



TE RŪNANGANUI O TE ĀTI AWA

2020/21

Whānau Ora Wellbeing Services – First Quarter Report for 2020/21 Year



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Te Runanganui o te Atiawa
2020/21

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Key performance Indicators

Quarter 1 2020/21 Performance by Service

Health



Whānau Ora health – Marae new enrolments

Target 50
Actual **48**



Health Promotions

Target 3
Actual **3**



Whānau Ora Health Rūnanga new enrolments

Target 6
Actual **15**



Tamaiti Whāngai Rangatahi new enrolments

Target 10
Actual **30**



Breast Feeding Service new enrolments

Target 30
Actual **42**



Wahine Ora (Cervical Screening)

Target 88
Actual **115**



Tamariki Ora new enrolments

Target 75
Actual **122**



Tamariki Ora RVUs

Target 875
Actual **1,164**



Safe sleep (wahakura/pepi pods)

Target 5
Actual **10**

Social services



Iwi Panel Enrolments

Target 100
Actual **110**



Oranga Tamariki Transitions

Target 3
Actual **1**



Rapu Mahi Enrolments

Target 8
Actual **6**



He Tangata Licenses

Target 10
Actual **85**



Whānau Ora clients (TPK funded)

Target 18
Actual **36**



Whānau Direct funding

Target \$10K
Actual **\$37K**

Media



Radio Te Reo content 9 hours/day

Target 959 hours
Actual **959 hours**

Satisfaction



Satisfaction across services

Target 95%
Actual **99%**

Whānau Ora Integrated Wellbeing Services

First Quarter Report to the HVDHB for the period 1st July to 30th September 2020

Executive Summary

This report describes the delivery of integrated hauora/wellbeing/whānau ora services by Te Rūnanga and its network in the first quarter of the 2020/21 financial year.

The first quarter of the new financial year has seen Te Rūnanga working to deal with the back log of cases and needs created by the Covid-19 Pandemic. New staff have been appointed to the Tamariki Ora service and training has continued to assist staff develop their capability to respond to needs.

Te Rūnanga continues to develop its holistic whānau-centric approach to ensuring whānau wellbeing with the introduction of new services and innovations which will continue in this new financial year.

This quarter saw a return to Alert Level 2 and this impacted the delivery of services, particularly kaumatua services and group gatherings. In addition to this, the challenges associated with working with high needs whānau continue. To assist Te Rūnanga to the increased complexity of needs we encounter we have continued to develop collaborative relationships, particularly with Kahungunu Whānau Services and Ngāti Toa Rangatira. The Whānau Ora Collective continues to meet regularly and to share information and support.

Further highlights for this quarter have included health and wellbeing promotions including Kaumatua Under the Stars Dine and Dance, Smear Your Mea (Cervical Screening) campaign held in August and Blue September Prostate Awareness evening held in September.

New Contracts have been signed with the Marae in the delivery network and Te Rūnanga looks forward to working to expand the delivery network over this new financial year.



1.0 Introduction

This report outlines the progress made by Te Rūnanga in delivering its integrated wellbeing services for the period 1st July to 30th September 2020, the first quarter of the 2020/21 financial year.

It covers services contracted by Hutt Valley DHB (Health Promotion, Screening, Breastfeeding Support, Safe Sleep, Whānau Ora, Tamaiti Whāngai), Ministry of Health (Tamariki Ora), TPK (Whānau Ora Whānau Direct), MSD (Rapu Mahi, Drivers Licences) and NZ Police (Iwi Panel).

2.0 First Quarter 2020/2021 Highlights

2.1 Health Promotions

Rheumatic Fever

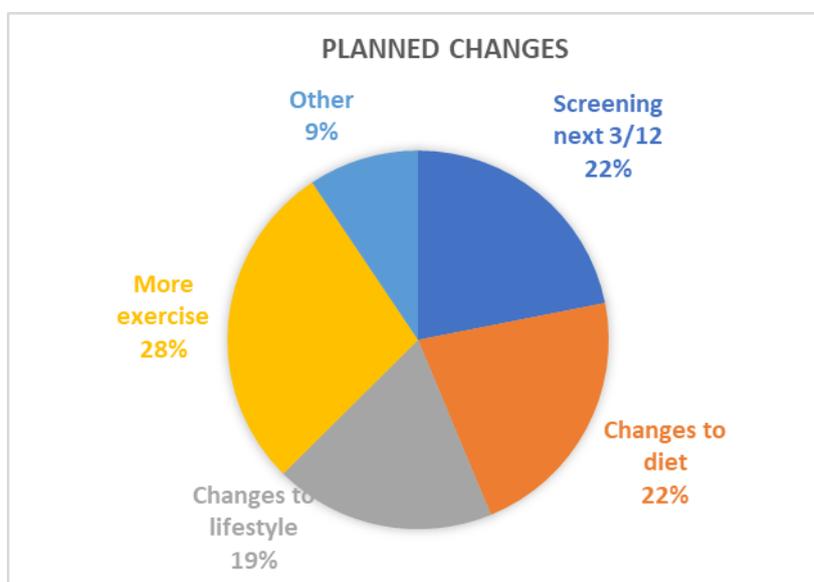
Following the Covid-19 lock down it was noted that there had been an increase in tamariki presenting with symptoms of rheumatic fever. Te Rūnanga partnered with the HVDHB to relaunch its radio awareness campaign to bring this to the attention of whānau.

Cervical Screening – Smear Your Mea

This quarter there has been a push to catch up on overdue cervical screening. Three screening clinics have been held in the community and the Smear Your Mea campaign was held in August. This culminated in a day which combined wahine pampering – facials and pedicures – with screening. Twenty-five wahine attended this day with 24 being screened.

Blue September

Blue September promotes awareness of prostate cancer and the need for testing. Te Rūnanga held an awareness evening in late September that was attended by 28 people – the majority being male. An evaluation of this event was held which showed that participants increased their understanding of prostate cancer as a result of attending this event and the majority committed to making changes in their life. It was pleasing to see that 22% of those that attended planned to get screened within the next three months.



Kaumatua Under the Stars Dine and Dance

On the 2nd July, Te Rūnanga held a Kaumatua Dine and Dance supporting kaumatua to reconnect and to engage with the community. This was a great event that recognised that many whānau had found the Covid-19 rahui stressful.

2.2 New services and service innovations

Te Rā o Raukura 2021

With Covid-19 and the risk of further community transmission, Te Rūnanga has made the decision to hold the 2021 event as a virtual one. Te Rā will become an -online event delivered over a week. How the health/wellbeing components will be integrated into this are still being worked through.

Housing

Te Rūnanga has entered into a partnership with Hutt City Council, Urban Plus and Kahungunu Whānau Services to build social and emergency housing in the Hutt. This is an exciting development for Te Rūnanga as being able to support whānau into healthy homes is an important part of the wellbeing strategy.

Education

Planning to introduce a Tamaiti Whāngai Pathways to Employment and Education (Pae Aronui) programme in October are well underway. This programme will support rangatahi at risk of becoming beneficiaries find pathways into education/training and/or employment.

Careers evening

Te Rūnanga held a Careers evening in August promoting education opportunities in sciences and engineering. This event was run in partnership with Callaghan Innovation and was well attended. Te Rūnanga plans to hold a further 2 events in November, one focussed on careers in health and social care and one targeting business and ICT.

Rongoa and Mirimiri

Orongomai Marae have introduced Rongoa/Mirimiri clinics to the services they offer collaborating with Ora Tika for this.

2.3 Collaboration

Hui with Ngāti Toa Rangatira

Over this quarter, the relationship between Te Āti Awa and Ngāti Toa Rangatira has continued to develop. Meetings between the leadership are held fortnightly with collaborative projects based in health, education, and radio progressing.

In August, a hui was held between the staff of Te Āti Awa and Ngāti Toa Rangatira to look at how the two organisations could work together to deliver services. This hui provided an opportunity to share their kaupapa and service integration models. A further hui is planned for October.

Hui with Kahungunu Whānau Services

In September, a hui was held between staff of Te Rūnanga and Kahungunu Whānau Services (KWS), aimed at developing an understanding of the services offered by each organisation and how they can work together to support whānau. KWS continue to be an important partner in seeking housing solutions for those whānau needing emergency and longer-term housing.

2.4 Meeting with MPI

In August, the Ministry of Primary Industries met with Te Rūnanga staff to get feedback on the distribution of pork products during Covid-19 rahui. This was a great opportunity for staff to share their stories of the impact the pork had on the lives and circumstances of whānau.

2.5 Staff Achievements

In this quarter one of Te Rūnanga kaimahi has completed her Bachelor of Applied Management. Three other kaimahi are nearing completion of their Diploma in Whānau Ora.

3.0 Issues and Challenges

3.1 On-going impacts of Covid-19

The changes to service delivery that needed to be made as a result of the different Alert Levels associated with Covid-19 has led to a back log in clients to be seen as well as changes to the services delivered.

Our Kaumatua are doing it tough going back to Alert Level 2. Many Kaumatua have lost their partners, live home alone, have no whānau support and/or no waka, are unable to drive and have no driver license. This has seen whānau present with a range of health concerns including increased stressed, grief for loss, relationship problems, limited mobility, limited access to services, financial hardship and limited contact with whānau creating loneliness.

