

# Pūrongo A-Tau Annual Report 2023











23



# **Karakia**

Tākiri ko te ata e

Ki runga o Te Pae Maunga

Hei tohu i te ara e

Tēnā ka hora mai

Hei tohu na Rangi e

E puritia Papatūānuku

Hei ara ngā nui

Hei ara tangata nei e

Let the first light of dawn

Settle upon the mountain ranges yonder

To reveal the world

Extended beyond me

It is the glowing face of Rangi

Embracing Papatūānuku

To awaken life

To awaken mankind

# Welcome from Network Kaumātua

Kia ora koutou,

On behalf of Te Rōpū Ārahi, I welcome you to Hauora Taiwhenua Rural Health Network's 2023 Annual Report.

The Network's board and staff are committed to enacting the principles of Te Tiriti o Waitangi with the goal of achieving equitable health outcomes for rural Māori. There is progress in the work of the Network in prioritising this goal. The Network has upheld and modelled Te Tiriti practices through aspects of their work and in embodying the below Whakataukī expressed at the start of our journey together.



E mea ana te kōrero

A saying comes to mind

Pani a te pai ki te pai

If you spread good things with kindness

Ka puta te hua o te pai

Then you will see the fruits of your work

Our rural Māori communities have been greatly affected by the ongoing COVID-19 pandemic and the systems change that we are seeing in the health service.

Te Rōpū Ārahi took part in and contributed to the Strategic Planning session with all Chapters of the Network and has also been engaged in much of the Network's activities and regular meetings with the Network's Chair, Dr Fiona Bolden, and Tumu Whakarae, Dr Grant Davidson.

Te Rōpū Ārahi contributed to and took part in some of the workshops in secondary schools to promote rural health as a career to rural youth. We acknowledge our active student Chapter (SoRHA) for their dedication in engaging with students soon to decide on their future careers.

With many challenges ahead of us Te Rōpū Ārahi continues to work tirelessly to provide excellent services to our members and to our various networks throughout Aotearoa and are committed to doing so in the years ahead.

Ngā Manaakitanga

we noth on

Nāku noa, nā

Bill Nathan

Chair, Te Rōpū Ārahi and Kaumātua for Hauora Taiwhenua

# Ngā Uaratanga **Our Values**

Kia tipu matomato ngā hapori i Aotearoa

**Healthy and thriving** rural communities in Aotearoa New Zealand

#### **Our Values** Ngā Uaratanga

Manaakitanga Generosity Wairuatanga Spirituality Kotahitanga **Togetherness** Rangatiratanga Leadership



### Manaakitanga/Generosity

We will acknowledge the mana of others, and express that through aroha, hospitality, generosity and mutual respect. Through this we will bring the best out of each other and our Network.



# Wairuatanga/Spirituality

We will recognise and acknowledge the values and beliefs of each other, those we work with, and our guests no matter where we meet or gather.



### **Kotahitanga/Togetherness**

We will work collaboratively to enhance our collective rural voice, and move in unity to bring our vision to life.



## Rangatiratanga/Leadership

We will strive to show qualities of rangatiratanga through selflessness, humility, and diplomacy. We will lead by example through genuine commitment, integrity and honesty; tika, pono and aroha.



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# Te Pūrongo o Te Kaiwhakahaere Matua a **Te Tumu Whakarae Report of the Chair and Chief Executive**





This is the inaugural report for Hauora Taiwhenua Rural Health Network, launched in Parliament on June 28 2022, after many years of planning and networking across the rural health sector.

It was only last year that we published the final annual report for the New Zealand Rural General Practice Network, one of the key founding members of this new organisation. It was a time of hope as the Pae Ora (Healthy Futures) Act had just been released, and for the first time, "rural" had been identified as a priority population. Over this year, we have seen the development of the first ever rural health strategy within Te Pae Tata Interim NZ Health Plan. Jeremy Webber (Clinical Director Rural Health) and Marie Daly (GM Advocacy) were seconded to Te Whatu Ora to work on some of the rural components of this plan; we hope that this will result in better health outcomes for rural communities. We have also seen the huge turbulence within the sector as the structure is overhauled, renamed and redesigned to meet the recommendations of the Health and Disability Review. This has happened on the heels of critical stress across the health workforce with the impact of COVID-19. Hope has sometimes been hard to maintain in the face of sheer exhaustion, especially with the additional challenges like Cyclone Gabrielle and the issues around pay disparity for primary and community care nurses.

It is at times like this that you do need support more than ever. Together we are certainly stronger, and we are pleased to report that all nine of our Te Whare Taumata/Chapters are advocating on your behalf and strengthening our network: Rural General Practice, Rural Hospitals, Rural Nurses, Rural Midwives and Maternity, Rural Scientific, Technical and Allied Health, Whānau Whānui, Rural Health Research and Education, Students of Rural Health Aotearoa and Rural Communities Aotearoa, Each Chapter has two representatives that meet with all the other Chapter representatives, along with the chair (who is also chair of the Board) and the Senior Management team at the Council. This is a time when we can share what is happening across each Chapter and focus on the advocacy needed by the organisation, identifying where extra support is needed. In addition, it is the drive for our strategic direction.

Over this first year we have still been finding our feet a bit and learning how we can best work together, but we have had key touchstones on this pathway. The first was the National Rural Health Conference held in Christchurch in September 2022, with around 400 attendees. The conference was an important time for connecting, and out of that was developed the "Christchurch Consensus" outlining immediate calls for action for rural health. These were hand delivered to the Minister of Health and the Minister of Rural Communities. We also released a book at the conference to celebrate 30 years of advocacy and support through the NZRGPN: "Growing Rural Health Tipu Haere Tuawhenua Hauora"; thanks to all of you who contributed to this and of course, to the authors.

The second key touchstone was our strategic workshop to co-design a positive pathway for rural health and wellbeing held in March 2023, which was open to all members of the organisation. Named He Waka Eke Noa | Planning the Future of Rural Health, this was an aspirational event to gather those of you who wanted to contribute to our first strategic plan, codesigned by a diverse group of rural health experts from across the sector. For the first time we had representatives from Manatū Hauora | Ministry of Health attend; we were told about the plans for a complete review of urgent and unplanned care across the sector (as opposed to "just" PRIME for rural), and we discussed the development of the rural health strategy. There were some inspiring messages from this day. Hemaima Reihana-Tait gave a wonderfully thought-provoking presentation of the Council being a potential place for "bread making and breaking;" this is an example of a unifying tradition where solutions can be found across "the shared table." It is our place to share our skills and to involve others; our job to empower whānau but not our job to fix everything. Each of the attendees was aligned to their Chapters and from that we gathered the threads to weave the basket of our strategy. The overwhelming themes were the workforce shortage, pay equity, role scope, developing our own, recruitment and retention, training and supervision. There were also requests for coordination of rural health research and access issues for rural communities, not only to health services generally but also further impact from connectivity challenges and natural disasters. One of the "low hanging fruit" which was requested was the dropping of the \$5 surcharge for prescriptions. This has happened under our current Minister of Health Ayesha Verrall.

We have completed the three-year strategic plan for Hauora Taiwhenua based on the outcomes of the workshop and this is available for you to read on our website.

#### So, what else have we done as an organisation over this year?

- We submitted a cross-sector rural response to the draft Women's Health Strategy being developed by Manatū Hauora. We see women's health currently at crisis point with so many barriers for hapū mamas to get the care they need in rural communities due to the diminishing supply of rural midwives.
- Te Whatu Ora funded our locum service to provide interprofessional cover for both rural and urban areas impacted by Cyclone Gabrielle.
- We provided advice on a rural telehealth service to be funded by Te Whatu Ora.
- We helped negotiate \$500,000 of new funding for those responding to PRIME medical calls as a stop-gap measure while we wait for the major review of PRIME, after hours and urgent care funding.
- Following our work with the NZ Rural Hospital Network (now our Rural Hospital Chapter) we have been granted a contract with Te Whatu Ora to establish and deliver a rural hospital locum service.
- We attended Mystery Creek Fieldays in both November 2022 and June 2023. This 4-day agricultural event is a key date in the rural calendar and a chance to connect with the rural sector, promoting health and wellbeing, and in recent years to promote rural health as a career.
- By March 2023 we had already run 132 workshops in 94 secondary schools to promote rural health as a career to rural youth. A huge thanks to our active student Chapter (SoRHA) for their enthusiasm and participation in this crucial part of the rural health pipeline.
- We worked with the Royal New Zealand College of General Practitioners and the medical schools of both Auckland and Otago Universities to develop a proposal for a National Interprofessional School of Rural Health, starting with a Joint Department of Rural Health. We met with Health Minister Verrall and the Minister of Rural Communities, Kieran McAnulty to present this and seek support. We were encouraged by the announcement in June 2023 of increased training placements for medical students with a focus on Māori, Pasifika, and rural students, although at 50 this is obviously too few.
- We also supported the University of Waikato with its proposal for a third medical school with a focus on rural general practice. As a Network, we will support any proposal that is true to the philosophy of the training of rural multidisciplinary students "in rural, by rural, for rural."
- We continue to advocate for primary care nurse pay parity and now also pay equity. We know that this has a huge impact on the ability to attract and retain rural nurses both in general practice and also in rural hospitals which are not owned by Te Whatu Ora. We work closely with our colleagues in GPLF on this matter.
- · We have been increasing our media activity through a new website and regular newsletters and have been developing an IT platform that our Council members can use for easier and more direct communication.

