

Principles of Relationship Agreement

Between

Murihiku and Āraiteuru Rūnaka

and

Southern District Health Board

and

WellSouth Primary Health Network

March 2021

Contents

1.0	Introduction	3
2.0	Purpose	3
3.0	Parties to this Relationship	4
	Ka Papatipu Rūnaka	4
	Southern District Health Board.....	4
	WellSouth Primary Health Network	4
	All Parties.....	4
4.0	Acknowledgements of Parties	5
5.0	Legal Effect	5
6.0	Values.....	5
7.0	Goals	5
8.0	General Scope	6
9.0	Reporting.....	6
10.0	Consultation Engagement.....	6
11.0	Meetings	7
12.0	Remuneration	8
13.0	Communication	8
	Iwi Governance Committee	8
	Southern District Health Board.....	8
	WellSouth Primary Health Network.....	8
	External Communication	8
14.0	Dispute or Difference Resolution	9
15.0	Review	10
16.0	Appendix A.....	11
	Ngāi Tahu Values:.....	11
	Values for the Southern DHB:	11
	Values for the WellSouth PHN:	11

1.0 Introduction

The seven papatipu rūnaka of Murihiku and Āraiteuru have formed an Iwi Governance Committee with a specific focus on health and disability matters. The Iwi Governance Committee wish to have a Te Tiriti o Waitangi (Treaty) based partnership with the Southern District Health Board (Southern DHB) and WellSouth Primary Health Network (WSPHN). The Southern DHB partner is represented by the Southern DHB Chair and Board members. The WSPHN partner is represented by the Chair and other members of WSPHN Board as the WSPHN should determine. The Treaty Partnership is a governance relationship.

The purpose of this agreement between the three parties is to clearly state why the relationship exists, what the parties will do within this relationship and how the parties will engage in this relationship.

All parties acknowledge that there will be other formalised and/or contract based relationships between the parties or constituents of the parties from time to time. Such formalised and/or contract based relationships are not the business of the Iwi Governance Committee. Our relationship is intended to be transformational rather than transactional.

2.0 Purpose

The overall purpose of the Iwi Governance Committee is to work collaboratively with the Southern DHB and WSPHN to improve the health and well-being of Māori living in the Southern region.

All three parties in this relationship acknowledge that leadership is required in the improvement of health and wellbeing of all who live in the Southern region. It recognises the different mandate and responsibilities relevant to their respective roles and through collaboration these roles are seen as complementary and necessary.

The Iwi Governance Committee in partnership is committed to addressing the findings of Wai 2575 and will leverage our collective influence with our partners to ensure planning and resource allocation to effect continuous improvement in Māori health and wellbeing.

The Southern DHB and WSPHN will engage with the Iwi Governance Committee, to agree our approach for broader engagement with local iwi and taurahere. This will ensure that relevant health and disability priorities for Māori are identified and targeted by primary and secondary health service delivery.

3.0 Parties to this Relationship

Ka Papatipu Rūnaka

3.1 The Iwi Governance Committee is made up of a representative from each of the seven papatipu rūnaka identified in Te Rūnanga o Ngai Tahu Act (1996) whose territory is in the Southern DHB region, namely:

- Ōraka Aparima Rūnaka
- Te Rūnanga o Awarua
- Waihōpai Rūnaka
- Hokonui Rūnanga
- Te Rūnanga o Ōtākou
- Kati Huirapa Rūnaka ki Puketeraki
- Te Rūnanga o Moeraki

3.2 These representatives have been mandated by their respective rūnaka to engage in a formal relationship with the Southern DHB and WSPHN.

Southern District Health Board

3.3 The Southern DHB has statutory rights and obligations under the New Zealand Public Health and Disability Act (NZPHDA) 2000 to improve health outcomes for Māori in the Southern DHB region. Actions to address equity will be assessed to ensure that we are able to respond to Wai 2575.

