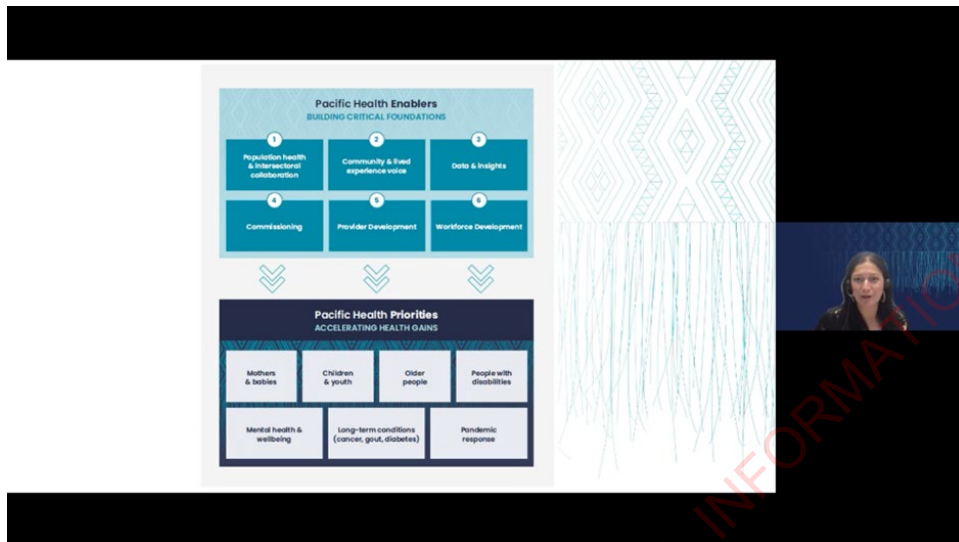
Vaccination Policy

- Health Order now lifted
- Using the existing policies we have in the interim
- Single policy for all staff is in development – working group of experts coming out with a draft policy for consultation with unions and staff
- National Hospital Director will be released in the next couple of days and appointment announcement for the infrastructure roles to come

21 October 2022

- Te Whatu Ora appointments
 - Fionnagh Dougan – National Director Hospital and Specialist Services
 - Jeremy Holman – Chief Infrastructure and Investment Officer
- We have a couple of big consultation documents coming out. The first is the nationalizing of our enabling functions, this paper will be released on 31 October. Then the Procurement and Supply Chain function will be putting out a consultation document for their teams.
- We are looking forward to putting out the ‘What Say You’ application, this will be a way for you to give us your feedback on the consultation documents.
- Te Pae Tata will be launched next Friday
- In relation to media coverage of our acute services, in particular ED, we do want to acknowledge that we’ve got a major challenge in our acute services. ED services are at a crunch point for us, and we are working with primary care to put more resources in place. We’ve also had some challenges across the country where residential facilities have been constrained in availability. We are working on reviewing winter measures we put in place last year so that we can look at what we need to prioritize to support better flow in the system.
- We are mindful of, rather than relieving a system temporarily, we want to build up a strong ecosystem where we have a plan for now and for the future
- Riana Manuel and Abbe Anderson have been on a tour around the Bay of Plenty and the Lakes Region meeting with local iwi and local medical services to get a sense for what is happening on the ground, as well as the struggles they are facing
- It is important for us to have a companion document to Te Pae Tata that contains context about the feedback that we’ve been given by our communities and sector. There is also some really good information about a health needs analysis. This document is called Ola Manuia and should be launched mid-November.
- Pacific Communities have told us they want:
 - A strong emphasis on prevention and the wider determinants of health
 - To be active leaders of their well-being, equipped with what they need to stay well
 - A strong voice in the health system and involvement in design and development of services
 - Access to their data and to know that we are using their health information well
 - Services that are high-quality, seamless, consistent and accessible
 - To be feel confident, safe and respected when accessing services
 - To see themselves in the workforce and know those workers are valued and supported
- Pacific providers and members of the Pacific Health Sector have told us they want:
 - To build on the successes and lessons learnt during COVID
 - Strong emphasis on supporting, growing and increasing the capacity and capability of the Pacific health workforce

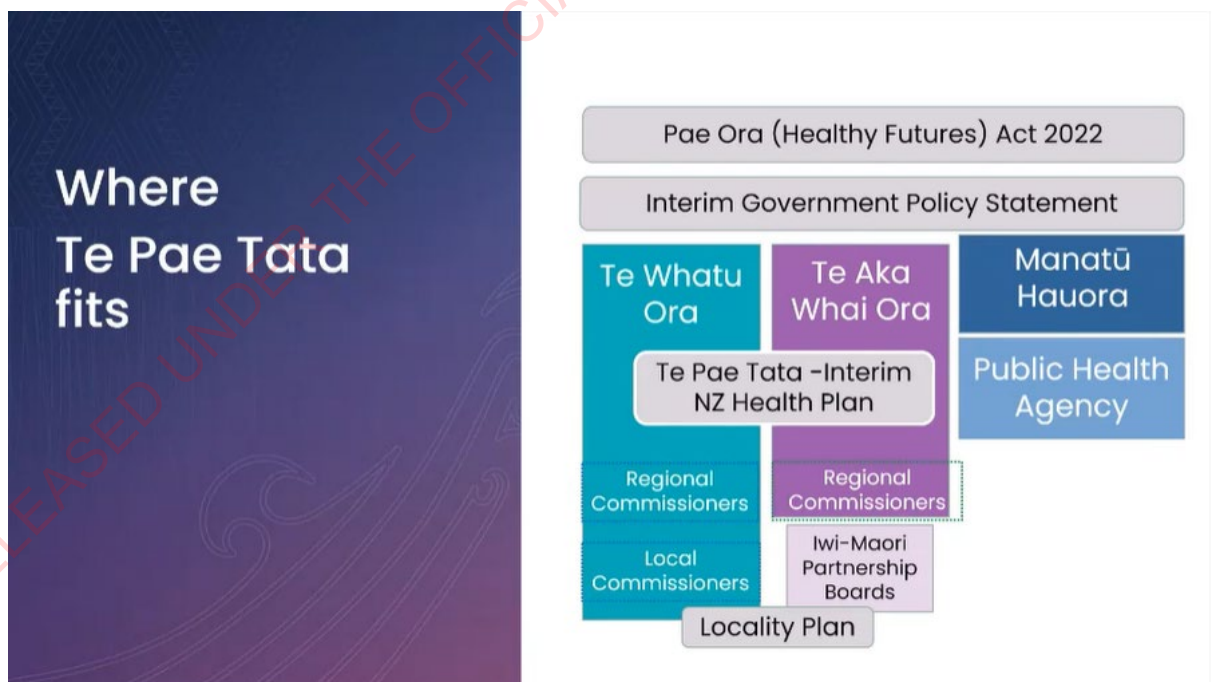
- Support for integrated services and models of care that seamlessly address social and health needs
- Adequate funding and resourcing for Pacific providers
- Commissioning that is high-trust, flexible and outcomes-focused
- Timely access to up-to-date data on Pacific people and communities and support to build their own data infrastructure