It is important to recognise our team within NZLocums and NZMedJobs who, once again, have worked relentlessly to provide locum support across the country to besieged rural practices. This job has become even more difficult through the COVID-19 period when getting international graduates into the country was nigh on impossible at times. Post-COVID we are seeing a number of our younger graduates leaving on delayed overseas trips, and there is incredible competition in the international market for trained doctors. While we cannot compete on salary rates alone, we can still offer a safe and beautiful country where it is a wonderful, welcoming environment in which to work, recreate and raise families.

Despite these challenges our NZLocums team achieved their contractual targets with Te Whatu Ora as you can read in this report. This work has provided much needed locum support for holiday breaks for rural GPs across the country as well as providing a number of longer term staffing for rural practices in a time of workforce shortage. Responding to the Cyclone Gabrielle emergency with further locum support (this time interprofessional) meant our team were put under extra pressure for a period of many weeks; but we were glad that we were able to offer support for those in dire circumstances from the climate catastrophe.

Once again, we acknowledge the funding from Te Whatu Ora that allows the rural locum service to operate, along with the programme we run visiting rural schools to develop interest in health careers.

To finish with the metaphor discussed earlier in this report, and gifted to us by Hemaima Reihana-Tait, "we must continue to make and break bread together;" bound by our joint commitment to healthy and thriving rural communities in Aotearoa New Zealand. As always, we would like to thank our Te Tiriti partner Te Rōpū Ārahi, the Board, the Council, our Chapters and Members, and our superb team at Hauora Taiwhenua who do the hard work with purpose and dedication. Most of all this year though, we would like to thank those of you who have spoken up for the first time and have added your voice to our rural choir; that will continue to sing as loudly as we can because our very lives, and those of our rural communities, depend upon it.

Manaakitanga, Wairuatanga, Kotahitanga and Rangatiratanga are our auiding values and through these we will collectively keep the flame of hope burning for a better future for rural communities and those who work in them.

Mauri ora

**Dr Fiona Bolden** 

Chair

**Dr Grant Davidson** 

Chief Executive

# Ko Wai Tātou **Who We Are**

# Tō Tātou Kaimahi | Our Staff

Dr Grant Davidson | Chief Executive

### **Senior Management**

Denise Brennock | General Manager Finance Ingrid Busby | General Manager Membership Services Marie Daly | General Manager Advocacy Robyn Fell | Operations Manager Linda Reynolds | Conference Manager Dr Jeremy Webber | Clinical Director Rural Health

#### Staff

Jane Booth | Communications Team Leader - Membership Services Rumer Grace Archer | Communications Advisor Edison Harris | Assistant to the Chief Executive & Board Secretary Samantha Hill | Rural Health Careers Programme Coordinator Alexander Nebesky | Communications Advisor Sajan Patel | Communications Coordinator

### NZLocums & NZMedJobs Team

Luke Baddington | General Manager Workforce Recruitment Jenny Butt | Senior Relationship Manager David Davenport-Brown | Senior Relationship Manager - NZMedJobs John Ferguson | Relationship Manager Jason Ng | Recruitment Coordinator Connor Owen | Recruitment and Marketing Coordinator Debra Wilson | Relationship Manager



# Tō Tātou Poari | Our Board

Dr Fiona Bolden | Chair

Rhoena Davis | Deputy Chair

Bill Nathan | Kaumātua/Board Member

Ray Anton | Chair Finance Audit Risk Committee

Mark Eager | Board Member

Debi Lawry | Board Member

Wilson Mitchell | Board Member

# Te Rōpū Ārahi

Bill Nathan | Chair

Rhoena Davis | Deputy Chair

Russell Riki | Kaumātua to Board Chair

Kim Gosman

Jaana Kahu

Tania Kemp

Herewini Neho

Hemaima Reihana-Tait

# To Tatou Kaunihera | Our Council

Sarah Walker | Rural Allied Health Scientific and Technical

Pip Zammit | Rural Allied Health Scientific and Technical

Kathy de Luc | Rural Hospitals

Margareth Broodkoorn | Rural Hospitals

Rhonda Johnson | Rural Nurses NZ

Emma Dillon | Rural Nurses NZ

Kate Dunstall | Students of Rural Health Aotearoa

Angel Harbers | Students of Rural Health Aotearoa

Grahame Jelley | Rural General Practice

Gemma Hutton | Rural General Practice

Tawera Trinder | Rural Midwifery and Maternity

Kendra Short | Rural Midwifery and Maternity

Tania Kemp | Te Whare Taumata o Whānau Whānui

Kim Gosman | Te Whare Taumata o Whānau Whānui

Gill Genet | Rural Communities Aotearoa

Bill Eschenbach | Rural Communities Aotearoa

Jane George | Rural Health Research and Education

Jesse Whitehead | Rural Health Research and Education



# Tō Tātou Rautaki **Our Strategy**

We have five strategic pillars that we believe are critical to achieving our vision in a context of health and wellbeing:

- The health system will reinforce Te Tiriti principles and obligations so that unacceptable levels of inequities experienced by Māori living in rural communities are addressed.
- Rural people will have health system support to help them stay well in their own communities with health outcomes equitable with other New Zealanders.
- Rural people will have equitable access to high quality emergency and specialist care when they need it.
- Digital services and technology will enable rural people to access care from within their home and/or communities at equitable levels of affordability to other New Zealanders.
- The rural health workforce is available, valued, well trained and supported.

# Te Mahere Rautaki Strategic Plan 2023 2026

# Commitment to Te Tiriti o Waitangi

# **Strategic Priorities**

#### **Advocacy**

Identify opportunities that arise from:

- > Pae Ora and a Rural Health Strategy
- Te Pae Tata a rural health action plan, national rural health manager and team
- > Geographic Classification for Health
- > Inclusive and diverse membership
- > Equitable access to digital connectivity

# **Collaborative Partnerships**

Work together with:

- Our Network of engaged and valued members
- > Te Rōpū Ārahi, our Te Tiriti partner
- Organisations that share our values and commitment to improving rural health outcomes

### **Developing our Capacity**

Grow our organisations' reach through:

- Being a reliable, stable and connected national organisation with robust infrastructure
- Delivering a high performance rural locum service
- Providing a national regional and local chorus of rural voices

# **Work Towards**

#### Improving health outcomes for rural Māori

So that whānau who live and work in rural communities are able to live longer, healthier lives in the communities of their choice.

#### A vibrant rural health workforce

That is from rural communities, educated and trained in rural communities, well supported and funded to stay in rural communities, across every health profession.

## To Enable

#### Accessible, sustainable and resilient health services in rural communities

For both whānau who live and work in rural and remote communities and are reliant on access to planned, acute and emergency health services now, and those who will do so, well into the future.

# Ngā Uaratanga -Our Values









### Our focus will be on:



Achieving equitable health outcomes for rural whānau



Monitoring rural health system performance and holding agencies to account for these



Equitable funding for rural health services



Increasing our influence on rural Māori health outcomes



Addressing the rural health workforce crisis



Building strength and organisational resilience into our Network



Ensuring everyone living in rural and remote communities has unrestricted access to the digital technology they need to access health care

# **Our Vision**

Kia tipu matomato ngā hapori i Aotearoa Healthy and thriving rural communities in Aotearoa New Zealand



ASE

# Ngā Taumata | Our Chapters

The nine Chapters of Hauora Taiwhenua are critical to ensuring that the 'united rural voice' of Hauora Taiwhenua represents the diversity of rural health professionals and the rural communities they live and work in. While Chapters are instrumental in fostering a closely connected membership base, in this first year of operation, we know that they are in varying stages of development, with work to be done in fine-tuning the way they function together and contribute to the Network's success.