Kaiarahi continue to encourage and assist Kaumatua to talk to their whānau about end-of-life terms and conditions and the importance of whānau support. Orongomai Marae staff have seen some Kaumatua travel to Wainui on Mondays and Wednesdays to the Kaumatua Roopu run by Kokiri, who have the space to follow the Covid-19 policy guidelines. We are mindful of the risk to our Kaumatua when driving out of the area is concerning to us. Often our kaumatua are unable to attend or make a presence at events due to a lack of transport.

3.2 Managing the workloads resulting from increased service demand

Many of the services offered by the networked providers in Te Awa Kairangi/Wainuiomata areas have seen an increase in demand for the services and this is putting a load on staff. In some service, for example, Tamariki Ora, caps on the numbers enrolling may need to be made.

3.2 Engaging with high needs whānau

Many of the whānau supported by Te Rūnanga and its partners have high and complex needs which require long-term engagement and support. This is seen in the data on average length of stay with the services.

The complexity of issues and needs whānau present with requires a multi-disciplinary approach and care in referring whānau to other agencies. Our whānau often have low trust with non-iwi-based services and fear of Oranga Tamariki involvement can make it difficult to build the trust needed to address the issues seen. The case studies presented in this report show some of the complexities staff deal with on a day-to-day basis.

3.3 Managing appointments

Over this quarter we have continues to be challenged by whānau who do not attend scheduled appointments, cancel their appointments or are “no shows”. This creates considerable administrative work for kaimahi as the seek to contact whānau and reschedule appointments. This was exacerbated this quarter by the second period at Covid Alert levels 2.5/2 and the school holidays.

3.4 Need for on-going training and development

There is an on-going need to support the training and development of staff as practice models develop and services expand. This creates exciting opportunities for kaimahi, and it is planned to develop a three-year organisational development plan covering Te Rūnanga and the Marae partners we work with in the coming quarter.

4.0 Summary of Q1 2020/21 achievements in integrated service provision

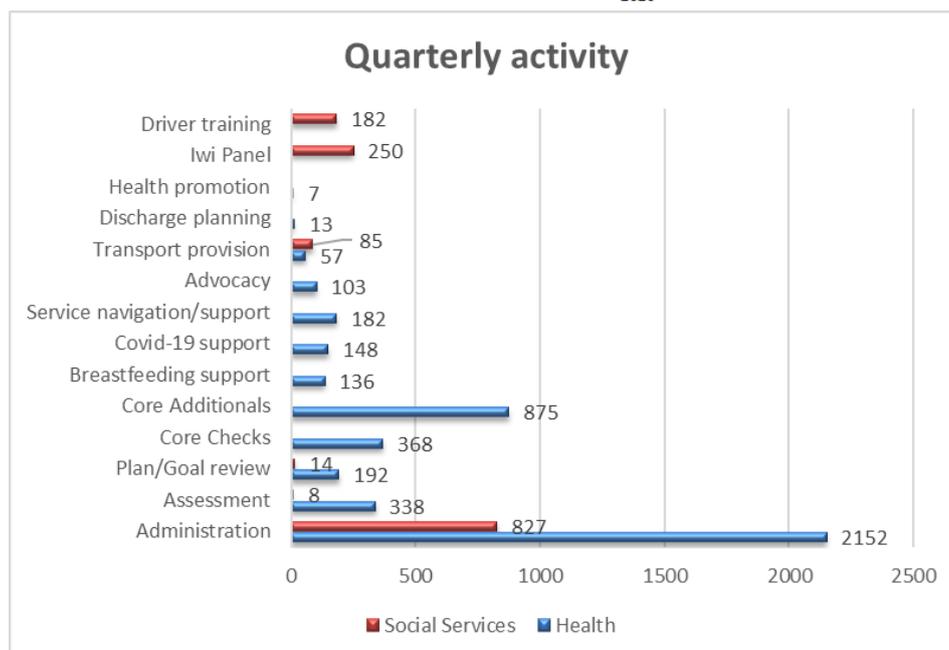
Across all Rūnanga wellbeing services supporting whānau in this quarter – reported through Ara Whanui (including Tamariki Ora, Breastfeeding service, Health Promotion, Tamaiti Whāngai, Iwi Panel and Rapu Mahi¹) – there have been 460 new enrolments into the services with 284 discharges giving a final total of whānau supported this quarter of 2,968.

Year	Month	Total	%
2020	Jun	48	0.8%
	Jul	1877	31.7%
	Aug	2148	36.3%
	Sep	1852	31.3%
Total		5925	100.0%

Activity continues to be high reflecting the work required to contact, build relationships, and support our

whānau. This quarter we have recorded 5,925 activities which compares positively with the quarterly average recorded in the last year of 5,602.

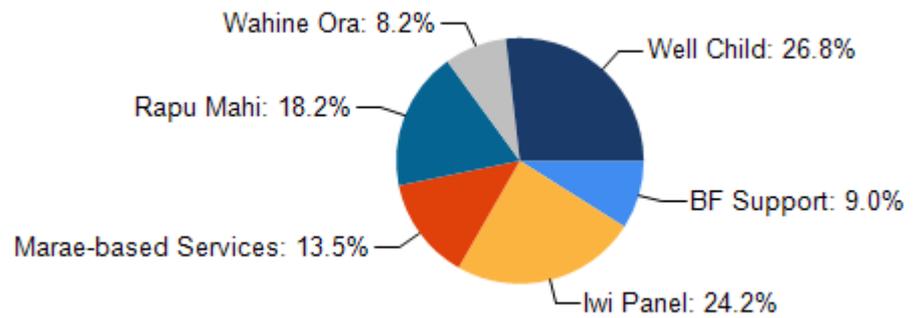
This increase in activity reflects both the increased enrolments into the services and also the work done to catch up on activities that were deferred during the Covid-19 rahui.



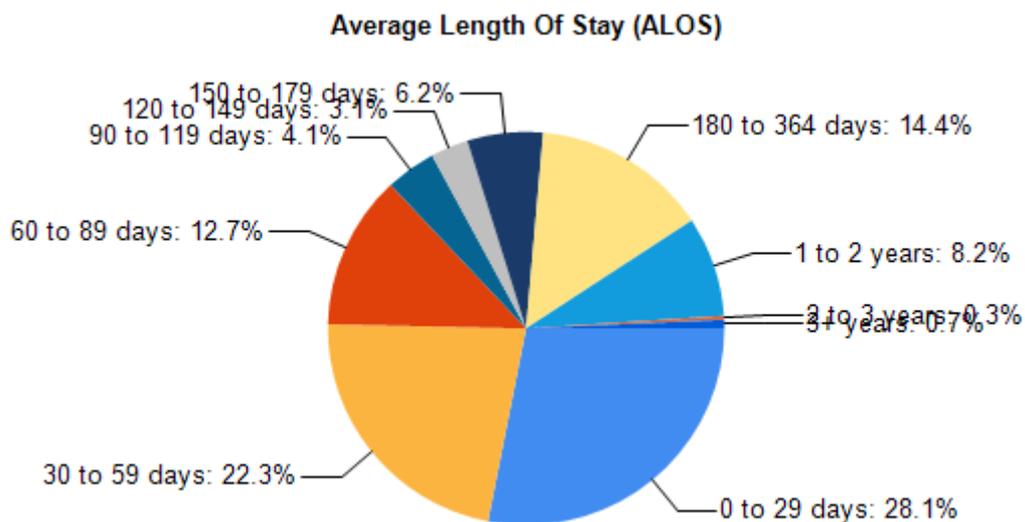
¹ Excludes Whānau Ora (TPK funded) services recorded in Whānau Tahī database

There have been 466 enrolled into the services this quarter with the majority of these enrolled in the Tamariki Ora service.

A total of 292 clients have been discharged from services this quarter. The average length of stay across all services is 138 days. Just over half, 55%, of all clients have required more than 4 activities with 29% requiring more than 10.



Analysis of the client base served by Te Rūnanga shows that the percentage who are Māori remains constant at approximately 77% and the split between male and female accessing the range of services available remains constant (55% female to 44% male).

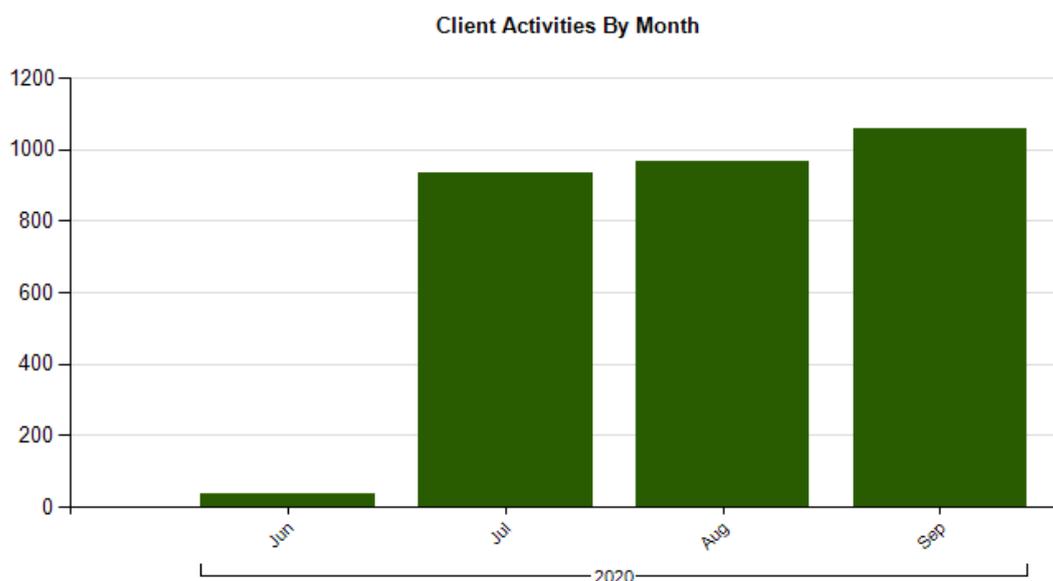


5.0 Service Delivery Report for Quarter Four 1st April to 30th June 2020

5.1 Well Child/Tamariki Ora

5.1.1 Overview

Delivery of Tamariki Ora/Well Child services continued to track ahead of target with 122 new enrolments and a total of 1,157 enrolments in the service at the end of Q1. There have been 2,995 client engagements recorded for the quarter which shows a significant 12% increase in activity on the quarterly average of 2,680 recorded for the last year.



