

## Pūrongo A-Tau Annual Report 2024





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

## **Karakia**

Whakataka te hau ki te uru
Whakataka te hau ki te tonga
Kia mākinakina ki uta
Kia mātaratara ki tai
E hī ake ana te atākura
He tio, he huka, he hau hū
Tīhēi mauri ora.

Cease the winds from the West
Cease the winds from the South
Let the breezes blow over the land
Let the breezes blow over the ocean
Let the red-tipped dawn come
With a sharpened air, a touch of frost,
a promise of a glorious day.



## Welcome from Network Kaumātua

Ngā mihi kia koutou kia ora tātau katoa,

On behalf of Te Rōpū Ārahi, I welcome you to Hauora Taiwhenua Rural Health Network's 2024 Annual Report.

The Network's Board and staff remain dedicated to upholding the principles of Te Tiriti o Waitangi, with the ongoing mission to achieve equitable health outcomes for rural Māori. Over the past year, we have continued to prioritise this goal through our work, modelling Te Tiriti practices across many initiatives and embodying the Whakataukī that guides us:

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

A significant milestone this year was the launch of the Tātai Whetū app, an interactive Tikanga resource developed in partnership between Hauora Taiwhenua and Te Ropū Ārahi. Freely available to the public in the spirit of Kotahitanga, the app alongside the companion Tikanga Guide - fosters cultural understanding and strengthens the values of Tikanga within our rural communities and beyond.

Another area of focus has been our staff's commitment to upskilling in cultural competency, with many successfully completing Tikanga certification. This aligns with our vision of embedding Te Tiriti values into the foundation of our mahi.

Te Rōpū Ārahi also contributed to Noho Marae visits, which aimed to provide a unique opportunity to bridge the connection between tertiary students interested in rural health careers and the kaupapa of Māori health. Through the immersive experience of noho marae, participants were able to connect deeply with the values and principles of Māori health. Our student Chapter, SoRHA, played a vital role in these workshops, offering their perspectives and encouraging students to envision a future where rural health and Māori health aspirations are intertwined.

In April, we co-hosted Hauora Taiwhenua's Annual Conference at Tākina, Wellington's new Convention and Exhibition Centre. We welcomed rural health professionals and supporters from across Aotearoa to connect, learn, and celebrate rural health. The conference showcased the power of collective action and shared vision.

Looking ahead, Te Rōpū Ārahi remains committed to supporting our members, fostering Kotahitanga in all our relationships, and driving positive change for rural health across Aotearoa.

Ngā Manaakitanga,

**Bill Nathan** 

Chair, Te Rōpū Ārahi Kaumātua, Hauora Taiwhenua

we att on

#### **Honouring Rhoena Davis**

We pay tribute to our esteemed friend and colleague, Rhoena Davis, who served as Deputy Chair of Hauora Taiwhenua Rural Health Network and Deputy Chair of Te Rōpū Ārahi, and who passed away on 16 August 2024.

> Haere mai ki ahau, e koutou katoa e mauiui ana, e taimaha ana, a maku koutou e whakaokioki.

Come to me all who labour and are heavy laden and I will give you rest.

Matthew 11:28

A dedicated and compassionate health professional, Rhoena tirelessly advocated for rural communities. In 2023, she was honoured with the Dr. Peter Snow Memorial Award for her exemplary service to Māori health, rural healthcare delivery, and nursing leadership. As a Board member of the College of Nurses Aotearoa and a member of the New Zealand Nursing Council Komiti Māori, Rhoena played a pivotal role in shaping nursing leadership and championing Māori health. Rhoena possessed a unique ability to foster friendships and a steadfast commitment to collaborating with others to address future challenges, embodying the very spirit of Te Rōpū Ārahi. Despite her demanding schedule, Rhoena remained dedicated to caring for and nurturing her family. We extend our aroha and heartfelt gratitude to Patrick and the whānau for their unwavering support, allowing Rhoena to pursue her work and share her generosity of spirit with all who had the privilege of working with her.

Ma te Atua koutou e manaaki e tiaki i nga wa katoa





## **Ngā Uaratanga Our Values**

Kia tipu matomato ngā hapori i Aotearoa

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

Ngā Uaratanga		Our Values		
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Manaakitanga Generosity Wairuatanga Spirituality Togetherness Kotahitanga 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.



## Rangi Kōrero Contents

In this year's Annual Report we celebrate and put the spotlight on our Rural Health Research and Education Chapter.

Heading and accent colours throughout this year's report are in the Chapter's brand green.



Rural Health Research and Education / Te Whare Taumata o te Mātauranga Taiwhenua



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





Our vision is healthy, thriving rural communities in Aotearoa, New Zealand. Our role as a team of independent rural health advocates working in partnership with our Te Tiriti partners, Te Rōpū Ārahi is as important as ever.

In this, our second year as Hauora Taiwhenua, we faced the challenge of working with a new Government. As political changes flowed into the health sector, we found ourselves working with uncertainty and at times, confusion, across Health New Zealand and the Ministry of Health. The disestablishment of the Māori Health Authority, Te Aka Whai Ora, was disappointing for many and again clouded in uncertainty. Progress towards achieving changes anticipated with the restructure of the health sector and promise of the Pae Ora Healthy Futures Bill has been underwhelming. Despite this, and huge budget blowouts at Health NZ, we welcomed the establishment of the rural team within HNZ.

Working in partnership with them, and across all of government, our rural voice is held in high regard. Its credibility has resulted in our being active partners in many multisectoral working groups, including capitation, rural workforce, and redesign of rural unplanned and urgent care.

In December 2023, we offered the Coalition Government our "Briefing for the Incoming Ministers" that incorporated a 20-point action plan focussed on five key rural health issues: workforce, access to services, health outcomes, input into rural initiatives, and rurally appropriate funding. The Briefing, along with our "Rural Health Snapshot, May 2024" was presented to Ministers and Members of Parliament across all political parties at Rural Fest in May 2024.

Our first edition of the Rural Health Snapshot detailed the University of Otago's Geographic Classification for Health analysis of the demographics of the 888,654 people living across R1 (rural), R2 (rural remote), and R3 (remote) areas. It summarised key findings from rural health researchers across the motu that evidenced disparities in rural health outcomes. It highlighted the inequities of those living in R3 areas are not only due to geographic isolation, but much lower levels of income, education and academic qualifications, and much higher socioeconomic deprivation, especially for Māori. A Snapshot standout is that the death rate for rural people under 30 years old, is twice that of urban areas, mainly due to preventable causes.

RuralFest is an annual event, highly regarded across Government, that is led by our Rural Community Chapter. This year's event brought 35 representatives from across our nine Chapters to meet with politicians at the Beehive. We met with nine Coalition Government members, including Associate Minister for Rural Health Matt Doocey and Minister for Rural Communities Mark Patterson, and later, seven opposition members, including Opposition Spokesperson for Health, Ayesha Verrall. Seven members from the HNZ rural team, led by the Co-Director of Rural Health and the Chief Rural Clinical Advisor also participated. We distributed the RuralFest summary paper widely, and established quarterly meetings with Minister Doocey in which we discuss key issues and potential solutions.

Inadequate funding for primary care continued to severely impact rural practices, forcing some to close and many to reduce services, most commonly PRIME and after-hours care. PSAAP (PHO Services Agreement Amendment Protocol) reconvened this year and because of much lobbying. now includes direct representation of contracted providers. This provided an opportunity for the rural voice to be heard, so our CEO now represents 14 rural practices at the PSAAP table. Despite our efforts, the government's annual funding uplift for General Practice of 4% came short of the 5.88% Sapere had advised HNZ was necessary. This shortfall has resulted in higher co-payments for many patients and may exacerbate inequities for those rural practices that cannot raise fees because of the financial constraints of those they provide care for.

