

Ka tanuku e! Ka tanuku e!

Ka tanuku ngā tihi ō ngā maungā whakahirahira, āhaha!

*E kapo ki ngā whetu, e kapo ki te mārāma, e kapo ki te ata,
ko āku raukura ka riro rā e!*

Tihe maurimate!

E te manu tioriori, pari kārangārangā e Mira ka, hāere atu rā. E te waha kākā nui ā Tāne, e Manuhuia, hāere hoki rā. Otirā, hāere rā koutou katoa ngā mate huhua o te tau kua pahemo tae noa rā ki te Tau Hou nei. Hāere rā, tiraha rā, moe mai rā koutou i te Ariki.

Tihe mauriora!

Tēnā ano koutou katoa e āku rangātira kei te pupuri tonu i ngā tumanako ō rātau mā. Ko te tau hou he wā ka āta tirohia e te tangāta ki

tōna tūngā me ngā take nunui kei whakamua. He tika pea kia timata tēnei tirohangā i rungā i whakāro ki ngā taongā me ngā mahi i waihotia mai e ngā rangātira kua nuku kē atu ki tuawhakarere. Kia ahatia ai? Kia kore e ngāro ngā kākano nā rātau i timata te ruiui. Pērā i ngā Poari Hauora-ā-Takiwaa hou, ā, ka timata te whakakīkī i ngā kete hauora i rarangā ai e ngā Poari tawhito. Nā te iti, nā te rahi ka tae ki ngā taumata o te hiahia. Nā reira, ngā mihi aroha ki a koutou, a, kia kaha tonu raa. Tēnā anō tātau katoa!

From the Director's Desk

The need for good data can never be underestimated and with the release of the Census 2001 data on the ethnic populations of Aotearoa expected this month, there is no doubt that the information will provide some vital perspectives for future policy.

One of the articles in this issue is about He Oranga Pounamu, a Māori Development Organisation (MDO). CEO, Fiona Pimm, identified poor collection of ethnicity data and the consequent lack of sound information on the health of Māori within the Ngāi Tahu rohe as one of the biggest challenges they faced when they started.

Another MDO, Poutiri Trust, is also profiled in this issue as they work on the issues of improving systems and management using the ISO quality processes.

In both organisations there is a clear commitment to work with their managers and their member organisations, to improve their performance. A key challenge for us all in the health and disability sector . . .

These stories and issues remind me that if we are to successfully tackle quality issues, we need to focus on being:

People-centered.

Systems-minded.

And, Information-based.

In fact we are likely to discover that these aspects drive any successful organisation. And its exciting to share (as we will continue to do), the journey to quality improvements that our Māori organisations and providers have begun.



Ria Earp
Deputy-Director General
Māori Health

Manatū Hauora Scholarships Established

New scholarships, designed to develop a relationship with Māori students considering future work within the Ministry of Health, have been established by the Ministry for 2002. This pilot programme has been implemented with Victoria University.

The scholarships award a payment of up to \$5000 toward study costs for undergraduates over three years, and guarantee summer holiday employment within the Ministry. Seven applicants were selected to take up the scholarships in 2002.

Rochelle Francis (Ngāti Whanaungā/Ngā Puhī) started with the District Health Board Funding and Performance Directorate on 3 December 2001. Rochelle is studying for an LLB and BA in Māori studies and Japanese and believes the Ministry experience will teach her much about health, government and processes.

Karewa Arthur (Ngāti Toa/Te Ati Awa/Ngāi Tahu/Rangitane) started in the Māori Health Directorate on 5 December. He has lived all his life in the Wellington area, is strongly involved in the church, has children in kohangā and supports an autistic teenager. He is about to start his final year in criminology and social policy.

Sarah (Hera) Ngāta-Gibson (Te Aitangā a Hauiti/Ngāti Ira/Ngāti Porou) started with Sector Policy a week later, on 10 December 2001. Having lived in Te Tai Rawhiti all her life, Hera can evidently handle a chain saw bigger than herself and fell a tree on a one dollar note!

Rawiri Faulkner (Te Arawa/Ngāti Whakaue/Ngāi Te Rangi/Tapuika) also started with the Mental Health Directorate on December 10, 2001. Rawiri is in the last year of study towards his BA and balances study with the care of two young sons who attend kura kaupapa.

