



Annual Report 2023-24



**Unuhia te rito o te harakeke
Kei hea te korimako e kō?
Whakatairangitia, rere ki uta,
rere ki tai.**

**Kī mai koe ki ahau,
He aha te mea nui o te ao?
Māku e kī atu, he tangata,
he tangata, he tangata.**

**Remove the centre of the flaxbush
Where then will the bellbird sing?
It will fly inland and seawards aimlessly.**

**You enquire of me,
What is the greatest thing in this world?
I reply, it is people, it is people,
it is people.**



Nā Meri Ngaroto o Te Aupouri

Proverb by Meri Ngaroto of the Te Aupouri tribal nation





Nau mai, haere mai and welcome to our THINK Hauora Annual Report for 2023-24. This Report gathers together the highlights and challenges of our year, and celebrates the diligent, unending efforts of our passionate kaimahi.

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01

Introduction





Chairman's Report



Tēnā koutou katoa,

It is with great pride and a sense of accomplishment that I present to you the THINK Hauora 2023-24 Annual Report.

This year has been one of significant progress and resilience, marked by our unwavering commitment to improving primary health care services for our community.

Our New CEO

Our new CEO, Amarjit Maxwell, was officially welcomed to THINK Hauora at a pōwhiri held in December 2023. Amarjit was previously Chief Executive of Collaborative Aotearoa, and her background includes local government work across both the UK and Aotearoa. Her passion for primary and community health care is evident through her involvement in the transformation of primary healthcare in Aotearoa, working with PHOs across the country. Through this mahi, Amarjit has been instrumental in the establishment of the Health Care Home (HCH) model of care.

Board Changes

During the year, we farewelled Dr Anna Skinner, who has been a Provider Trustee on the THINK Hauora Board for the past six years. Anna's strong clinical background and dedication have been invaluable, and we wish her well in her future endeavours. We also welcomed our new Provider Trustee, Stephan Lombard, who brings a wealth of experience and expertise from his many years as a GP. His expertise is a strength and asset to our Board.

We also bid farewell to Di Rump, our iwi representative for Muaūpoko Tribal Authority. Di's valuable contributions, particularly on our Finance, Audit, Risk, and Health and Safety

Committee, have been greatly appreciated. We welcome Geraldine Gray as the new Muaūpoko iwi representative and look forward to her insights and collaboration.

The Alliance

The Alliance has continued to meet on a regular 6-weekly basis, and workshops have been held throughout the 2023-24 year. The Alliancing approach has been one of partnership and collaboration with a range of other organisations, which has driven improvements in many areas. We look forward to continuing discussions during the 2024-25 year.

Meso Level Workshops

Health NZ Te Whatu Ora facilitated meso-level workshops across the country to discuss the future functions of Primary Health Organisations. These workshops, which included network-wide engagement, Hauora Māori Providers, and a hui with the Iwi Māori Partnership Board, were rich in discussion and will inform the future direction of the PHO. The Palmerston North workshop was well attended by a range of community providers. In response, Health New Zealand is preparing a discussion document. We look forward to working alongside Health New Zealand, our general practice teams, Iwi and our other primary care partners, once the new policy settings are known.

Achievements and Milestones

Over the past year, we have been working hard to address network sustainability and building relationships within our network. We are committed to ensuring that we work with our practices, for our practices.



We will continue to review our after-hours care across the district and look at innovative ways to provide care to our communities. Workshops held throughout the year have ensured that our dedicated team of healthcare professionals are working together to deliver comprehensive after-hours services.

In June, I had the honour of officially opening our new building in Levin, where the Horowhenua Community Practice and THINK Hauora staff are now based. The name Te Puna Hauora, gifted by Muaūpoko Tribal Authority, means the spring of wellness and has connections to the local Levin area. The design, fit-out and artwork has been commissioned in partnership with Iwi, and we remain committed to supporting the health and wellbeing of our communities. This purpose-built clinic is a significant asset to the region.

Responding to Challenges

Two of the most significant issues facing general practice nationally, and especially locally, are workforce and funding constraints. Our team has wasted no opportunities to raise these important issues with officials and Government during the year, including with in-person meetings with Dame Dr Karen Poutasi (the previous Chair of Health NZ), Hon Matt Doocey, Associate Minister of Health and Sam Uffindell MP and Chair of Parliament's Health Committee. These issues have also been front of mind during national negotiations on changes to the PHO Services Agreement, where we are actively represented.

In the face of these hurdles, our team remained resilient and adaptive, ensuring that our services continued without interruption.

Pictured: Refugee Day.



Financial Performance

We continue to manage our economic stability throughout times of uncertainty. Our prudent financial management has enabled us to continue delivering high-quality services without compromise. Detailed financial statements are included later in this report.

Future Outlook

Looking ahead, we remain committed to our vision of Connecting Communities for Wellbeing and providing accessible, high-quality primary health care. Our strategic priorities for the coming year include:

- **Strengthening Partnerships:** We will continue to build and strengthen partnerships with our network of general practices, community organisations, iwi, local Councils, and other stakeholders to enhance our service delivery and community impact.
- **Innovation and Improvement:** We will continue to invest in innovative solutions and continuous improvement initiatives to ensure we remain at the forefront of primary health care.
- **Sustainability:** We are dedicated to ensuring the long-term sustainability of our organisation through sound financial practices and by working with our partners to enhance the future of primary health care.

The coming year also signals the potential for changes to our wider policy and contractual settings. The Board believes that with our strong focus on communities, relationships, improving equity, and our primary care partners, we are in a strong position to respond to these changes positively and in a way that improves health outcomes.

Conclusion

In closing, I would like to extend my heartfelt gratitude to the Board, Sub-Committees, Senior Leadership Team, and staff at THINK Hauora, as well as our provider network and community. You have offered unwavering support and dedication. Together, we make a significant difference, and I am confident we will continue to achieve great things in the years to come.

This will be my last Chairman's Report for THINK Hauora as my tenure has come to an end. In early 2025, we will be seeking applications for two new appointments, namely an independent Board Chair and a Chair for our Finance, Audit, Risk and Health and Safety Committee.

Thank you for your continued support. Ngā mihi.



Dr Bruce Stewart
Chair, THINK Hauora Board



CEO's Report



Tēnā koutou katoa,

I am pleased to present the annual report for THINK Hauora for the 2023-24 year. This year has been a year of transformation for our organisation, as we continue to strive towards our mission of Connecting Communities for Wellbeing.

Having joined the THINK Hauora team in December 2023, in my short time here already, I am very proud to be part of this organisation and can see the immense value our kaimahi bring to our whānau communities.

As we reflect on the past year, we also acknowledge the transformations underway in Aotearoa New Zealand's health system. The health reforms, including the structural changes, represent a significant change that we must navigate carefully to ensure they lead to real improvements in health outcomes. THINK Hauora is proud to contribute to this progress, aligning our work with the broader goal of improving health outcomes for all, with a particular focus on equity. Our commitment to Te Tiriti o Waitangi remains central to our work, guiding us as we strive to improve health equity for Māori and deliver meaningful outcomes across the MidCentral rohe.