Attempts to mitigate pressure on clinical capacity led to the establishment of Ka Ora, the rural telehealth service that, while a welcome addition to our rural health teams, cannot be mistaken as a replacement of face-toface care. Greater recognition of the skills and expertise of other health professions has encouraged the expansion of multi-disciplinary primary healthcare teams. We are proud of our contribution to the successful petition for changes to ACC legislation, enabling paramedics to now be funded as PRIME providers.

The lack of progress towards pay equity for nurses working in primary and community care continued to hinder our ability to retain and attract nurses into rural areas. It has had dire impacts on the clinical and financial stability of Rural Hospitals that are not owned by HNZ yet play a vital role in the health of rural communities.

Our frustration at the lack of progress in expanding rural health education models is tempered by our understanding there is a sector commitment to doing so. We continued to support expansion of Otago and Auckland Medical Schools' work in rural medical training, while also supporting the Government's proposal towards establishing a Waikato Medical School focused on rural general practice.

The Rural Health Conference in April 2024 was a highlight of the year. The record numbers of 500 attendees and 70 speakers were energetically reconnected, reset and revived. They heard MC, Jehan Casinader remind us of the importance of our stories, and Minister Doocey's supportive opening address. Through our Chapters, the rural health sector was widely represented and together, we thank our key sponsors and the support of the agribusiness sector. Pre-conference workshops delved into a review of PRIME, the development of GP Registrars, and opportunities for rural research and education. The Peter Snow Award for 2023 (when we didn't

have a conference) was presented to Rhoena Davis and for 2024 to Kyle Eggleton. Three new awards have been established and were presented: the Emerging Rural Health Researcher Award to Deborah Rhodes, the Health Education Award to Sue Donaldson and the Te Waka Kotahitanga Award to Julia Cronin.

At Matariki 2024 we launched our Tikanga App, Tātai Whetū. This great accomplishment from Te Rōpū Ārahi will help all those who use it to practically include tikanga in daily life.

The Board maintained its focus on the implementation of our 2023-2026 Strategic Plan. At a strategic retreat in February 2024, we developed a strategic matrix to assist in ensuring our waka sails in the right direction no matter the winds that blow or the currents that try to push us off course.

On a more personal note, in October 2023, we grieved the passing of our dear friend and colleague, Dr Tom Mulholland. Tom was a staunch advocate for rural health, especially in the mental health space. He could be found talking to rural farming folk in a barn about "knowing your numbers" or about "positive thinking". Our condolences go out to Dee and to his family.

Finally, this Annual Report is an opportunity for me to thank you all. Thanks to all of you who have actively involved in Ngā Whare Taumata (the Chapters) to give us your views and your feedback, especially to those of you who represent Chapters at Council level. Thank you to the Board and Te Rōpū Ārahi, particularly Bill Nathan our kaumātua for your wisdom and support. Thank you to our Deputy Chair, Rhoena Davis for her wisdom, and support for our Board, Te Rōpū and me as Chair. Thank you to Grant who as CEO expertly steers us along the practical path of our strategic direction and to Marie and Jeremy who work hard within the advocacy space. Thanks to the rest of the hard-working senior management team, and to those of you in NZ locums - we truly value all you do. My last thanks go to Russell Riki, Kaumātua to the Chair, whom I have had the good fortune to work with for almost 20 years.

Manaakitanga, Wairuatanga, Kotahitanga and Rangatiratanga; our guiding values. This is the glue that sticks us all together as though we are many voices we can be heard as one united around our common goal. In unity there lies hope, in change there lies courage.

Although this falls outside the time remit of this Annual Report I cannot omit the passing of our very beloved Rhoena Davis on 16th August 2024, only 17 days after her retirement hui from Mahitahi Hauora. She was so many things to so many people, but she was my Deputy Chair and a dear friend and advisor to so many. She was a key person, not only in our organisation, but in her leadership within Te Rōpū Ārahi and as a Māori Nurse Practitioner. She is very much missed by us all and we extend our aroha to her tane, Patrick and her whānau. Her legacy will live on.

#### Operational Achievements – comments from the CEO

Fiona's report covers the vast amount of mahi that we, as a Network of passionate rural people, have achieved. This Annual Report highlights the many achievements we have made over the past year – despite the turbulent times in the health sector.

I would like to give praise to our small but talented and hard-working team here at Hauora Taiwhenua who have made the past year such a success. They have been assisted at all stages by our Chapter members who have helped us respond, often at short notice, to provide expert advice on rural input to submissions, reviews and other expert panels. That input is the strength we have to offer as a collective.

Some of the standout achievements for the year include:

- · Achieving or exceeding all targets in our rural locums contract in providing a vital service to provide workforce relief in our rural practices.
- · Securing relocation funding for GPs coming to NZ to work in Rural Practices.
- Working with students from our SoRHA Chapter to visit 113 rural schools and kura to promote health careers along with attendance at a number of careers expos throughout New Zealand.
- Worked with our Chapters to have a significant presence at the Mystery Creek Fieldays Health Hub to promote rural health careers and awareness of health check-ups.
- Running our most successful National Rural Health Conference to date at Tākina, Wellington, with in excess of 70 abstracts presented and over 500 attendees.
- Launch of an interactive Tikanga App (Tātai Whetū), with accompanying expanded web version, built in partnership with Te Rōpū Ārahi.
- A strong turnout from Council representatives at Parliament to RuralFest, which was ably led by our Rural Communities Chapter, to ensure rural health issues were clearly presented to Ministers and other
- · A strong media presence, across multiple channels, to push the need for a focus on supporting rural health professionals, while also celebrating the positive things they achieve.
- Rural Snapshot produced and distributed the first ever collation of rural health data utilising the GCH which provides a compelling argument for increased investment in rural health in order to reduce Postcode Lottery outcomes.
- Increased funding for PRIME callouts and the initiation of a review of Rural Urgent and Unplanned Care by Health NZ.
- · Successful Rural Hospital Summit.
- A survey of Rural General Practices to understand their current state and stressors.
- A strong relationship built with the new Rural Health Team within Health NZ and regional representatives.

These outcomes have come from the collaboration of all levels of our fledgling organisation: Board, Council, Chapters, Members - while working closely with our health partners at GPLF, within the Ministry and within Health NZ. A special mention to our key group of rural academics and researchers, who are now providing us data that we can use in evidencebased advocacy efforts. Also to the group of rural-focussed PHOs who funded our clinical director position.

Thank you all for a great year.

**Dr Fiona Bolden** 

Chair

**Dr Grant Davidson** 

Chief Executive

## Ko Wai Tātou Who We Are

#### Tō Tātou Kaimahi | Our Staff

#### **Senior Management**

Dr Grant Davidson | Chief Executive

Jane Booth | General Manager Communications and Business Development

Denise Brennock | General Manager Finance

Ingrid Busby | General Manager Membership Services

Marie Daly | General Manager Advocacy

Heather Lang | Manager, Rural Hospitals Locum Service

Robyn Fell | Operations Manager

Dr Jeremy Webber | Clinical Director Rural Health

Ashley Darbyshire | Business Support Officer

Amanda Ellorey | Relationship Manager

Samantha Hill | Rural Health Careers Programme Coordinator

Sajan Patel | Communications Coordinator

#### NZLocums & NZMedJobs Team

Luke Baddington | General Manager Workforce Recruitment

Jenny Butt | Senior Relationship Manager

Debra Wilson | Relationship Manager

John Ferguson | Relationship Manager

David Davenport-Brown | Relationship Manager - NZMedJobs

Jason Ng | Recruitment Coordinator

Connor Owen | Recruitment and Marketing Coordinator



#### Tō Tātou Poari | Our Board

Dr Fiona Bolden | Chair

Rhoena Davis | Deputy Chair

Ray Anton | Chair Finance Audit Risk Committee

Bill Nathan | Board Member/Kaumātua

Debi Lawry | Board Member

Mark Eager | Board Member

Wilson Mitchell | Board Member

#### Te Ropū Ārahi

Bill Nathan | Chair

Rhoena Davis | Deputy Chair

Russell Riki | Kaumātua to Board Chair

Tania Kemp

Kim Gosman

Jaana Kahu

Hemaima Reihana-Tait

#### Tō Tātou Kaunihera | Our Council

Sarah Walker | Rural Allied Health Scientific and Technical

Jen Thomas | Rural Hospitals

Margareth Broodkoorn | Rural Hospitals

Stacy-Maree Thwaites | Rural Nurses NZ

Emma Dillon | Rural Nurses NZ

Harrison Edwards | Students of Rural Health Aotearoa

Tatila Helu | 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



## **Overview of Board Strategy**

The key function of the Hauora Taiwhenua Board is governance of the organisation to enable us to achieve the overall strategic direction set by the Council and operationalised by the CEO and Senior Management team. To this end, we had a hui in February 2024 facilitated by 3eLeader to design a strategic grid that we could use at every board meeting to connect our vision with our actions and review our direction monthly.