- It is important to reflect on the health needs analysis as to why we have picked priority areas. We want to build and strengthen these critical foundations. We will then accelerate the health gains in these areas.

All-staff hui 2 November

- Well done to West Coast and Canterbury who recently launched their Māori Leadership Program. This program helps increase the knowledge and connection to Te Ao Māori. It also fast-tracks them into leadership positions in the health system by equipping them with important parts for the leadership role.
- Shoutout to workforce team for the International Recruitment Centre, they support candidates and their families who are coming from overseas, they aim to offer them consistent care and support and discuss what job opportunities are available.
- Introducing new appointments, Aroha Keremeta-Metcalf (General manager Oranga Hinengaro), Ben Hingston (Director Service commissioning Oranga Hinengaro), Michael Naera (Principal Advisor Suicide Prevention Oranga Hinengaro).



- Building the foundations of our new health system: ensuring sustainability of the health system, delivering equity for all, implementing a population health approach and embedding Te Tiriti.

- **Planned care:** We are looking at reset and restore, which includes looking at the current ways of working, the challenges we face, the opportunities we have and having an outlined roadmap to reduce the waiting lists and build a more resilient system.
- Continuum from access to community and primary care services through outpatient services, diagnostics and then through to therapeutic interventions. There are changes we can make at each of these points to improve the planned care system, however some will require government support.
- Overall, we have looked at the opportunities of the reform and believe; they are considerable to improve access and outcomes, will reduce health inequities, will remove boundaries, will have clinical consistency, better use of resources, appropriate roles for our workforce, and allow us to work smarter not harder- for example, overlap between specialties.
- What do we need to do: we should be working on clinical consistency, interdistrict cooperation, valuing patient time and making small changes locally that make a big difference nationally.
- There are 101 recommendations, this reflects that planned care is across the entire system.
- Taskforce have handed that report over to us for implementation.
- We have a consultation paper coming out, this will talk about a proposal to shift and enable reporting lines to national rather than district. There are 255 teams currently that we are trying to shift to national reporting. We are launching a portal where you can send us your feedback on this.

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All-staff hui 1 December



The graphic features a dark blue background with a light blue gradient on the right side. The title 'Te Aka Whai Ora appointments' is written in a large, white, sans-serif font. Below the title, there are five portrait photos of staff members, each with their name and title in white text. The photos are arranged in two columns: three on the left and two on the right.

Kingi Kiriona
(Ngāti Kahungunu, Ngāti Ruanui, Ngāti Apa)
DCE Mātauranga Māori

Jade Sewell
(Ngāti Maru, Te Arawa, Ngāti Ranginui, Ngāti Ruanui, Ngāti Porou)
DCE - Service Development and Relations

Harley Rogers
(Ngāti Kea, Ngāti Tuara, Ngāti Raukawa ki Waikato)
Director Service Commissioning, Primary & Community Care

Diane Koti
(Ngāti Porou, Ngāti Porou ki Harataunga, Te Whānau ā Apanui, Ngaati Maniapoto, Waikato/Tainui)
General Manager, Localities

Jennifer Hale
(Āwherika ki te Tonga)
Principal Solicitor, Legal Services

- National Kaumātua Service Provider Conference: Shout out to the team as the entire conference was planned by Kaumātua. It was great to take surveys and use the opportunity to speak to Kaumātua.
- The next iteration for staff transfers will take place on Monday 6 December. There will be 59 people in this transfer. They will be doing the same work, just reporting nationally.
- The International Recruitment Centre is up and running. They are one of the first national teams and are establishing one way to support people that are coming into the country. They are doing a great job working closely with Immigration New Zealand.
- Workforce sent offers to 1,300 nursing graduates. 600 people have applied for subsidies to apply for nursing/return to nursing.
- Shoutout to Christchurch Emergency Department team, ICare have launched a blood test that can determine whether someone has had a heart attack.
- Hawkes Bay Hospital Registered Nurses Prescribing: 25 people graduated from the program last week.
- Procurement and Supply team have issued a decision document, this indicates where we are going to defer leadership roles.
- Survey on how teams are working: we are asking staff to complete the survey so we can get feedback and work to make changes.
- Abbe Anderson, National Director of Commissioning says localities and locality prototypes are taking place. We are using a place-based approach to planning, it's about localities coming together and gaining lots of community input. This is so we can determine what the needs are, the priorities and where we need to go from there. Once the plans are developed, we have allocation basis to grant budgets. It is then about the localities deciding what priorities should be implemented.
- We will continue to work closely with prototypes.