The increase in client contacts seen this quarter reflects the addition of a new nurse and the work undertaken to catch up on core checks missed over the Covid-19 rahui.

5.1.2 Staffing

A new nurse, Peta Vinnicombe has joined the team. Peta is a registered nurse and has enrolled to complete her post-graduate diploma next year. Peta fills the vacancy that has been in place since last year.

Kaiarahi

Role	FTE	Staff Name	Qualifications	Training/development	Comment
Nurse	1.0	Michelle McGregor	Registered Nurse Well Child Nurse	<ul style="list-style-type: none"> • Training in RBA and narrative reporting • Ara Whanui training • Two staff attended Tamariki Ora Symposium by Zoom 	Continuing professional development activities to meet APC requirements
	1.0	Lil Tuhaka	Registered Nurse Well Child Nurse		
	1.0	Peta Vinnicombe	Registered Nurse Enrolled to do post graduate Tamariki Ora programme		
Doctor	0.5	Larisa Koning	FRNZCGP		

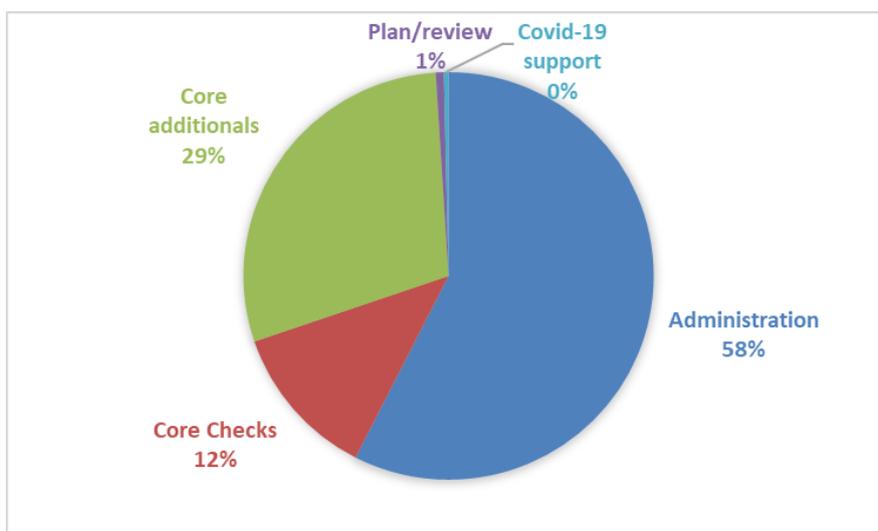
Role	FTE	Staff Name	Qualifications	Training/development	Comment
Kaiawhina	1.0	Hine Stevens	Qualified Kaiawhina	<ul style="list-style-type: none"> • Training held for staff Violence Intervention • Edwina representing TO team on Maternity Care and Child Wellbeing Multi-agency Group (MCCW) 	Matāuranga Māori Mentoring and peer support
	1.0	Ngahuia Tuhaka	Qualified Kaiawhina		
	0.8	Beth Moroney	Well Child Training		
Administrator	1.0	Edwina Taylor	NZ Certificate in Business and Administration L3		In cadetship Mentoring and peer support

Michelle McGregor has been appointed to the National Advisory Group for Tamariki Ora.

5.1.3 Service delivery

There have been 122 new pepi (babies) enrolled in this quarter with 80% coming from the the LMC service. At the same time, there have been 292 discharges this quarter, giving a final current enrolled population of 1,268. Of the population registered in the Tamariki Ora service, 73% are Māori and 3.7% are Pacific Islander.

During this quarter, the Tamariki Ora team recorded 2,995 engagements with clients equating to 1,165 RVUs. These engagements fell into the following categories:



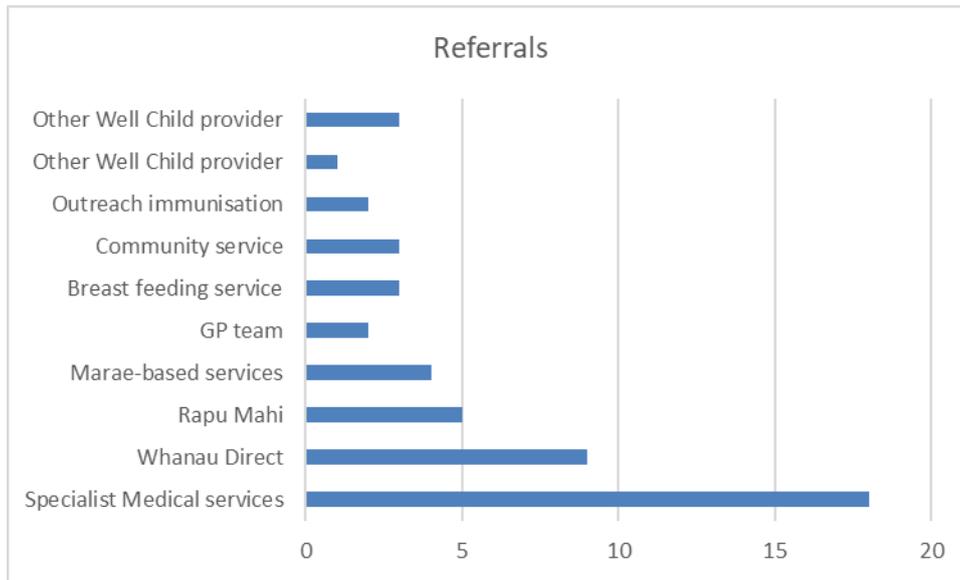
Community clinics have recommenced with clinics being held at Orongomai, Koraunui, Wainuiomata, Waiwhetu and Te Kohanga Reo.

Sixty-five whānau were referred to external agencies for assistance in this quarter with 18 being referred for Whānau Direct finding, 13 to doctors/ specialist medical services/ paediatrician. This is up from the 25 referred last quarter.

Sixty-seven whānau had whānau plans prepared for them to assist them to meet identified needs compared to 63 last quarter.

In this quarter the recording of NHI numbers has improved with only 6 clients missing an NHI number.

There have been 50 referrals this quarter with the majority of these (36%) being to specialist services/paediatrician/ear services.



5.1.4 Client satisfaction

In this quarter there have been 5 Client satisfaction surveys completed with 80% of respondents rating the service as excellent or performing well.

5.1.5 Challenges

The major challenge encountered this quarter has been managing cancellations and “no shows” and having to follow up and re-schedule these. This is an on-going issue.

“Lost” whānau and those who do not communicate continue to consume a great deal of effort to contact and follow up. This has been compounded by not being able to do “cold call” home visits due to the protocols of COVID 19 Level 1. We are reliant on other communication tools including phone, text, email for appointments and to ask COVID 19 questions and in some cases can only a send letter to make contact to confirm appointments. This can be time consuming.

The number of new enrolments continues to create challenges as we seek to service them this the workforce we have. We are looking to appoint another nurse on a casual contract to assist ease workloads.

Whānau Direct funding has run out making it difficult to assist whānau in need.

5.1.6 Case studies

Case 1

A 6 months old baby was referred to the Tamariki Ora doctor by the TO Nurse as mum had a concern regarding the appearance of his eyes.

The doctor saw the baby the following day. She suspected a serious condition and discussed the case with a paediatrician, who recommended referring the baby to an ophthalmologist. The doctor contacted the Ophthalmology Registrar at CCDHB and an urgent appointment was given. The baby was seen by the specialist within 1 week and has had a follow-up appointment.

Mum was very happy with outcome.

Case 2

A 5-month-old baby boy (D) was referred to the Tamariki Ora doctor by a TO nurse as both mum and the nurse were concerned regarding the unusual appearance of the boy's penis. D was seen and examined. On examination he was diagnosed with a condition that required surgical intervention. He was referred to a paediatric surgeon in CCDHB.

Case 3

One of the Tamariki Ora Kaimahi has completed 5 whānau Ora Whānau Direct applications for whānau in need this quarter. One of these applications requested funding for eco-friendly bedding for a tamaiti who is very sensitive and allergic to dust mites, dust. This triggers her eczema and asthma.

Whānau needed assistance as that type of bedding is very expensive. This will help minimize trips to the GP.

Case 4

B is the second baby to be seen once lock down restrictions were lifted. At the time B was 8 weeks old and living in a cold sleep-out with his mum and dad. The sleep out is at the back of the maternal mothers house and with family dramas the maternal mother had given B's whānau two weeks to move out which happens to the day B's father is to have hip replacement surgery. The whānau had nowhere to go.