Our purpose is to enable the organisation to drive our vision of healthy and thriving rural communities. To do this as an organisation, we have five key success factors underpinning our work:

- Healthy Finances: financial stability and growth.
- **Healthy People:** sustainable and skilled at all levels of the organisation.
- Healthy Membership: engaged and diverse, united by a sense of purpose.
- Healthy Relationships with stakeholders.
- **Healthy Advocacy:** representative of diversity across the rural sector, solutions focused.

With each of these areas, we develop a focus, determine the goals and the key activities, and align them with a specific person and a timeline. Many of the activities have been outlined in the results achieved by the Senior Management team throughout the year, specifically the financial stability, which is still very much dependent upon our external contracts. Regarding "healthy people," one of the things we have done is to define the skills required of the board members and the process around the election, which is done in a 2-year cycle and due in the AGM in December 2024. This has included developing a skills matrix for the Board and introducing a 'meet the candidates' session prior to the AGM.

Each of these five areas has multiple levels at which they could be considered, the Board though, needs to operate at a high flight level of over 50,000 feet rather than at the ground level. The Council operates at a slightly lower flight level, which is more connected directly to the membership. It is the flow of ideas and support from one level to another, which is also essential to the success of the organisation.

Over time, it would be helpful to develop these concepts at all levels of the organisation so that we are all aligned to our common vision which, whilst sounding superficially simple, is indeed very complex with continually changing environments around it to which we need to adapt. Gradually, we would like to embed this into how the organisation operates, and this should mean that we are more adaptable, responsive, and supportive at a time when this is more important than ever for the future of thriving, healthy rural communities.



# **Chapter Spotlight: Rural Health Research and Education**

This year, the Rural Health Research and Education Chapter has continued to inspire and lead the way in advancing rural health and education in Aotearoa New Zealand. The Chapter's efforts were highlighted by the Rural Health Research and Education Day, themed "Building Capacity Through Research and Education: A Rural Focus."





The event brought together professionals, researchers, educators, and rural health advocates to share knowledge and spark new ideas. The day began with a research workshop, which highlighted the transformative potential of rural research in shaping communities, healthcare systems, and social determinants of health. A panel featuring Jean Ross, Lynne Clay, Garry Nixon, and Fiona Doolan-Noble provided valuable insights on leveraging research to address rural challenges, including climate change and shifting government policies. Attendees explored practical tools and methodologies, equipping them to drive impactful change in their fields.

The education workshop that followed explored the dynamic landscape of rural education, focusing on the intersections of politics, environment, and pedagogy. Panellists Roger Strasser, Greville Wood, and Sue Adams shared their experiences in fostering future-focused education that prepares learners to navigate rural health challenges. The day also included an innovative live research demonstration, where data was collected, analysed, and presented as a collaborative exercise, demystifying the research process and showcasing the power of teamwork.

This year marked the debut of the Emerging Rural Researcher and Educator Awards, recognising Hauora Taiwhenua

members who are making significant contributions to rural health. Sue Donaldson received the Emerging Rural Educator Award for her leadership in Te Hōtaka Mātauranga Whatu Ngaio o te Tai o Poutini, an interprofessional education programme in Greymouth. Deborah Rhodes earned the Emerging Rural Researcher Award for her groundbreaking PhD research on health and safety in the dairy industry, which aims to influence policies and build community resilience.

The Chapter's initiatives have not only fostered collaboration but have also inspired a shared commitment to a healthier, more sustainable future for rural communities. Looking ahead, the Chapter is already planning the 2025 Research and Education Day and welcomes new members to join this transformative journey.

For more information or to get involved, we encourage you to attend the Chapter AGM or reach out to the team. Together, we can continue driving positive change for rural health in Aotearoa.

Ngā mihi nui

Dr Jane George Jesse Whitehead

Rural Health Research and Education Chapter Co-Chairs

## 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. Chapters are instrumental in fostering a closely connected membership base, and in turn, connect members to our wide-reaching sector engagement and advocacy work.

#### Over the past year:

- The Rural General Practice Chapter is closely connected to our work with Health NZ on the review of afterhours and PRIME services coming together for a workshop prior to our National Rural Health Conference. Their contributions to our submissions on ACC, Pharmac, and Health NZ policies ensure the realities of 'rural' are considered in these forums.
- The Rural Hospitals Chapter held another very successful Summit connecting them to the Health NZ Rural Hospital Sustainability initiative. The NGO Rural Hospitals have supported each other through challenging financial pressures and commissioning discussions. They are working closely with us to establish the rural hospital locum service.
- 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.
- Rural Communities held a successful RuralFest event at which their members, and our Council met with Ministers of Rural Health, and Rural Communities, and Members of Parliament from all political parties to discuss common ground issues and potential solutions to them.
- · Rural Midwives focussed on profiling diversity of service models that are evolving to ensure clinical and personal viability of rural services.



Te Whare Taumata o Ngā Hapori Taiwhenua o Aotearc



Rural General Practice / Te Whare Taumata o Ngā Tākutatanga Taiwhenua



Rural Hospitals / Te Whare Taumata o Ngā Hōhip Taiwhenua



Te Whare Taumata o Whānau Whānui



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



Rural Midwifery and Maternity / Te Whare Taumata o Ngā Kaiwhakawhānau me te Whare Kōhanga Taiwhenua



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



Students of Rural Health Aotearoa / Te Whare Taumata o Ngā Tauira Taiwhenua o Aotearoa



Rural Health Research and Education / Te Whare



## **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 with Aotearoa New Zealand

#### **NZLocums Achievements**

The past year has presented both challenges and successes for the workforce team at NZLocums & NZMedJobs. The task of sourcing international General Practitioners (GPs) has become increasingly competitive as we contend with other countries drawing from the same limited pool of doctors. This challenge is intensified by the worsening GP crisis in countries like Ireland and the UK. Despite these hurdles, we have diligently worked to meet our targets under the rural recruitment and locum support (RRLS) contract.

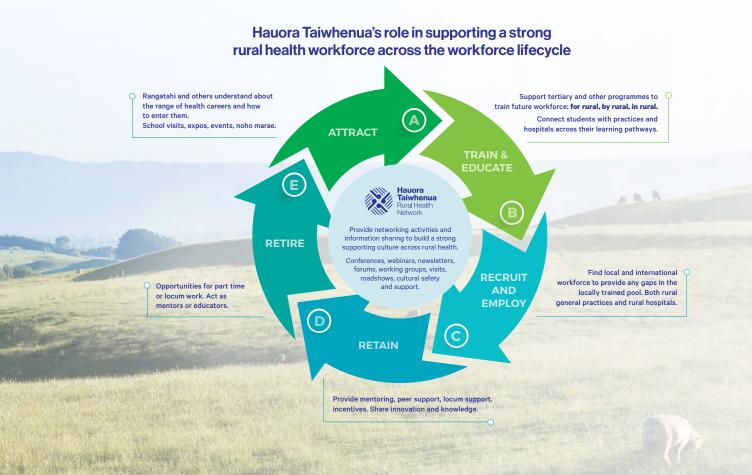
We have surpassed our RRLS targets with 92 long-term and permanent placements against a goal of 80 for the financial year. Additionally, we successfully filled 96% of locum support requests, exceeding our target of 80%. Outside the RRLS targets, we also facilitated 104 shortterm locum (interim) placements. These accomplishments are particularly noteworthy given the current shortages of nurse practitioners and doctors, especially GPs, both internationally and domestically. Outside of our main contract we maintained our relationship with the International Recruitment Centre and continued the development of the Rural Hospital Locum service.