A key element of this progress has been our partnership with the Te Pae Oranga o Ruahine o Taranaki Iwi Māori Partnership Board and Te Tihi o Ruahine, which have provided invaluable guidance and insight into the aspirations and priorities of whānau. These relationships have deepened our ability to co-design and deliver services that aim to reflect kaupapa Māori principles. Our strengthened collaboration with iwi ensures that our work is both equitable and culturally anchored.

Our achievements as THINK Hauora, alongside general practices and community organisations, have reinforced the power of cross-sector collaboration to address the complex drivers of health and wellbeing. General practices remain the cornerstone of primary and community care, playing a vital role in supporting whānau with accessible, comprehensive, and coordinated care. Their partnership is essential to delivering population-health-focused solutions that address barriers, improve access, and ensure continuity of care for all.

This year, we have been laying the groundwork in preparation for the government's newly announced 5+5+5 health targets, which were announced in March 2024. These targets, focusing on reducing acute demand, improving prevention, and enhancing equity, are pivotal in advancing our health system's response to population needs. Along with our partners, a key priority for us is improving childhood immunisation rates. Immunisations are a critical component of protecting our youngest tamariki from preventable diseases, and we are committed to supporting general practices and whānau in boosting uptake, particularly among Māori and Pasifika children. These efforts align with our broader commitment to Pae Ora—Healthy Futures for all.

In addition to strengthening partnerships within the primary and community care sectors, we continue to recognise the importance of collaboration with Hospital Specialist Services. Effective integration between primary, community, and hospital care is essential to delivering coordinated and comprehensive services to our communities. We will continue to seek opportunities to deepen these collaborations, ensuring that all parts of the system work together to support patients.



We also recognise the value of regional collaboration in addressing shared challenges and aligning resources to achieve system-wide improvements. At the same time, we are committed to place-based planning that centres on the unique needs and aspirations of local tākiwā. By tailoring solutions to reflect the strengths and priorities of each community, we can ensure that services are responsive, culturally relevant, and effective in supporting whānau wellbeing.

I would like to extend my heartfelt thanks to our Board for their strong strategic leadership throughout this year, ensuring that our organisation remains focused and adaptable in the face of change. I also wish to acknowledge the outstanding contributions of our Alliance Leadership Team the Clinical and Digital Committee Governance Group, and the Finance, Audit and Risk and Health & Safety Committee. Their expertise and guidance have been critical in driving innovation, enhancing clinical and digital capability, and strengthening integrated care.

Of course, a huge well-deserved thanks to our kaimahi, including our Senior Leadership Team, for their commitment to improving outcomes for whānau and communities. This Annual Report reflects their mahi, including highlights of significant achievements. Ka rawe e te whānau!

Looking ahead, we remain steadfast in our commitment to achieving Pae Ora (Healthy Futures). This journey demands bold action, deep partnerships, and unwavering accountability. By continuing to work alongside general practices, the Iwi Māori Partnership Board, iwi, regional partners, Hospital Specialist Services, and community organisations, we will advance equitable and transformative health outcomes for our communities.

Ngā mihi,



Amarjit Maxwell
CEO, THINK Hauora Board

Pictured: Enhancing General Practice for Community Health and Wellbeing Wānanga.



Network Summary

The THINK Hauora network of 31 general practices and other health care providers covers the more than 194,000 people of the MidCentral rohe, approximately four percent of the national population.

As a primary health organisation, highlighting the work of our General Practice network is important to us.

Ours is a diverse region, with people living in both urban centres and sparsely populated rural areas where people travel significant distances for medical attention.

A summary of our demographic makeup across the rohe is covered on the following pages.

The data on page 15 highlights the increase of enrolments and consultations for general and high priority populations between the past two fiscal years to 30 June.

The full list of statement of service performance (SSP) metrics can be found at the end of this report with financial information.

Data source: THINK Hauora General Practice Network. Statistics accurate as of 30 June 2024.



MidCentral rohe total population

194,500



THINK Hauora enrolled population

171,157 87.9%



80,594 47.1%

Palmerston North City



31,823 18.6%

Horowhenua District



29,173 17.0%

Manawatū District



16,336 9.5%

Tararua District



5,739 3.4%

Ōtaki Ward



33,156 19.4%

Māori – This higher than the national statistic 15.3%.



5,736 3.4%

Pasifika – This is lower than the national statistic 7.2%.



52,387 30.6%

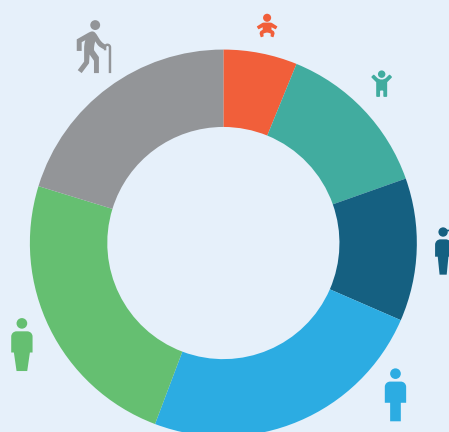
Community Service Card Holders – This higher than the national statistic 25.3%.



43,564 25.5%

Living in high deprivation – This higher than the national statistic 18.9%.

Enrolments by age group



10,561
6.2% 0-4 yrs

41,455
24.2% 25-44 yrs

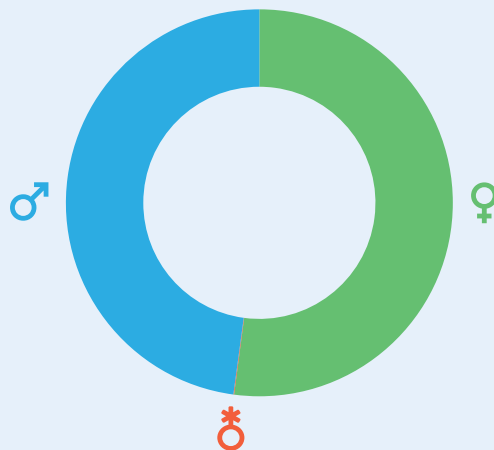
22,972
13.4% 5-14 yrs

41,083
24.0% 45-64 yrs

20,427
11.9% 15-24 yrs

34,659
20.2% 65+ yrs

Enrolments by gender



89,150
52.1% Female

81,903
47.9% Male

104
0.1% Another gender



Total enrolled patients

2024 FYE

171,157

2023 FYE

167,713

2% INCREASE

As a percent of total population

2024 FYE

87.9%

2023 FYE

87.5%

0.4% INCREASE



Māori, Pasifika and deprivation quintile 5, and
Community Services Card holders enrolled

2024 FYE

67,033

2023 FYE

63,786

5% INCREASE



Total GP consultations

2024 FYE

598,367

2023 FYE

554,793

7% INCREASE



Consultations with Māori, Pasifika, deprivation
quintile 5, and Community Services Cardholders

2024 FYE

211,384

2023 FYE

182,472

16% INCREASE

As a percent of total population

2024 FYE

35.3%

2023 FYE

32.9%

2.4% INCREASE

02

THINK Hauora Overview





Our Strategy

During this past year we took the opportunity to refresh our strategy, reflecting the ongoing changes occurring throughout the health sector and how THINK Hauora is meeting the changing landscape.