Kaye Maree Dunn (Ngāi Maniapoto, Ngā Puhī, Ngāti Kuri) is about to start her final year of a BA in criminology and Māori studies. Kaye Maree

works for Quitline as a telephone advisor and has been placed in the Public Health Directorate.

Regan Smith (Ngāti Kuia, Ngāti Koata, Ngāi Tahu, Ngāti Kahungunu, Maniapoto) started in the Disabilities Issues Directorate on December 11. Regan grew up in the Hutt Valley and has completed a first year toward a BCA/BSc in accounting, management and psychology. She also has a background and interest in disability issues.

Nurse **Tina Millar** (Ngāti Tuwharetoa) started with the Māori Health Directorate in the New Year. Tina completed a Diploma in Māori Health at Te Wanangā o Raukawa and is studying now at Victoria for a BA in social policy and Māori studies.



ABOVE: The students piloting the Manatū Hauora Scholarships, from left Regan Smith, Kaye-Maree Dunn, Rochelle Francis, Karewa Arthur and Tina Millar, Rawiri Faulkner, Sarah Ngāta-Gibson.

See Yourself on the Māori Health Website

Māori Health providers wishing to be listed on the Māori Health website should go to the site www.maorihealth.moh.govt.nz and check out 'Māori Providers'. Complete and submit the application form on the site and your organisation will go 'live' within seven days.



Note that the invitation to contracted Māori health providers be listed on the Māori health web site is also extended to those organisations described as significant providers of health and disability services to Māori.

Before you list your organisation please note the definitions:

Māori Health Provider

A Māori health provider:

- Is contracted to deliver health and disability services that target Māori communities or clients (even when delivering services to a wider population).
- Is led by a Māori governance and management structure and expresses a Māori kaupapa (vision or purpose).
- Considers the wider issues of Māori development (whanau, hapū, iwi and community) and how it might apply to their own organisation.

A Significant Provider of Services to Māori

A significant Health Provider of services to Māori:

- Is contracted to deliver health and disability services that target a broad population group that includes a significant proportion of Māori clients or a Māori community.
- Has a management structure that works in partnership with Māori, with an articulated vision or goals that include a service focus for Māori.
- Adopts a wider community focus which is inclusive of Māori.



Accreditation First for MDO

Congratulations are certainly in order for New Plymouth based Māori Development Organisation, Tui Ora, who is the first MDO to achieve Quality Health New Zealand accreditation. In a 'lead by example' decision Tui Ora chose to seek Quality Health New Zealand accreditation for itself first before committing its provider organisations to the process. In our next issue we look at the process and the achievement for Tui Ora.

New Appointment for National Screening Unit

Aroha Riley (Te Arawa) has recently been appointed as the Coordinator, Māori Provider Development & Relationships with the National Screening Unit (NSU).

Aroha has joined the Ministry of Health from Te Puni Kokiri. She has a background in managing relationships and consultation on proposed Government Policy changes both with Māori and Mainstream stakeholders. She has a Bachelor in Social Science, with a Double Major in Māori and Psychology.

Applications Sought Now for Māori Health 2002 Scholarships

All Māori Providers, MAPOs, M.D.O.s District Health Boards, Universities, Poly Techs, Wanangas, and Colleges have received application forms for the Ministry of Health Māori Health 2002 Scholarships.

Application forms are also available directly from:
 Tamara Fox, Executive Assistant,
 Ministry of Health
 Māori Health Directorate
 Email: tamara_fox@moh.govt.nz
 Tel:(09) 580 9082

*Closing date for applications is 5 pm
 Wednesday March 20, 2002*



"In many aspects, the Primary Health Care Strategy reflects the service arrangements developed by tangāta whenua providers and other strongly community-based services. The emphasis is on developing a partnership with the people using the services, to plan and deliver services in a way that meets their needs and supports better health outcomes for everyone.

Tangāta whenua providers have an opportunity with the development of Primary Health Organisations (PHOs), to drive this whole movement of primary health care services 'by and with people'.

This is a movement away from doing things 'to' or 'for people' -it's not about a few health professionals deciding the priorities, or what services are 'delivered'. It is about a close and mutually respectful partnership between whanau, hapu, iwi and communities and teams of health professionals, supported by managers and community workers, to develop and deliver services that are right for that population.