#### Collaboration with Te Whatu Ora

Our collaboration with Te Whatu Ora's International Recruitment Centre (IRC) has continued successfully as we managed leads generated by their international GP campaign. Although the IRC contract ends on 30 June 2024, we will persist in working with these leads, anticipating several conversions to placements over the next 12-24 months.

#### **Rural Hospitals Locum Service**

The Rural Hospital Locum Service (RHLS) has made significant strides in its development. This free service aims to support rural hospitals across New Zealand by recruiting, placing, and retaining locum doctors. While still in the implementation phase, we are steadily moving towards deliverable phase. The RHLS has already successfully recruited a doctor from the USA into a permanent role and placed several NZ-based doctors in rural hospital locum positions. In April 2024, we attended the Rural & Remote Medicine conference in Edmonton, Canada. as the sole international recruitment agency, which generated significant interest and approximately 150 leads. We expect some of these leads to convert to placements over time and plan to return to this conference next financial year.



#### Goal 1: Workforce Support cont.

#### **Connecting with Our People**

We regularly engage with rural health providers across Aotearoa. This year, we visited rural general practices and rural hospitals in Waikato, Northland, Canterbury, Taranaki, Eastern Bay of Plenty, Marlborough, Southland, and Lakes regions. These visits facilitated meaningful discussions on workforce issues and broader healthcare challenges, including funding. We promoted the RHLS service and developed relationships with key contacts. The rural hospitals were grateful for our visits and are happy to support the project, whether they need locums or not. We gained valuable insights into what is important to rural hospitals and how we can tailor our service to meet their needs.

Our participation in several New Zealand conferences in Rotorua and Christchurch allowed us to engage directly with healthcare professionals from diverse backgrounds. These interactions help us understand their needs and how we can assist. We remain committed to our mission of supporting rural healthcare in New Zealand. As we navigate these dynamic and evolving landscapes, we extend our gratitude to our partners, supporters, and the dedicated healthcare professionals who make our work possible.



Above: David Davenport-Brown, NZMedJobs Relationship Manager, with Kirsten Nel, Practice Manager at Sunset Road Family Doctors in Auckland.

Below: Debra Wilson and Jenny Butt at the NZLocums & NZMedJobs stand at GP CME 2024 in Rotorua



## **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.

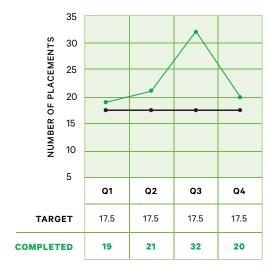
**PLACEMENT TARGET** 2023/24

**PLACEMENTS MADE** 2023/24





#### **Long-term Placements**



121% OF ANNUAL TARGET DELIVERED

#### **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.

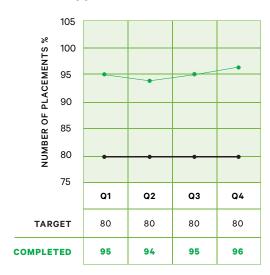
**PLACEMENT TARGET** 2023/24

PLACEMENTS MADE 2023/24





#### **Locum Support Placements**



**5% ABOVE ANNUAL TARGET DELIVERED** 

#### **Rural Hospital Locum Service**



LONG-TERM PLACEMENTS - 1

SHORT-TERM LOCUM PLACEMENTS - 28

#### **Tautoko Rural**



NUMBER OF PRACTICE VISITS - 53

NUMBER OF **HOSPITAL VISITS - 10** 

## Grow our rural health workforce from within the heart of rural New Zealand

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

Our Rural Health Careers Promotion Programme, run in partnership with Students of Rural Health Aotearoa, continues to be a key tool in helping to address the rural health workforce crisis.

In 2023, the Network was thrilled that Te Whatu Ora agreed to extend funding for this programme for another year.

This has allowed us to continue our mahi in promoting rural health careers to rural youth through rural school visits, noho marae, practice visits and conferences. 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 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.

This year we have continued 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 privilege to go on the rural school visits programmes. I loved visiting all the different schools and interacting with the students there. It made me look me back on my own time as a student in a rural high school and my own big dreams, and how far I have come since. I hope that visiting the schools sparked some interest in health and inspired students, and by seeing us health care professionals in training, the high school students see that pursuing a health career is possible."

- LILIAN JONES, 5th Year Medicine student at Otago University, volunteer for the 2023 Manawatu/Wairarapa region trip.

A huge thank you to the generosity and support of Te Whatu Ora Health Promotion Agency, who helped us to access more rural youth and communities to promote and encourage addiction-free lifestyles. Through all our events, we have supplied rural schools, parents and students with promotional material, information and resources about the harms and effects of drug and alcohol consumption by young people who have come from the same background, alongside other health information and support to better their education and wellbeing.



#### In 2023/2024 we:











Promotional Health Videos produced



Medical Practices/ professionals visited



#### **Rural School Career Expos**

For the first year, career expos have been included in the RHCPP programme. This has been a great success in helping not only answer questions and provide resources to our rural students, but also for whānau to get information on the next steps for their rangatahi.

We have had the privilege of rural schools reaching out to us to exhibit at these expos as they wish to have a health focus. We have been able to provide an array of interactive elements at our exhibits, showcased by volunteer tertiary students who talk about their experiences and the health disciplines they are studying. We hope to continue to offer this opportunity to local schools and regions.

> Wanna see other channels that we are utilising to reach our rural youth?





## Ngā Hua o Te Tau Our Key Achievements

2023 – 2024 Financial Year

167 Organisation
Members



232 Individual Members

334

Named Individual Members















#### **Rural Schools**



**Rural School Tours** 



**Rural Schools Visited** 



3800+

**Rural School Students Reached** 



**Rural Practices Visited** 

54 **International Doctors Attended Orientation** 

**54** Students attended **Noho Marae workshops**  **512** ...... **Delegates National Rural Health Conference** 



Mystery Creek Fieldays
Health and Wellbeing Hub

## **Goal 2: Services to Members**

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

Our commitment to representing the breadth of the rural health sector and advocating for equitable access to healthcare in rural communities has remained unwavering. This year, we have taken significant strides in enhancing the services we provide to our members, ensuring they feel informed, listened to, supported, and connected with their peers. We launched several new member benefits that reflect our dedication to supporting our members in meaningful ways.

Among these initiatives is our **Mentorship Programme**, designed to foster professional growth and development within our community. By connecting experienced members with those new to the field, we aim to create a supportive environment where knowledge and skills can be shared, ensuring the sustainability of rural health services.

We also introduced Health in Every Rural Home, a campaign focused on empowering rural communities with the tools and resources needed to improve health outcomes at the grassroots level. This initiative is aligned with our broader mission of ensuring equitable access to healthcare, and it has been met with great enthusiasm from our members.



Our Tātai Whetū app has been another highlight, serving as an educational resource that helps members confidently host hui and much more. This culturally grounded tool supports and empowers rural health professionals within our Network, reflecting our ongoing commitment to honouring the cultural diversity of our membership and ensuring that the voices of Māori are central to our work.