This involved several workshops with our kaimahi and stakeholders over a period of a couple of months. The Board has reaffirmed our strategy that blends the core work that general practice teams achieve within a multi-disciplinary and community-centred framework to improve equity. Our aspiration to be a Te Tiriti led organisation remains at the core of our mahi.

The strategy refresh is to the right. A full strategic review is planned for 2025.

This infographic is correct as of May 2025. You can view the most recent 'Strategy at a Glance' here:

STRATEGY AT A GLANCE 2019–2025

STRATEGIC AIMS		KEY AREAS OF FOCUS
COMMITMENT TO TE TIRITI O WAITANGI	Whānau Ora Achieving wellbeing	W Positively support and influence Align activities and effort to the indicators Continue to drive the uptake a
	Equity People, community voice and data-driven	E Connect information and people equity Health intelligence provides equitable health outcomes Effective data stewardship and
	Access Easy, available, cross-sectors	A Provide leadership for the inclusion Develop a strong affinity between based health, social and special THINK Hauora will give effect in our rohe
	Value Teams, technology, performance	V Establish locality-based teams Locality-based teams will be supported THINK Hauora Outcomes Framework consumer and practice incentives
	Innovation Quality improvement, excellence, engagement	I Recognise and celebrate our people outcomes Drive the implementation of the Achieving our local response to Programme of Action
	Networking Relationships, partnerships, collective impact	N Partner with people, communities Strive to become a trusted back methodology Partner with local, national and development
	Growth Sustainability, system and alignment focus	G THINK Hauora will give effect to Diversify revenue streams to a Cultivate innovative approaches of providing care
COMMUNITIES		HOROWHENUA

2025 *Tūhonotia te Hapori ki te Ora* Connecting Communities for Wellbeing



cross-sector Whānau Ora and Wellbeing policy setting and direction

Whānau Ora outcomes-based framework and the Stats NZ Wellbeing

and utilisation of Ka Ao, Ka Awatea Māori Health Strategic Framework

le to inform and transfer knowledge to develop innovative ways to improve

quality and context-based insights to support decision-making to improve

d system interoperability will improve the access and flow of information

usion of bold political choices for health across all sectors

een the Health Care Home, Iwi and Māori providers and other community-

alist services

to Te Awa-Digital Strategy by continuing to drive the digital connectedness

across the district to support whānau to meet their health and wellbeing needs

upported by technology that enables mobility, productivity, knowledge and safety

network will focus expectations on equity of outcomes and any related

ves across our communities

provider network achieving *excellence every day* in improving health

he district's 'Quality Agenda Shared Clinical Governance'

o the Mental Health Inquiry 'Realising W.A.I.O.R.A - A Collective Voice'

ty and providers to collectively support our communities' aspirations

bone organisation that supports cross-sector alliances within a collective impact

d international organisations to improve our approach to research and

o the MidCentral DHB Health and Wellbeing Locality and Cluster Plans

chieve primary health care clinical and financial sustainability

es to primary health care workforce development to improve the experience

WHĀNAU ORA OUTCOMES

Rangatiratanga
Self-Managing



Kōtahitanga
Whānau Cohesion



Hauoranga
Living Healthy
Lifestyles



Tuakiritanga
Participating in
Te Ao Māori



Tiaki Taiao
Responsible
Stewards of Living &
Natural Environments



Pāporitanga
Participating
in Society



Pukenga Rawa
Economic Security
& Wealth Creation



Affordable care

Excellent
outcomes

Excellent experience
for those we serve

Excellent experience
for providers

QUADRUPLE AIM

MANAWATŪ

ŌTAKI

PALMERSTON NORTH

TARARUA

Our Services

THINK Hauora is the [Primary Health Organisation](#) (PHO) for Manawātū, Taranaki, Horowhenua and Ōtaki. We ensure everyone across our communities has access to essential primary health care services through a general practice team.

Like other PHOs, we provide primary health services either directly or through our contracted providers, particularly our general practice teams. The services provided aim to improve and maintain the health of the enrolled PHO population, ensuring that general practice services relate to other health services to ensure a seamless continuum of care.

We also aim to facilitate access to general practice care for those people who are unenrolled and are eligible for enrolment.

THINK Hauora supports the community by:

- Supporting general practice teams to deliver high-quality primary healthcare
- Developing primary healthcare capacity and capability within our rohe
- Working with Iwi, local communities and enrolled populations
- Engaging members of the population who are unenrolled in primary care with an aim to encourage them to enrol in a primary care practice
- Identifying and removing health inequities in access and outcomes
- Offering access to comprehensive services to improve, maintain and restore people's health
- Coordinating care across service areas
- Continuously improving programme quality using good information.

Pictured: Kaimahi at our Organisational Day.



Our Partnership with Te Tihi o Ruahine Whānau Ora

THINK Hauora continues to enjoy a strong partnership with Te Tihi, who provides Māori health guidance and leadership across the organisation. The two organisations undertook a relationship reset with the arrival of THINK Hauora's new Chief Executive in December 2023. Through this, Te Tihi and THINK Hauora have strengthened their shared commitment to centring a Māori lens throughout our work, as described below through our shared collaborations.

In September 2023 Te Tihi and THINK Hauora initiated the Te Ara Rau Workforce Advancement initiative. Through this work Te Tihi guided Te Ara Rau kaimahi with a schedule of workforce advancement sessions to further kaimahi learning, skill and knowledge in engaging with whānau Māori. The initiative included multiple workshops and training events throughout the year.

Additionally, Te Tihi continues to provide coordination of Te Roopu Waiora across seven Māori providers and includes all iwi and Māori providers who deliver services to whānau Māori experiencing differing levels of mental distress. The Te Ohu Whakaaraara (Whānau Ora Navigation Service) continues to lead in the delivery of a whānau centred and whānau led approach to working alongside whānau to identifying whānau aspirations and creating whānau plans to pathway to achieving their aspirations.

The service currently has 24 Kaiwhakaaraara (Whānau Ora Navigators) across eight of the Te Tihi Home Organisations ensuring opportunity for whānau to engage across the MidCentral region. The model of engagement is also being implemented by THINK Hauora services such as Te Ara Rau, Here Toitū and more broadly across Te Tihi Home Organisations.

Te Tihi and THINK Hauora have reformed the working group to advance Ka Ao Ka Awatea - the Māori health strategy. Together, the group is developing a framework for THINK Hauora and general practices to provide guidance and practical tasks to support them working with whānau Māori. This will provide a strategic framework to develop and implement their own Māori health plans, as it relates to their enrolled populations and communities. In the 2024/2025 year the working group, alongside clinical SMEs, will continue this work and finalise the next iteration of Ka Ao Ka Awatea.

Finally, our two organisations continued work on an Equity Training Package – a set of modules with a focus on equity and equitable outcomes for Māori in the primary health space. In the coming year, Te Tihi will continue to provide guidance firstly to THINK Hauora staff and then with the view to look more broadly across the primary healthcare network in a second phase.