The establishment of Chapter Committees and the appointment of Chairs to represent them in Council were initial steps in this journey. The Committees then focussed on clarifying their purpose and developing workplans that reflect this. The emerging functionality of Chapters is a priority for Hauora Taiwhenua as they are fundamental to how we engage with government agencies and the initiatives they are undertaking that we contribute to. For example:

- The Rural General Practice Chapter is closely connected to our work with Te Whatu Ora on the review of afterhours and PRIME services, and the establishment of a rural telehealth service.
- The Rural Hospitals Chapter has been working with us to develop a rural hospital locum service, and confirming the role they play in the restructure of the health system.
- · SoRHA is a dynamic and geographically spread Chapter whose members are vital to the delivery of our Rural Health Careers Programme and the Health and Wellbeing Hub at the Mystery Creek Fieldays.

The development of Chapters will continue to be a priority for Hauora Taiwhenua in our second year of operation as we learn from each other to strengthen their role within the organisation.



Te Whare Taumata o Ngā



Rural Hospitals / Te Whare Taumata o Ngā Hōhir Taiwhenua



Rural Scientific, Technical and Allied Health / Te Whare Taumata o te Mātauranga Pūtaiao Hangarau



Rural Nurses NZ / Te Whare Taumata o Ngā Nēhi Taiwhenua o Aotearoa



Rural Health Research and Education / Te Whare Taumata o te Mataurang



Rural General Practice / Te Whare Taumata o Ngā Tākutatanga Taiwhenua



Whānau Whānui



Rural Midwifery and Maternity / Te Whare Taumata o Nga Kaiwhakawhānau me te Whare



Students of Rural Health Aotearoa / Te Whare Taumata o

# **MYSTERY CREEK FIELDAYS**

Our Chapters have actively participated in Mystery Creek Fieldays, especially SoRHA, Rural General Practice and Rural Communities, whose members volunteer as support for the Hauora Taiwhenua Health and Wellbeing Hub event team. The team of student Health Navigators receives excellent guidance from our experienced rural GPs and nurses, making Fieldays a significant event for our Chapters.

Samantha Tait, 2022 student volunteer, said "Volunteering at the Fieldays Health Hub is such a blast. You get to meet loads of new people who are passionate about rural health. From tractor racing to taking blood pressure, each day is different, and you can make a huge difference to members of the rural community."



Scan the QR Code to hear more from Samantha about her role at Mystery Creek Fieldays 2022.



# **Goal 1: Workforce Support**

Outcome: Provide workforce support to rural health organisations who are in need of help, while also delivering initiatives that grow our future health and wellbeing workforce within Aotearoa New Zealand

#### NZLocums & NZMedJobs Achievements

The past year has been one of significant activity and achievement for the NZLocums & NZMedJobs team. As we navigated the ongoing challenges presented by the COVID-19 pandemic, we also responded to the urgent needs arising from Cyclone Gabrielle while continuing our commitment to rural recruitment and locum support.

#### **Tautoko Rural**

With the persistent presence of COVID-19, our TR (Tautoko Rural) initiative, which concluded on December 31, 2022, played a vital role. With funding from the Ministry of Health (now Te Whatu Ora), we stepped up to provide comprehensive locum support services to rural practices and community-owned rural hospitals. Our assistance extended to all facets of healthcare, including GPs, NPs, nurses, and administrative support. We successfully filled a number of placements, making a substantial impact on our rural communities. One practice expressed:

"CFHC applied for COVID-19 funding through Hauora Taiwhenua to support our clinic's needs during the pandemic. The impact was huge for our team and the Coromandel residents. Thank you, Hauora Taiwhenua, for the support and ongoing support we receive. Naā mihi nui kia koutou."

#### Cyclone Gabrielle

In February 2023, Cyclone Gabrielle wrought havoc upon regions across New Zealand, causing widespread devastation. In the aftermath of this natural disaster, we recognised the heightened healthcare demands in affected areas. Collaborating with Te Whatu Ora, we secured additional funding to bolster workforce support in these cyclone-hit regions. Responding swiftly, the NZLocums & NZMedJobs team recruited GPs to provide essential healthcare in some of the hardest-hit locations, including Coromandel, East Coast, and Hawkes Bay.

In addition to addressing crisis situations, our team continued to excel in rural recruitment and locum support, exceeding the annual targets for locum support and long-term placements.

# DR SUSIE MOLLER LOCUM PLACEMENT - A RECOUNT FROM TAIRĀWHITI

"There was really no other decision to make – I had the time and training, and my family were supportive," said Dr Susie Moller.

The NZLocums team placed Dr Moller, an Auckland-based locum GP, in Tairāwhiti to assist those practices most deeply affected by Cyclone Gabrielle.

Impassable roads challenged practices, resulting in short staffing issues or patients being unable to get to clinics or clinicians to them. However, the community's resilience prompted health professionals to think creatively, utilising horses and helicopters to overcome infrastructure damage.

"Sick patients needing tertiary care travelled several hours through backcountry forestry roads, or if urgent, we would need to call a helicopter and hope the weather was OK for them to come."

Despite all these challenges, the people of Tairāwhiti did not bat an eye when supporting each other. Dr Moller described the collective feeling of hope within the region, with everyone



getting on with the job to help each other. Nothing was impossible. Something could be worked out.

"I take my hat off to the permanent Healthcare teams there. They are relentlessly positive in very trying circumstances, isolated and under-resourced, but ultimately most important, care deeply for their community."

#### Goal 1: Workforce Support cont.

#### Te Whatu Ora Collaboration

We have fostered an excellent relationship with Te Whatu Ora's International Recruitment Centre and have partnered with them regarding their international GP campaign. All leads generated by their campaign come directly to us to process from application right through to placement. This speaks to our standing and reputation in the recruitment work Hauora Taiwhenua does through its NZLocums & NZMedJobs division. This relationship commenced in June 2023 and was a great end to a successful year.

### **Connecting With Our People**

Each year we actively engage with rural practices across Aotearoa New Zealand. In 2022/23 we visited regions including Nelson Marlborough, Northland, Auckland, Southland, Waikato, Wairarapa, and Manawatu, facilitating meaningful discussions on workforce issues and exploring broader healthcare challenges, including funding.

Furthermore, our active participation in several New Zealand conferences held in Rotorua and Christchurch during the financial year allowed us to engage directly with healthcare professionals from diverse backgrounds. We enjoy meeting with the people we work with on a day-to-day basis. It helps us to understand your needs and how we can help.

We remain dedicated to our mission of supporting rural healthcare in Aotearoa New Zealand As we continue to navigate these dynamic and ever-changing landscapes, we extend our gratitude to our partners, supporters, and the dedicated healthcare professionals who make it all possible.



Relationship Manager John Ferguson, with Aruni Dias and Dr Harsha Dias at Pae tu Mokai Featherston Medical



Senior Relationship Manager Jenny Butt visiting Wakefield Medical Centre



John Ferguson and Luke Baddington at the NZLocums & NZMedJobs stand at this GPCMF 2023 in Rotorua.



# What it's like to work in NZ, from a US family physician



Scan the QR Code to hear from Debbie Allert, MD about her experience working in New Zealand, through our NZLocums & NZMedJobs division.

# **Our Performance**

# **Rural Recruitment Service** (Long-term Placements)

We assist eligible rural health providers with recruitment of long-term and permanent Rural General Practitioners and Nurse Practitioners.

**PLACEMENT TARGET** 2022/23

**PLACEMENTS MADE** 2022/23





# **Long-term Placements**



# **Rural Locum Support Service** (Locum Support Placements)

We ensure that eligible providers can access up to two weeks locum relief per 1.0 FTE, per annum.

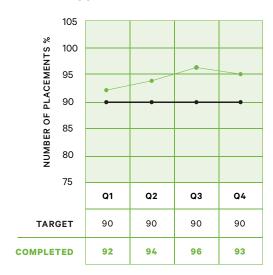
**PLACEMENT TARGET** 2022/23

PLACEMENTS MADE 2022/23





# **Locum Support Placements**



\*Included Cyclone Relief placements as it was agreed with TWO that any CG placements were to be included in our locum support placements.