At this stage mum declined additional support from TO, even after she was advised we may be able to help. Two days later, 2/6/2020 mum texted the Kaiawhina stating they have exhausted their options and asking if we can help, as they were very desperate and on the verge of being homeless

The Kaiawhina referred B's whānau to the Kaiarahi in the Hauora team who identified that there were a lot of issues going on for this whānau in addition to the housing crisis. Concerns were also raised about mum's mental health.

The Kaiarahi, TO nurse and Kaiawhina worked together to come up with a plan. The whānau was referred to HNZ for emergency housing, however, this application was declined due to mum and dad having a savings account. On 5/8/2020 the Kaiarahi referred B's whānau to Kahungunu Whānau Services, where they got whānau into emergency housing two weeks later and are now supporting the whānau with counselling and mental health.

Throughout the referral process the TO Nurse and Kaiawhina were able to continue with Well Child assessments and additionals, were able to give B's whānau kai vouchers. Mum cried and was very thankful The Kaiawhina Ngahua has a Whānau Direct application on standby for when B's whānau move in to stable accommodations, to assist with furniture and bedding etc.

This is an ongoing case

5.2 Hauora/Whānau Ora Service

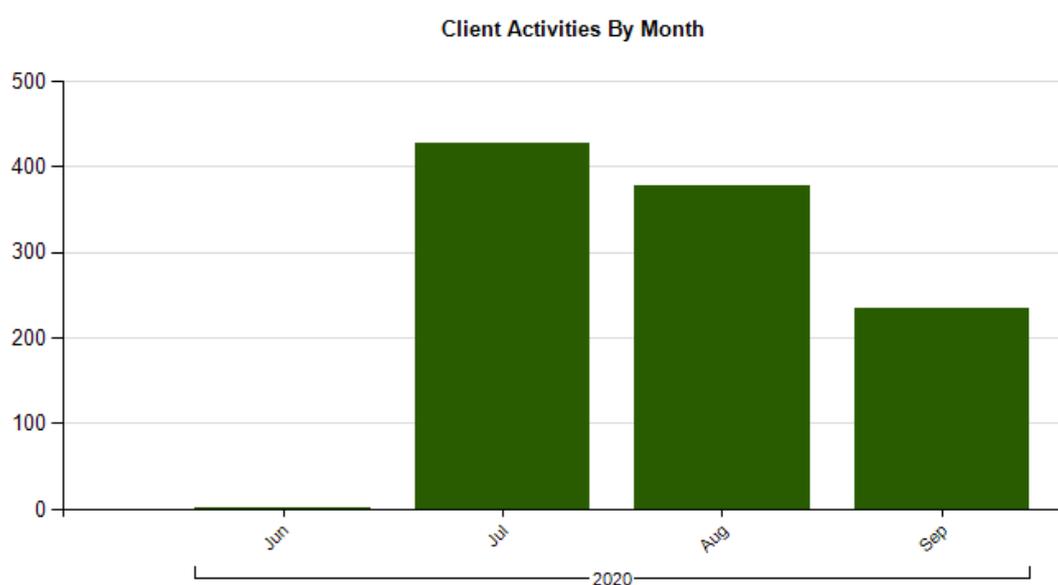
5.2.1 Overview

The data recorded in Ara Whanui shows there were 63 new enrolments and 47 discharges from the service this quarter giving a final enrolment of 1,496.

The recorded distribution of clients across Te Rūnanga/Marae network is shown in the table below:

Delivery site	New enrolments	Discharges	Current clients	Engagements
Rūnanga	15	10	1,305	482
Waiwhetu	0	3	10	51
Kokiri Pukeatua	7	13	6	8
Koraunui	16	5	59	77
Orongomai	16	0	84	349
Wainuiomata	9	16	32	74
Total	63	47	1,496	1,041

There were 1,041 engagements for the quarter (compared with 2,804 for Q4, 1,070 for Q3, 385 for Q2, and 575 engagements recorded for Q1).



The service provision in July and August reflects the work undertaken as a result of the Covid-19 pandemic and Alert Level 2 conditions.

5.2.2 Staffing

Staffing has remained relatively stable over this quarter with all past vacancies filled and staff training continues. A new kaiarahi has been appointed by Te Rūnanga as a cadet. She is currently undergoing training.

Kaiarahi

Marae	FTE	Staff Name	Qualifications	Training/development	Comment
Koraunui	1.0	Charmaine Peachy	B Social Work	<ul style="list-style-type: none"> • Training in RBA and narrative reporting • Ara Whanui training 	
Waiwhetu	1.0	Peggy Luke-Ngaheke	National Certificate in Health and Wellbeing L4 Bachelor of Alcohol and Drug Counselling Certificate in Workplace Supervision		
		Jasmine Moeahu	Enrolled in NZ Cert Whanau Ora L4 for 2021		
Orongomai	1.0	Nga Powhiri Walker	Working towards a degree Te Korowai Aroha- Mauri Ora		
Wainuiomata	1.0	Dominique Va'a	Studying B Social Work		
Kokiri Pukeatua	1.0	Ngahaka Deys	Bachelor of Social Work		
Rūnanga	1.0	Esther Lambert	NCEA Study degree in Maturanga Reo Te Wananga o Raukawa	Cadet in training Enrolled to Study NZ Cert Whanau Ora L4 2021	Esther is in a workplace cadetship

Kaiarataki

Location	FTE	Staff Name	Qualifications	Training/development	Comment
Waiwhetu	2.5	Lisa Temple	Bachelor of Bi-Cultural Social Work Annual Practicing Certificate (APC) Member of Aotearoa NZ Association of Social Workers	Professional supervision in place. Fortnightly sessions held	Additional specialist support will be contracted in as required.
		Dallas Ratu	National Certificate in Health	Use of Ara Whanui and training others in its use	
		Dr Larisa Koning	FRNZCGP	GP CPD activities Consultations with paediatricians	

5.2.3 Service delivery

As with previous quarters, the majority of clients in this were female (66%) and Māori (85%). A further 8% are Pacific Peoples

Sixty eight percent of referrals to this service are self-referrals with 2% coming from Community agencies, with a further 14% being referred from Marae.

Nearly two thirds (60%) of the clients discharged this quarter had been with the service for more than 180 days with the average tenure being 300 day. This is a significant increase on the 184 days recorded last quarter.

The main activities that reported as being delivered include Covid-19 support; Administration; Planning and Goal Setting and Advocacy/Service Navigation.

This quarter, Hauora teams have been working together to clean up the data on the Ara Whanui Database and contacting whānau through the marae phone tree, deliveries, home visits for routine wellness checks.

Most clinics have continued to run regardless of alert levels this quarter. Tikanga practices are followed – whānaungatanga with new clinicians, med students and whānau.

Orongomai have introduced Whaia Te Oranga, a new mirimiri service while Tai Chi and Wellbeing Clinic have both ended this quarter. They have continued their kai bank for whānau and community support.

Activity Type	Count
Administration	395
Plan/Goal Review	176
COVID-19 Support	132
Service Navigation	108
Advocacy	103
Transport Provision	57
GP Visit Support	29
Programme Attendance Support	17
Discharge Planning	13
Health Promotion	7
Assessment	4
Total	1041

Orongomai report there has been enquiries about more support for whānau with diabetes, free eye checks and pharmacists. They have partnered with Te Awa Kairangi Health Network (TeAHN) to provide counselling services and mental health services for Marae Whānau continuing this valuable contribution to supporting whānau with a range of mental health concerns over the last two years.

Waiwhetu Marae have held a campaign to get people fit for summer.

Other services delivered this quarter include:

- Advocacy
 - Advocating for whānau with MSD/WINZ
 - Advocating for clients with doctors/specialist/other health providers
 - Advocating for clients with police
 - Advocating for emergency housing – Kahungunu Whānau Services, Greenstone Doors
 - Advocating for whānau with Petone Budgeting services
- Community wellbeing
 - Home visits (Kaumatua support & home help)
 - Delivery of hygiene packs for Covid-19
 - Pharmacy pick-up/deliveries
 - Kaibosh (food relief)
 - Food vouchers and food supplies
 - Weekly Te Ao Māori classes to enhance personal growth and development
 - Kapa haka training
 - Kaumatua exercise sessions
 - Kaumatua Dine and Dance

- Tai Chi sessions
- End of life planning
- Transport
 - Transport provision (doctors, specialists, airport, blood clinic, marae programmes & local events)
 - Transport for clients to attend clinics
 - Kaumatua assistance with food shopping
- Whānau Hauora
 - Facilitate whānau hui, conduct assessments, whānau ora plans & advance care plans
 - Maternal Care and Child wellbeing group
- Hauora
 - Podiatry Clinics (Orongomai)
 - Hearing clinics (Waiwhetu)
 - Hapu Ora Clinics
 - Podiatrist service for diabetic patients
 - Speech therapy for mokopuna
 - Referrals to specialist services – eyes, kidneys
 - Mental health and counseling support
 - Cultural supervision – kaupapa Māori strengths-based approach to enhance personal growth and development for Marae staff
 - Acupuncture clinic (Orongomai)
 - Whaia Ara Tika Ara Hauora – Wellbeing clinic
 - Rongoa and mirimiri clinics

A total of 52 plans were developed and implemented for whānau this quarter with the majority of these being health, connectedness and/or housing plans. Thirteen whakatupu assessments were also carried out a significant increase on the 4 recorded last quarter.

5.2.4 Client satisfaction

There have been 6 client satisfaction surveys completed this quarter with 83% rating the service as excellent or performing well and one reporting it as satisfactory.