Both Te Tihi and THINK Hauora value the relationship which has endured over a long period of time and withstood changes along the way. We both look forward to continuing to strengthen the ties and the work we carry out collectively to improve outcomes for whānau across the region.



03

**The Year
in Review**



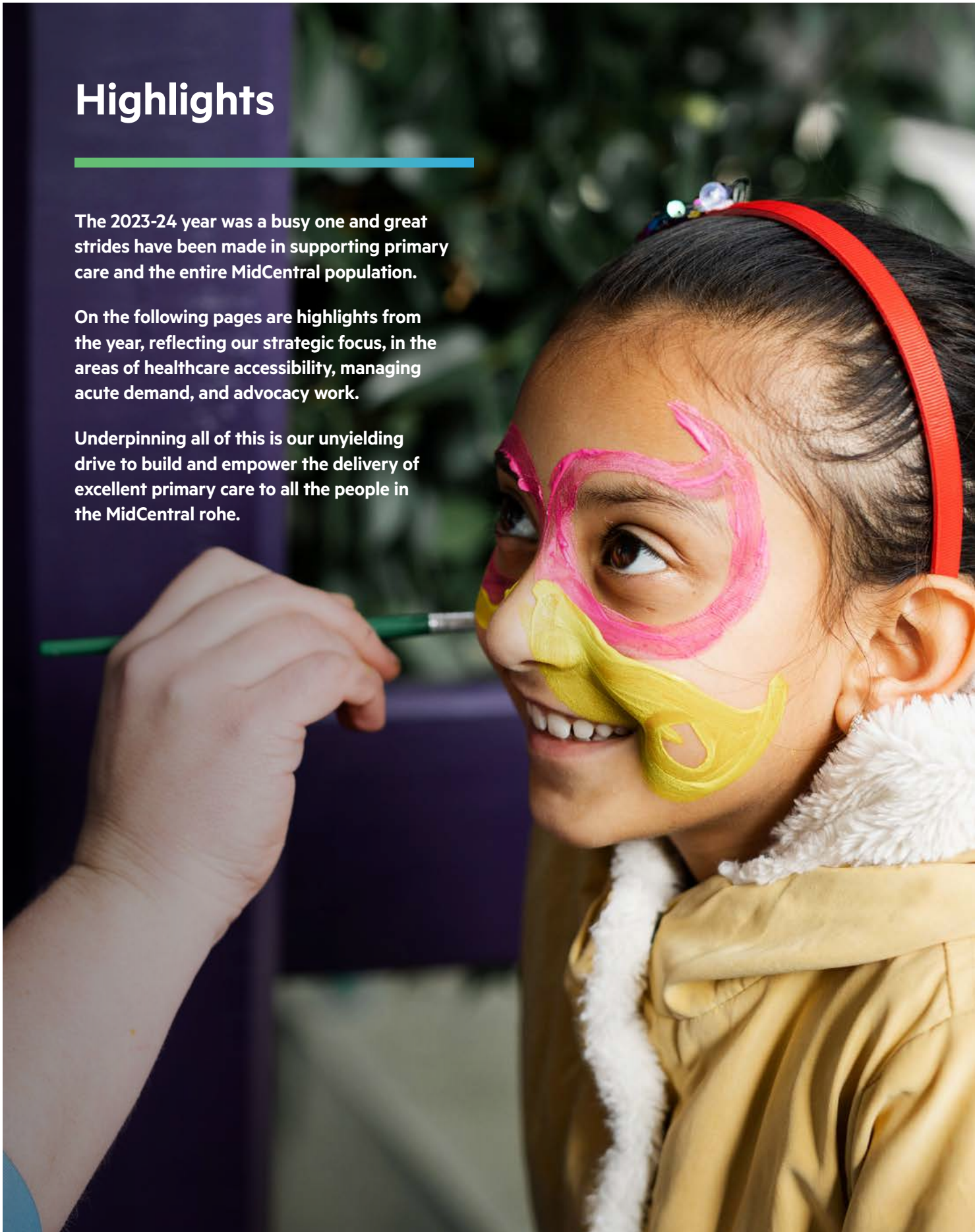


Highlights

The 2023-24 year was a busy one and great strides have been made in supporting primary care and the entire MidCentral population.

On the following pages are highlights from the year, reflecting our strategic focus, in the areas of healthcare accessibility, managing acute demand, and advocacy work.

Underpinning all of this is our unyielding drive to build and empower the delivery of excellent primary care to all the people in the MidCentral rohe.



Highlight

Strengthening connections with general practices

THINK Hauora continues to strengthen connections with general practices throughout the rohe through General Practice Forums, wānanga and practice visits.

Our General Practice Forums prioritise in-person connection, with the option for attendees to join online if they are unable to attend face to face. They are an opportunity for general practice teams to engage with each other, share knowledge and best practices, address important topics and help us as an organisation understand how THINK Hauora can support our general practice teams more efficiently.

In April, THINK Hauora hosted a successful wānanga focused on enhancing general practice for community health and wellbeing. With over 100 healthcare professionals in

attendance, the event successfully provided a platform for general practice kaimahi, regional partners and sector leaders to share knowledge, explore new ideas and hear of the changes that others within the sector have made to alleviate the pressures many are facing.

This year also saw the return of practice visits by our leadership team, which has been incredibly beneficial for THINK Hauora kaimahi to get out into practices, meet the general practice teams and understand their needs first-hand. These visits are ongoing and will be continuing over the next year. These visits are critical for keeping THINK Hauora grounded in our mission to support General Practice.

Pictured: General Practice forum.





Highlight

Meeting the demand for acute care services

Demand for acute care services throughout the rohe continues to grow. The MidCentral district has a growing population, but is facing significant workforce challenges in meeting demand, without a significant increase in clinicians.

After-Hours Working Group

In response to ongoing concerns around the after-hours roster and model of care, THINK Hauora established the After-Hours Working Group in October 2023 to provide expert advice and recommendations. The purpose of the group is to understand and assess the current after-hours system within our rohe and propose solutions to the issues identified.

Comprised of representatives from general practices teams and THINK Hauora's Acute Care Team, meetings were scheduled quarterly and the group successfully identified opportunities to enhance the model of care. These opportunities included expanding telehealth services, diversifying the workforce, and supporting practices with in-hours acute demand management. Between October 2023 and June 2024, the group focused on identifying challenges and opportunities and has begun transitioning into its implementation phase.

Practice Plus

Practice Plus is a virtual telehealth service, offering same day, after hours appointments with a GP. THINK Hauora is a shareholder in Practice Plus, which provides telehealth to connect clinicians from around the country to create additional local capacity. Throughout this financial year, THINK Hauora has implemented the Practice Plus Voucher Scheme which provides free Practice Plus vouchers to enable accessible healthcare for whānau facing financial barriers, distributing them through General Practices, Iwi health providers, and community groups. In May, THINK Hauora extended this partnership by funding free consultations for children 14 and under across the MidCentral rohe throughout the winter months.

This approach has proven to be very successful with more than 12,200 vouchers used, nearly two thirds of which were by people living in deprivation quintiles 4 and 5. Following the success of this initiative, THINK Hauora will continue to fund this service for the foreseeable future.