### **Interim Placements**



ADDITIONAL SHORT-TERM PLACEMENTS INTO RURAL **PRACTICES** 

### **Tautoko Rural**



FOR THE PERIOD 01 JULY 2022 TO 31 DECEMBER 2022

(when the Tautoko Rural initiative ended)

# Cyclone Gabrielle **Locum Support**



FOR THE PERIOD 20 FEBRUARY TO 30 JUNE 2023, WE PLACED 20 LOCUM PLACEMENTS

# Ngā Mahi Hauora Taiwhenua ki Aotearoa Rural Health Careers Aotearoa New Zealand

### **Rural Health Careers Promotion Programme**

Our Rural Health Careers Promotion Programme, run in partnership with Students of Rural Health Aotearoa, is one of the ways we contribute to addressing the rural health workforce crisis.

In 2022, the Network was delighted that Te Whatu Ora agreed to extend funding for this programme for another year.

This has allowed us to continue our promotion of rural health careers through our renowned rural school trips, noho marae, webinars and promotional videos. Promoting rural health careers to students is a vital part of our long-term solution to the rural health workforce crisis and will ensure we have a strong and sustainable future workforce.













## **Rural Secondary School Visits**

The rural secondary school visits are the foundation of the Rural Health Careers Promotion Programme. They involve groups of tertiary students touring regions and visiting rural schools to host interactive health career workshops with pupils. This initiative has proven to be invaluable for rural school pupils, engaging them in discussions about their futures and the health career pathways available to them.

Since June 2022 when COVID restrictions eased, we have been able to host in-person rural health careers sessions, visiting with year 9 - 13 students from rural boarding, secondary and composite schools throughout Aotearoa New Zealand. In between school visits, we schedule practice, hospital and health professional visits for our volunteer tertiary students to meet with rural healthcare workers and learn about the rural workforce outside of the lecture halls.

"It was a huge privilege to have the opportunity to return to the rural schools I attended and to give back to the communities that helped shape who I am today."

- LALIT RAIKWAR, 5th Year Medicine student at Otago University, Thames High School graduate and volunteer for the 2022 Coromandel region trip.

Thanks to the kind generosity and support of Te Hiringa Hauora / Health Promotion Agency (THH), we are able to actively promote and encourage addiction-free lifestyles to our rural youth. They have supported us with many of our events, including our noho marae, Fieldays, Rural School Visits and the National Rural Health Conference. Throughout all these events, we have supplied rural schools with THH

promotional materials and information, utilised their material within health activities and workshops, and have even helped rural parents get support on how to discuss these topics with their children. Te Hiringa Hauora messages have hit close to home with some of our rural volunteer tertiary students, with many of them recalling the accessibility and pressures around drug and alcohol use from a young age in their own rural towns. Our partnership makes delivering these messages more natural as they are presented by young people who have come from the same background, alongside other health information and support to better their education and wellbeing.

# What's being done about the dire doctor's shortage in rural areas?

#### Scan the QR Code

to catch our Rural School Visit trip in action at Taranaki's Green School in June 2022, with Seven Sharp heading along to capture what's being done to attract doctors to the rural regions?



#### In 2022/2023 we:















# RURAL SCHOOL VISITS JOURNEY THROUGH BAY OF PLENTY/ GISBORNE -

### KYLA FUNG, 2022 TRIP VOLUNTEER

The rural school trip was an absolutely wonderful experience. Every school we visited was unique and special in its own way, and each received us with enthusiasm. It was very encouraging to see how the students engaged with us. Seeing the students' faces light up when they listened to their own and friends' heartbeats and getting them to compete with the number of push-ups to try to raise their heart rates were very special moments. While I know we only met a fraction of the students in these areas, I feel very grateful that I even had the chance to visit these schools and potentially plant that seed into some of our youth's hearts.

Outside of seeing the positive impact we left on the students, this trip also greatly facilitated my own personal understanding of rural health. While I appreciated all the scenic views as we travelled along the East Cape, I think I developed a greater appreciation and respect for the people who live in these areas and how they took pride in their identity and lifestyle. Having lived in Auckland since I started



my tertiary studies, I saw the value of smaller communities and how strongly connected they were to one another and their land. It expanded my understanding of what a good quality life looks like and where healthcare fits into that. The trip has inspired me to move out of the major cities and consider living and working in a smaller area.

# Ngā Hua o Te Tau Our Key Achievements

2022 - 2023 Financial Year

**514** 向市 Individual Members

141 con Members



19 Media Pitches



3 Conferences
Attended





**7**Rural Hospitals
Visited











3500+
Rural School
Students Reached





# **Goal 2: Services to Members**

Outcome: Provide services to members so they feel informed, listened to, supported, and networked with peers

In 2022, the New Zealand Rural General Practice Network made the transformation to unite with its partners the Rural Health Alliance Aotearoa New Zealand, Rural Nurses New Zealand, the New Zealand Rural Hospital Network, Students of Rural Health Aotearoa and the New Zealand Institute of Rural Health to form a new collective organisation representing the breadth of the rural health sector.

The newly established Network, Hauora Taiwhenua Rural Health Network, carries the legacy of the combined associations through its membership framework and continuing advocacy for equality in access to health care and health outcomes for rural communities.

Hauora Taiwhenua Rural Health Network's (the Network) membership framework is defined in the society's constitution and is a tiered structure with the vision to be inclusive of the breadth and depth of individuals and organisations that support rural health outcomes.

We acknowledge and credit the founding members, all past members and leaders, who have championed the former Networks by signing up as Members of Hauora Taiwhenua Rural Health Network.

We had steady growth throughout the year. The Network ended the year with 514 Individual Members and 141 Organisation Members.

It is only with this strength and the support of all our members that it is possible to flourish in such a significant way. Thank you to all members who have committed their valuable time through workshops such as the Strategic Planning Day 2023, building policy events such as Conference 2022, Network and associated organisations webinars, volunteering for the Rural Health Careers programme and sharing our advocacy news through social media and word of mouth.





## STRATEGIC PLANNING DAY

Our 2023 strategic planning day was a showcase of our Chapter's collective strength. Over 100 members from across New Zealand, with an additional 25 joining virtually, collaborated to shape a better future for rural health.

The opportunity to hear first-hand from staff of Te Whatu Ora and Manatū Hauora on the short-term response plans for rural health and then the longer-term development of a rural health plan provided a great context for our sector. The group then set about identifying the strategic priorities for rural health that Hauora Taiwhenua, as a collective of experts and connected rural health voices, could campaign for over the next three years.

Denise Irvine, Rural Communities Chapter, said, "Being personally engaged in these discussions with different rural health professionals, all working towards the same goal for the future direction of rural health, was exciting, but the fact that these discussions around rural were being held was also a very important step."

"The breakout conversations held in the afternoon of the complexities of rural health delivery into the rural



health professionals' curriculum, including the value of technology and the gradually improving internet, the importance and understanding of culture to patients, the challenges of farming life and the difficulty of travel, were exciting and progressive."

# **Rural General Practice Stocktake 2023**

In 2023 we carried out the first, of what is planned to be an annual, survey of the "State of Rural General Practice" in New Zealand. In this first year we received a 63% response rate (122/193) of practices. We hope to improve further on this in future years. It is important to recognise that the results are only indicative of the general state of rural practice as the respondents were self-selecting and the surveys were completed by a sole representative of each practice, often

the practice manager. Also note that not all respondent practices answered every question, and we have indicated response rates in the results where appropriate.

The value of this survey will be in tracking trends across future years.

Thank you to the Rural General Practice Chapter for helping design and promote this survey to its membership.

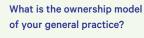
# 'Temperature' Gauge of Your Practice



Our general practice is sustainable in terms of its overall 'health'

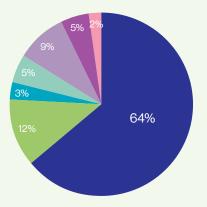


# **About Your Organisation**









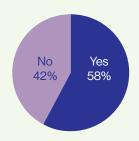
# Ratios of GPs to **Registered Patients**

Clusters GP:Patient Ratios	Percent of Practices
1:1-1299	30%
1:1300+	70%

70% of rural general practices are significantly over the RNZCGP stated maximum acceptable patient ratio of 1:1300, GP:Patient.

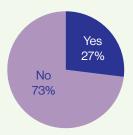
# Are you advertising any General Practitioner (GP) / Rural Generalist Vacancies?

The duration of advertisement for GP vacancies ranges from 1 week to 104+ weeks. The average duration of advertisement is 31 weeks



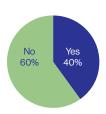
## Are you advertising any Nurse Practitioner (NP) or Registered Nurse (RN) vacancies?