5.2.5 Key relationships and linkages

Clients continue to be referred to the Kaiarahi providing this service from self/family/friends/neighbours, Tamariki Ora staff, Marae staff and their community contacts and government agencies. Referrals and integrated service support also continues with other agencies including Whānau Ora, other community agencies and the Rapu Mahi service.

Referrals for further support for clients include:

- Health
 - HVDHB – Specialist Services, medical ward, Maternity services, Māori Health Unit
 - Hutt Valley GPs including Waiwhetu Medical Centre

Plan Type	Plans	Goals
Health Plan	24	42
Housing Plan	9	11
Connectedness Plan	7	17
Mental Health Plan	5	5
Cancer - Long Term Support Plan	4	4
Healthy Lifestyle Plan	1	1
Cardiovascular Disease - Long Term Support Plan	1	0
Diabetes - Long Term Support Plan	1	0
Total	52	80

- UH Community Mental Health
- Cervical Screening – cervical smear clinic
- Tamariki Ora
- Ora Tika – Rongoa
- Whaia Te Oranga – Mirimiri
- Te Omanga Hospice
- Hutt pharmacies
- Hutt Valley Breastfeeding Networks
- Upper Hutt Foot Clinic
- Life Unlimited
- Pacific Radiology
- Wellbeing
 - Kaibosh
 - Food Banks
 - Tuatahi Centre
- Social Services
 - WINZ
 - MSD
 - E Tu Whānau
 - Te Hikoitanga
 - Work Bridge
 - Women’s Refuge
 - Wellington City Mission
 - IRD
- Legal support
 - Just Law
 - Community Law
- Housing support
 - Housing NZ
 - Salvation Army
 - Tuatahi Housing
 - Kahungunu Whānau Services
- Budgeting
 - Whānau Family Support Service Trust
 - Petone Budgeting Services
- Counseling support
 - Marae Social Services
 - Orongomai Social Services
 - Te Awa Kairangi Health Network
 - Paepae Arahi
- Parenting support
 - Family Works – parenting support
- Employment support
 - Corrections
 - Workbridge
- NZ Police

5.2.6 Challenges

Some challenges the Kaiarahi and Kaiarataki continue to encounter include:

- The complexity of issues clients face, for example, a single client may be dealing with complex health issues at the same time as dealing with past traumas, alcohol and drug

issues, mental health, loss of connection due to incarceration, financial and housing difficulties, and removal of children by Oranga Tamariki. For example, approximately 80% of Marae current caseloads are high needs whānau. Some of these high needs include, family violence issues, parenting issues, severe health issues, and homelessness.

- Dealing with the backlog of needs caused by Covid-19
- Working with MSD and Oranga Tamariki facilitate hui to sort out details and get processes needed. It is difficult to navigate access to benefits and support
- Difficulty in contacting whānau. This often requires multiple contact attempts
- Maintaining effective communication and personal safety.
- Recording our mahi.

5.2.7 Case studies – Whānau Journeys

The following cases illustrate the range of issues we deal with, the complexities that underpin these cases and the way we work together and with other agencies to effect positive outcomes.

Case One

Whānau P is a Maori whānau of 3 with a mother aged 71, her daughter aged 41 and her grandson aged 17. The grandson is at St Pats College Silverstream and the women are both beneficiaries. The Mother has been ill in hospital and is now in palliative care. Te Rūnanga has been supporting this whānau through this period and has assisted the whānau to access care, negotiate with Kaianga Ora to transfer the lease of the home to the daughter. Working alongside Orongomai Marae social worker in Oranga Tamariki transition program for grandson.

The whānau have been provided with hygiene packs and Pak N Save vouchers. Whānau Direct funding has also been used to provide a laptop and clothing for the grandson and a mobile phone for the mother. These actions have helped to reduce the stress of the whānau.

Case Two

The Corona virus Pandemic can be stressful for people. Fear and anxiety about a new disease and what could happen is devastating and can cause strong emotions in people. J is a seventy-eight-year-old female who fits into the kaumatua category and is very susceptible to the (COVID-19) pandemic.

Wednesday 12 August J came to the Marae office very upset and anxious which is out of character. She was overly concerned with the COVID-19 pandemic and her stress levels had been raised by concerns about what might happen. Even though J understands social distancing, it made her feel isolated and lonely for her family especially her daughter whom she visits on a weekly basis in Upper Hutt by catching the bus. She had not been able to do this due to the pandemic or to attend her Wellington Hospital eye clinic.

It took J forty five minutes to calm down; I supported her by listening to her and allowing her to peel back all the layers of frustration with the Covid 19 pandemic. J actions were crucial for her coping with her stress in a healthy way which made her feel and know that she was heard and in safe environment where she was cared for.

Case three

Damian (not real name) is a male, Maori in his 40s and shares rent with a flat mate. Damian is separated from his partner and has a young daughter. His sister and her 3 x children recently moved in. Creating financial pressure on him to feed the extra mouths and pay more for household expenses.

He has been receiving food parcels from the Marae to help supplement the pantry cupboard and household expenses. His personal experience during the lockdown was depression, anxiety and

stress. Because he wasn't able to be beside his daughter to protect her, while she lives in Australia with her mother. To help ease the mind, he was able to stay in touch with his daughter via face time. Mindful of other whānau in need, he requested food parcels for another couple in the Hutt Valley and an elderly man, who is home alone and lives next door to him.

Whānau Ora called and asked Damian, who agreed to help with the delivery of food packs this month. As he got to meet Kaumatua on the way, he was able to get an appreciation by seeing for himself, how the Marae is supporting the kaumatua and the wider community. Marae are really thankful for his efforts. Getting in and out of the wet weather and carrying the parcels to the front door of the homes. By offering to volunteer his time, Damian said "it was his way of giving back because of what the Marae has done to support him and his whānau with the food parcels through the covid-19 lockdown."

Case four

C is a 60-year-old Maori male who lives with his partner (80) who has dementia. C has been diagnosed with prostate cancer, difficulty in walking due to varicose veins in both legs, high blood pressure and is a silent drinker which adds to his health issues. He presented the Marae seeking support for his cancer treatment and home care.

C was supported to see his doctor and specialist and now has an operation scheduled. He has had a visit from the Hospice. The Kaimahi checks in daily to see if more help is needed. A whānau plan has been drawn up covering legal wills, power of attorney and end of life planning. Possible home for C's partner have been discussed and a decision is pending.

As Kaimahi, we must understand confidentiality, gain trust and keep our word and lastly Listen. work to the rhythm of the client.

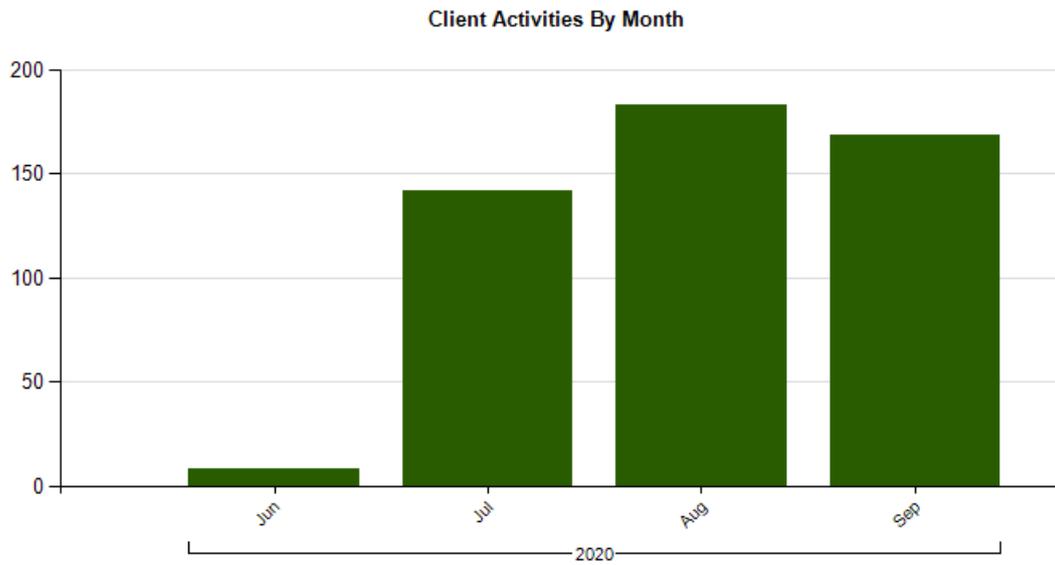
Treat people with respect and keep their mana intact. Some health professionals attitudes need to change to listen to our Maori elders when they are unwell. Sometimes they say yes when they mean No or Kao. Some say nothing because they do not want to offend the person or they plainly do not like them. You have to find the way into the client's Atea so they respond truthfully. It's a knack and required instinct.

5.3 Breast Feeding Support Service

This section of the report summarises the work of the Breast-Feeding Support Service (BFSS) for the period 1st July to 30th September 2020.

5.3.1 Overview

There have been 42 new enrolments this quarter and 49 discharges giving a final population of 37 in this service. A total of 502 client interactions have been recorded this quarter, compared a quarterly average of 429 recorded for the last financial year.



Thirty-seven (37%) percent of clients seen by the service in Q1 are Māori (compared to 40% in Q4 and 66% in Q3) and 20% are Pacific Islanders (compared with 19.6% Q4). Twenty percent of mothers seen were aged between 15 and 19 years of age.

The average length of time clients engaging with the service in this quarter was 79 days with half engaging between 30 and 119 days.