Pictured above: Our Tātai Whetū app is available on Google Play and the App Store



Additionally, we launched a new Advisory Service to offer support to members navigating a variety of complex issues they may encounter in the course of their careers or when running their own practice. Whether seeking advice on policy, practice, or professional development, our members now have access to guidance tailored to their specific needs.

Our membership framework, defined in the society's constitution, remains inclusive and representative of the diverse individuals and organisations that contribute to rural health. This year, we have seen steady growth, with 232 Individual Members plus 334 Named Individual Members, and 167 Organisation Members. The distinction between Individual and Named Individual Members, introduced in our second year of operation, has allowed us to more accurately reflect the different ways in which individuals engage with our Network, enhancing our ability to meet their unique needs.

Our members have played a pivotal role in shaping the direction of Hauora Taiwhenua. Their active participation in events such as the National Rural Health Conference 2024, Rural Hospital Summit, RuralFest, webinars, and volunteer initiatives such as the Rural Health Careers programme and Fieldays have been invaluable. The feedback and insights gathered from these activities have been instrumental in



232 Individual Members

**334** Named individual Members

**167** Organisation Members

refining our services and ensuring that our members feel supported and valued.

As we move forward, our goal remains clear: to continue providing high-quality services that keep our members informed, engaged, and connected. With the launch of these new member benefits, we are confident that Hauora Taiwhenua will continue to thrive and make a meaningful impact on rural health outcomes in Aotearoa New Zealand.

Thank you to all our members for your ongoing commitment and support. Your dedication is what enables Hauora Taiwhenua to flourish and continue its vital work in advocating for rural health in Aotearoa New Zealand.

#### **MEMBERSHIP SATISFACTION SURVEY CASE STUDY:** INSIGHTS AND IMPROVEMENTS

Our 2024 membership satisfaction survey has provided valuable feedback that reflects both the strengths of Hauora Taiwhenua and areas where we can continue to improve our services. Over 90% of respondents indicated satisfaction with our responsiveness to membership enquiries. Similarly, 72.22% of members feel that their membership provides excellent value for money, underscoring the effectiveness of the network in meeting member needs.

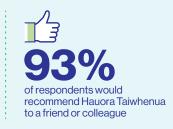
One standout metric from the survey is that 93.88% of respondents would recommend Hauora Taiwhenua to a friend or colleague, affirming the impact of our organization in supporting the rural health community. Members also expressed high levels of satisfaction with their overall membership experience, with 80.39% rating their satisfaction at 4 or 5.

Our communication efforts, particularly the e-newsletter, have also been well-received, with over 92% of respondents confirming they receive it, and more

than 75% finding it to be a valuable and interesting resource. However, feedback highlighted a need for more engagement through social media, with 73% of respondents stating they haven't connected with us on social media platforms. We will work on promoting our social media channels more effectively to keep our members informed and engaged.

These insights are crucial for guiding future improvements, and we remain committed to enhancing the value we offer to our members through ongoing communication, advocacy, and support.





## Rural General Practice Stocktake 2024

This is the second year Hauora Taiwhenua has conducted a survey of Rural General Practices to quantify and better understand their current operational status, issues and morale. Our goal is to develop a repository of sector-informed data that monitors key indicators vital to rural general practice and changes over time.

Building on insights from the first survey, we refined our methodology for collecting and analysing response data this year. This refinement enhances our ability to produce multi-year data and enable comparisons between rural general practice

indicators and urban or national data produced by other organisations.

Consequently, in this second year, we have included only a few indicators showing results from both surveys. We are optimistic that with high response rates, support from Health NZ in providing system-level data, and the University of Otago's Geographic Classification for Health (GCH), the range of indicators that we can report on a multi-year basis will expand.

#### **Rural General Practice vital signs**

At -38.16, the overall 'temperature' of rural general practice is critically low.



#### **Shortage of Rural GPs**

Nationally, there is a SHORTAGE OF 130 **FTE OF RURAL GPs** (537 FTE GPs employed, 667 FTE GPs budgeted)

#### The business of Rural General Practice

**64%** 

of respondents operate as a private business with 15% of the 64%, run by a single GP.

report their facilities are fit for purpose. Those with inadequate facilities find it challenging to bring more services closer to home and to participate in training the future workforce.

**38**%

of respondents have been in emergency situations where patient care has been impacted by poor mobile coverage or internet connectivity.

#### **Workforce**



with locums filling 44% of these at the time of the survey.



69% of these achieve this

#### **Rural Connectivity**

of respondents consider rural connectivity impacts on their patients having reliable access to health services.

of respondents have been in emergency situations where patient care has been impacted by poor mobile coverage or internet connectivity.

of respondents said their community had initiated solutions to improve connectivity to health services.



#### **Education and Training**



of respondents have hosted and/or trained health students over the last 3 years.



of respondents would like to host/train students but have barriers in the way of doing so.



of respondents intend to host and/or train health students over the next year.



of respondents either provide, or have their community provide, accommodation for students.

#### **Education and Training**



are open to enrolling new patients



provide a complete 24/7 afterhours and PRIME service



rate their rural community's emergency care services as less than 'good'

#### **Emergency Service Response**

Respondents were asked for a subjective assessment of how well their communities emergency care needs are met:





4.35%



26.08%



## **National Rural Health Conference 2024**

#### Kahikatea tū i te uru Growing stronger, together

The National Rural Health Conference is the annual flagship event for Hauora Taiwhenua Rural Health Network Members and the wider rural health sector. It is not just a get together of friends and colleagues, it is a platform for deep conversations, contemplating long-term strategy and instigating change.

In 2024, the conference branding was refreshed. Developed in partnership with Te Rōpū Ārahi the conference's new logo and colour palette echoes the elements of our Hauora Taiwhenua logo. The concept of echo or kārangaranga when applied to the theory of a national conference, demonstrated to delegates that the echo of their voice will be heard.

2024's conference exceeded all targets with a record number of attendees and presenters and a sold-out exhibition hall. Tākina was buzzing for 3 days with workshops, Chapter meetings, lightning talks, keynote speakers and a broad range of presentations. Jehan Casinader, Conference MC, received a standing ovation for his personal presentation.

The four conference themes of **Equity** – moving towards health equity; **Leadership** – development/sustainability/rangatiratanga; **Technology** – we can use it so much more in rural areas; Resilient Communities - climate change/sustainability/environment; and **Grow the workforce** - workshops: clinical, business and personal skills provided the basis for a well-rounded programme.

A heartfelt thank you to our sponsors: Spark Health, Indici, Fonterra, Mobile Health, Otago Community Trust and Academic Consulting, without whose support NRHC 2024 wouldn't have been possible.





Above: Jehan Casinader hosts a panel discussion with (Left to right) Dr Samantha Murton, Philip Wheble, Dr Wilson Mitchell and Tania Kemp

Delegates	Presenters	Keynote Speakers	Lightning Talks	Concurrent Sessions	Workshops	Awards Presented
512	70	8	5	<b>53</b>	5	5
		issi II s			-	















## **Awards - Honouring Rural**

#### **Peter Snow Memorial Award**

#### **Rhoena Davis, 2023**

Rhoena Davis received the 2023 Peter Snow Memorial Award for her outstanding contributions to Māori health, rural healthcare, and nursing leadership. As a Māori board member of the College of Nurses Aotearoa and the New Zealand Nursing Council Komiti Māori, she has been a strong advocate for Māori health and nursing leadership. Her role as chair of Aronuku, the Māori caucus of the College of Nurses, highlights her commitment to addressing the needs of diverse communities.

Rhoena has championed initiatives for cultural safety, policy changes for Nurse Practitioners, and healthcare improvements in rural areas. Her leadership extends across national health groups like the National Nurse Leaders Group, where she advocates for vulnerable populations.

As Deputy Chair of Hauora Taiwhenua and Te Rōpū Ārahi, Rhoena has helped shape organisational direction while promoting the principles of Te Tiriti o Waitangi. Her dedication to equitable healthcare and Māori health outcomes makes her a deserving award recipient.