Extended Care Paramedics

Extended Care Paramedics (ECPs) are registered paramedics who can assist general practice teams to manage their acute demand. In 2023-24 general practices began using ECPs across the rohe to support them in their work. Early indications demonstrate they are a useful addition to an already stretched general practice workforce in being able to relieve pressure and allow more capacity in the semi-acute and planned space.

Practices that already have ECPs have reported increased capacity and are therefore better equipped to manage acute demand on a day-to-day basis reducing demand in other parts of the system, including after-hours. They are of value in the urgent care and after-hours space.





Highlight

Primary care practice assistants

In late June, THINK Hauora joined our general practice teams in celebrating ten primary care practice assistants obtaining their Certificate in Health and Wellbeing - Primary Care Practice Assistance. The certificate is a collaboration between Careerforce, UCOL and THINK Hauora, and enables practice assistants to develop skills to better support nurses and doctors in their mahi. In adding more practice assistants to the workforce and in general practice, the assistants can relieve pressures in general practice to address more complex patient needs. The ten graduates are now employed by general practices across the rohe.



Pictured: Primary care practice assistants graduation ceremony.







Highlight

Initiative funding to impact health outcomes

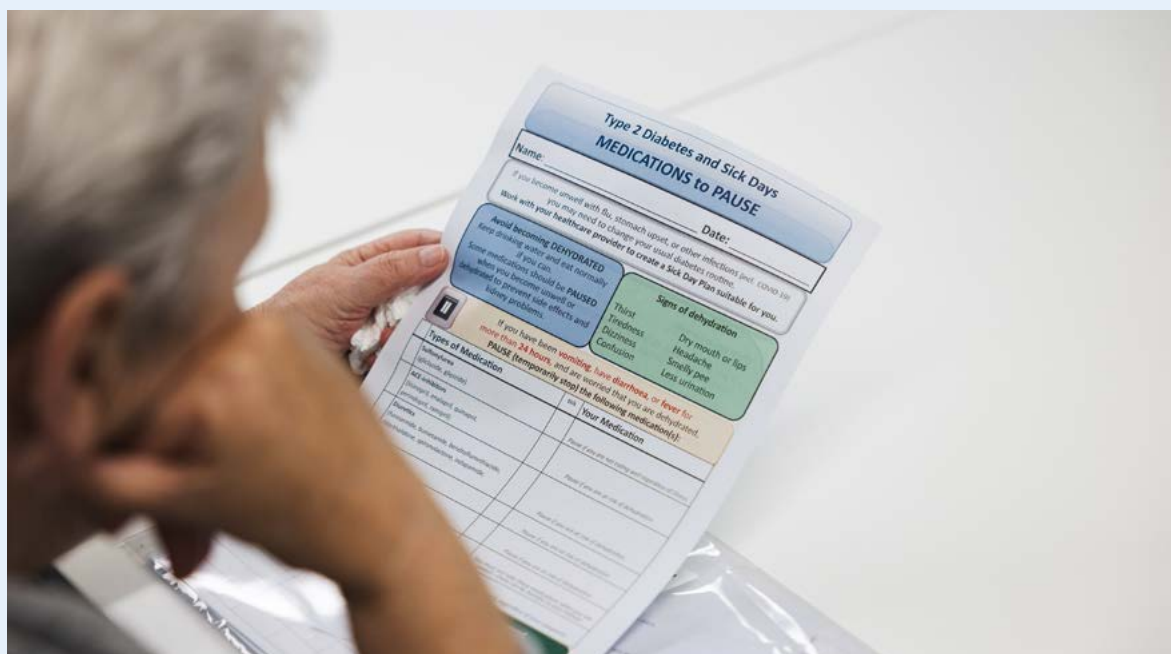
In April 2024, THINK Hauora committed more than \$2M to dedicated equity focused projects that will positively impact community health outcomes.

This includes \$450,000 to long-term conditions (LTC) initiatives, \$775,000 to population health initiatives (with a focus on access and acute demand), and \$775,000 to enable iwi/Māori providers to better support their communities' needs.

For the funding allocated to iwi/Māori providers, providers collectively came together to decide how this one-off investment from THINK Hauora's reserve funds could best support the hauora needs and aspirations of whānau, hapū, iwi, and hāpori in our rohe.

Thirty-seven applications for LTC and population health projects were extensively reviewed by an external panel, who focused on the proposals' alignment with community needs, an equity focus, and potential impact in the categories of acute demand, LTC, and population health. The panel recommended funding for nine LTC initiatives and eight population health initiatives.

A summary of each funded Long-Term Condition and Population Health initiative is below.



Entity	Long-term condition initiative summary
Te Puna Oranga o Ōtaki	Wānanga approach to LTC Providing whānau-centred long-term condition education and experiences through monthly wānanga in Ōtaki, targeting Māori and other demographics in the high-deprivation, rural-based community.
Hokowhitu Medical Centre	Fully-funded appointments for pre-diabetes and diabetes patients Offering fully funded appointments for pre-diabetes and diabetes patients, with a focus on Māori and Pasifika communities.
The Palms Medical Centre	Saturday clinics covering patient fee Establishing Saturday clinics to cover patient fees, aiming to improve access to healthcare services.
Cook Street Medical Centre	Diabetes annual reviews Conducting diabetes annual reviews to enhance patient self-management and health outcomes.
Niuvaka Trust	Pasifika LTC nurse including overheads Employing a Pacifica LTC Nurse to address long-term conditions in the Pasifika community.
Tararua Health Group	Additional resources for acute cardiovascular and diabetes care Enhancing triage processes to reduce pressure on acute demand services, especially during winter.
Ngāti Kahungunu ki Tāmaki-nui-a-Rua	Culturally responsive LTC nurse Implementing a culturally responsive LTC nurse programme to address long-term conditions in Māori and rural communities.
Levin Family Health	Elder health/diabetes management Improving management options for elder health and diabetes within the community through various initiatives.
Sydney Street Health	Nurse prescriber training Training nurse workforce to meet the community's healthcare needs.



Entity	Funded population health initiative summary
Te Puna Oranga o Ōtaki	Kura health-navigator programme This project aims to introduce a Health-Navigator programme in primary schools in Ōtaki. The focus is on improving health outcomes, children’s behaviour, and attendance rates by providing drop-in sessions, a 10-week parenting course, and support based on kaupapa Māori and te whare tapa whā models.
169 Medical Centre	ECG machine upgrade and no-cost ECG services The project seeks to upgrade the ECG machine at 169 Medical Centre and provide ECG services at no cost to Māori/Pacific and Community Services Card (CSC) holders, addressing barriers to healthcare access.
Cook Street Health Centre	Enrolling unenrolled individuals in Palmerston North This initiative focuses on enrolling unenrolled individuals in the 4412 postcode area, especially targeting Māori, Pasifika, and refugee populations
Otaki Medical	GP clinic for staff and students The proposal includes operating a GP clinic for staff and students for 3 days a week, 2 hours each day.
Kauri HealthCare Medical Centre	Acute demand management and winter kids clinic The project aims to improve acute demand management through an enhanced triage process and establishing a winter kids’ clinic.
Niuvaka Trust	Pasifika cultural model for healthcare access The one-year pilot initiative aims to address healthcare disparities for Pasifika communities using the Vaka Ola model, including funded healthcare vouchers, transport assistance, digital health support, and cultural competency training.
Tararua Health Group	Triage process improvement The project aims to enhance triage processes to reduce pressure on acute demand services, especially during winter.
Te Kete Hauora o Rangitāne	Whānau ora Registered Nurse initiative The project involves introducing a Whānau Ora Registered Nurse to provide wellness activities and screenings targeting vulnerable groups.