All-staff hui 15 December

- New appointments: Egan Bidois - Director Lived Experience, Oranga Hinengaro, Dean Rangihuna - Te Kaihapai Principal Advisor Lived Experience, Oranga Hinengaro, Donna Thorburn - Team Coordinator, Service Development
- Last Monday, we welcomed over 100 staff from Te Whatu Ora to the Te Aka Whai Ora whānau. The last of our transfers included hauora Māori kaimahi that support in functions of tikanga, commissioning, mental health, workforce and strategy. Most of the staff who have transferred will maintain their current reporting lines.
- There will be an announcement about the Iwi-Māori Partnership Boards in the afternoon. The IMPBs (Iwi-Māori Partnership Boards) are an important partner to ensure the representation of local Māori perspectives on health matters within the IMPB rohe.
- The nurses pay equity application has been successful. Most nurses will receive a 14% pay increase. We have 20 payroll systems so a bit of time to organise, may take 6-8 weeks.
- With regards to vaccination consultation, we're developing a single vaccination policy for our employees. They are currently different across many of our districts. Consultation opens next week and runs into the New Year.
- Pulse Survey: More than 25,000 have completed the survey.
- We will be releasing results on 'unify to simplify' today in a webinar, we have spoken to the people whose roles are affected.
- Jeremy Holman has started as Chief Infrastructure and Investment Officer.
- Delivering Pae Ora: We are almost 6 months in and have been doing lots of the discovery work for operational model etc.
- We're working on our next set of priorities and will share that early next week. We will announce the decisions on 'unify to simplify' and this will allow us work more collaboratively.
- We now have three out of four Regional Directors for HSS confirmed (Hospital Specialist Services).

Dr Nick Chamberlain's update: National Public Health Service (NPHS) National Director

NPBS Kaupapa

Manaakitia ngā whānau me ngā hapori mō te pae ora te take
Enable whānau and communities to lead lives of wellness

We deliver national, regional and local equity led public health services, underpinned by Te Tiriti, to achieve pae ora/healthy futures.

In honouring Te Tiriti o Waitangi, we create an environment for mana whakahaere, mana motuhake, mana tangata and mana Māori.

Our workforce reflects the diversity of people across Aotearoa so whoever they are and wherever they are, they can see themselves.

Through mahi tahi, our highly trained, trusted, competent, culturally safe and knowledgeable kaimahi support mauri ora, whānau ora and wai ora.



Our kotahitanga/unity with community providers and trusted partners across sectors enables a holistic hauora model encompassing all the determinants of health.

Together we are bold in challenging the status quo; supported and empowered to be creative, innovative, flexible and adaptive in how we work.

We anticipate, predict, identify and address issues, embrace opportunities, and continually improve delivery of health protection, prevention and promotion services.

NPBS Organisational Chart



- Te Pae Tata actions NPBS is leading- The 5 big priorities are immunisation, screening, Te Tiriti dynamic, kaimahi wellbeing, commercial determinants of health, tobacco, alcohol and food.
- Measles: The World Health Organisation (WHO) and Centres for Disease Control (CDC) have warned that falling vaccination rates and reduced surveillance during the COVID-19 pandemic have created an 'imminent threat' of measles spreading in every region of the world.
- Strengthening our protection function by designing new models:

Designing new models for intelligence and protection



- We are continuing our COVID-19 response, there has been 7,500 new cases and a significant increase in surge. We are expecting more cases, so we need to be prepared and have a response for future surges as well as this one. We are working with providers to keep managing this. Vaccination is our biggest protection.
- Human Papilloma Virus (HPV) Primary screening and self-testing: The new testing will look for HPV. This is different from current testing which looks for cell changes. From July 2023, there will be the option to self-test, however this will not be the only option available.
- The Aotearoa Immunisation Register (AIR) will replace National Immunisation Register (NIR) and supersede the Covid Immunisation Register (CIR).

The Aotearoa Immunisation Register (AIR)

AIR|What is the AIR?
The Aotearoa Immunisation Register (AIR) will replace the National Immunisation Register (NIR) and supersede the Covid Immunisation Register (CIR). Both systems have and continue to inform the design and build of the AIR.

AIR|Why do we need the AIR?

- Over their lifetime, New Zealanders can receive vaccinations from a range of health providers. Currently, health providers can't always get a full picture of a person's vaccination history to help them, and the consumer make the best health decisions.
- The AIR will provide an accurate understanding of population immunisation coverage rates. This means programmes can be planned better to support populations with the lowest immunisation rates.

AIR|What has been achieved to date?

326
Engagements

Throughout the 2022 flu season, providers were encouraged to record flu vaccinations using a new form on the CIR. Over 40% of vaccinations recorded were recorded using the new form.


476
Current Users

The 'AIR Force' (former NIR Admin) have been onboarded to a new AIR Admin system to support onboarding, data quality management and user issues.

44
AIR Admin Onboarded

Currently the AIR is only recording MMR, Tdap and Meningococcal A & B vaccines for adults, we look forward to adding more including flu through 2023.

AIR|Want to know more?
We have also launched an AIR webpage on the Te Whatu Ora website, this can be accessed at the following link and will be the place to get the latest AIR updates - [The Aotearoa Immunisation Register \(AIR\) - Te Whatu Ora - Health New Zealand](#)



518,845
Flu Vaccines Recorded

The AIR's new Vaccinator portal is now live. Since completing the pilot with Māori and Pacific providers, Pharmacy have begun to onboard to replace ImmuniseNow. Currently 285 facility managers and 187 vaccinators are live in the system with 233 vaccinations recorded.

- Digital Investment: Getting our staff onto a common desktop and full communicable disease management/ surveillance team.

6 April 2023 All-staff hui

Summary of the key topics covered:

- Riana Manuel opened with a mihi
- Margie Apa thanked immunisation teams
- Acknowledged Andrew Slater new People and Culture Officer joining – day four
- Pulse Survey results should be with teams, encouraged to discuss with managers
- Te Aka Whai Ora colleagues and teams are part of Te Whatu Ora services and delivery so they should have access to everything. Work in partnership

Change updates:

- 2,000+ registered on What Say You to give feedback
- Over 400 comments so far
- Hospital and Specialist Services change timeframe had a TBC
- We weren't going to impact frontline/patient facing roles and teams, so we don't disrupt care for our patients
- Confirm we're not making changes to HSS except for a couple areas (Fionnagh talk to later)
- We will put in place National Clinical Leadership roles and processes needed and National Clinical Governance Group
- Te Whatu Ora is a large part of implementing the Government reforms. Those goals are to achieve five things, as can be seen on the slide below along with how we intend to achieve them.