#### Kyle Eggleton, 2024

Kyle Eggleton has been awarded the 2024 Peter Snow Memorial Award for his unwavering dedication to improving healthcare access and outcomes for rural communities. After graduating from the University of Auckland, Kyle returned to Northland as a rural GP, where his work focused on addressing the health impacts of rurality and social deprivation.

Kyle's commitment to health equity led him to join a Māori health provider, where he spearheaded community-driven projects. His clinical practice also informs his academic roles, including as Associate Dean (Rural) at Auckland University, where he established a rural stream for medical students and developed admission schemes for rural-origin students.

With additional qualifications in medical science, public health, and a PhD focused on Māori health providers, Kyle's impact extends across research, education, and rural health leadership. His passion for rural health workforce development and the wellbeing of underserved communities makes him a deserving award recipient.

#### Te Waka Kotahitanga

#### **Julia Cronin**

Julia Cronin of Manatū Hauora was awarded the inaugural Te Waka Kotahitanga Award at the National Rural Health Conference 2024. Julia received the award in recognition of the significant role she played in developing New Zealand's first Rural Health Strategy.

Although new to the rural health sector, Julia's dedication to understanding the unique challenges and priorities of rural communities was critical to shaping a strategy that reflects their diversity. Her grassroots approach, which included visiting rural areas and engaging directly with health services in their environments, earned admiration from the Network.

Julia's commitment to enhancing the well-being of rural populations made her a deserving recipient of the Te Waka Kotahitanga Award Julia was unfortunately away at the time NRHC24 took place, so her award was received Helen Connole (pictured right) on her behalf.



#### Hauora Taiwhenua Emerging Rural Researcher and Educator Award

#### **Deborah Rhodes, Emerging Rural Researcher Award**

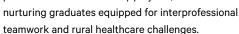
Deborah Rhodes was announced as the recipient of the Emerging Rural Researcher Award. Deborah, a rural advocate and dairy farm owner, pioneers groundbreaking research on health and safety in the dairy industry. Her PhD work addresses critical gaps, using innovative methodologies to shed light on rural health challenges, aiming for tangible



policy improvements and community resilience. Deborah truly embodies the essence of research "for rural communities, by rural communities".

#### Sue Donaldson, Emerging Rural **Educator Award**

Sue Donaldson received the Emerging Rural Educator Award for 2024, Sue as leader of Te Hōtaka Mātauranga Whatu Ngaio o te Tai o Poutini, has spearheaded an innovative Interprofessional Education Programme in Greymouth, fostering collaborative rural workforces. Her dedication has led to impactful placements and community projects,





#### Hauora Taiwhenua Rural Student **Research Scholarship Winners:**



#### **Geraldine Atchico**

5th Year Medical Student at University of Auckland from Rotorua:

**Understanding Inequity** in Access to Specialised Healthcare in Rural Communities within Aotearoa



#### **Anna Donaldson**

4th Year Medical Student at the University of Otago from Dobson:

Discrepancies in clinical coding in rural vs. urban hospitals

#### 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 2024 year were:



Alisia Stoian from Marton studying a Bachelor of Biomedical Science at University of Auckland



**Cameron Dickey** from Greymouth studying the Health Science First Year course at Otago University

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



#### **Nicola-Mary Geraghty**

6th Year Medical Student at University of Auckland from Ohakune:

Strengths and weaknesses of paediatric patient discharge advice communicated to whanau; A Qualitative Study



Holly Pickery from Kaikohe studying a Bachelor of Health Science in Paramedicine at Auckland University of Technology



**Leah Johnson** from Ashburton studying a Bachelor of Science majoring in Human Nutrition at Otago University

## **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, encompass both the interests of our members and most importantly, all those who live and work in rural communities.

This year we welcomed the establishment of Health NZ's rural team, and appointment of the co-director rural health. Our advocacy team is actively involved in the rollout of their ambitious workplan, and through this, we take every opportunity to ensure our members are connected and contribute through:

- A pre-conference workshop on Rural Unplanned and Urgent Care, and PRIME
- The Redesign of Rural Unplanned and Urgent Care advisory group
- Aeromedical Service Review, and
- Submissions on government legislation, policy, and review of meso-level organisations.

We are an active participant in the General Practice Leaders Forum, and now represent 14 rural general practices in the PHO Services Agreement Amendment Protocol (PSAAP) forum.

We continue to appreciate the ongoing financial support from the contributing PHOs for our Clinical Director role, held by Dr Jeremy Webber, This enables us to have dedicated rural clinical expertise in our own team, and in work we do with government agencies.

#### RuralFest, May 2024

Our annual RuralFest, held in Parliamentary Buildings, is led by the Rural Communities Chapter. Through the engagement of Council members, all 9 Chapters have the opportunity to participate in both the formal discussions with Members of Parliament from all political parties, and informally during lunch and session breaks. RuralFest identified 4 calls to action for the Coalition Government:

1. Fund Pay Parity for all health professionals, regardless of who their employer is.



- 2. Adequately fund rural general practice to sustainably provide:
- Core health services, in hours and out of hours, planned, unplanned and urgent care responses.
- Training placements for medical, nursing, and allied health students without compromising clinical service capacity.
- A broad range of clinical services that includes, but is not limited to, minor surgery, sexual health, and infusion clinics to enable rural communities access to health services close to home.
- 3. Endorse and resource the Primary Industries Mental Health and Wellbeing Strategy developed by the rural sector, for the rural sector.
- **4.** Establish and report on clear, and sector agreed metrics that demonstrate the impact the Rural Health Strategy has on the health of rural communities.

## Mystery Creek Fieldays Hauora Taiwhenua Health and Wellbeing Hub 2024

This event is our annual 'boots on the ground' connection with rural communities. It's our chance to talk to people who live and work in rural NZ, who rely on rural general practices, rural hospitals, and all those who work tirelessly within them, to keep their families well.

It's also a chance to catch up with other likeminded organisations whose focus contributes to achieving our mission – healthy, thriving, rural communities. Many of those who we spend time with at the Fieldays, are members of our Rural Communities Chapter or closely connected to our work – Federated Farmers, Rural Women NZ, Waikato University, Mobile Health Services, Rural Support Trust, Farmers Weekly, Farmstrong, Health NZ clinical and rural team leaders, and of course, a fair number of Members of Parliament from across all political parties.

"I had an amazing time at 2024 Fieldays with Hauora Taiwhenua Rural Health Network. Was amazing to talk to so many different people about rural health. Feeling very grateful for getting to be a part of an amazing event."

- Faith De Courcy, University of Auckland Medical Student, who gifted 4 days of her time, and awesome energy, to join us in this year's Hub.

Through the enthusiasm of 16 SoRHA students and the generous volunteering of experienced rural GPs and nurses from Pinnacle Midlands PHO, Health NZ, and our Board, we were able to talk with many of the estimated 4000 people who visit the Hub each day.

Our Clinical Director, Dr Jeremy Webber who is one of those experienced rural doctors who braves the wintry Waikato weather to work in the Health Hub observed, 'A lot of people are much more comfortable talking about their health issues when we're leaning on a haystack, dressed in a Swandri and gumboots.'





Faith DeCourcy with 'Farmer John' whose Big Operation tested the talents of Hub visitors, young and old!

#### **Rural General Practice Stocktake 2024**

The second annual survey of rural general practices received 103 responses, or 54% of the 190 rural general practices. The survey endorsed the Network's advocacy that the rural health sector is under immense stress largely attributed to dire workforce shortages across all professional disciplines, particularly General Practitioners (GPs), Nursing, and Allied Health. The year-on-year underfunding of primary care services continues to reduce available GP consultations, out-of-hours and urgent care responses, and in many areas, hinders new patients' ability to register with a practice.