Of the mother/baby seen this quarter 80% had more than 4 contacts with the service. On average, clients have 11 contacts with 66% having between 5 and 19 contacts.

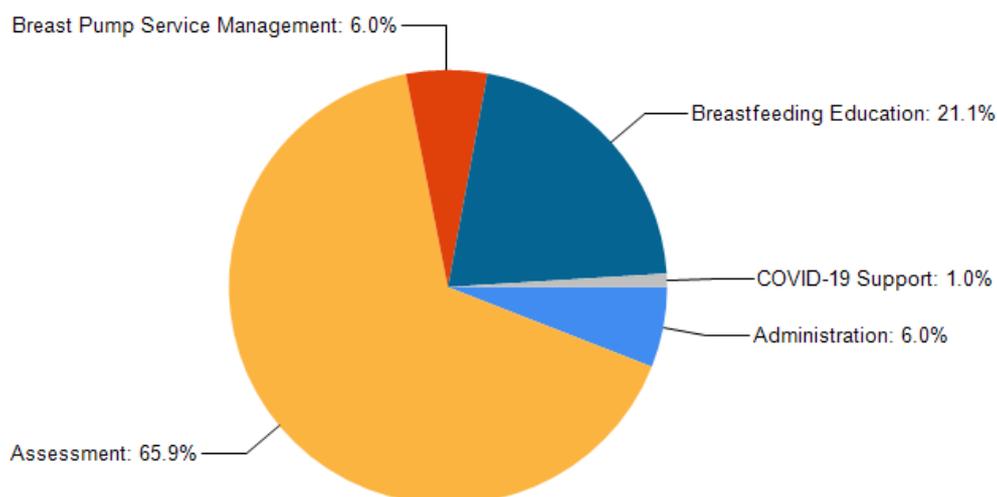
5.3.2 Staffing

Milly Carter, a Lactation Consultant (LC) and registered nurse, leads this service. She is supported by lactation consultants, Susan Reihana, Maria Hakaraia and a Breastfeeding Education Specialist Heather Cotter.

5.3.3 Service delivery

The 502 client activities recorded this quarter are set out in the accompanying table and reflect the support required to assess and support new admissions.

Client Activities by Type



In this quarter, approximately 50% of clients were referred to the service by the Tamariki Ora team or another Well Child provider. In contrast in this quarter nearly 33% of clients were referred to the service from hospital-based services. Approximately 17% were either self-referred or referred from community-based services.

Seven of those enrolled with the service as at 30th September are missing their NHI.

3.4 Client satisfaction

Two satisfaction surveys were completed this quarter and they both rated the service as excellent.

5.3.4 Networks and linkages

The Breastfeeding service works with:

- Tamariki Ora/Well Child
- Rūnanga Whānau Ora services
- Hutt Valley Breastfeeding Network
- HVDHB Maternity Services
- Oranga Tamariki
- Family Planning

5.3.5 Breastfeeding Support Service Highlights

Highlights this quarter have included:

- Working collaboratively with other services

5.3.6 Breastfeeding Support Service Challenges:

Breastfeeding challenges include:

- Managing the breast pump service. This takes up a lot of time
- Managing the increased numbers of wahine requiring support

5.3.7 *Whānau Journeys*

Journey One

JR is a single mum aged 32 years. She has 2 tamariki, KR aged 10 months and PR aged 3 years. JR has little family support but as supportive friends. She has had breastfeeding difficulties which are causing her to be stressed. JR also faced financial stress as her eldest child, PR, needed to go on a specialist diet to deal with their food allergies.

The Lactation Consultant assisted JR with her breastfeeding issues and applied for Whānau Direct funding to assist with food, power bills, firewood and car registration. The Lactation Consultant was offered a car by a friend and this was given to JR with the Whānau Direct funds paying for the registration.

JR continues to be supported by the Lactation Consultant and her GP. To date the Lactation consultant has sent 25 texts, made 4 phone calls and 10 home visits, assisted JR with 1 clinic visit and sent 5 e-mails. JR has also been supported to see her GP and practice nurse, a specialist GP, a paediatric nurse and an osteopath.

5.4 Tamaiti Whāngai Rangatahi Service

This section of the report summarises the activities of the Tamaiti Whāngai service provided by Te Rūnanganui o Te Āti Awa in collaboration with the Wellington Institute of Technology (WelTec) for the period 1st July to 30th September 2020.

5.4.1 Overview

This quarter has seen the enrolment of the second cohort of rangatahi into the MPTT programme at WelTec. There have been 30 rangatahi supported this quarter.

Relationships with WelTec continue to be positive, seeking new and innovative ways of meeting the needs of rangatahi.

5.4.2 Staffing

The service is based at Te Whare Āwhina at the WelTec Petone campus and David Lomax is the Tamaiti Whāngai Advocate/Mentor funded 0.5 FTE by Te Rūnanga to deliver the services. In this quarter Errol Weston has transferred back to Te Rūnanga to support rangatahi referred via the Iwi Panel or Oranga Tamariki Youth Justice service.

5.4.3 Service Delivery

Thirty (30) taura (students) were supported by Tamaiti Whāngai wellbeing support services during this quarter. There are mainly taura enrolled in the Māori and Pasifika Trades Training (MPTT) programmes offered by WelTec.

Tamaiti Whāngai staff use the Te Whare Tapa Wha model to monitor the status and meet any needs of students and whānau. Students who have required mental health support have been referred to the appropriate organisations for support. Most students who have provided feedback have appreciated the ongoing follow up, contact and support provided.

5.4.4 Networks and linkages

The Tamaiti Whāngai Mentor works with a wide range of networks and agencies to assist Taura achieve their goals. These include with:

- Waiwhetu Medical Centre
- Counsellors
- Tertiary education organisations (TEOs) particularly WelTec
- Police and Te Pae Oranga
- Employers e.g. Downer

5.4.5 Highlights

The main highlights this quarter have been

- Enrolling a new cohort of MPTT students for second semester
- Supporting 30 rangatahi this quarter

5.4.6 Challenges

Challenges faced this quarter have included:

- Maintaining relationships with the students through the Covid-19 rahui and supporting them to address their needs. These include needing support to address:
 - Access to food
 - Access to ICT equipment
 - Isolation from whānau

- Mental health issues
- Housing needs
- Transport assistance
- Meeting needs resulting from the Covid-19 pandemic including support for food, fees, living costs etc.
- Having some very high needs students that take up a lot of resource

5.4.8 *Tauira Journeys*

Case one

D is a single mum with a seven-year-old child. D recently moved back to New Zealand from Australia after having a fall out with her mother. She explained that the relationship breakdown with mother felt like she did not have her support.

D has a brother and aunty who live in Wellington. She was feeling depressed about her current circumstances and what her future would look like for her and her child. D is currently living with her brother's ex-partner and sees this as a short-term arrangement. D would like to work but feels she doesn't have skills. She feels that because she can't provide for her child she is worthless. D sometimes feels overwhelmed by her situation.

After accessing her current situation, the following needs were prioritised:

- Support to reconnect with whānau in Wellington.
- Support to find work and provide for her child.
- Assist D to make sure her child is ok whilst she studies.

The Kaiarahi assisted D with the following:

- Making a WINZ application
- Finding more permanent accommodation
- Finding a school for D's child
- Finding part-time work that fits with study
- Finding after-school care if required
- Support to reconnect with whānau
- Learning support for study

As a result of this support D has:

obtained the domestic Purposes Benefit;
 Enrolled on the Barbering course at WelTec
 Gained a MPTT scholarship
 Met with whānau
 Found part-time work

5.8 Health Promotion Service

This section of the report summarises the health promotion activities of Te Rūnanganui o Te Āti Awa, including cervical screening, as required under its agreement with the Hutt Valley District Health Board. It covers the period 1st July to 30th September 2020.

5.8.1 Overview

In this quarter, health promotion continued to focus on ensuring communities were safe during the Covid-19 pandemic while supporting the following health campaigns:

- Rheumatic Fever – an awareness campaign was delivered over Atiawa Toa FM
- Smear Your Mea cervical Screening campaign
- Blue September – raising awareness of Prostate Cancer.

5.8.1 Staffing

Location	FTE	Staff Name	Qualifications	Training/development	Comment
Waiwhetu	1.0	Miri Luke	National Certificate in Healthcare Assistance L4	Ara Whanui training	This role works closely with the Kaiarahi across the marae network

5.8.2 Service delivery

At all points in which clients interact with the services provided through Te Rūnanganui o Te Āti Awa and the Marae network, opportunities were used this quarter to promote procedures to support whānau to stay safe during Covid-19.

Health promotions offered this quarter have included:

- Radio promotion for rheumatic fever awareness
- Outreach cervical screening – Three outreach clinics have been held at Timberlea, Orongomai and Kokiri Pukeatua. The total cervical screening completed this quarter, including at Waiwhetu Medical Centre, totalled 115.
- Support to ensure kuia and kaumatua receive flu vaccinations.

5.8.3 Client satisfaction

Twenty-two satisfaction surveys were received this quarter with all 22 stating they were satisfied with the service.