The slide content is as follows:

The reform goals....	How do we achieve this? Through 5 system shifts....
<ul style="list-style-type: none">• Partnership• Equity• Person and whanau centred care• Sustainability• Quality	<ul style="list-style-type: none">• The system will reinforce Te Tiriti Principles• All people will be able to access a comprehensive range of Support in their local communities to stay well• Everyone will have access to high quality emergency and specialist care when they need it• Digital Services will provide more New Zealanders with the care they need in their homes and local communities• Health and care workers will be valued and well trained for the future health system

The video player overlay shows a woman speaking, with a timestamp of 05:43 and various control icons at the bottom.

- The changes we're going through are to enable us to achieve those goals. Having brought 29 entities together what are the roles, nationally and regionally, that we can bring together to simplify and reduce duplication?
- Margie acknowledged that change is a challenging process for many of us
- We are not disestablishing 1,600 roles in this process as reported by the media. They may be impacted due to changes in reporting lines/teams

- We can move to make permanent appointments to roles that have currently been held by interim appointments

Fionnagh Dougan - National Director, Hospital & Specialist Services

- We have determined that there are a couple of areas where we need to provide clarity about what the future looks like. We are consulting on the formation of the team that sits under two roles; Strategy Planning and Purchasing and the National Delivery Group.
- In the next couple of weeks potential structures will be coming out. We are speaking to Unions and aim to go to consultation on 27 April
- Local leadership roles to replace current District Director roles are going to be consulted on
- We want to create certainty, so every District know who their leader is
- Procurement and Supply Chain consultation will be released 13 April

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20 April 2023 All-staff hui

Summary of the key topics covered:

- Te Aka Whai Ora new appointments: Carlton Irving, Chief Clinical Officer, Allied Health and Heather Muriwai, Chief Clinical Officer, Midwifery
- For those that have transferred from Te Whatu Ora into Te Aka Whai Ora we have been undergoing a consultation process. That was completed last week so the team and ELT are collating feedback and will provide consultation documents in due course.
- Te Pitomata Grants launched

The screenshot shows a video player interface. On the left is a purple slide titled "Te Pitomata The Power of Potential" with a photo of a woman and the text "Applications now open". On the right is a white slide titled "Te Pitomata Grants" with the following text: "Grants will be awarded to healthcare students who meet the criteria - eligible students who are currently enrolled in a tertiary programme of study can apply under five hauora categories:" followed by a bulleted list: "• Midwifery", "• Allied Health, Scientific and Technical (such as Pharmacy, Oral Health Therapy, Anaesthetic Tech, Radiation Therapy)", "• Nursing", "• Medical (such as Dentistry, General Practice)", "• Corporate (such as Management, Human resources, Accountancy)". Below the list, it says "Applications are now open until 5pm, 28 April - visit our website for more information and to apply." The Te Aka Whai Ora logo is at the bottom right. A video feed of a man is visible in the bottom right corner of the player.

- Iwi Māori Partnership Boards have had 3 regional hui. The purpose of the hui is to establish the local need and ensure there are pathways in place to serve those needs. In the next few weeks there are the final 2 hui to be undertaken

The screenshot shows a video player interface. On the left is a dark blue slide titled "Updates". On the right is a white slide with a bulleted list: "• **Introducing Andrew Slater, Chief People Officer**", "• **Vaccinations**" (with sub-bullet "• Flu and COVID19 Bivalent available now"), "• **Pulse Survey Actions**", "• **Simplify to Unify**" (with sub-bullets: "• 28th April Finance, Service Improvement & Innovation, National Public Health Service", "• 5th May Commissioning", "• Underway last week – Pacific, Procurement & Supply, Data & Digital, Office of the Chief Executive"). A video feed of a woman is visible in the bottom right corner of the player.

- Introducing Andrew Slater, Chief People Officer. One of the systems' shifts was to ensure we value our workforce. We want to grow and develop our workforce to meet the needs of our community and whānau.
- Andrew spoke about leading Payroll, Wellbeing, Health and Safety, HR, and Communications. He wants to be part of making this the 'best little health system in the world'
- Andrew wants to make sure our organisation is a great place to work, and that staff have the tools they need to do their job
- Andrew is looking forward to meeting the teams across the motu
- Next hui will have special agenda focused on winter
- Margie is getting a fortnightly update on how we are progressing with the Pulse Survey. 2,669 actions identified across the country, that include 307 'quick wins' that we can do.
- Important dates for change consultations shared (see slide above)
- Over 13,500 have already registered on What Say You to give feedback. We have already received about 2,600 feedback submissions
- Consultations were based on many months of workshops and lots of data. However, data was drawn from more than 20 information systems so we will get things wrong. Margie apologises to those for whom we have made mistakes.
- It is a time of change which can create uncertainty, we appreciate that and please reach out to the services available to you e.g. EAP, Career Coaches.
- We have had media coverage over the week about workforce planning. The Workforce Taskforce was set up last year to help us while we were pulling together the national team. That taskforce is handing over their report, but Margie does not have it yet. This report is not the only source of advice we have for workforce planning.
- We know we have shortages. We need more than 600 Doctors, SMOs, over 3,000 Nurses, 300 Midwives and over 1,000 Allied Health workers in the country.
- While we know workforce takes time to grow, we need to do more. We are planning initiatives to not just retain staff but also grow staff into roles.