Many respondents said their facilities do not cope with the multi-disciplinary team approach that underpins rural primary care services today. The evolution of the rural health team has put pressure on the predominantly privately owned business to accommodate not only its core business of general practice, but the increasingly broad range of services such as Access and Choice programmes, Point of Care Testing, infusions, and minor surgery. At the same time, and with the best interests of their community at heart, the general practice facility also houses visiting specialist clinics or social services and provides training for tertiary health students - often without receiving payment for the use of the facility. While respondents indicated a commitment to ensuring their patients have access to health services as close to home as possible, they equally told us they are unable to service capital investment required to upgrade or expand their facilities.

The survey scored morale within the sector as 'low' and scored the sustainability of rural general practice as 'very low'.

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



#### The staff in our general practice are energised and motivated



#### **Rural Hospital Summit 2023**

In October 2023, clinical and managerial leaders from 23 rural hospitals participated in a vibrant and informative Summit. The day opened with what is somewhat of a Summit tradition, the Soap Box from which hospitals share highs and lows, innovations, issues they've faced, and solutions to them. It demonstrates the importance of relationships and the role of in-person events in enabling collaborative networks that enhance the sustainability of rural health services to flourish.

Health NZ joined the Summit to discuss their Rural Hospital Sustainability Project, the development of Clinical Networks, and working within the context of localities and place-based service planning.

Three concurrent workshops went into details of NGO Rural Hospital Commissioning, Rural Clinical Leadership, and the ongoing development of our rural hospital survey.

#### **Rural Hospital Survey 2023**

The rural hospital sector is unquestionably in a workforce, and financial sustainability crisis.

This year's annual survey of rural hospitals was completed by 50% of rural hospitals. The aggregated score to the statement 'Our rural hospital is sustainable in terms of its overall health' was a dire -63.64.

Respondents, and those who were unable to complete the survey, continue to support the Kaupapa of the survey, but report that it can be difficult and time consuming to gather the data required to respond. As we did this year, we will convene a working group to continue to improve on it for next year.

#### Our rural hospital is sustainable in terms of its overall 'health'.



#### **RURALFEST, MAY 2024**

On Tuesday, 7th May, the annual RuralFest brought together 35 rural community representatives for a hui with rural politicians at the Beehive. The event emphasised the critical need for government support to address the health and wellbeing challenges in rural areas, which despite contributing 81.9% of New Zealand's trade exports and 10.5% of GDP, suffer from poorer health outcomes.

Attendees included primary care professionals, rural hospital colleagues, community organisations, and rural industry representatives. They presented five key calls to action to the Coalition Government, including funding pay parity for rural health practitioners, supporting rural general practices, committing to urgent healthcare solutions, establishing a National School of Rural Health, and developing evidence-based rural health outcome measurements.

Minister Doocey and Minister Patterson expressed support for rural health initiatives, while opposition



MPs, including Hon Dr Ayesha Verrall and Hon Damien O'Connor, engaged in discussions on healthcare investment and advocacy strategies. The event underscored the need for a united, cross-ministry, and cross-party approach to improve rural health, reflecting the significant economic and social contributions of these communities

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



PER ANNUM



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



PER ANNUM



PER ANNUM



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

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

#### Partnership with Te Ropū Ārahi

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

As in previous years, we welcomed the advice of Te Ropū Ārahi in the co-design and delivery of all major events organised by Hauora Taiwhenua. Our 2024 National Rural Health Conference had strong links to local iwi with Kaumātua to Board Chair, Russell Riki and other Māori leaders sharing pūrākau to inform and guide our thinking with a culturally appropriate lens. Again, staff were fortunate to participate in waiata training with Network Kaumātua, Bill Nathan.

Matariki 2024 saw the launch of Tātai Whetū, our free interactive app supporting the use of te reo and tikanga. The app was derived from our tikanga guide and mandated by Te Rōpū Ārahi. The name Tātai Whetū means a constellation of stars - a metaphor for the bright stars or clusters of knowledge contained in the tikanga guide. Those bright stars of knowledge are there forever. You can download our app on the Apple Store Google Play or by scanning the QR codes below.













We were also pleased to launch our Te Reo Guidelines for Staff for Internal and External Communications to serve as a valuable aid in navigating cultural protocols. It is hoped these guidelines will encourage staff to deepen their understanding of tikanga and the use of te reo in their daily interactions.

#### Working with Whānau Whānui

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.

54 students had the opportunity to attend two Noho Marae workshops, one at Poihakena Marae in Whaingaroa Raglan and another at Pukawa Marae, Tūrangi. These workshops are designed to prepare tertiary health students to work from a platform of cultural safety.

We are grateful to have a Māori representative in our SoRHA Chapter Executive. This ensures that the perspectives and needs of Māori students are actively considered and addressed, fostering an inclusive and culturally responsive environment.

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, 54 doctors attended our training.

#### NOHO MARAE 2023

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

"The Raglan Noho Marae was the most incredible experience that left me with a warm soul and an overflowing cup. The interactions, with other students, Raglan and Marae community members and all others involved were priceless with conversations taking "learning beyond the curriculum" to another level. The connections and communication throughout the Marae provided ample opportunity for learning through korero, and I feel as if I have left with a widened and appreciative perspective of Hauora Māori.

The noho reinforced the importance of creating a culturally safe clinical environment and has inspired me to be curious and take this learning forward into clinical practice in Aotearoa. The balance of creativity with the haka and waiata, as well as connection to our whenua and moana with activities such as waka ama and celestial navigation enabled me to appreciate the wider contributors of Hauora Māori. I would highly recommend the experience to health students and am beyond appreciative to have had the opportunity to attend!!" -Sonakssi Ramilan, 4th Year Medicine, UoA



2023 Noho Marae students at Te Papatapu Marae, Waikato

## Tauākī Pūtea | Financial Statements

#### Summarised Statement of Financial Performance

For the year ended 30 June 2024

INCOME	2024	2023
Income Received	7,133,119	7,355,633
LESS: DIRECT COSTS	3,322,137	4,005,333
GROSS PROFIT	3,810,982	3,350,300
LESS: EXPENDITURE		
Amortisation	16,454	10,207
Audit Fees	16,672	16,300
Legal Fees	9,387	12,734
Depreciation	32,050	27,234
Kiwisaver Employer Contribution	61,016	54,848
Rent	156,528	156,528
Salaries & Wages	2,040,240	1,843,881
Advertising	128,066	94,145
National Rural Health Conference	361,508	317,747
Other Expenses	634,449	599,140
TOTAL EXPENDITURE	3,456,370	3,132,763
NET SURPLUS/(DEFICIT)	\$354,612	\$217,537
TOTAL COMPREHENSIVE REVENUE AND EXPENSE	\$354,612	\$217,537

#### Summarised Statement of Financial Position

as at 30 June 2024

EQUITY	2024	2023
Accumulated Funds Account	3,896,671	3,542,059
TOTAL EQUITY	\$3,896,671	\$3,542,059
Represented By:		
CURRENT ASSETS	6,120,722	5,969,624
FIXED ASSETS	72,846	71,900
INTANGIBLE ASSETS	41,888	18,342
TOTAL ASSETS	6,235,456	6,059,866
CURRENT LIABILITIES	2,338,785	2,517,807
TOTAL LIABILITIES	2,338,785	2,517,807
NET ASSETS	\$3,896,671	\$3,542,059



## Tauākī Pūtea | Financial Statements

#### Summarised Statement of Cash Flows

as at 30 June 2024

CASH FLOW FROM OPERATING ACTIVITIES	2024	2023
Cash was provided from	7,047,165	5,783,984
Less: Cash was applied to	6,754,181	6,653,061
NET CASH INFLOW/(OUTFLOW) FROM OPERATING ACTIVITIES	292,984	(869,077)
CASH FLOW FROM INVESTING ACTIVITIES		
Cash was provided from	460,000	-
Less: Cash was applied to	72,996	3,648,752
NET CASH INFLOW/(OUTFLOW) FROM INVESTING ACTIVITIES	387,004	(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	679,988	1,701,987
CASH AND CASH EQUIVALENTS AT THE BEGINNING OF THE YEAR	1,701,987	-
CASH AND CASH EQUIVALENTS AT THE END OF THE YEAR	2,381,975	1,701,987

#### Summarised Statement of Changes in Net Assets/Equity

For the twelve month period ended 30 June 2024

	2024	2023
Balance at the Beginning of Year	3,542,059	-
Net Surplus / (Deficit)	354,612	217,537
Amalgamation	-	3,324,522
NET ASSETS/EQUITY AT THE END OF YEAR	3,896,671	3,542,059



#### Notes to the Financial Statements

Statement of Accounting Policies

For the twelve month period ended 30 June 2024

#### **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 year ended 30 June 2024.

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.