Whanau know what their needs are and are the only ones that can improve their own health and wellbeing. Provider groups can be guided by that knowledge and offer their information, apply their skills and professional knowledge to assist whanau, in their quest for good health.

In the past, tangāta whenua providers have often been seen as 'on the margins' while big groupings, for example, the doctor-led IPAs were 'mainstream'. We must grasp the



Associate Minister of Health,
Tariana Turia

opportunity to be the 'mainstream', to support tangāta whenua to be at the centre, leading the development and receiving better resources.

I would encourage all tangāta whenua providers to talk with whanau, about alliances that consolidate their values and strengths and support the kaupapa of whanau development.

For those tangāta whenua led providers, with genuine community input and feedback, and a broad team of health workers supporting health and wellbeing, it's a time to consolidate and take the lead.

For those wanting to develop that approach, it is a time to nurture the dream and work hard in your negotiations with District Health Boards and the Ministry of Health to make it a reality."

CMS Looks Forward to Another Year

Top Team Stays on CMS for 2002

The CMS team completed a review of the first round of CMS installations in December and are using the findings of the review in

their planning for a second round of CMS installations at another 100 provider sites starting in March this year.

The team has already visited 75% of those sites to audit existing hardware and software and advise, where necessary, on upgrades required to enable the latest version of CMS to be installed.

Also planned for February is a road show through the regions to provider further information on the project and a demo of the latest version software.

Project Manager Teepa Wawatai also notes, "we have retained the same team on the CMS project that we had last year. This team is highly motivated and skilled with working with Māori providers."

LEFT: Top Team, from left: Edward Gareghty, John Simpson, Ruth Rivers, James Sigley, Dene Sigley, Matu Ihaka and Teepa Wawatai.

In this issue we profile new Māori Development Organisation, He Oranga Pounamu . . .

IN 1999, TE RUNANGA O NGAI TAHU ADOPTED THE NGAI TAHU HEALTH AND SOCIAL SERVICES STRATEGY. A KEY PART OF THE STRATEGY WAS TO NEGOTIATE TREATY-BASED RELATIONSHIPS WITH THE CROWN AND ITS AGENCIES IN HEALTH AND SOCIAL POLICY SECTORS. THE OTHER WAS TO ESTABLISH A STRUCTURE TO MANAGE THE PROVISION OF HEALTH AND SOCIAL SERVICES. THIS RESULTED IN THE ESTABLISHMENT OF HE ORANGA POUNAMU . . .

He Orangā Pounamu's primary role is to re-organise and re-distribute Crown funding for health and social services to improve choice, access and service quality for Māori residing in the Ngāi Tahu rohe.

It acts as a broker for affiliated Māori service providers and community organisations, securing funding contracts with the Crown and other funding agencies and also provides a range of business support services to affiliated groups.

Fiona Pimm has been CEO from the outset. She acknowledges that while she was aware of some of the key issues facing He Orangā Pounamu she and her team quickly came to realise there was more to be done than could ever have been imagined.



ABOVE: He Oranga Pounamu CEO, Fiona Pimm

"Inconsistent and inadequate collection of ethnicity data over the years meant we lacked sound information about Māori health and simply did not know the health status of Māori in the Ngāi Tahu rohe. We are now putting a lot of work into assessing whanau needs and aspirations."

Also of serious concern is the lack of a Māori health workforce throughout Te Waipounamu and Fiona is firmly convinced that the answer to this is encouraging local Māori into the health sciences. "We must have kaupapa Māori training based in the South Island. The reality is people will move north. Not so many move south. Workforce development and training is regarded as a priority for provider development this year."

There are two other key activities in the area of provider development for 2002. One is quality assurance on the part of all affiliated

providers which includes plans for piloting a quality framework with two affiliated providers this year. The other is identifying and providing the necessary tools for all affiliated providers to operate effective business management systems.

He Orangā Pounamu's primary task is to build the capacity and capability of the Māori health and disability service providers who choose to affiliate with them. Fiona says the programme is also, by necessity, a broader one.

