



Helen Mason

Healthy, thriving communities, Kia Momoho Te Hāpori Ōranga.



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Te Toi Ahorangi Strategy launch



I was delighted when we recently launched the Te Toi Ahorangi Strategy in Whakatāne. It was a wonderful event and the sense of excitement and optimism about this strategy and what it can achieve going forward was palpable.

Hon Peeni Henare - Minister of Civil Defence, Whānau Ora and Youth; Associate Minister of Health (Māori Health) and Tourism was in attendance as were the MP for Wairariki Tamati Coffey, Runanga Chair Pouroto Ngarapo and Runanga members, iwi representatives, BOPDHB Board members and members of staff.

Te Toi Ahorangi has been inspired, driven and led by tangata whenua. It affirms our unified vision, voice and intention to drive forward whole of system transformation to Toi Ora that will improve the well-being of the 57,000 Māori who live in Te Moana-a-Toi (Bay of Plenty). It builds on the good work that came before under the guidance of our Runanga, the vision of Toi Ora and in particular He Pou Oranga.

The strategy aligns with our vision: Kia momoho te hapori oranga (healthy thriving communities) and with our Strategic Health Services Plan (SHSP). Toi au rangi, the eight elements/strategic currents which emanate from Te Toi Ahorangi, together with our 12 transformational actions identified by the evolution work carried out by our COO Pete Chandler, give us our four strategic priorities.

Te Toi Ahorangi represents a journey we need to take many people on, to build on the gains that have been made over recent years. There is already a much stronger commitment to collective responsibility and increased use of quality improvement methodology to improve Māori health. I'm heartened to have seen the improvements in dental enrolments, breast screening rates and cervical screening, to name a few. I'm also heartened that 400 members of our team want to learn Te

Reo through Te Whare Awanuiarangi Wananga.

The concept of Te Toi Ahorangi has already resulted in many brave conversations. Where we can talk about the impact of colonisation, about institutional racism, and how we can have a truly Te Tiriti based relationship.

I see this as a document of hope.

As I step away from Te Moana-a-Toi I feel optimistic. Optimistic that Te Toi Ahorangi is going to bring to fruition our communities aspirations and our aspirations for our communities. That through Te Toi Ahorangi wai ora, whanau ora, hapu ora, iwi ora and mauri ora will all be realities, and all the people of Te Moana-a-Toi will be flourishing.

To achieve that we all need to work together, on both of the hulls of our waka, paddling in the same direction, paddling in unison.



Nāu te rourou, nāku te rourou, ka ora ai te iwi
With your basket and my basket our communities will flourish.

Māori proverb.

The thoughts of our Board Chair Sally Webb on Te Toi Ahorangi

History shows us we cannot achieve Māori Health equity by using the same thinking we have used for the past 10, 20, 30 years. Success will only come if we are in real partnership with tangata whenua and support their aspirations and self-determination - only then will all flourish.

Te Toi Ahorangi is unique because it is grounded in the concept of partnership. For the first time in Aotearoa we have a Māori health strategy that is owned by the Runanga and endorsed by the Board. Usually they are developed in a Pakeha world with a little Māori influence, but this is very different.

My real aspiration as Board Chair is that Te Toi Ahorangi is the catalyst that changes the way we work together. And that we in the DHB are brave enough to truly see what we need to change to empower our Māori communities so they can fulfil their aspirations.

It won't be easy because this does call for significant mind set changes within the DHB. We will need to look within ourselves with open minds to what we need to do differently so we work together to achieve Toi Ora.

BOPDHB Board election results

The seven elected members who will form part of our new Board have been confirmed. The four Ministerial appointments, who will make up the remainder of the 11-strong team, including our new Chair, will be announced towards the end of November. I would like to take this opportunity to say how much I have enjoyed working with our Board, and how I have appreciated their guidance and leadership of the Bay of Plenty health system. I want to recognise those Board members who will not be returning as members of the new Board: Sally Webb, Matua Parkinson, Yvonne Boyes and Judy Turner.

Information on the seven newly-elected members, from their candidate profiles, is given below:

Mark Arundel

My pharmacy career and experience with BOPDHB has been about quality care, compassion and dignity for patients and healthcare staff while achieving value for money within available funding. Most of what affects health occurs in education, employment, housing and welfare, outside 'health system control'.

I believe our health system, which is mainly people, is at a tipping point now and our politicians must be compelled to ask New Zealanders if we are prepared to contribute more to the costs of healthcare and it's determinants, before we are forced to reduce services in the face of unprecedented demands.