The full Financial Statements were authorised for issue on 24 October 2024 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 \$5m 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.

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 Aotearoa 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 2024, the statement of service performance, the summarised statement of financial performance, summary statement of changes in net assets/equity, and summarised statement of cash flows for the year then ended, and related notes. The summary financial statements are derived from the audited financial statements of Hauora Taiwhenua Rural Health Network Incorporated for the year ended 30 June 2024.

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 30 October 2024.

#### **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 daples Rocking

Wellington, New Zealand 31 October 2024

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





### **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:

#### **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.

#### **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.

#### **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.

#### 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.

	2023/2024	2022/2023	
Target:	70 placements per year	70 placements	
Achieved:	92 placements per year	85 placements	

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

	2023/2024	2022/2023	
Target:	80% of requests	90% of requests	
Achieved:	96% of requests	97% of requests	

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

	2023/2024	2022/2023
Target:	100% of requests	100% of requests
Achieved:	100% of requests	100% of requests

Run a health careers promotion campaign to rural students.

Tanasta	2023/2024	2022/2023
Target: Achieved:	90 rural schools   kura visited 113 rural schools   kura visited	90 rural schools   kura visited 102 rural schools   kura visited
_		
Target: Achieved:	85% satisfaction rate 94.97% satisfaction rate	85% satisfaction rate 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. I.

	2023/24	2022/23
Target:	85% of members are satisfied or better	Survey not undertaken due to transition
Achieved:	80.39% of members are satisfied	

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

	2023/24	2022/23
Target:	85% satisfaction	Annual communication satisfaction survey
Achieved:	94.7% of members are satisfied	not undertaken in 2022/23 recognising survey fatigue across the rural health sector

The performance measures for member services reveal positive outcomes with some room for improvement.

For the first measure, the target was set at 85%. The actual achievement was slightly below this goal, with 80.39% of members reporting satisfaction.

For the second measure, involving the effectiveness of communication platforms (comprising questions 9, 14, and 20), the target satisfaction rate was also set at 85%. This goal was exceeded, with 94.7% of members expressing satisfaction with the provided communication channels, which include monthly newsletters, the website, webinars, and conferences.

Overall, the results indicate strong performance in facilitating communication and engagement among members, while there is a minor shortfall in the overall satisfaction with services provided.

To improve our satisfaction rate, the organisation will explore ways to enhance its on-the-ground presence, improve transparency, and advocate more effectively for the needs of rural healthcare professionals.

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

	2023/24	2022/23	
Target:	1 per annum	1 per annum	
Achieved:	1 per annum	1 per annum	

The second annual survey of rural general practices received 103 responses, or 53% of the 196 rural general practices. The survey endorsed the Network's advocacy that the rural health sector is under immense stress largely attributed to dire workforce shortages across all professional disciplines, particularly General Practitioners (GPs), Nursing, and Allied Health. The year-on-year underfunding of primary care services continues to reduce available GP consultations, out-of-hours and urgent care responses, and in many areas, hinders new patients' ability to register with a practice.

Many respondents said their facilities do not cope with the multi-disciplinary team approach that underpins rural primary care services today. The evolution of the rural health team has put pressure on the predominantly privately owned business to accommodate not only its core business of general practice, but the increasingly broad range of services such as Access and Choice programmes, Point of Care Testing, infusions, and minor surgery. At the same time, and with the best interests of their community at heart, the general practice facility also houses visiting specialist clinics or social services and provides training for tertiary health students - often without receiving payment for the use of the facility. While respondents indicated a commitment to ensuring their patients have access to health services as close to home as possible, they equally told us

they are unable to service capital investment required to upgrade or expand their facilities.

The survey scored morale within the sector as 'low' and scored the sustainability of rural general practice as 'very low'.

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.

Target: Achieved:	2023/24 All general practices visited on a three-year cycle 53/196 practice visits achieved 95/196 practice visits achieved cumulatively from 1 July 2022	2022/23 All general practices visited on a three-year cycle 42/193 practice visits achieved
Target: Achieved:	All 24 rural hospitals visited on a three-year cycle 16/24 rural hospital visits achieved 19/24 unique rural hospital visits achieved cumulatively from 1 July 2022	All 24 rural hospitals visited on a three-year cycle 7/24 rural hospital visits achieved

Note: In the 2022/23 year, rural hospital visits were under-reported by 2.

Membership numbers will be strong and representative of our population.

Individual Target 600

	Achieved 2023/24	Achieved 2022/23	
Individuals	232	Not differentiated	
Named Individuals	334	Not differentiated	
<b>Total Individual Members</b>	566	514	

Of which the following members identify as Māori or Pacific Peoples.

	Achieved 2023/24	Achieved 2022/23
Māori	32	5
Pacific Peoples	5	4

Organisation Target: Target increase on Year 1

	Achieved 2023/24	Achieved 2022/23	
Organisations	167	141	

In the second year of operation, the counting and reporting method for Individual Members has been refined. Individual Members are now categorised into Individual Members and Named Individual Members. Named Individual Members are those nominated under their organisation's membership. This refined method provides a clearer distinction between membership types and has resulted in a more accurate representation of our membership base.

Ethnicity reporting, added last year to capture the cultural makeup of our membership base, remains a focus. With one year of data collection, we have observed an increase in the number of members who identify as Māori or Pacific Peoples. This data will continue to be reviewed and refined as we aim to further diversify our membership and better represent our community.

#### Goal 3:

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.

#### **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.

	2023/24	2022/23
Target:	1 per annum	1 per annum
Achieved:	1 delivered	1 delivered

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

	2023/24	2022/23	
Target:	80 per annum	80 per annum	
Achieved:	413 delivered	100 delivered	

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

	2023/24	2022/23
Target:	2 per annum	2 per annum
Achieved:	3 delivered	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.

	2023/24	2022/23	
Target:	100%	100%	
Achieved:	100%	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, is involved in the co-design of all major events that Hauora Taiwhenua organise.

	2023/24	2022/23
Target:	100%	100%
Achieved:	100%	100%

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

	2023/24	2022/23	
Target:	100%	100%	
Achieved:	100%	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.

2023/24	2022/23
100%	100%
100%	100%
	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: 3 per annum	3 per annum	
	o po. aa	
Achieved: 2 delivered	4 delivered	

Note: The annual target of three per annum is set according to our contracts with Te Whatu Ora, which covers calendar years for the periods 1 January 2022 to 31 December 2023 and 1 January 2023 to 31 December 2024.

### 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 (goals) 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 (goals) 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**



**Rural Snapshot 2024** 



**Briefing for the Incoming Ministers** 



**Rural Health Strategy** 



**Mystery Creek Fieldays** 



**PSAAP Negotiations** 



Rural General Practice Stocktake Survey 2024



**Funding for PRIME** 



**Tātai Whetū** 



**Vaccination Support** 



**National Rural Health Conference** 



Rural Health Careers Promotion Programme



**Telehealth Services** 



**Nurse Pay Parity** 





Kia tipu matomato ngā hapori i Aotearoa

Healthy and thriving rural communities in Aotearoa New Zealand