The Southern DHB is represented under this agreement by the Southern DHB Chair and nominated Board members.

The Southern DHB representatives will be appointed for the District Health Board term.

WellSouth Primary Health Network

3.4 The WSPHN is represented under this agreement by the Chair, two Māori WSPHN Board members and one other WSPHN Board member.

All Parties

3.5 In addition to the membership, it is agreed that other Board members from the Southern DHB and WSPHN, may attend from time to time. The Chair of the Iwi Governance Committee also has the discretion to invite others to the meeting as and when appropriate. In addition to the membership, it is agreed that other Board members from the Southern DHB and WSPHN, may attend from time to time. The Chair of the Iwi

Governance Committee also has the discretion to invite others to the meeting as and when appropriate.

4.0 Acknowledgements of Parties

The parties acknowledge:

- 4.1 The policy for health and disability services is determined by central government and advised to the Southern DHB by the Minister of Health and the Ministry of Health.
- 4.2 The relationships created by this agreement are not exclusive and all parties reserve the right to create or maintain partnerships with any other group that may assist them in their respective objectives.

5.0 Legal Effect

This Principle of Relationship Agreement while not legally binding provides an opportunity for a substantive response to the findings of Wai 2575.

6.0 Values

The parties have identified values that underpin their partnership and the values for each of the parties is outlined in Appendix A to this Principle of Relationship Agreement.

7.0 Goals

- 7.1 To provide a comprehensive and evidence-based response to equity in Māori health and disability across the Southern region.
- 7.2 To influence and shape strategic processes to achieve excellence in health equity and outcomes for Southern Māori.
- 7.3 To ensure operational activities are underpinned by the findings of Wai 2575 and across relevant strategies and actions for Māori health are identified for Māori.
- 7.4 To agree annual objectives to ensure that localised needs are addressed.

8.0 General Scope

- 8.1 Provide advice and make recommendations regarding Māori health. This includes supporting the partners to prioritise Māori health equity and outcomes.
- 8.2 The Southern DHB and WSPHN will ensure Annual Plans are presented to the Iwi Governance Committee with sufficient time for the committee to contribute to those plans in a meaningful way.
- 8.3 To receive and consider relevant information and research regarding Māori health in the Southern region.

9.0 Reporting

- 9.1 The Iwi Governance Committee will work with the Southern DHB and WSPHN to develop an agreed suite of reports, which will be provided on a regular basis and be reviewed periodically by the Iwi Governance Committee. The purpose of the reports is to monitor progress against agreed plans and outcomes for Māori living within the Southern region.
- 9.2 It was agreed that some Health and Disability Commission (HDC) information could be included in the suite of reports provided to the Iwi Governance Committee, noting that the important issue is for Iwi Governance Committee to know that consideration is given to inquiries. Iwi Governance Committee will be advised of significant events and risk and be involved in solutions.

10.0 Consultation Engagement

The Southern DHB and WSPHN agree to seek advice from the Iwi Governance Committee for all matters that require formal consultation that significantly impact Māori. Such matters should include but not be limited to strategic directions, changes in service provision and new service design.

- 10.1 General discussions at scheduled meetings do not automatically represent formal consultation. The Southern DHB and WSPHN will clearly identify when their discussions with the Iwi Governance Committee are formal engagement.
- 10.2 The Iwi Governance Committee will provide advice and direct support regarding best methods for consultation with Māori as relevant to the kaupapa at the time.