Highlight

Advocacy in a changing sector

THINK Hauora continued its work advocating for better health outcomes for our region at a government level, while also strengthening our partnerships.

In May, together with local partners, GPs and Te Pae Oranga o Ruahine o Tararua Iwi Māori Partnership Board, we welcomed Dame Karen Poutasi, Te Whatu Ora Board Chair, to a MidCentral District hui. The hui was an opportunity to reinforce the challenges impacting local services including ongoing workforce shortages, nursing pay parity and capitation funding. Alongside these challenges, the hui highlighted what is working well, such as the partnership and collaboration in the MidCentral rohe and examples of integrated care responding to community needs.

Pictured: Dame Karen Poutasi, Te Whatu Ora Board Chair at a MidCentral District hui, May 2024.



Pictured: Sam Uffindell, Parliament's Health Select Committee Chair visiting THINK Hauora, June 2024.



Parliament's Health Select Committee Chair, Sam Uffindell visited THINK Hauora in June and acknowledged the key role our organisation plays in looking after the community. This visit gave our leadership team the opportunity to highlight the mahi underway, the strategy and key programmes being implemented to support our health network and highlight some of the challenges the primary care network faces.

As mentioned by the Chair earlier in this report, we used these meetings to highlight the pressures general practices are facing. We had a particular focus on the underfunding of general practice, and the significant workforce challenges our general practices face – particularly those in more rural locations of Ōtaki, Horowhenua and Tararua.

Highlight

Here Toitū hits its stride

Here Toitū is a pilot programme delivered by THINK Hauora in partnership with the Ministry of Social Development.

The Here Toitū team supports whānau who are experiencing long-term health or disability challenges impacting their abilities to enter the workforce (either paid or voluntary) or training programmes. In the second year of the pilot, we are pleased to report that Here Toitū is going great.

Using the evidence-based Wellbeing Outcomes Star tool, the Here Toitū team supports whānau across eight key areas: lifestyle, self-care, symptom management, work/volunteering, financial aspects, living situation, relationships with family and friends, and positive feelings. Participants are asked to rate their wellbeing before engaging with the service, and again after. Recent data reveals substantial improvement, with 72% of whānau now scoring between

30 and 40 on the scale (40 being the maximum score), compared to an initial 59.3% scoring between 19 and 29. It's great to see the meaningful progress happening through this programme.

In the FY 2023-24 financial year, THINK Hauora successfully obtained Social Sector Level Four Accreditation in relation to our contract to deliver the Here Toitū Programme. This accreditation, set by Government, assesses providers and their services across six core social sector standards. This is a significant achievement and milestone for THINK Hauora as an organisation.

Here Toitū enrolled 204 people in FY 2023-24, exceeding its target enrolment volume of 200 people and is on a positive trajectory to meet the required volume for the rest of its contract (until June 2025).



Highlight

Te Puna Hauora: A purpose-built space for holistic health outcomes

After two years of planning and development, our newest clinic space, Te Puna Hauora, opened on Power Street in Levin in June.

The new clinic space houses both the Horowhenua Community Practice and THINK Hauora team members, providing a bright, modern facility for clinical teams to deliver first rate care to the community.

The name *Te Puna Hauora* was gifted by Muaūpoko Tribal Authority and encapsulates the kaupapa of the organisations and their ambitions: a space to provide a healing flow of holistic wellbeing and health outcomes for the entire community. In creating this space, the Horowhenua community has a bright and welcoming space for the entire whānau to engage in their health and wellbeing.

Pictured: Te Puna Hauora opening.





Highlight

Te Ara Rau Access and Choice continues to grow

Integrated Primary Mental Health and Addiction (IPMHA) Programme

The purpose of IPMHA, Te Ara Rau Access and Choice, is to improve the health and wellbeing of all individuals seeking wellness. This programme adopts a population-based care approach, offering a range of mental health services from minimal to extensive support, and complements the clinical services delivered in primary care settings.

In the 2023-24 financial year, 10,673 people accessed Te Ara Rau Services, a 23% increase from 2022/2023. A total of 980 Packages of Care were provided by external providers specializing in brief therapy, and 108 group sessions were provided by community providers.

Te Ara Rau Access & Choice has expanded into five additional general practices,

including West End Medical Centre, Levin Family Health, Massey Medical Centre, Health Hub Project NZ and WW Clinic on Grey. Nearly 89% of tangata whaiora found the interventions provided under the programme helpful, while 77% felt confident in applying the acquired skills in their daily lives. This represents an increase in confidence utilising these skills, highlighting the positive impact that these interventions are making.

Improving access for rainbow communities

Inspired by Health New Zealand's Midcentral's Rainbow Nursing scholarship, THINK Hauora and UCOL Te Pūkenga were proud to announce the Rainbow Health scholarship. It is available for ākonga who identify as part of the LGBTQIA+ community and are studying in an area of

Pictured: The Tūturu team.



health, excluding nursing. It's hoped these scholarships will inspire other rohe around the country to create similar support for the Rainbow and Takatāpui community.

Within the Te Ara Rau Access and Choice umbrella of services, THINK Hauora also has a gender affirming care programme called The Tūturu Service: True to your authentic self, which ties in directly with the new scholarship. This service provides comprehensive support for individuals exploring their gender identity and sexuality and helps them to achieve social affirmation.

The Tūturu Service continues to engage with the rainbow community to inform service provision and the development of the service. This approach ensures that the voices of LGBTQ+ individuals and families are heard and considered in decision-making processes. Ultimately, this engagement fosters a more inclusive and supportive environment for all families, promoting equity and well-being across the community.

From this, THINK Hauora has started developing a Rainbow Strategy. This strategy will be informed by engagement with the Rainbow community and will be designed to better serve the health and wellbeing of LGBTQIA+ communities. Through this strategy, THINK Hauora aims to reduce health disparities, promote inclusivity and safety, improve access to health care services and strengthen community relationships.



Meet Caitlin

[Click here to learn more about Caitlin, a 19-year-old trans woman who received a THINK Hauora scholarship.](#)

Snapshots 2023-24: Quarter by Quarter



Pictured: Matua Ola programme in progress.

Quarter 01

July-September

Pasifika health programmes focus on women and the elderly

Vaka Ora Pasifika (VOP) and Matua Ola health programmes are engaging Pasifika communities through exercise and health checks. VOP offers aquacise three days per week and is led by certified personal trainers who provide dance, full body workout and aquafit activities. General practice enrolment is available for those who are not yet enrolled with a care provider.