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5 May 2023 All-staff hui

Summary of the key topics covered:

Naomi Ferguson – Interim Chair of the Board

- Offered thanks on behalf of the board
- We spend a lot of time thinking about where we're at as an organisation, the importance of what we do, and in all those conversations we take into account how our staff are feeling and how we can support you.
- We know there are inequities, inconsistencies and things that don't work well, pressures. As a board we're committed to working our way through those and making a difference. We can in time, tackle some of these big issues.
- Board is keen to hear what comes out from the consultations
- Board committed to supporting Andrew, Margie and the team to ensure the basics are fixed. E.g. microwaves in staff kitchens
- Thanks for engagement with Pulse survey, you gave us lots of things to think about
- Growing concern about the level of aggression (verbal or physical) that many are facing every day. We spoke to colleagues at Middlemore and it was good to hear that the training rolling out there is helping people feel better supported. This is something that the board and leadership team want to continue to think about. How can we signal that aggression simply isn't acceptable and support staff to deal with patients/customers when they are displaying aggression.
- We wouldn't deliver the health system that we do every day for New Zealanders without you.
- Thank you to midwives as today is International Midwives Day

Selah Hart, Deputy Chief Executive Public and Population Health Te Aka Whai Ora

- Thank you to Smokefree practitioners and clinical staff who support people quitting tobacco – World Smokefree May
- Te Aka Whai Ora is going through staff consultations and transfers from Te Whatu Ora into Te Aka Whai Ora
- We had planned on releasing the decision document earlier this week but due to feedback from consultation we now need to revise our next steps, go back to the drawing board and come up with some solution-focused approaches.
- Kaiāwhina Workforce – \$20.6 million announced in funding for kaiāwhina roles in newly introduced comprehensive care teams. Including kaiāwhina care coordinators, physiotherapists, pharmacists and paramedics in some rural areas.

Margie Apa – Chief Executive Te Whatu Ora

- Midwifery workforce has the largest proportion of vacancies in our service. We appreciate the strain this creates and thank you for your hard work.
- Margie met with the midwifery leadership group yesterday and it was great to hear about new initiatives and mahi going on.
- On change we have received over 10,000 pieces of feedback. Two consultations closed last week: Finance and Service Improvement and Innovation. National Public Health Service and Commissioning extended, and they close today.

- Acknowledge Union colleagues who have provided feedback.
- We genuinely want to read through all feedback, carefully consider and review it. It's important that we take our time to do that. People have offered suggestions for improvement which may mean we have to come back and reconsult on specific aspects, in a much shorter timeframe.
- We want to make sure our data is correct. Many have been working off incomplete information. Before we make decisions, we do want to get that data right. We want to give certainty as soon as possible but we need to take the time to get it right.
- We will talk to teams about moving some parts of the change earlier, we will make those timetables available on local intranets.
- We are advertising for Chief Clinical Officer and four National Professional Leaders: Medical, Midwifery, Nursing and Allied Health
- On Hospital and Specialist Services Fionnagh Dougan, National Director will be speaking next week about the next stage of development
- We are not making changes to clinical teams or frontline delivery. What may need to change is how we work together regionally and nationally
- We are launching Clinical Networks – a great opportunity to problem solve at a national level.
- Minister Verrall has announced Winter planning. This is the first opportunity we've had to do this at a national level and put in resources for Winter.

Press **Esc** to exit full screen

Winter preparedness

- Reducing and mitigating system pressures in **primary and community** settings
- Preventing **hospital admission** and ensuring **timely discharge**
- Reducing acute pressures by improving **acute flow**
- Maintaining **planned care delivery** under system pressure
- Increasing **immunisation** to protect from severe illness and hospitalisation
- Addressing workforce pressures and **supporting staff**
- Reducing system pressure through **communications and behaviour change**
- Reducing the impact of **COVID-19** on system pressure

To Whānau Ora

Start with news on Nurses pay settlement

- The end of last year the Employment Relations Authority has approved an application from Te Whatu Ora for mediation to settle nurses' pay equity rates and backpay.
- Te Whatu Ora, NZNO and PSA agree the current litigation process is a long way from resolution and there is opportunity to get a faster resolution on both matters using mediation directed by the ERA.
- The New Zealand Nurses Organisation (NZNO) and Public Service Association (PSA) have agreed to this mediation.
- The mediation process is confidential, we can't provide further comment at this time.
- What I can say is along with NZNO and PSA we are committed to resolution, moving past this and working together to address the workforce shortages and health and safety issues that need collective attention.
- For our nursing kaimahi, thank you for your ongoing contribution, and deep commitment, to our health system and the health needs of our whānau and communities.
- I will continue to keep you updated as appropriate.

Budget

Last week, the Minister of Health Dr Ayesha Verrall announced the Wellbeing Budget 2023. Highlights include;

- More than \$1 billion to increase health workforce pay rates and boost staff numbers
- \$20 million to increase COVID-19 immunisation and screening for Māori and Pacific peoples.
- \$864 million for Whaikaha – Ministry of Disabled People
- \$63 million to allow an additional 500 nurses to be employed
- \$99 million towards the coming winter.
- \$118 million to help reduce waiting lists by improving patient flow
- \$400 million capital plus \$51 million for operating costs to create three multi-institution research hubs
- Scrapping the \$5 co-payment for prescriptions from July this year.

Change Updates

- You may have seen media reports about change decisions happening tomorrow – that is not correct
- You gave a great deal of thoughtful and considered feedback and we need to ensure this is considered and factored into what happens next
- Business units are working through timelines for re-consultation where your feedback showed proposals needed to be re-thought and changes made
- Proposals where there was general agreement and support will progress to final decisions
- We are working with the business units and unions on reviewing all of the feedback received to ensure that we have a shared understanding
- We will share the overall timelines with you as soon as these have been developed, and approved by ELT
- In most cases re-consultation will take a minimum of 10 days but it will depend on the depth and scale of the re-consultation.

- The HR teams within People and Communications are working hard to ensure all of the people data is as accurate and up to date as possible
- We are also ensuring consistency across role descriptions and change processes, so people have the same experience regardless of which business unit they work for
- We are developing an expression of interest process for people whose roles will be disestablished
- There were a lot of questions coming through around next steps, and process matters. We are reviewing all of them and will develop a new set of FAQs which will be published alongside re-consultation and decisions documents.