11.0 Meetings

- 11.1 The Iwi Governance Committee will work with Southern DHB and WSPHN to develop an induction programme for new Iwi Governance Committee members.
- 11.2 The Iwi Governance Committee will meet six times per year or as necessary.
- 11.3 There will be at least one wānanga each year for the purposes of education, professional development and training.
- 11.4 The schedule of meeting dates will be set out in the Iwi Governance Committee “work plan” to ensure meetings provide for timely input into key strategic processes.
- 11.5 A quorum for the Partnership will be four of the seven papatipu rūnaka representatives with provision for rūnaka to delegate their proxy to the Chair of the Iwi Governance Committee for the purposes of a quorum.
- 11.6 There is an expectation that members attend 67% (four of six) of the meetings per annum.
- 11.7 Meeting locations will be held between Otago and Southland and at a Marae a minimum of twice a year – one in Otago and one in Southland.
- 11.8 The Iwi Governance Committee is not a statutory committee and as such the meetings are not public meetings.
- 11.9 The Chairperson of the Iwi Governance Committee shall be appointed by the Iwi Governance Committee for a term of three years.
- 11.10 The Southern DHB Chief Executive Officer and the WSPHN Chief Executive will ensure provision of administrative support to the Iwi Governance Committee.
- 11.11 A meeting summary will be distributed to each Iwi Governance Committee member for general distribution within their respective rūnaka.
- 11.12 There is an expectation that, outside the membership, all Iwi Governance Committee meetings are supported by the following management members: Chief Executive Officer, Southern DHB; Chief Executive WSPHN; Chief Māori Health Strategy and Improvement Officer and Executive Director Strategy Primary and Community or their delegates. Management members have the discretion to invite other members of their respective teams as appropriate.

12.0 Remuneration

- 12.1 Remuneration to Iwi Governance Committee members will be consistent with those rates as set down by the State Services Commission and include reasonable costs for reading materials.
- 12.2 The Southern DHB and WSPHN will agree an annual budget with the Iwi Governance Committee to support secretariat meeting and reasonable costs.

13.0 Communication

Iwi Governance Committee

- 13.1 The representatives from each of the seven papatipu rūnaka will facilitate communication with their respective rūnaka.
- 13.2 Southern DHB and WSPHN recognise that on occasions rūnaka members and/or members of the Iwi Governance Committee will communicate about health issues outside of their role as a representative on the Iwi Governance Committee. On these occasions the representative will ensure that their comments are NOT from the Iwi Governance Committee unless formally agreed.

Southern District Health Board

- 13.3 The Chief Executive Officer of Southern DHB and the Board Chair will facilitate communication within the Southern DHB with regards to Iwi Governance Committee work activities.

WellSouth Primary Health Network

- 13.4 The Chief Executive of the WSPHN and the WSPHN Chair will facilitate communication within the Primary Health Network with regards to Iwi Governance Committee work activities.

External Communication



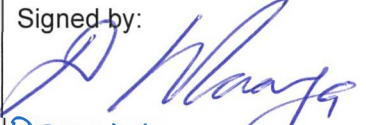
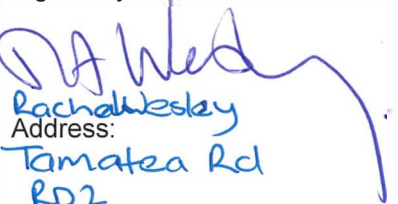
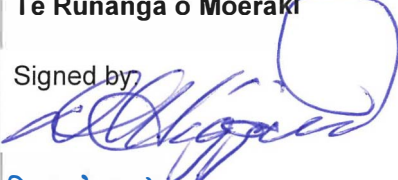
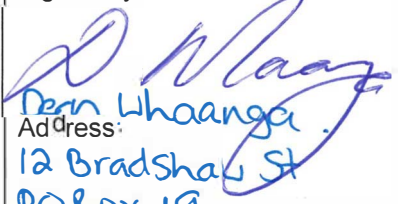



- 13.5 Any communications related to the Iwi Governance Committee relationships will be fronted in the first instance by the Chair of the Iwi Governance Committee, the Chair of the Southern DHB and the Chair of WSPHN as agreed by the Chairs at the time of the communication.