The duration of advertisement for NP and RN vacancies ranges from 1 week to 52+ weeks. The average duration of advertisement is 13 weeks.

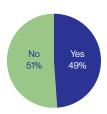


# **About Your Services**

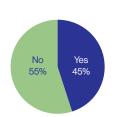
Does your practice open during the weekend?



Has your practice had to reduce or stop any health services because of staff numbers or vacancies?



Do you run an urgent care (emergency department equivalent) arrangement?



What best describes the enrolment status of your practice?



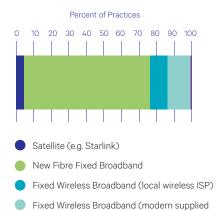




# Connectivity

What type of broadband and mobile coverage do you have?

## **Broadband Options**

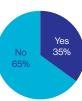


Traditional Copper Wire Based (ADSL/VDSL)

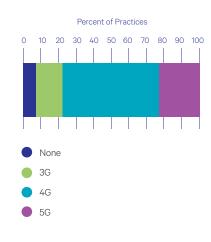
Is connectivity holding back your

by mobile phone provider

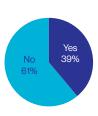
patients from accessing good health care?



# **Mobile Options**

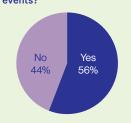


Have you been in an emergency situation where connectivity or mobile coverage has been an issue for patient care?

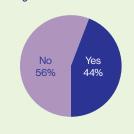


# **Population Surges**

Does your rural general practice experience any population surges during summer, winter, weekends, public holidays, or specific events?



Do you plan for extra workforce to cover these surges in demand?



# **National Rural Health Conference 2022**

# Mā mua ka kite a muri, mā muri ka ora a mua Shaping the future of rural health

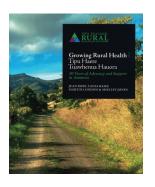
The National Rural Health Conference is the annual flagship event for Hauora Taiwhenua Rural Health Network members and the wider rural health sector. In 2022 we held our first event following the transition from the New Zealand Rural General Practice Network to Hauora Taiwhenua Rural Health Network.

Hosted by Hauora Taiwhenua Rural Health Network and our Te Tiriti partner, Te Rōpū Ārahi, the conference was held at Te Pae Conference Centre in Ōtautahi Christchurch and attracted over 400 delegates, including general practitioners, nurses, midwives, allied health practitioners, researchers, practice managers and students, as well as many health sector leaders.

The four conference themes of rural health workforce: retaining, growing, and recruiting the future workforce, rural health research, equity and cultural competence, innovation and sharing success shaped the programme with the key outcome being the Christchurch Consensus.

Hauora Taiwhenua promised to produce the Christchurch Consensus Statement for Improved Rural Health so that the concerns, proposed solutions and calls to action of the united voice of attendees of the National Rural Health Conference 2022 can be presented to the Government and its Agencies.

The Conference also focussed on the celebration of being together, the celebration of 30 years of the contribution from those in forming and driving the NZRGPN, and the celebration of sharing knowledge and practice.



The book Growing Rural Health Tipu Haere Tuawhenua Hauora (30 years of Advocacy and Support in Aotearoa), celebrating the achievements of the NZRGPN, was launched at the event.



Martin London, Jean Ross, Tania Kemp, and Shelley Jones, Authors of Growing Rural Health Tipu Haere Tuawhenua Hauora

Keynote Lightning Concurrent Awards Talks Workshops Presented **Speakers** Sessions **Delegates Presenters** 





















# **Awards**

# **Honouring Rural**

#### Distinguished Fellowship of the Division: Dr Jeremy Webber

Our very own Dr Jeremy Webber, Clinical Director of Rural Health at Hauora Taiwhenua Rural Health Network, was honoured with a Distinguished Fellowship by the Royal New Zealand College of General Practitioners, Division of Rural Hospital Medicine.

This recognition is a testament to Dr Webber's unwavering commitment to rural healthcare. His dedication to improving health equity is evident through his continuous commitment as a rural GP, his role at Hauora Taiwhenua and his representation of rural health on various Ministry of Health taskforces and panels.

The Distinguished Fellowship is one of the highest accolades awarded by the College and is reserved for individuals who have made enduring contributions to general practice, medicine, or community health and wellbeing.

"His natural empathy and genuine concern for people leads to effective relationships being built which enables an ability to get great outcomes whether clinical or political."

- Dr Grant Davidson, Chief Executive, Hauora Taiwhenua





### **COVID-19 Response Recognition Award**

In May 2023, to our great pleasure, the Network received a COVID-19 Response Recognition signed by Prime Minister Chris Hipkins.

Throughout the COVID-19 response, the Network provided operational support to those in need. Contracted by the Ministry of Health, the Network provided services that placed health and disability workers across all rural practices, becoming a part of the community's testing, vaccination and support services.

# Hauora Taiwhenua Long Service **Award 2022**

Linda Reynolds was recognised for her long service as a staff member working for the New Zealand Rural General Practice Network with the Hauora Taiwhenua Long Service Award 2022. Linda, whose role at the time of writing this report holds the title of Conference Manager but has over her 19 years of service, held roles in NZLocums, Interim Chief Executive of the Rural General Practice Network and the GM Membership. Congratulations Linda!



## Mobile Health | Hauora Taiwhenua Rural Health Scholarship

Hauora Taiwhenua Rural Health Network has partnered with Mobile Health to offer rural youth financial support in their pursuit of health studies through four annually awarded scholarships.

The scholarships (with at least one targeted at Māori or Pasifika students) are offered to rural youth entering their first year of full-time undergraduate study in nursing, medicine, or allied health related courses at any New Zealand University, Polytechnic, or Private Training Establishment.

# The four recipients for the 2023 year were:



Ella St John from Queenstown studying a Bachelor of Nursing at Otago Polytechnic



Emma Billings from Tūrangi studying a Bachelor of Midwifery at WINTEC



Lexi McQuaig from Ōpunake studying a Bachelor of Science at Massey University



Seba Metzler from Gore studying the Health Sciences First Year course at the University of Otago

#### **BNZ Rural Development Scholarship**

Hauora Taiwhenua was delighted to announce that the BNZ Rural Development Scholarship for 2023 was awarded to Samantha Menezes. Samantha is a fourth-year medical student at Tauranga Hospital, currently holding a bachelor's degree in both nursing and public health, a postgraduate diploma in health policy, and is passionate about becoming a rural GP in the future. She has been involved as a volunteer in Hauora Taiwhenua rural school visits tours and has since been conducting a research project with Dr Kyle Eggleton.

"Our project was a rapid review of the available literature about rural healthcare ethics. It is the first research paper to describe rural doctors' unique ethical challenges compared to urban doctors. It is currently awaiting a peer review and is informing the development of a teaching resource about medical ethics for medical students."

"The scholarship has allowed me to explore my new-found interest in rural medicine. I got to 'deep dive' into the literature and have in-depth but casual discussions with Dr Eggleton about the reality (both the highs and lows) of being a rural doctor, so thank you Hauora Taiwhenua Rural Health Network and BNZ for this opportunity."



# **Goal 3: United Voice**

Outcome: Be the trusted and united voice of rural health and wellbeing: Identify issues of critical interest to the rural health and wellbeing community and advocate for these with Government, government agencies and the public in order to impact positive change.

We are proud to be acknowledged across government and the health sector as the trusted and united voice of the rural health sector. This provides many opportunities to advocate at both a government policy and on-the-ground level and therefore, encompasses both the interests of our members and most importantly, all those who live and work in rural communities.

This year, we have been directly involved in developing the Government's first Rural Health Strategy and its implementation through Te Pae Tata (NZ Health Plan). We have worked closely with Te Whatu Ora on rural initiatives through:

- · Senior staff secondments
- Board, Council and staff participation in working groups
- Members' involvement in projects such as the National PRIME Committee, Aeromedical Service Review, and the development of a national rural telehealth service.

We would also like to thank the contributing PHOs for their ongoing support of our Clinical Director Rural Health position, held by Dr Jeremy Webber. Jeremy's role has been instrumental in shaping our strategic initiatives, such as the finalised three-year Strategic Plan and Advocacy Priorities. Through their support, Jeremy has also had active engagement in various clinical leader forums and policy development groups, to ensure that rural perspectives are integral to critical policy decisions.

Te Whatu Ora Health Workforce Plan, and more specifically its 365-day plan, incorporates rurally specific initiatives that align with the Network's workforce plan produced in early 2022. We attribute this to the collaborative working relationships staff and members have with leadership in Te Whatu Ora and our engagement with their workforce taskforce and advisory groups.