Infrastructure and Investment consultation launching

- Infrastructure and Investment is launching its consultation tomorrow (1 June)
- Proposed changes would bring together all the elements responsible for the delivery and management of infrastructure, facilities, and property, into a single Infrastructure and Investment Group (IIG).
- The proposal focuses on a regional and national matrix
- It applies to T3 & T4 roles only with the intention on clarifying specialisations while bringing together all our current I&I functions under one of the regional leads
- It is also aimed at understanding who are our current I&I whanau out in the motu and ensuring we are able to get our arms around them all
- There will be future proposals as we move through the proposed structure

Clinical Networks (Riana and Margie)

- Last time talked briefly about Clinical Networks
- Now formally launched last week at To Toka Tumai Auckland
- These national clinical networks are a key part of Te Pae Tata and the health reforms.
- They're about supporting our clinicians to lead and drive change by developing national standards and models of care.
- Partnership with Te Aka Whai Ora.
- They will support the delivery of consistent service quality and outcomes.
- Increase access and improve equity so our communities can access the care they need wherever they are in Aotearoa.
- Next steps for clinical Networks are to invite expressions of interest for co-leads of the networks. We'll be starting with cardiac, stroke, renal and trauma.
- If you have more questions about Clinical Networks join Jo Gibbs and Pete Watson for the Breakout session on Clinical Networks.

Workforce updates

Tackling staff shortages

- Over the past 6 months we've been doing lots of work to tackle staff shortages, including:
 - Investing in the GP pathway, such as increasing the number of GPs trained each year to 300 by 2026.
 - Creating more educational pathways, such as establishing a post-graduate diploma in cardiac sonography at the University of Auckland
 - Supporting our nursing professionals, such as doubling the number of nurse practitioner training places from 50 to 80 in the 2023 academic year, and to 100 in 2024.

Changes to Immigration NZ's Green List with new Tier 1 Health Roles

- Additional Health Roles have been added to Tier 1 of Immigration New Zealand's Green List.
- 32 new health roles will be added to the straight to residence pathway (Tier 1) of the list – including speech language therapist, dieticians and nurse practitioner among others.
- 8 roles currently on the work to residence pathway (Tier 2) will be upgraded to Tier 1 – these include anaesthetic technicians, occupational therapists and sonographers.
- This change allows us to attract new workers from offshore to help address some of our immediate workforce pressures and retain onshore workers by giving them a simplified direct pathway to permanently extending their stay in New Zealand.

Student placement system project completes initial engagement

- We recently heard from over 400 people involved in organising or delivering student clinical placements, through surveys, submissions and focus groups covering 16 health professions.
- The findings are being used to shape detailed design requirements for a nationwide system, including a proposed digital tool to support more equitable, planned and joined-up coordination of placements.

2023 Voluntary Bonding Scheme registrations making records

- The scheme's 2023 intake registration period closed 2nd April.
- 488 registrations were received.
- 18.6 percent were Māori (91), the second highest number of Māori registrants within any intake, just behind the record 2021 intake (94).
- 4.1 percent were Pacific peoples (69), the highest number and percentage within any intake of the Scheme and a 25% increase on last year (55).
- the highest number of mental health nurses within any intake of the Scheme (204) and a 9.6% increase on 2022.
- 17 Māori midwives (and 6 Pacific midwives (8.5%).
- 30 rural and regional general practice trainees, 5 of whom are Māori (16.7%),

Scarce Skills International Recruitment Campaigns

- A refreshed international campaigns for 5 health workforces has recently been launched – Radiation Therapists, Anaesthetic Technicians, Cardiac Sonographers, RMOs and Radiation Oncologists.
- Recruitment events are happening around the motu

Mental Health and Addictions (MH&A) International Recruitment Pilot

- The International Recruitment Centre is piloting a programme to match mental health and addiction candidates to roles in both Te Whatu Ora and NGO service providers.

Smoke Free Campaign (*slide with images*)

- To coincide with World Smokefree Day, Te Aka Whai Ora and Te Whatu ora launched a new quit smoking campaign.
- The campaign helps support the implementation of the Smokefree 2025 Action Plan and Budget 2021; encouraging more quit attempts, with a focus on Māori and Pacific smokers.

- it has been informed by a collaborative talanoa co-design process – with Māori and Pacific voices steering the mahi.
- Breakfree to Smokefree is a kaupapa that makes smokers and their wider whānau feel seen, heard and supported in the journey to quit.
- Breakfree to Smokefree takes a provocative and disruptive approach to reach and impact the remaining pockets of smokers who have not yet been influenced to quit. As well as challenging the usual beliefs about smoking and quitting, this campaign will introduce new themes such as the history of tobacco in Aotearoa and the overarching reasons why people smoke – as well as introducing the promise of a smokefree generation.
- Content will roll out in stages that align to the legislative changes that are being introduced in support of the Smokefree Aotearoa 2025 goal. The campaign has launched with a radio advertisement, digital banner, and social media posts with TV advertisements and On Demand video content will follow in late July.
- More information - Smokefree.org.nz/breakfreetosmokefree

Highlights from visits across the motu

- **Hawkes Bay visit:** acknowledge the team, workforce innovation allied health cadets arrangement with MSD who will then move on to
- Opening of the new mental health facilities at **Christchurch's Hillmorton Hospital campus** with the Minister of Health Dr Ayesha Verrall.
- The work at Hillmorton is one of 16 projects under Te Whatu Ora's Mental Health Infrastructure Programme, which has been allocated \$836.1 million in Government funding.
- The two new buildings provide child, adolescent and family inpatient services and services for people with eating disorders. As well as adult mental health inpatient services.
- Hillmorton also has a new energy centre, using sustainable technology.
- Helping us to meet the Government's carbon neutral targets and contributes to improving air quality in Ōtautahi/ Christchurch.
- **Sustainability** – advancing on climate changes this month – Minister announced the EECA funding change from coal to steam.
- This significant announcement means that, together with the \$70m already committed by Te Whatu Ora, a total of \$130 million will be invested in key sustainability projects in our nation's hospitals and health facilities.
- These projects will include the replacement of the 11 last remaining coal boilers powering our hospitals with more sustainable energy sources, a considerable energy transition programme that encompasses the conversion of natural gas boilers, the implementation of LED lighting and the electrification of Te Whatu Ora's vehicle fleet, plus other energy efficiency and fossil fuel reduction initiatives.
- Our expectation is that this mahi will have been completed by June 2025, resulting in a reduction in greenhouse emissions of more than 54,000 tonnes every year going forward.