"We must also be encouraging non-Māori providers to deliver services to Māori in a culturally appropriate and high quality way. All health providers need to understand why they should be concerned about the health and social status of all Māori in the Ngāi Tahu rohe and appreciate how working together can lead to improved outcomes across the board."

There have been a number of highlights over the past twelve months. A suicide prevention programme - Kia Piki te ora o te Taitamariki - started in July 2001 and is proving to be a phenomenally successful pilot scheme.

Says Fiona, "we worry about the funding and reporting and the groups working within the Kia Piki te ora o te Taitamariki umbrella get on with the job."

Two new Southland-based providers have

BELOW: The Oranga Pounamu team – from left, George Clark (Employer Sector Manager) Aroha Garth (Contracts Administrator) Jim Hauraki (Kia Piki Te Ora O Te Taitamariki Project Manager) Tracee Rerekura (Administration Support) Fiona Pimm (CEO) Gilbert Taurua (Business Development Manager). Missing is IS Manager, Kiritapu Murray-Mikaere.

also come on board in 2001. Ngā Kete Mataurangā Pounamu and Hokunui Runangā Health & Social Services are primarily service co-ordinators set up to answer an obvious need for those comprising an 'at risk' population in the far south and through these two organisations Fiona is confident that "we will see action for the people."

In December 2001, eighteen months after set up, Christchurch based researchers Suzanne Pitama and Annabel Ahuriri-Driscoll delivered their report 'Evaluation of He

Ahakoia he iti, he Pounamu

Although it is small it is precious

Orangā Pounamu' which had been commissioned by Fiona to review progress organisation in line with strategic goals and the impact of these on the current Māori environment.

The report concludes with the observation that "He Orangā Pounamu has developed as a resource that is well suited to the current health and social services environment and has the potential to develop a truly integrated health and social care approach for Māori clients. Its strengths were well noted by both staff and providers."

He Orangā Pounamu is profiled on their website <http://www.hop.org.nz>

Affiliated Providers

Currently He Oranga Pounamu has 21 affiliated health and disability service providers.

Ali's Home Help	Christchurch
He Waka Tapu Trust	Christchurch
Nga Hau E Wha Marae	Christchurch
Te Tai O Marokura Health & Social Services	Kaikoura
Hokunui Runanga Health & Social Services	Gore
Māori Disability & Resource Centre	Christchurch
Te Aka Umanga Ki Waitaha	Christchurch
Te Puna Oranga	Christchurch
Te Rapana Trust	Christchurch
Te Roopu Ara Hou	Christchurch
Otautahi Māori Wards	Christchurch
Otautahi Social Services	Christchurch
Rakiura Health	Dunedin
Akona Te Rangatahi Otepoti	Dunedin
Te Roopu Tautoko Ki Te Tonga	Dunedin
Awarua Social Services	Invercargill
Murihiku Iwi Social Services	Invercargill
Nga Kete Haua Hauora Ki Murihiku	Invercargill
Te Huarahi Ki Te Oranga Pai	Invercargill
Nga Kete Matauranga Pounamu	Invercargill
Te Arawa Whanua Ki Otautahi	Christchurch



COMMITTING TO QUALITY

*In our October issue we began an examination of the focus on quality in health and disability care systems. We looked at Te Wana and also at provider accreditation through Quality Health New Zealand. This issue we report on the development of **Poutiri Trust Network's** Quality Management System . . .*

In 1999 the Poutiri Trust, a Māori Development Organisation in the Bay of Plenty, decided to trial the implementation of an ISO Quality Management system, believing it would help them focus more on the 'quality' in health care for the Bay of Plenty.



ABOVE: Deputy Director General - Maori Health, Ria Earp with Poutiri Trust's Network Quality Co-ordinator, Kimiora Rawiri at 'graduation'.

Kimiora Rawiri (Executive Officer with Poutiri Trust and Network Quality Co-ordinator) says that the Trust selected the ISO Quality Management system because of its focus on customer requirements. "We liked it because the system allows for a proactive or preventive approach to issues. It's generic and, as such, has been proven across various sectors and it's internationally recognised."

On 9 March, 2001, Phase One of implementation concluded when a Pilot Group comprising Poutiri Trust along with health providers, Ngā Kakano Foundation, Te Rau O Te Huia Trust and Waitangi Medical Centre achieved certification to the ISO 9002 standard.