5.8.4 Networks and Linkages

In addition to working with Ātiawa Toa, Kaimahi have continued to work to support many agencies through the Covid-19 pandemic. These include:

- HVDHB
- Regional Public Health
- Te Awa Kairangi Health Networks
- Regional Screening Services
- Kahungunu Whānau Services
- Kokiri Marae
- Te Rūnanga o Toa Rangatira

- The Roopu Awhina
- Kaibosh Lower Hutt
- Hutt City Council
- E Tu Whānau
- TPK
- MoH
- Te Kakano o te Aroha
- Timberlea Community Centre

5.8.5 *Challenges*

Challenges kaimahi face in further developing the health promotion service include:

- Finding ways to engage with wahine overdue for their cervical screening and encouraging them to get screened.
- Managing “no shows” for cervical screening

5.8.6 *Case studies*

Example One

To support 56 wahine who were identified as overdue for their cervical screening test, the Smear your Mea campaign was launched. Of the 56 wahine identified, 53% were Maori and 7% were Pacific Islander. Of the 56 identified to attend the 3 outreach clinics held, 25 attended and 24 were screened. A further 16 had their appointment rescheduled, 13 “did not attend” and 3 cancelled.

This campaign combined pampering sessions with the testing. The 25 who attended were given facials and had their nails done alongside 24 of them getting their screening test completed.

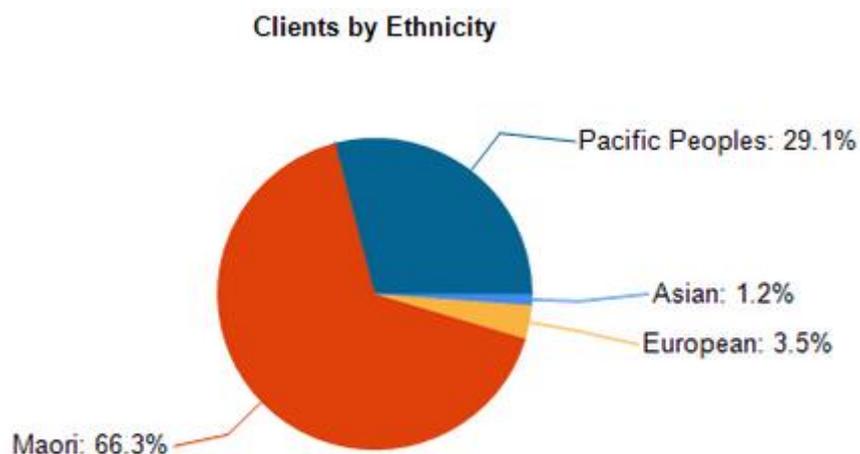
5.9 Other Services

5.9.1 Rapu Mahi

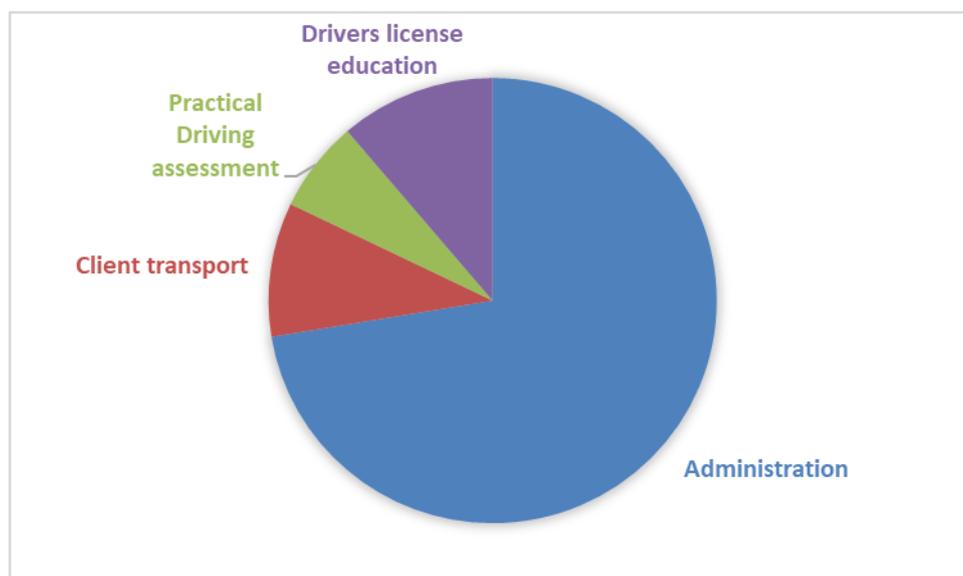
The Rapu Mahi service helps clients to gain driver's licences and to access employment opportunities. The drivers licencing service is essential for ensuring whānau can be safe while driving and therefore is a key service in supporting community wellbeing and social cohesion. A number of mothers are referred to the Rapu Mahi from the Tamariki Ora service, where mums are found to be driving without a licence.

In this quarter the service engaged with 91 clients which included 85 new clients. Fifty-four were discharged from the service this quarter leaving a final cohort of 91 clients. All but one of these clients has an NHI recorded.

In this quarter 60% of clients were male, a significant change from last quarter when 71% were female. Eighty four percent were aged between 16 and 29 years. Just over 66% were Māori and 29% were Pacific Islander.



The Rapu Mahi team recorded 907 client activities for the quarter, up from 488 in Q4 and 353 in Q3. The majority of the activity related to administration related to difficulties contacting and following up with these clients.



Referrals to this service come from a range of sources.

In this quarter there was a strong focus on supporting Tamaiti Whāngai rangatahi enrolled at WelTec in the MPTT programmes to complete their driver’s licences.

Twenty-three satisfaction surveys were received this quarter with all 23 reporting the service as either excellent (21/23) or satisfactory (2/23).

Referral Source	
Other Community	41
Self/Family/Friend/Neighbour	12
Internal - Well Child	11
Internal - Iwi Panel	10
Police	5
Internal - Marae-based Services	4
Internal - Rapu Mahi	1
Other	1

Case study 1

M is a 55-year old mother of 5 children aged between 18 and 31. She has been a widow for three years after her husband passed. He was the driver for the whānau and no-one else in the whānau had a licence. This also meant that whānau members had no form of Photo ID!

M is unemployed and does not have any qualifications. She lacks self-esteem but was encouraged to gain her drivers licence, commencing the Rapu Mahi programme in April 2019 along with her daughter. While M’s daughter gained her restricted licence, M left the programme after gaining her learners licence. She came back into the programme in May 2020 and has been supported to prepare for her restricted licence test which was booked for 9th September. She passed the test and in doing so gained in confidence and self-esteem. She now has a Photo ID and the confidence to learn other things.

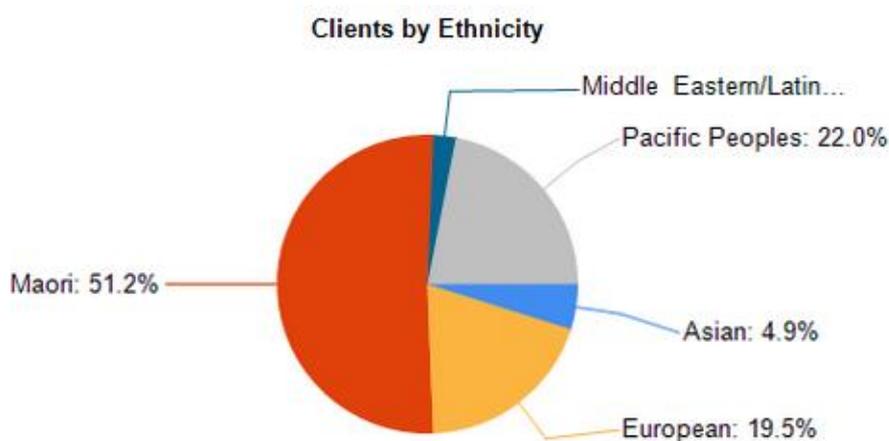
When dealing with whānau Maori it’s not always about the one person coming to the service. It’s always about providing support for the wider whānau. In this case the whānau also received support during the lockdown period with hygiene packs and pork. The whānau are very happy with the support they have received.

Case study 2

Wainuiomata Marae worked to Support Vertical Horizons delivery of their preparation for employment programme, supporting 5 rangatahi from the Marae in the programme. The programme coordinators report that 80% of those rangatahi attended transitioned into work.

5.9.2 Iwi Panel

The Iwi Panel provides a key opportunity for staff to connect with people referred to Te Rūnanga by NZ Police, who are in need, and to work with these clients to identify and meet those needs. In this quarter staff have engaged with 110 new clients referred to the service by the NZ



Police. A total of 123 clients were discharged from this service in this quarter leaving a final number of 38 enrolled in the service. While NHIs have been recorded for 30 of these clients, 8 have their NHI missing.

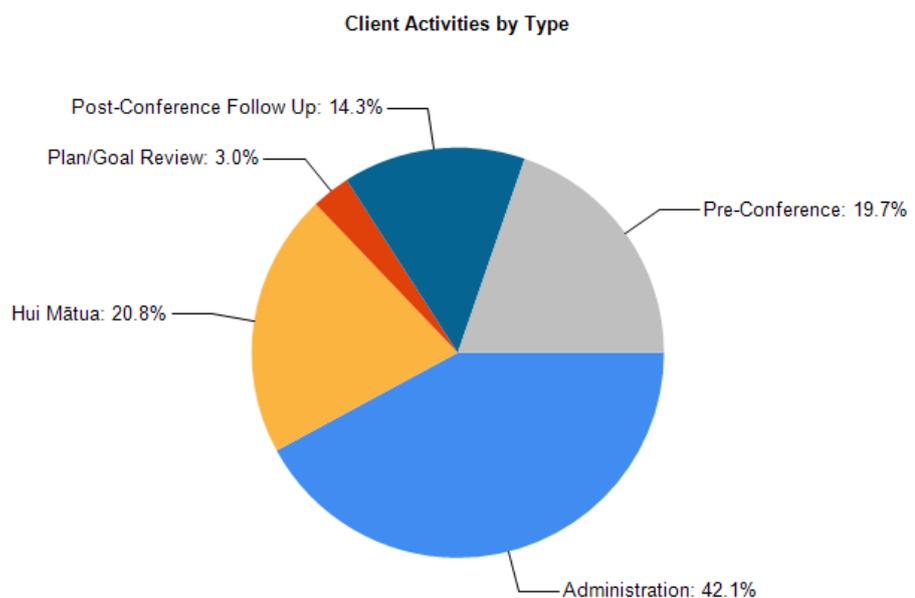
Of the 110 clients seen this quarter, 70% were male and 51% were Māori. A further 22% were Pacific Islander.