Loafers Lodge acknowledgement

- Our thoughts remain with the people and whanau who were affected by the tragic fire that occurred at Loafers Lodge in Newtown– particularly the four Wellington Regional Hospital staff who lived at the Lodge.
- Thank you to the teams who provide support to colleagues, communities and whanau

- I want to acknowledge those of you who were working at the hospital when the fire occurred, and who may have witnessed some distressing scenes as the incident unfolded.
- Thank you to those involved in the Coronial process
- Although not the lead agency for this incident, it did have quite an impact on services.
- The Incident Management Team and their services worked hard to try to minimise the effect on patients and ensure that services – particularly for those needing urgent and emergency care – continued to be delivered.

Riana

Staff reassignments final embedding

Our journey to onboard staff into Te Aka Whai Ora has been a long one

1. **Phase 1** of the transfer of the workforce from Te Whatu Ora to Te Aka Whai Ora was completed in December 2022.
2. This was to support the newly formed entities of Te Aka Whai Ora and Te Whatu Ora as the organisations realigned our functions.
3. It was a 'lift and shift' operation to ensure the functions of Te Aka Whai Ora were supported as the next phase planning was made
4. **Phase 2** was more specific and aimed to embed staff into positions and teams where their skills, experience and work history are best placed to have the most impact
5. To better effect this change we used the insights gathered from our kanohi-ki-tekanohi kōrero about mapping options, interests and kaimahi aspirations.
6. From the insights, feedback and kōrero Te Aka Whai Ora have released our Consultation Decision Document
7. We are working to embed staff
8. Our final piece of this mahi will be four regional pōwhiri which is separate to the pōwhiri we share with Te Whatu Ora

Training wananga that supports mātauranga Māori

9. Te Aka Whai Ora has contracted Te Kurahuna Ltd to provide specialist mātauranga Māori training to the Māori health workforce.
10. Te Kurahuna specialises in training, and the ongoing professional and personal development of the Mataora workforce.

They provide Mahi a Atua wānanga which reach across the community, recognising that anyone has the potential to be an agent of change

11. Six-week blocks options for training are in-person wānanga and online
12. More on the wānanga and training options will be socialised in our respective pānui

29 June 2023

Te Mauri o Rongo Health Charter

- We're engaging on the Health Charter.
- The charter provides, principles, values and beliefs to support all health professionals in the way we do our work.
- Unions have been very active and supportive
- Still time to have your say – you can find info on the Charter website – link in the Q and A.

Holiday Act

- We are working hard to remedy payments to staff to comply with the Holidays Act
- Impacted staff at Te Toka Tumai Auckland will be the first group to receive remediation payments on 28 July.
- This will be followed by other districts over the coming months, through into 2024.
- There will be a national portal going live in August for former employees going back to 1 May 2010. We'll tell you more about this closer to the time.
- Please continue to share updates with your teams – thanks for your support.

Change update

- We know dates have changed while we have been consulting.
- I know the changes are taking longer than first indicated. This has been to ensure:
 - we work with your union representatives and ensure they have enough time to read information and advocate on your behalf
 - we are checking thousands of names in the HR systems to ensure everyone's information is correct
 - we must look at the impact of every decision on every staff member
 - all decisions need to be costed
 - we are designing a process that ensures people whose roles are disestablished are given proper support and help.
- Please continue to communicate with your teams that we are working as fast as we can. Ultimately, we want to get this correct and spend time considering your feedback and, unfortunately, this is not a speedy process.

He Ara Tapatahi (SHEF)

- *He Ara Tapatahi is the new name for our Strategic Health Engagement forum with unions*
- The name He Ara Tapatahi has been gifted by Te Aka Whai Ora and translates to 'The Interwoven Paths'. we are all travelling on various roads that eventually join, to bring us together for a common purpose.
- Some of the things agreed at last meeting:
 - Establish the Strategic Health and Safety Tripartite Framework – made up of Te Whatu Ora reps, and all Unions. It is an oversight group, that will aim to add value to the H&S system for our employed health workers
 - Establish a group to engage with funded sector employers. Attendees will include Te Whatu Ora, Te Aka Whai Ora, and CTU Union reps.
 - Establish the Workforce Plan Sub-group– to monitor progress on the Workforce plan.

Equity

- A lot of media attention
- Concern about inequities in health outcomes
- Under our Pae Ora legislation, we are required to actively pursue health equity,
- Key health statistics show that some groups of people are not doing as well as others, particularly Māori, Pacific, people with disabilities and those from high deprivation and rural areas. Large differences exist in health outcomes, including life expectancy.
- As long as this is the case we should be doing what we can to remove these differences in health.
- Achieving health equity is a long-term challenge and one that inspires me in my role and I know many of you.
- I know there are a very diverse range of activities and initiatives across Te Whatu Ora to push us in the right direction; my thanks to everyone involved for your support of this important work.
- Share MOH definition of equity (slide)
- One of our Q and A breakouts today is on equity.

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 **Shout outs**

The Tairāwhiti team treated the community to some nourishing soup along with a good kōrero on staying well this winter.

Huge thanks to the **response team** of the Auckland shooting.

Kai pai to **Dr Rob Burrell, Tim Emerson & Victoria Blake** for being recognised at University of Otago Climate Conference.

The Holiday Act Team and payroll team at Te Toka Tumai are the first to remediate Holiday Act payments!

 **Reminders**

All **change document timelines** are available on your local intranet. There's support set up for permanent disestablished roles through the **Career Transition Centre**.