Our submission on the Government's Women's Health Strategy, made in March 2023, demonstrated that the depth and expertise of our Network membership reaches across wahine to a living in rural and remote areas to rural general

Left: Donas Nathan, Kendra Short, Gemma Hutton and Sarah Walker in discussion during the Hauora Taiwhenua Council Session at our Strategic Planning Day



Right: Taking time to kōrero, Debi Lawry, Mark Eager, Bill Nathan and Margareth Broodkoorn



practice and rural hospital specialists, and onto women's health and wellbeing medical specialists.

We are an active participant in the General Practice Leaders Forum (GPLF) alongside other GP membership groups on matters related to general practice. The Network contributes the uniquely rural perspective to the Forum's monthly meetings and issuesbased activities.

On-the-ground issues have also been a focus of our advocacy this year. This year, we secured new funding for PRIME attendances at medical notifications and also for telephone clinical consultations. Neither of these were funded for PRIME callouts in the past. We also ensured rural hospitals and general practices impacted by Cyclone Gabrielle had access to fully funded locum support.

Following Rural Hospital Summits in 2020 and 2021, the Network advocated that a nationally coordinated rural hospital locum service could optimise the existing rural hospital locum workforce, reduce the national cost of commercial recruitment services, and provide a platform for an international recruitment campaign. This has led to the Network entering a three-year contract with Te Whatu Ora for the development of this service.

PUBLISH (PRINT, RADIO, TV, ETC.) ADVOCACY PIECES ON KEY ISSUES TO INFLUENCE THE REQUIRED CHANGES THAT HAVE BEEN IDENTIFIED.





**DELIVER WEBINARS/DISCUSSIONS TO** ALLOW THE SECTOR TO INTERACT WITH DECISIONMAKERS OVER KEY POLICY ISSUES.





ACHIEVED per annum

### RURALFEST

RuralFest, now over five years old, carries the overarching aim of achieving equity of access to healthcare services for rural New Zealanders. With the advocacy work continuing today as Hauora Taiwhenua, Dr Sarah Clarke, Manatū Hauora Clinical Chief Advisor Rural Health, spoke of its influence.

"RuralFest has been immensely important in getting the rural priorities articulated in a way that we can present to rural caucus - I would like to think that some of that work is the reason we are seeing these changes to include rural in health reforms now."

"In my career, this is the first time I've felt like rural is becoming a priority - it really is a cause for celebration. Rural communities are the powerhouse of the agricultural economy so ensuring their wellbeing should be a 'nobrainer'. Sustained lobbying from a group of passionate people has helped it become a 'no-brainer' to our nation's policymakers too."

In preparation for RuralFest 2023, our Chapters collaborated effectively, with Chapter Committees engaging their members in discussions about our advocacy priorities. Chapters responded to how these priorities could result in meaningful change for rural health outcomes, later reported back by selected Council members at RuralFest.



# **Goal 4: Te Tiriti o Waitangi**

Outcome: Ensure Hauora Taiwhenua upholds and role-models practices that are consistent with Te Tiriti o Waitangi.

# **Tikanga Training**

Our partnership with Te Rōpū Ārahi continues to support the development of the organisation through a variety of support mechanisms including assessment of service support needs, advocacy and relationship development with whānau, hapū and iwi, linking and collaboration, monitoring support and education.

Demonstrating our commitment to personal development and understanding the importance of Te Tiriti as an underlying foundation to our work, Te Mahi Ako | Skills Active developed a Level 2 Certification, Taumata Kāwai Rangatira, for staff members. This online certification has been well received, with at least half of the staff completing or nearing completion of the course by July 2023.

# Nurturing our partnership with Te Ropū Ārahi

Ensuring our Tiriti partner, Te Rōpū Ārahi, was involved in the co-design of all major events that Hauora Taiwhenua organised, we welcomed the advice of the Rōpū in the design and delivery of the 2022 National Rural Health Conference and the 2023 Strategic Planning Day. Prior to these events, staff

were fortunate to participate in waiata training with Network Kaumātua Bill Nathan and his wife Donas. Kaumātua to Board Chair, Russell Riki, also played a key role in our events including leading the opening and closing karakia. During these events, Māori leaders shared pūrākau to inform and guide our thinking with a culturally appropriate lens.



Above: Russell Riki, Kaumātua to Board Chair Below: Te Rōpū Ārahi members with Peeni Henare (Fourth from left) at NRHC 2022



In addition to the partnership with Te Rōpū Ārahi, Te Whare Taumata Whānau Whānui has worked alongside the Hauora Taiwhenua Council and across all Chapters to strengthen their relationships with iwi, Māori, Hapū and Whānau to support their understanding of issues that are impacting on Māori health outcomes. Whānau Whānui has contributed an informed and highly valued rural Māori perspective to all of Hauora Taiwhenua's work.

Each month, NZLocums hosts newly arrived international locums at a three-day Orientation. Cultural safety and knowledge training are incorporated into the Orientation. This is to ensure doctors are reflecting on their own personal views and biases and to understand how these could affect their decision-making and health outcomes for the patient. This year, 60 doctors attended our training.

63 Students had the opportunity to attend our Noho Marae workshops designed to prepare tertiary health students to work from a platform of cultural safety.



Above: Rebecca Manawatu from Te Tai O Marokura shows the native trees and plants that were used in rongoā Māori from the Puhi Puhi Nature Reserve.

#### **NOHO MARAE 2022**

Noho Marae visits are a unique opportunity that aid in bridging the connection between our tertiary students interested in rural health careers and the Kaupapa of Māori health.

Tessa Munday, a Public Health Student, recounted her experience on the 2022 Noho Marae visit to Takahanga Marae in Kaikōura.

"I thoroughly enjoyed my experience and learnt a lot! I loved learning about the rich culture and history of Ngāti Kuri and the Kaikōura area. I have driven the coastline several times before, but now that I understand the history, I have a whole new appreciation of the area. I also loved the stay in the beautiful wharenui. Seeing the translation of history and whakapapa into carving and art was amazing. Hearing these traditions also gave me an appreciation for the knowledge that has been passed from generation to generation.

From a public health perspective, it was amazing to hear about the opportunities in rural and Māori health. So often in my studies, these topics are discussed with a deficit focus, but this experience taught me the importance of focusing on strengths - such as the connectedness of rural communities, the importance of whānau, spirituality and connection to whenua."



Above: 2022 Noho Marae students at Takahanga Marae, Kaikōura

# Tauākī Pūtea | Financial Statements

# Summarised Statement of Financial Performance

For the eighteen month period ended 30 June 2023

	2023
Income Received	7,355,633
LESS: DIRECT COSTS	4,005,333
GROSS PROFIT	3,350,300
LESS: EXPENDITURE	
Amortisation	10,207
Audit Fees	16,300
Legal Fees	12,734
Depreciation	27,234
Kiwisaver Employer Contribution	54,848
Rent	156,528
Salaries & Wages	1,843,881
Advertising	94,145
National Rural Health Conference	317,747
Other Expenses	599,140
TOTAL EXPENDITURE	3,132,763
NET SURPLUS/(DEFICIT)	\$217,537
TOTAL COMPREHENSIVE REVENUE AND EXPENSE	\$217,537

# Summarised Statement of Financial Position

as at 30 June 2023

	2023
EQUITY	
Accumulated Funds Account	3,542,059
TOTAL EQUITY	\$3,542,059
Represented By:	
CURRENT ASSETS	5,969,624
FIXED ASSETS	71,900
INTANGIBLE ASSETS	18,342
TOTAL ASSETS	6,059,866
CURRENT LIABILITIES	2,517,807
TOTAL LIABILITIES	2,517,807
NET ASSETS	\$3,542,059



# Tauākī Pūtea | Financial Statements

### Summarised Statement of Cash Flows

	2023
	2023
CASH FLOW FROM OPERATING ACTIVITIES	
Cash was provided from	5,783,984
Less: Cash was applied to	6,653,061
NET CASH INFLOW/(OUTFLOW) FROM OPERATING ACTIVITIES	(869,077)
CASH FLOW FROM INVESTING ACTIVITIES	
Cash was provided from	-
Less: Cash was applied to	3,648,752
NET CASH INFLOW/(OUTFLOW) FROM INVESTING ACTIVITIES	(3,648,752)
CASH FLOW FROM FINANCING ACTIVITIES	
Cash was provided from	6,219,816
Less: Cash was applied to	-
NET CASH INFLOW/(OUTFLOW) FROM FINANCING ACTIVITIES	6,219,816
NET INCREASE/(DECREASE) IN CASH AND CASH EQUIVALENTS	\$1,701,987
CASH AND CASH EQUIVALENTS AT THE BEGINNING OF THE YEAR	-
CASH AND CASH EQUIVALENTS AT THE END OF THE YEAR	\$1,701,987

# Summarised Statement of Changes in Net Assets/Equity

For the eighteen month period ended 30 June 2023

	2023
Balance at the Beginning of Year	-
Net Surplus / (Deficit)	217,537
Amalgamation	3,324,522
NET ASSETS/EQUITY AT THE END OF YEAR	\$3,542,059



#### Notes to the Financial Statements

For the eighteen month period ended 30 June 2023

#### **Statement of Compliance**

The information set out in these Summary Financial Statements has been prepared in accordance with PBE FRS 43: Summary Financial Statements and extracted from the full financial statements of Hauora Taiwhenua Rural Health Network (HTRHN) for the eighteen month period ended 30 June 2023.