“It’s been great having this free programme where we can work out as a group and have fun. I can also bring my kids and not worry about looking for a babysitter for them, they end up joining in on the exercises.”

Matua Ola delivers health checks for elderly Pasifika with a focus on medication and prescriptions, cardiac and stroke, and the My Health Myself programme.

Shared medical appointments

Shared medical Appointments in Palmerston North are aimed at people with Type 2 Diabetes who sit in the moderate to high level of complexity. The programme started in Levin and is spreading throughout the rohe based on positive feedback.

Shared Medical Appointments are group appointments which uses a combination of group education, group work and individual appointments to help clients to improve their diabetes management. There is a strong focus on self-management skill building. Each session takes approximately two and a half hours with up to 15 people in attendance. The sessions rely on self-management principles while focussing on health literacy as the core focus of this patience-centred approach.

Te Tihi and Te Ara Rau

Te Tihi and Te Ara Rau continue the workforce advancement initiative through a series of hands-on pounamu workshops focussing on the kaupapa behind pounamu and how to care for our pounamu.

After-Hours and Urgent Care services hui

In September, we hosted an After-Hours and Urgent Care services hui for our general practice teams within Palmerston North, Manawatū and the Taranaki. One of the outcomes is the After-Hours Working Group which meets regularly. This was a significant piece of work for THINK Hauora and sector representatives throughout the year with many ideas and suggestions being urgently discussed and considered.

Pae Ora Act

THINK Hauora provided support to Te Pae Oranga o Ruahine o Taranaki Iwi Māori Partnership Board and Te Whatu Ora in developing locality plans as a part of the Pae Ora Act. This work sought to replicate the prototype model developed in the Horowhenua for the other parts of the MidCentral rohe.

Pictured: Te Ara Rau pounamu workshop.





Quarter 02

October-December

Te Ara Rau Access and Community

The Te Ara Rau Access and Community team provided health information and supported our LGBTQIA+ whānau at the 2023 Palmy Drag Fest Rainbow Fair. In mid-October the second takatāpui and whānau engagement workshop was successfully conducted by the Gender Affirming team in partnership with Te Tihi. After discussion, the group unanimously agreed that the service would be named the 'Tūturu Service: True to your authentic self', underscoring the importance of authenticity, freedom and individuality.

Community Referred Radiology Service

The Community Referred Radiology Service is proving to be a critical support for patient care in the rohe, providing timely and

equitable access to private diagnostics at no cost to patients.

The change to pro-equity eligibility has been a success, with priority populations benefitting significantly. Despite staffing challenges, the service is operating well across a range of localities, with a diverse group of private providers and within budget. Ka pai CRRS!

The Community Referred Radiology Service (CRRS) provides vital access to diagnostic x-ray and ultrasound, delivered in the community. THINK Hauora has carefully chosen a range of private radiology providers to ensure that patients have choice and options for closer to home service. All of this at no expense for eligible consumers.

Pictured: Rainbow Fair 2024.



The Move to Improve

The Move to Improve programme in Horowhenua, now in its second year, has experienced steady growth, with increasing attendance at its classes. As more people become aware of the program, referrals have come from sources such as GPs, LTC nurses, Te Ara Rau and Kaamanaki's and local health organisations. This year, new Move to Improve programs were also launched in Foxton and Otaki, both showing steady growth. Expanding the program to these smaller areas supports the goal of equity by removing geographical barriers to access.

The team has actively networked with clinical practices by attending clinical huddles to promote these services. They have successfully created inclusive groups that support a diverse range of individuals with long-term conditions, fostering an environment free of judgment.

Move to Improve group exercise programme is designed to improve mobility, strength, balance and mental health for people with long-term conditions. These are gentle exercise classes and participants can choose to do as much as they feel comfortable doing. It is a 20-week group programme ideal for entry into physical activity and caters to individuals with long-term health conditions who need support to start exercising in a supportive environment and with developing their self-management.



PATIENT SUCCESS STORY

Sonny's journey from heart surgery to becoming a local line dance instructor.

In late 2022, Sonny faced multiple health challenges, including heart surgery, type 2 diabetes, sleep apnea, and a weight of 152.2kg. Referred to THINK Hauora's Physical Activity Service, Sonny was initially hesitant but soon embraced exercise with the team's support. Starting with water walking due to knee pain, Sonny gradually built his confidence and improved his fitness.

Joining the Move to Improve programme in Levin, Sonny not only lost 16kg but also gained strength and a love for movement. He now actively engages in line dancing, even teaching classes in the community. With a weight of 114kg and his HbA1c in the pre-diabetic range, Sonny's transformation is remarkable. Congratulations, Sonny, on your incredible achievements!



Quarter 03

January-March

The Keep Out Gout Shared Medical Appointment

Shared appointments are a remarkable success and now includes Gout! The Keep Out Gout Shared Medical Appointment was a great success. This is in large part to the many hours of planning that has gone into getting this up and running.

Food & Fitness

Food & Fitness programme groups have been averaging 15 people per session as the groups are now well established. Group classes are held in Levin and there has been good engagement and positive feedback so far.

An important role has been to link participants onto other services like Move to Improve or the Diabetes Trust. This programme has now been rolled out in other towns in the rohe, including Feilding and Palmerston North in 2024.

The 4-week Food & Fitness programme focuses on healthy eating and starting/maintaining physical exercise as a positive way to improve overall health and wellbeing and is taught by a dietitian and physical activity educator – Self management principles and goal setting are weaved throughout this programme.

Pictured: Diabetes support group (Palmerston North).





Pictured: Bhutanese Soccer Tournament.

Bhutanese Youth Soccer event in Feilding

In the third quarter of the year, THINK Hauora, through the RIMA and Clinical Services teams, were represented at the Bhutanese Youth Soccer event in Feilding. THINK Hauora attended the community event and offered blood pressure checks to whānau in attendance.

The Former Refugee, Internally displaced person, Migrant and Asylum seeker (RIMA) programme is now in its fourth year. It has gone from strength to strength as the team work alongside this community, addressing barriers, continuing to improve participation,

leading to greater empowerment, and a more culturally inclusive health care experience. RIMA communities often find it hard to access health and wellbeing services because of difficulties such as language barriers, cultural misunderstandings, lack of information or transport and housing issues. The programme helps to develop better communication and connection between service providers and MidCentral RIMA communities to bring about better health outcomes. It does this by identifying current and potential barriers to access and working to develop solutions to those barriers.



Quarter 04

April-June

Integrated care and the THINK Hauora experience

Integrated care and the THINK Hauora experience was presented at the International Conference on Integrated Care in Northern Ireland in April. Pulling specific examples from THINK Hauora's work in connecting communities for wellbeing, describing the role that general practices play as wellbeing partners through the WEAVING strategy, and the importance of using community engagement to capture whānau voice as evidence of social impact is shared at this international conference.

HealthPathways

In May, the HealthPathways team presented at the HealthPathways Conference in Brisbane, focusing on the success of the Haematuria in Adults pathway implementation. Ka pai HealthPathways Team!

Health Care Home

THINK Hauora continued to promote the Health Care Home model of care throughout the rohe with the recertification of Taranaki Health Group and support for Ōtaki Medical Centre.