14.0 Dispute or Difference Resolution

- 14.1 All disputes and differences between the parties to this relationship shall be subject to agreed processes for mediation.
- 14.2 All disputes and differences between the rūnaka representatives on the Iwi Governance Committee shall be dealt with based on tikanga Ngāi Tahu.

15.0 Review

The parties shall review this relationship agreement every 36 months or earlier from the date of signing and will amend this relationship agreement as necessary to achieve the objectives of the three parties.

<p>Kāti Huirapa Rūnaka ki Puketeraki</p> <p>Signed by:  Marewa Preddy</p> <p>Address: 520 Apes Rd. Kaitiaki 4110</p> <p>Occupation: Deputy Upoko</p> <p>Date: 15 MAR 2021</p>	<p>Hokonui Rūnanga</p> <p>Signed by:  Winnie Matahaere</p> <p>Address: 140 Charlton Rd Gore 9740</p> <p>Occupation: Representative</p> <p>Date: 15 MAR 2021</p>	<p>Ōraka Aparima Rūnaka</p> <p>Signed by:  Dean Whaanga</p> <p>Address: 175 Palmerston St Riverton</p> <p>Occupation: Chair (on behalf of)</p> <p>Date: 15 MAR 2021</p>
<p>Te Rūnanga o Ōtākou</p> <p>Signed by:  Rachael Wesley</p> <p>Address: Tamatea Rd RD2 Ōtākou</p> <p>Occupation: Chair</p> <p>Date: 15 MAR 2021</p>	<p>Te Rūnanga o Moeraki</p> <p>Signed by:  David Higgins</p> <p>Address: Tenby St Moeraki RD2 Palmerston 9482</p> <p>Occupation: Upoko Moeraki</p> <p>Date: 15 MAR 2021</p>	<p>Te Rūnanga o Awarua</p> <p>Signed by:  Dean Whaanga</p> <p>Address: 12 Bradshaw St PO Box 19 Bluff 9814</p> <p>Occupation: Chair</p> <p>Date: 15 MAR 2021</p>
<p>Waihōpai Rūnaka</p> <p>Signed by:  Cynil Gilroy</p> <p>Address: PO Box 7017 South City Invercargill</p> <p>Occupation: Chair</p> <p>Date: 15 MAR 2021</p>	<p>Southern District Health Board</p> <p>Signed by:  Pete Hodgson</p> <p>Address: Pete Hodgson Southern DHB Private Bag 1921 Dunedin 9054.</p> <p>Occupation: Chair</p> <p>Date: 15 MAR 2021</p>	<p>WellSouth Primary Health Network</p> <p>Signed by:  Andrew Swanson-Dobbs</p> <p>Address: WellSouth 11335 Princes St Dunedin</p> <p>Occupation: CEO</p> <p>Date: 15 MAR 2021</p>

16.0 Appendix A

Ngāi Tahu Values:

- Whanaungatanga – a relationship through shared experiences and working together which provides people with a sense of belonging.
- Manaakitanga – the process for acknowledging the mana of each party.
- Tohungatanga – expertise, competence and proficiency.
- Kaitiakitanga – guardianship, stewardship and trusteeship.
- Rangatiratanga – chieftainship, right to exercise authority, chiefly autonomy, authority, ownership and leadership.
- Tikanga – the customary system of values and practices.

Values for the Southern DHB:

- Manaakitanga (Kind) – looking after our people: we respect and support each other. Our hospitality and kindness foster better care.
- Pono (Open) – being sincere: we listen, hear and communicate openly and honestly. Treat people how they would like to be treated.
- Whaiwhakaaro (Positive) – best action: we are thoughtful, bring a positive attitude and are always looking to do things better.
- Whanaungatanga (Community) – as family: we are genuine, nurture and maintain relationships to promote and build on all the strengths in our community.



Values for the WellSouth PHN:

- He mana tō te whānau – Whānau Centred
- Tōkeke – Equitable
- Manawa whakaute – Respectful
- Pono – Transparent