The rules for HTRHN were set up in November 2021 but did not take affect until they became an Incorporated Society on 23 December 2021 set up to start on 1 January 2022.

HTRHN is the resulting entity of an amalgamation that occurred 1 July 2022. There were limited transactions that occurred in the six months between 1 January 2022 and 30 June 2022, therefore, the financial statements have been prepared for an eighteen month period from 1 January 2022 to 30 June 2023.

The full Financial Statements were authorised for issue on 14 November 2023 by the Executive Board.

The Network's auditor has issued an unmodified opinion over the full Financial Statements.

The full Financial Statements have been prepared in accordance with New Zealand Generally Accepted Accounting Practice ("NZ GAAP"). They comply with the Public Benefit Entity Standards Reduced Disclosure Regime ("PBE Standards RDR"), as appropriate for Tier 2 not-for-profit public benefit entities. HTRHN voluntarily opted into Tier 2 reporting as the current period has between \$2m and \$30m operating expenditure and does not have public accountability.

All transactions in the Financial Statements are reported using the accrual basis of accounting.

The summary financial statements do not provide a complete understanding as provided by the full financial statements of the financial performance and financial position of the entity. The full Financial Statements are available to Members upon request to the Chief Executive.

### **Functional and presentation currency**

The Financial Statements are presented in New Zealand dollars (\$) which is HTRHN's functional and presentation currency. All financial information presented in New Zealand dollars has been rounded to the nearest dollar.

### Amalgamation

From 23 June 2022 until 31 December 2022, New Zealand Rural General Practice Network, New Zealand Institute of Rural Health, New Zealand Rural Hospital Network, and Rural Health Alliance Actearoa New Zealand entered into an Amalgamation with assets and liabilities being transferred to the new legal entity - Hauora Taiwhenua Rural Health Network Incorporated. The amalgamation has enabled entities that carried out similar charitable work within the rural health sector to be united under one umbrella organisation. All entities amalgamated shared a balance date of 30 June.

Baker Tilly Staples Rodway Audit Limited Level 6, 95 Customhouse Quay, Wellington 6011 PO Box 1208, Wellington 6140 New Zealand

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# **Independent Auditor's Report**

To the Members of Hauora Taiwhenua Rural Health Network Incorporated Report on the Audit of the Summary Financial Statements

#### Opinion

We have audited the summary financial statements, which comprise the summarised statement of financial position as at 30 June 2023, the summarised statement of financial performance, summary statement of changes in net assets/equity, summarised statement of cash flows for the eighteen month then ended, summarised statement of service performance and related notes, are derived from the audited financial statements of Hauora Taiwhenua Rural Health Network Incorporated for the eighteen month ended 30 June 2023.

In our opinion, the accompanying summary financial statements are consistent, in all material respects, with the audited financial statements, in accordance with PBE FRS 43 Summary Financial Statements issued by the New Zealand Accounting Standards Board.

#### **Summary Financial Statements**

The summary financial statements do not contain all the disclosures required by Tier 2 Public Benefit Entity (PBE) Financial Reporting Standards as issued by the New Zealand External Reporting Board (XRB). Reading the summary financial statements and the auditor's report thereon, therefore, is not a substitute for reading the audited financial statements and the auditor's report thereon. The summary financial statements and the audited financial statements do not reflect the effects that occurred subsequent to the date of our report on the audited financial statements.

#### The Audited Financial Statements and Our Report Thereon

We expressed an unmodified audit opinion on the audited financial statements in our report dated 15 November 2023.

#### **Board's Responsibility for the Summary Financial Statements**

The Board is responsible on behalf of the Society for the preparation of the summary financial statements in accordance with PBE FRS 43 Summary Financial Statements.

#### **Executive Committee's Responsibility for the Summary Financial Statements**

The Executive Committee is responsible on behalf of the Society for the preparation of the summary financial statements in accordance with PBE FRS 43 Summary Financial Statements.

#### Auditor's Responsibility

Our responsibility is to express an opinion on whether the summary financial statements are consistent, in all material respects, with the audited financial statements based on our procedures, which were conducted in accordance with International Standard on Auditing (New Zealand) 810 (Revised) Engagements to Report on Summary Financial Statements.

Other than in our capacity as auditor we have no relationship with, or interests in the Society.

**BAKER TILLY STAPLES RODWAY AUDIT LIMITED** 

Baker tilly deples Rates

Wellington, New Zealand 15 November 2023

Baker Tilly Staples Rodway Audit Limited, incorporating the audit practices of Christchurch, Hawkes Bay, Taranaki, Tauranga, Waikato and Wellington. Baker Tilly Staples Rodway Audit Limited is a member of the global network of Baker Tilly International Limited, the members of which are separate and independent legal entities



In 2022 we were delighted to work with members and staff and Qora Health Branding to develop new branding for Hauora Taiwhenua and NZLocums & NZMedJobs. It was important to take time to immerse ourselves in our vision, mission, guiding principles and values to create logos and whakatauki that would frame and support our







Elements and inspiration within the logo have come from:

**Koru** - The unfurling frond is symbolic of new life, new beginnings, a new start and hope.

Support - A coming together to support, creating a collective strength and trust in each other.

The Land - The shapes that represent the rural New Zealand landscape from above.

Kete - The kete/woven basket, represents a container of knowledge and wisdom.

Hauora Taiwhenua's symbol represents knowledge, community, and support. Its circular shape depicting coming together in unity.





The NZLocums & NZMedJobs brand embodies the work of our recruitment and the team's approach to our stakeholders through the values of:

Hapori Whānui | Community Tautoko | Support Mātauranga | Knowledge Whakawhirinaki | Trust

Elements and inspiration within the logo:

Vertical lines - The logo's vertical lines subtly form mountain peaks, also represented are the streams and rivers flowing down from those peaks.

Steps - The vertical lines are also stepped like a traditional Māori tukutuku panel in the Poutama pattern, symbolising genealogies and the various levels of learning achievement.

Koru - The two koru represent the community - both people needing help with their wellness and those medical professionals who help people thrive.

Outer Circle - The outer circle represents the support network around rural communities - symbolising the inner strength they have through supporting each other.



# **HTRHN Statement of Service Performance**

#### **Vision**

HTRHN wants to ensure a future where there are healthy and thriving rural communities throughout Aotearoa New Zealand.

We have five strategic pillars that we believe are critical to achieving that vision in a context of health and wellbeing:

- 1. The health system will reinforce Te Tiriti principles and obligations so that unacceptable levels of inequities experienced by Māori living in rural communities are addressed.
- 2. Rural people will have health system support to help them stay well in their own communities with health outcomes equitable with other New Zealanders.
- 3. Rural people will have equitable access to high quality emergency and specialist care when they need it.
- 4. Digital services and technology will enable rural people to access care from within their home and/or communities at equitable levels of affordability to other New Zealanders.
- 5. The rural health workforce is available, valued, well trained and supported.

The health system in Aotearoa New Zealand is large, complex and made up of multiple stakeholders. Hauora Taiwhenua is realistic and understands that our ability to influence that system, towards achieving our vision, has limitations. We have chosen to put our delivery focus into the following main areas that we will measure and be held accountable for:

#### **WORKFORCE SUPPORT**

Developing our capacity to deliver high performing locum services to address the workforce crisis whilst nurturing the next generation of rural health workers across every health profession.