The majority (54%) fell within the 15 to 29-year-old age groups. A further 18% fell within the 25-29-year age group.

In this quarter we have recorded 461 activities for the Iwi Panel service.

The Iwi Panel kaimahi work with referrals to identify needs and prepare a plan to both address their offending and meet any underlying needs identified.

The most commonly identified need is for drivers' licences and 6 clients are referred to the Rapu Mahi team this quarter. One client was referred to alcohol and drug counselling services and another was referred for mental health support.



In this quarter 87 plans were prepared. These plans developed fall into the following categories

Plan Type	Plans	Goals
Apology/Accountability	51	50
Education and Training	14	13
Other	8	7
Financial Reparation	7	7
Support Services	6	6
Community Services	1	1
Total	87	84

Forty-nine satisfaction surveys have been received this quarter with 32 of the 49 responding recoding the service as excellent. Nine stated it performed well and the remaining 8 stated it was satisfactory.

The Iwi Panel serves an important function in diverting clients from the justice system with its associated risks of enhancing social dislocation and reducing the ability of whānau to take control of

and manage their situation. As such it has an important role in supporting Te Rūnanga's Wellbeing Strategy.

Case study 1

TMM is a 43-year-old Maori wahine with 4 sons aged 6 to 26 and a 6 year old mokopuna. TMM became engaged with Te Rūnanga after attending the Iwi Panel. She was identified as being of "high needs" and requiring whānau ora support to address the whānau needs for housing, employment, kai, clothing, assistance to pay bills, and lawyers. Whānau members also needed help with health issues, dealing with drug dependency and education.

The youngest son has learning disability and she has mental health issues. Te Rūnanga worked with TMM to create whānau plan and provided funding for food, and school uniform. Kaiarahi contact TMM twice a week to check in how she is going. This is difficult as TMM is not very stable and often rejects help.

The eldest son has got into trouble with the police again. He lives with her but does not contribute to household costs. This causes TMM additional stress. TMM has since come before the Police again as she was driving with her 6 year old in the car and crashed it. Oranga Tamariki is now involved.

This case shows the difficulties Kaiarahi often face in building trust and supporting whānau with complex needs.

Case study 2

Whānau A is a solo dad with a baby boy who is almost 2yrs old. He is currently living with his paternal sister and her children. He is on the waiting list for HNZ residence. Dad does some part-time work at a school where he teaches woodwork.

Dad was in a relationship when his son was first born and he joined the Tamariki Ora Well Child service. Well Child checks commenced for son and a referral was made to the Breastfeeding Support Service as mum needed advice with her breastfeeding. After a few months Dad's relationship with his son's mother was no more. At this point he moved in with his sister and her children.

Dad had been approached by a marae in Porirua and asked if he was able to do a whakairo for them. Dad was also interested in furthering his studies regarding whakairo, however did not have the necessary up-to-date equipment to help store and record important information that would be needed.

Funding was applied for, through Whānau Direct to purchase a laptop and phone, so that Dad could further his studies into Whakairo and will also be able to store important and relevant information on data. Dad also needed some chisels that he could not afford to get himself.

Dad was now able to take photos of his art work, i.e. whakairo, and can show the appropriate people who would be interested in the skills that he has and will gain.

Dad has gained independence as a carver. He is more confident in knowing that he has started a foundation and legacy for his son and other children that he may have.

6.0 Conclusion

Te Rūnanganui o Te Āti Awa continues to develop its model of integrated services delivery using nga Marae and other community networks as hubs to support social cohesion and community engagement. It also continues to build its capacity and capability to deliver and report on the services that support its community wellbeing. The value of having specialist health and social workers in Kaiarataki roles is producing valued outcomes and whose worth has been shown in Te Rūnanga's response to the Covid-19 pandemic.

Ensuring strategic alignment of Rūnanga structure with its strategic intent and the development of a strategic outreach approach enables Te Rūnanga to overtly embed matāuranga Māori and Ātiawatanga in its practice and reflects the growing confidence in Te Rūnanga being able to express its mahi from a Māori worldview.

Collaboration between providers has been highlighted through the Covid-19 situation and we have been able to develop a pan-iwi leadership strategic leadership, particularly with Ngāti Toa Rangatira and Kahungunu Whānau Services, and this is developing well.

We acknowledge the commitment of staff to the mahi and the communities we serve and celebrate our success with them.

Ara Whanui Overview

Service Delivery Summary for Marae-based Services

for information collected between 1/07/2020 and 30/09/2020

**Existing Enrolments as at 1/07/2020 1479****New Enrolments 64**

Referral Source	Count
Self/Family/Friend/Neighbour	44
Marae	9
Internal - Marae-based Services	4
Internal - Well Child	4
Other Government Agency	2
Other Community	1

Discharges 48

Satisfaction Survey Outcomes	Count
Excellent (5)	1
Performing Well (4)	5
Satisfactory (3)	1
Needs Improvement (2)	0

Total 7**Final Enrolments as at 30/09/2020 1495**

With NHI	467
Missing NHI	1028

Activity Type	Count
Administration	398
Plan/Goal Review	176
COVID-19 Support	132
Service Navigation	108
Advocacy	103
Transport Provision	57
GP Visit Support	29
Programme Attendance Support	17
Discharge Planning	13
Health Promotion	7
Assessment	4
Total	1044

Assessment Type	Count
Whakatupu Assessment	13
Total	13

External Referral Type	Count
Whanau Direct	13
Community Agency/Service	6
Internal - Rapu Mahi	4
Other	1
Total	24

Plan Type	Plans	Goals
Health Plan	24	42
Housing Plan	9	11
Connectedness Plan	7	17
Mental Health Plan	5	5
Cancer - Long Term Support Plan	4	4
Healthy Lifestyle Plan	1	1
Cardiovascular Disease - Long Term Support Plan	1	0
Diabetes - Long Term Support Plan	1	0
Total	52	80

Ara Whanui Overview

Service Delivery Summary for BF Support

for information collected between 1/07/2020 and 30/09/2020



Exisiting Enrolments as at 1/07/2020	44	Activity Type	Count	External Referral Type	Count			
New Enrolments	42	Assessment	331	TT-HVDHB Midwives	3			
Referral Source		Breastfeeding Education	106	TT-Palmerston North GP TT services	2			
Internal - Well Child	12	Administration	30	HVDHB MW and LC	1			
LMC	7	Breast Pump Service Management	30	Total	6			
PH WCP	7	COVID-19 Support	5					
Self/Family/Friend/Neighbour	5	Total	502					
Hospital Midwife	2			Assessment Type	Count	Plan Type	Plans	Goals
Lactation Consultant	2			Total		Total		
CCDHB Midwives/LC	2							
Internal - Marae-based Services	1							
Internal - BF Support	1							
Hospital	1							
Plunket	1							
TPU	1							
Discharges	49							
Satisfaction Survey Outcomes								
Excellent (5)	2							
Performing Well (4)	0							
Total	2							
Final Enrolments as at 30/09/2020	37							
With NHI	30							
Missing NHI	7							

Appendix 3 – Activity Report for Well Child Services

for information collected between 1/07/2020 and 30/09/2020

Exiting Enrolments as at 1/07/2020 1157

New Enrolments 122

Referral Source	
LMC	98
Self/Family/Friend/Neighbour	11
Other	8
Other Well Child Provider	3
Hospital	2

Discharges 11

Satisfaction Survey Outcomes	
Excellent (5)	2
Performing Well (4)	0
Satisfactory (3)	2
Needs Improvement (2)	0
Not Performing Adequately (1)	1

Total 5

Final Enrolments as at 30/09/2020 1268

With NHI	1262
Missing NHI	6

Activity Type	Count
Administration	1722
Core 1 - Additional	285
Core 5 - Additional	119
Core 4 - Additional	101
Core 3 - Additional	99
Core 6 - Additional	96
Core 7 - Additional	90
Core 2 - Additional	84
Core 4	72
Core 3	64
Core 2	59
Core 6	53
Core 5	51
Core 1	44
Core 7	25
Plan/Goal Review	14
COVID-19 Support	11
Assessment	3
Whanau Plan	2
Core 8 - Additional	1
Total	2995

External Referral Type	Count
Specialist Medical Services	15
Whanau Direct	9
Internal - Rapu Mahi	5
Internal - Marae-based Services	4
Community Agency/Service	3
Other	3
General Practice Team	2
Internal - BF Support	2
Outreach Immunisation	2
Paediatrician	2
Breastfeeding service	1
Ear Health Service	1
Other Well Child Provider	1
Total	50

Assessment Type	Count
Total	

Plan Type	Plans	Goals
Whanau Plan	67	20
Total	67	20