Q&A key themes (27.41m)

- Financial savings
- Encouraging young people into the workforce
- New localities
- Developing equitable health solutions

Watch via video link on intranet

Breakout session: Workforce plan

The workforce plan was released last month and aims to show us our current gaps and help us with our annual and long-term planning. The goal is to create a well-staffed and sustainable health workforce.

The workforce plan for this year is now being implemented.

Main Session



Margie Apa, CEO
Te Whatu Ora



Riana Manuel, CEO
Te Aka Wha Ora

Sustainability: (7.07m) We're taking a national approach to make faster progress and report how we are doing against targets set in the Carbon Neutral Government Programme.

Nurses Pay Equity: (8.45m) More than 30,000 of our nurses will receive a pay increase and one-off payment after accepting the pay equity settlement. We appreciate the commitment of our nurses and this is a great step in recognising that.

Change update: (12.18m) We've had three decision documents released and we have started the People and Communications consultation. For more information on timelines please check your local intranet. The next decision documents to be released will be:

- Procurement & Supply Chain - 8 Aug
- Service Improvement Innovation Part 2 - 10 Aug
- Hospital & Specialist Services - 11 Aug
- National Public Health Services and Pacific - 14 Aug
- Data & Digital, Office of CEO and Infrastructure & Investment - end of August

Te Whiri Kaha / Māori Clinical Forum: (18.32m) Te Aka Whai Ora is establishing Te Whiri Kaha to connect Māori clinicians from across the health system to provide advice on the complex challenges in healthcare sector.

Health Workforce Plan: (22.17m) For Te Aka Whai Ora this is an important step towards mobilising growth within our Māori workforce and ensuring Māori have a clear pathway into health mahi. This is about building on the outstanding hauora Māori services already available within hāpori and communities.

Iwi Māori partnership boards (IMPBs) update: (24.25m) After a lot of work we've now established 15 IMPBs, the last four were confirmed in June. As a key outcome of the Pae Ora health reform they represent the local needs and aspirations of Māori living in their takiwā. Our first national hui was held and provided an opportunity for everyone to connect and acknowledge a key milestone.

Breakout session: Cyber security

With cyber security, we all have a part to play. You are our best defense. Alongside developing a national training program, we're also improving our cyber security capability as a national function.

A short video's been released to help you identify scams and promote the idea of stop, think, act. The video was release in the Panui on 10 August.

Shoutouts

Ka pai to everyone involved in the engagement and shaping of the **Te Mauri o Rongo - Health Charter**.

Thank you to everyone involved in the ASMS strike contingency planning.

Te Mauri o Rongo Health Charter 4 Pou

Wairuatanga: Working with heart.

Rangatiratanga: As organisations we support our people to lead.

Whanaungatanga: We are a team, and together a team of teams.

Te Korowai Āhuru: A cloak which seeks to provide safety and comfort to the workforce.

[View full Te Mauri o Rongo here](#)

Reminders

As the election gets closer, we must remember to maintain political neutrality. We'll need to know of any staff standing for Parliament, so we can discuss a management plan - get in touch with Peter Alsop's team.

You're invited to the **Board Open Session** at the end of each month. Date, time and a link is shared in the Tū Mata Kōkiri Pānui.

Q&A key themes

- Individual performance agreements
- National performance metrics
- Microsoft teams
- Clinical networks
- Mental health

Breakout session: Sustainability

Our sustainability work programme aims to support the health system from the impacts of climate change. Due to technical issues we don't have the recording of this session.



Dame Dr Karen Poutasi
Chairperson



Margie Apa
Chief Executive



Leigh Donoghue
Chief Data & Digital

Main Session

Dame Dr Karen Poutasi: I want to thank you all for the work you do. My background is in public health and I've worked across the motu in my career. From this I know the path we're on will provide the benefits that we all need to deliver great health care. That is, underpinned by Te Tiriti with a drive for equity. I understand things aren't easy right now, we still have a long way to go, yet every day you do your best to deliver really good services for all New Zealanders – thank you! It's been great to hear the progress being made on winter pressures, waitlists, and our workforce plan. I look forward to us all continuing to build on the strengths of our past to create new opportunities for us to do better in the future.

Te Mauri o Rongo | Health Charter (Margie): Te Mauri o Rongo is part of the Pae Ora (Healthy Futures) Act, it has been endorsed by the Minister and applies to all publicly funded health entities. It's purpose is to set out the values, principles and behaviours that we can all aspire towards to improve the experience of healthcare workers and, ultimately, people who use our services. Local teams already have values in place, and I encourage you to talk within your teams about how we can align these values and bring them to life. The pou (value) from Te Mauri o Rongo that really stands out for me is - Te Korowai Āhuru, a cloak which seeks to provide safety and comfort to the workforce.

Te Pae Tata 2.0 (Margie): If you're interested in our strategic direction, I'd encourage you to read the six health strategies (NZ Health, Hauora Māori, Pacific Health, Disabled People, Women's Health, Rural Health) released by the Ministry. These are now being incorporated into our new health plan Te Pae Tata 2.0. This plan sets out our direction and will take effect from July next year.

Board update (Margie): Winter pressure, we've had a great response to some initiatives. Telehealth paramedic has saved 1,200 people from going to ED. The pharmacy minor ailments scheme has seen over 60,000 kiwis. And GP telehealth services, supporting rural people, has really taken off. **Waitlists**, we're on track to have no patients waiting more than a year by December (excluded orthopaedics). **Workforce**, we're starting to see progress and will keep the pressure on as this is a key priority.

Data and Digital (Leigh): We have some positive things happening in the digital and data space that will improve how we connect and collaborate. Soon you will have access to our national intranet Te Haerenga (this doesn't replace your local intranets), staff directory, and expanded Microsoft Teams. This mahi will create a simpler and more seamless experience for everyone.

Breakout session: Localities

Localities is place-based planning for health and wellbeing services that connects service providers, iwi and other stakeholders to collectively improve people's healthcare experience. For more details watch the full session via the link below.

[Watch hui and breakout session via links below](#)

[Main session](#)

[Localities](#)