In 2001, Phase Two saw the addition of a further eight providers participating in the project and then, later in 2001, the remaining 12 providers affiliated with the Network began implementing the quality system in the third and final stage of the project.

In the same year Poutiri Trust also developed a joint venture with an Australian company ETRS Business Management Systems to provide training for other organisations throughout Aotearoa.

Training has been ongoing at various levels throughout the Network. In August of 2001 for example, six Poutiri Trust Board members, including CEO Pia Callaghan, undertook Lead Auditor training which means this group can now carry out audits

and train other organisations.

Kimiora says that throughout the whole implementation process a number of their members have been criticised for adopting the ISO Quality Management System. "The argument is that ISO is overly bureaucratic, going out of fashion and not Māori," says Kimiora. "Our response to this is that any problems invariably lie in the way the process is applied or managed, not with the philosophy. ISO standards are updated regularly and ISO has a very sound track record. Finally, it was never our intention to adopt a quality management system to verify we are Māori."

ISO9002 has given both the Trust and its providers the ability to document procedures and improve the efficiency of delivering health services. At work, throughout the Poutiri Trust Network, the standards appear broad based enough for an organisation to find a balance for what works best for them.



ABOVE: Vincent Kihirini (Nga Kakano Foundation) with Graeme Bailey (ETRS Business Management Systems) who has shared his skills in ISO quality management with the Trust.

At the time his organisation embarked on the process of implementation Kelly Tahitahi of Te Rau o Te Huia, a provider of residential psychiatric care and one of the Pilot Group organisations noted that the ISO Quality Management system was about being able to show accountability. He was quoted as saying "it's about good management policies. The staff are fully involved and are able to improve standards. The process enables them to feel ownership. Now, almost 12 months later, Kelly says his staff are making these observations themselves. Having added seven staff to the organisation Kelly says the ISO system is a critical aspect of new staff induction and training.

Initially an ISO quality system can appear to be daunting for those responsible for its implementation and ongoing review. Vincent Kihirini (Ngā Kakano Foundation) who was also part of the Pilot Group and who also

trained to be a Lead Auditor, agrees. "Providers can still get anxious around audit time. No matter how used to it they get, an audit is still an audit which is why we keep on encouraging providers to regard an audit as part of the focus on continuous improvement."

Also evident is the encouragement given to providers to keep the system they have documented for ISO certification 'off the shelf'. Vincent points out it is easy to come up with a beautifully documented system and also very easy to leave it on the shelf. "The procedure may be excellent but it has to work and it has to stay alive as a working document," he says. "The key to ongoing success is keeping it simple, keeping it flexible and making it part of everyday business."

By adopting this system across the Provider Network, one of the many benefits has been sharing information and experiences. Organisations have been able to adopt existing procedures submitted by other providers or amend them to suit their own requirements.

Kimiora Rawiri says that while the primary aim has been to implement Quality Management Systems that comply with ISO standards throughout the Trust and the Network there have been other gains as well. "We have shared and learned local waiata and karakia. And whakawhanaungātāngā. There is no doubt the strengthening of bonds between providers will contribute to the success of future initiatives as well."



ABOVE: Also at 'graduation' - Ria Earp with Kelly Tahitahi (Manager - Te Rau O Te Huia Trust).

Poutiri Trust was established in 1998 by whanau, hapu and iwi across the Bay of Plenty. A charitable trust, Poutiri manages the delivery of various healthcare services throughout the Bay of Plenty region through 23 affiliated Healthcare Provider Organisation (Poutiri Network).

Dr John McLeod Scholarship Programme

SOUND SECURE STUDY FOR FIVE MĀORI HEALTH STUDENTS

Last year, five young Māori students, four female and one male, benefited enormously from the Dr John McLeod Scholarships now run by the Ministry of Health.

Of the five students, three attended Otago University, one attended Auckland's University of Technology and, yet another, attended Wellington's School of Medicine. Each received \$5,000 toward their educational expenses. These students were selected from all the applicants for the Māori Health Scholarships because they were assessed as the top students applying for assistance.