#### **MEMBERSHIP SERVICES**

Growing and maintaining collaborative partnerships with our network of Members, with organisations that share our values and commitment to rural health outcomes, and being a reliable, stable and connected national Society that has a long-term vision for an equitable rural health landscape.

#### **ADVOCACY**

Identifying opportunities that arise from our engagement with the development of rural health strategies, action plans, data mapping and rural digital connectivity improving access to services and ultimately equitable health outcomes for rural whānau.

### **COMMITMENT TO TE TIRITI O WAITANGI**

Increasing our influence on rural Māori health outcomes by working in partnership with Te Rōpū Ārahi and improving our connection with Tikanga in everything that we do.

#### Goal 1:

Provide workforce support to rural health organisations who are in need of help, while also delivering initiatives that grow our future health and wellbeing workforce within Aotearoa New Zealand.

#### **PERFORMANCE MEASURES:**

Provide long-term locums to practices with vacancies, or shorter-term locums to identified "hotspots" where there is a critical staffing shortage that is impacting community health.

Target: 70 placements per year Achieved: 85 placements per year

II. Provide short-term locum relief to practices seeking staff in order that their GP is able to take a holiday away from the practice.

Target: 90% of requests Achieved: 97% of requests

Meet any short-term government contracts, and their specifications, when asked to provide identified workforce support.

Target: 100% of requests Achieved: 100% of requests

Run a health careers promotion campaign to rural students.

Target: 90 rural schools | kura visited Achieved: 102 rural schools | kura visited

Target: 85% satisfaction rate Achieved: 97% satisfaction rate

#### Goal 2:

Provide services to members so they feel informed, listened to, supported and networked with peers.

#### **PERFORMANCE MEASURES:**

Survey members annually regarding satisfaction with services provided.

Target: 85% of members are satisfied or better

The goal in this first transition year has been to build membership, and therefore it has been agreed not to undertake a membership satisfaction survey until mid-2024.

Provide communication platforms for members that encourages and facilitates two-way communication (e.g., monthly newsletters, website, webinars, conference(s).

Target: 85% satisfaction

Annual communication satisfaction survey not undertaken this year recognising survey fatigue across the rural health sector.

III. Carry out a stocktake of rural general practice and hospitals annually to understand key metrics of staffing, stress, etc.

Target: 1 per annum

1 delivered

An annual stocktake survey was undertaken for the first time in 2022-2023 with 122/193 rural practices completing the survey and 6/24 rural hospitals.

Analysis shows the rural general practice sector in significant stress with the workforce crisis a major factor in this. Twice the number of practices reported de-motivated staff compared to those reporting motivated staff, with the vast majority of practices reporting the overall "health" of their practice being unsustainable. 58% of practices are currently advertising for one or more GPs and 49% of practices report reducing or stopping health services due to vacancies. Over 70% of all practices are operating at a ratio above 1300 enrolled patients per GP, which is the maximum acceptable patient:GP ratio proposed by the RNZCGP. 35% of practices report that internet and mobile connectivity is holding back patients from accessing good care.

IV. Face-to-face visits are made to rural general practices and rural hospitals to understand their issues and provide them with an update on our work programme.

All general practices visited on a three-year cycle Target: Achieved: 42/193 practice visits achieved year to date

Target: All rural hospitals visited on a three-year cycle Achieved: 7/24 rural hospital visits achieved year to date

On the back end of national emergencies such as COVID-19 and Cyclone Gabrielle the usual cycle of practice visits was disrupted, however, connection with practices continued through digital modalities.

Membership numbers will be strong and representative of our population.

Target: 130 Organisations; no targets established for Individuals, Māori, and Pacific Peoples

Achieved: 514 individuals, 141 Organisations, 5 Māori, 4 Pacific Peoples

Baseline target data for the target number of Organisation Members was established using membership income data from across the amalgamated organisations of the Rural General Practice Network, the Rural Health Alliance Aotearoa New Zealand, the Rural Hospital Network and the New Zealand Institute of Rural Health. As each of the contributing individual organisations' methods of reporting varied, a conservative approach using reported data on paid/active members was considered the most realistic approach to establishing Membership targets.

Baseline data for the target number of Individual Members has also not been established. With a change in how we count and report Individual Members the target will be established in the second year of operation. It is of note that Individual Members will also include the newly created membership criteria of Named Individual Members. These members are nominated members under their organisation's membership. This growth model has shown early signs of substantially increasing our engagement.

Reporting on ethnicity, in order to capture the cultural make-up of our membership base, was added this year as a reporting line, therefore, a baseline target has not been established. This will be reviewed in the second year of operation following a campaign to collect ethnicity data.

#### Goal 3:

To advocate as the trusted and united voice of rural health and wellbeing: Identify issues of critical interest to the rural health and wellbeing community and advocate for these with Government, government agencies and the public in order to impact positive change.

#### **PERFORMANCE MEASURES:**

Systemic review of key issues facing rural health and wellbeing annually and compile into summary document that is accepted by HTRHN Council for distribution.

Target: 1 per annum Achieved: 1 delivered

II. Publish (print, radio, TV, etc.) advocacy pieces on key issues to influence the required changes that have been identified.

Target: 80 per annum Achieved: 100 delivered

III. Deliver webinars/discussions to allow the sector to interact with decision-makers over key policy issues.

Target: 2 per annum Achieved: 3 delivered

IV. Respond to legislation and policy changes, that are identified as key to rural health by the HTRHN Council, with submissions reflecting the health and wellbeing needs of rural communities.

Target: 100% Achieved: 100%

#### Goal 4:

Ensure Hauora Taiwhenua upholds and role-models practices that are consistent with Te Tiriti o Waitangi.

#### **PERFORMANCE MEASURES:**

Ensure our Tiriti partner, Te Rōpū Ārahi, are involved in the co-design of all major events that Hauora Taiwhenua organise.

100% Target: Achieved: 100%

II. Run all official meetings, conferences, etc., in alignment with organisational tikanga so that Māori feel safe to take part.

Target: 100% **Achieved:** 100%

Ensure cultural safety and knowledge training is incorporated into all programmes of induction for international medical graduates arriving in New Zealand to work in rural areas.

Target: 100% **Achieved:** 100%

Provide noho marae workshops for tertiary health students to help prepare them for careers where they can work from a platform of cultural safety.

Target: 2 per annum Achieved: 4 delivered

### Judgements made in the reporting of service performance information

In preparing the service performance information to be used, the entity has made a number of significant judgements about what information to present - based on an assessment of what information would be most appropriate and meaningful to our members, stakeholders and other readers against our vision and strategic objectives. This was not an easy task because of the diverse nature of the member groups that we serve and the different foci that our major funders take, that often change at short notice due to health emergencies that occur such as pandemics, cyclones and floods in recent times.

The decisions about what service information to present were made in consultation with Hauora Taiwhenua's Board, key management personnel and Te Tiriti partner Te Rōpū Ārahi.

The judgements that had the most significant effect on non-financial information related to what case studies we chose to present to highlight specific outcomes in the reporting period. We have chosen to highlight key non-financial outcomes in this period that could not be predicted because of the need for external input and direction that is needed to make these happen - such as political or funding agency decisions.

These key case studies have been chosen by management, and endorsed by the Board and Te Rōpū Ārahi as important to recognise specifically from the past year.

The measures that have been reported on quantitatively have been chosen because they represent key achievements that can be predicted, measured and audited. These were tested for appropriateness by seeking input from both our accountants (BDO) and auditors (Baker Tilly Staples Rodway) before finalising them.





# **Our Key Achievements**

He Waka Eke Noa   Planning the Future of Rural Health	<b>/</b>
Election Manifesto 2023	<b>/</b>
Women's Health Strategy	<b>/</b>
Mystery Creek Fieldays	<b>~</b>
Rural Hospital Locums Contract	<b>~</b>
Te Pae Tata Interim NZ Health Plan	<b>~</b>
Negotiated \$500,000 of funding for PRIME responders	<b>/</b>
Cyclone Gabrielle Response	<b>/</b>
Tautoko Rural   Covid 19 Support	<b>/</b>
COVID-19 Response Recognition Award	<b>/</b>
National Rural Health Conference	<b>/</b>
Rural Health Careers Promotion Programme	<b>/</b>
National Interprofessional School of Rural Health Proposal	<b>/</b>
Nurse Pay Parity	<b>/</b>
Staff completing Level 2 Tikanga Certification, Taumata Kāwai Rangatira	<b>/</b>



Kia tipu matomato ngā hapori i Aotearoa Healthy and thriving rural communities in Aotearoa New Zealand



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