Technology and innovation will not deliver fast enough. Capable dedicated people in every part of our health system are under unsustainable pressure now. I ask your support to deliver these messages to our responsible Ministers of Health and Finance to help ensure our reasonable expectations can be met into the future.



Marion Guy RN, Masters of Nursing, QSO

I have many years' experience working in the community and hospital throughout the region. Other experience includes five terms BOPDHB; health leadership and governance roles both nationally and internationally. These diverse experiences are complementary and benefit each other.

As a nurse I have considerable knowledge of how the health system works, assisting me to make informed decisions on the issues presented. My clinical and governance background gives me an understanding of issues facing health providers and the community. This enables me to highlight gaps in the delivery of timely and effective services, along with suggestions for improvement. Planning to meet future demand is a challenge.

People need to have a choice of healthcare service that suits their individual need. I remain committed to ensuring all people in our region have the best quality healthcare services that are affordable and accessible.



Dr Geoff Esterman MBChB. Dip Obs FRNZCGP

As a New Zealand born and trained General Practitioner working in Tauranga for 30 years, I am aware of patient needs. My re-election will allow me to continue to be a voice for patients from someone who understands the system.

Hospital dynamics are complex, but I understand them well. I have been on the DHB for 6 years; Chairing the Hospital Advisory Committee and being the Board Observer on the Clinical Governance Board.

General Practice and community needs are also complex. My involvement with patients and Primary Healthcare boards means I can better advocate for wider health solutions. Our family has loved holidaying in Opotiki for 20 years. Our experiences all contribute to my excellent knowledge of the Bay of Plenty health system from all perspectives. I have the unique skill set required to achieve better outcomes for patients.



Ian Finch

I am an optometrist practicing in Whakatane for 28 years I have an history of governance in both business and community. I am married to Sue (midwife) for 40 years. I have three children and three grandchildren. I am passionate about achieving the best health outcomes for everyone in the BOP. As a health professional I see how poor health affects the daily life of so many individuals. I see how inequity affects health - it is incumbent upon us all to care for the ones who have the least opportunity to care for themselves. Using my governance experience I will help shape a health authority which fulfils those aims.



It is important our health authority demonstrates a culture of care not only for its patients but also for its employees. My experience in helping nurture positive culture change in a variety of environment's will prove beneficial in this regard.

Dr Bev Edlin DBA, MBA, FGNZ, CFinStD

As a current Board Member with a wide range of proven business skills, coupled with extensive governance experience, expertise and practical involvement in large organisations, I remain dedicated and focussed to the task of ensuring this large, complex and specialist organisation delivers appropriate and needed health-related services to our communities today; while planning for its future.



I currently chair the BOPDHB's Community Public Health and Disability Advisory Committee. I am a member of its Audit- Finance-Risk and Strategic Health Committees. I also represent BOPDHB on two LakesDHB's Advisory Committees.

My promise: "To ensure your District Health Board effectively and strategically leads the organisation into the future by becoming even more financially savvy so it can continue delivering professional, effective and timely health services and facilities for all who need them".
Ehara taku toa I te toa takatahi engari, he toa takitini.

Hori Ahomiro MIS (Hons) BSW, Reg SW, Dip Ad Ed

Hori is a Registered Social Worker and Mental Health Advisor/Cultural lead with a special interest in Kaupapa Māori and Indigenous models of health and wellbeing.



He has applicable systemic and practical experience within Iwi, social services, community and government health environments. He is a respectful advocate, of bicultural social work, human rights, natural justice and the implementation of the principles of Te Tiriti o Waitangi.

Hori aims to add his experience and skill set to help transform and improve our current poor health statistics and outcomes for Māori and other patients in our BOPDHB region. His background includes governance, management and leadership of whānau, hapū and iwi, including that of local and national mental health, social work, community, psychiatry and health quality and safety commission boards and affiliated Māori advisory groups.

Ron Scott JP CMinStD

We need stable, strong governance experience for ongoing development of health services in our rapidly changing region.



The current Chair and CEO both retire later this year so the institutional knowledge and experience that I bring as Deputy Chair will be vital when appointing a new CEO -a key decision of the new Board.

We also need: closer linkages with other agencies especially in mental health services; better access to after-hours services; to encourage older people to stay active at home with appropriate home-care services and to provide respectful care if health deteriorates; safe workplaces for our 3000 staff and other health professionals with appropriate resourcing.

When we care for our health professionals we care for our patients.

About me: Experience Director (Chair SILC, AA-BoP District Council, Stellaris Ltd). I teach Governance and Strategic Planning.