Lorraine Brooking (Ngāi Tahu/Ngāti Porou/Ngā riki ki Mangātu/Ngāti Pīkiao/Te Aitangā A Mahaka) was one of these students. She failed in her applications to medical schools twice before going on to complete a masters degree in social science and travelling abroad. On her return to New Zealand Lorraine had a baby and was accepted by Otago University to undertake medicine. With a 28 month old and very supportive partner, Lorraine completed a very successful third year in 2001, and plans to enter the MBChBPhD programme for 2002. Says Lorraine, the scholarship has meant so much - simply having that kind of contribution to books and to childcare." Long term Lorraine's plan involves returning to the East Coast as a GP, with specialist knowledge in diabetes.

"The Ministry of Health's Māori Health Scholarships are designed to assist Māori students undertake and complete study which will result in them becoming qualified Māori health professionals. Manu Keung, who administers the programme from the Ministry's Māori Directorate says the long term goal of the scholarship programme is to increase the size of the Māori health workforce capacity and build levels of professionalism in order deliver effective services for Māori.

Lincoln Nicholls (Ngāti Raukawa) was teaching Māori, human biology and PE at Queen Elizabeth College in Palmerston North prior to entering first year health science at Otago University in 2001. His 'leap of faith' and grappling with the 'foreign languages' of chemistry, physics and statistics paid off, resulting in excellent grades and ensuring him a place in Otago's Medical School for 2002. "My application was in Māori.

Maybe that impressed the panel. I was so surprised to qualify. It was so great to have it." Long term Lincoln's goal is sports medicine and Māori health.

Dr John McLeod (Nga Puhi), for whom the scholarship programme is named, was renown, both nationally and internationally for his work in public health and his significant contribution toward improving Māori health status. His distinguished medical, research and management career ended with his death in 1994. The scholarships were initiated jointly by the four Regional Health Authorities and the Ministry of Health, with the first awards being awarded in 1996.

The students awarded the Dr John McLeod Scholarship have invariably already achieved excellence in their chosen fields in preceding years of study.



ABOVE: Sarah intends to gain experience in a variety of situations but long term her intent is to be part of a multi-disciplinary primary care health organisation.

Sarah Tango (Nga Puhi) completed her fourth and final year of physiotherapy in 2001 at Auckland's University of Technology with one of the scholarships. The scholarship enabled her to graduate without a huge debt. "I was so lucky to be able to study without financial pressure. I did some part time work but it didn't have to interfere with study time."

The next few months will see the Māori Health Directorate embarking on a marketing campaign to ensure they effectively communicate programme to the target audience. Says Manu Keung, "we are trying to promote the scholarships to a wide range of students throughout the country, and we want to encourage all students to apply.

Māori Population Profile

This month we look forward to the release of the Census 2001 data on the ethnic population of Aotearoa. Statistics New Zealand project that the size of the Maori and Pacific peoples population will be 30% of the total population by 2030. By 2050 Statistics New Zealand estimate the Maori population will have doubled in size to just over one million.

SCHOLARSHIP PROGRAMME UPDATE

Primary Focus...

The future of primary health care
A national conference will take place at the Wellington Convention Centre on 30 and 31 May.

Registration forms are being despatched in March and full details will be the web site www.moh.govt.nz/primaryfocus

For more information please contact:

Caroline Wyatt
caroline_wyatt@moh.govt.nz

He Korowai Oranga soon to be released

The Ministry of Health is currently finalising He Korowai Oranga (Māori Health Strategy) and developing an action plan which we hope to release within the next couple of months. He Korowai Oranga will build on the framework established in the New Zealand Health Strategy to further challenge health inequalities and achieve whānau hauora.

More on He Korowai Oranga in our next issue.

Kaitiaki Regulations

The Ministry of Health will be in consultation during March and April on the Kaitiaki Regulations (concerning collective data on Māori women held in the cervical screening database)

THE KAITIAKI HUI DATES ARE:

Tuesday	12 March	Kaikōhe
Wednesday	13 March	Auckland
Tuesday	19 March	Whakatane
Wednesday	20 March	Rotorua
Thursday	21 March	Hamilton
Wednesday	27 March	Gisborne
Thursday	28 March	Wellington
Wednesday	3 April	Palmerston North
Thursday	4 April	Taranaki
Thursday	11 April	Nelson
Wednesday	17 April	Invercargill
Thursday	18 April	Christchurch