Te Puna Hauora

In June, we celebrated the opening of Te Puna Hauora, Horowhenua Community Practice. Our teams worked hard through long weeks and late nights to bring this to life for whānau in Horowhenua.

World Refugee Day

Connecting with our refugee community is a key focus for THINK Hauora. Members of our Connecting Communities team offered free health checks to attendees of the local World Refugee Day event.

Interdisciplinary Professional Education

Throughout the quarter, THINK Hauora hosted Interdisciplinary Professional Education (IPE) sessions on respiratory management, prostate screening and diagnosis, acute coronary syndrome pathway

and adult ADHD for the General Practice Teams throughout our network. As a direct outcome from IPEs, we observe an increase in views of Health Pathway content after these sessions, demonstrating impact of the event and extending the range of providers accessing them.

IPEs are an important part of the THINK Hauora Learning and Development portfolio and reinforce our ongoing commitment towards Professional Development across our partner network. Continuing Professional Development (CPD) hours are gained by IPE attendees, and we work in collaboration with health sector partners to facilitate IPE events. Evaluations indicate a high level of satisfaction from attendees with the subject matter and format. IPEs emphasise primary care, case-based discussion and promotion of Community Health Pathways.

Pictured: Activities at the local World Refugee Day event.





My Health Myself

My Health Myself wraps up a very strong 2023-24 year with 45 programmes (up from 19 in the previous year), engaging people with long term conditions (LTC) to support self-management skills. The programme is designed to help people learn how to self-manage so that they can live well and thrive with their LTC.

Matariki

As we strengthen our understanding of Te Ao Māori, our kaimahi came together to celebrate Matariki in a week full of learning, sharing and connecting.



Pictured: Matariki Celebrations 2024.







Our Governance

THINK Hauora Board Members

Dr Bruce Stewart

Danielle Harris

Gaye Fell

Robyn Richardson

Stephen Paewai

Dr Wayne Hayter

Dr Nader Fattah

Jane Ayling

Adele Small

Fiona Bradley

Geraldine Gray

Stephan Lombard

Clinical and Digital Governance Committee Members

Dr Nader Fattah (Chair)

Fiona Bradley

Jane Ayling

Bridget Bellhouse

Trissel Eriksen

Gaye Fell

Dr Wayne Hayter

Materoa Mar, ONZM

Stephen Paewai

Gabrielle Scott

Dr Anna Skinner

Leonie Wellwood

Alliance Leadership

Oriana Paewai

Yvonne Stillwell

Deborah Davies

Martin Steinmann

David Jermey

Kelvin Billigurst

Craig Johnston

Dan Arapere

Finance, Audit and Risk and Health & Safety Committee Members

Colin McJannett (Chair)

Dr Bruce Stewart

Ewen Kirkcaldie

Di Rump

Robyn Richardson

Jane Ayling

Clinical and Digital Governance Committee Report

2023-24 in Focus

The year started with considerable engagement with Health NZ around the future of meso-level organisations. While the outcomes of this are likely to have profound implications on the future of primary and community care, absence of any clear direction from Health NZ, CDGC remained laser focussed on our strategic priorities and its goal of Connecting Communities to Wellbeing. Harnessing a format that has served the Committee well, meetings alternated between specific workshops of topical governance concerns and more traditional papers based on our work programme.

Committee Highlights

- Developing a high-level goal of investigating how we can both measure and improve our providers' wellbeing, as part of our workforce sustainability efforts.
- Review of urgent care data led to creation of new dashboards and collaboration of several GPTs, improving insights into acute demand management.
- A review of the back-to-back contract, making sure it remains fit for purpose.
- System Level Measures were envisioned prior to the new national direction with a view to instigate a concerted effort to tackle pre-diabetes in the district.
- Providing critical governance input, in collaboration with Health NZ MidCentral, to safely implement a 'Note to GP' function to our network. The Committee continues to monitor the appropriate use of this and is encouraged by how well received this has been by our network.
- Setting expectations on quality assurance and directing more resource towards practices achieving or maintaining Foundation Standard, at the least.
- Shaping a new reporting framework for Te Ara Rau Access and Choice, to better measure the outcomes of a service, that has become a mainstay for patients with mild to moderate mental health symptoms.
- Collaborating with Health NZ MidCentral to envisage what primary and community care's services will look like in the coming decades in the district, to inform an effective Clinical Services Plan for Palmerston North Regional Hospital.



Supporting Innovation: Two Examples

The Committee endorsed a direction that led to THINK Hauora supporting general practices to adopt 'Open Notes'. The fruits of this effort were borne throughout the year as three general practices covering an enrolled population of over 50,000 patients, enabled those consumers a full view of their own clinical record, through their patient portal. CDGC was reassured that this led to positive patient experiences and had no adverse effect on participating practices.

The MidCentral rohe spans five territorial authorities, each distinct in their demography and geography. As our population ages, demand for certain services increase. While hospital's ability to meet acute care demands is stretched, the opportunity of enabling more services that are closer to home is both timely and compelling. The Committee supported a proof of concept for Point of Care testing in one of our localities, delivered in a large integrated family health centre. The ability to assess low risk patients with cardiac symptoms, with Troponin testing, has been welcomed by the Feilding community, since CDGC approved the proposal. This has meant dozens of patients have been provided reassurance and avoided the need for ambulance transfers to ED in Palmerston North. In times like these, where the ED is frequently at full capacity, the approach to bringing investigations, into the community, previously the domain of hospital services, is freeing up vital hospital resources.

Committee Process

As described above, the CDGC undertook multiple workshops in 2023-24, tackling many issues. In looking back over the year, the committee believes that their proactive, analytical and learning approach reflects their ability to work with general practices and the network to enable primary health impact and effectiveness. An example of this was the enrolment against a named GP vs Practice issue, whereby the committee reviewed relevant legislation and regulations and determined that practices can enrol either to a provider or a practice. Irrespective of the path a particular practice took, the most important aspect was ensuring that safe and appropriate continuity of care measures are in place. The decision was welcomed by a range of practices, who are evolving their operations to meet the changing needs of their increasingly diverse service providers. This example also highlights how the CDGC can adapt to current primary care needs.

CDGC in Context

The Clinical and Digital Governance Committee (CDGC) is a subcommittee of the THINK Hauora Board that provides primary care governance for five localities in the lower North Island. Our 12 members bring a diverse range of expertise and community connections, ensuring good representation of health providers, consumers, digital specialists, Iwi and the community at large. The committee governs a broad work programme of health and digital activities across seven quality domains and 15 focus areas (as illustrated in the CDGC Annual Work Programme below), including the new Here Toitū and RIMA programmes.

Finance, Audit and Risk, and Health & Safety Committee Report

The Finance, Audit, Risk and Health and Safety Committee is a standing Committee of the THINK Hauora Board and oversees the financial management, organisational compliance and risks for THINK Hauora and its entities whether fully owned, in partnership, or through a partial interest. The Committee also provides organisational oversight of identified THINK Hauora practices.

The Committee plays a key role in a changing health sector environment, ensuring that THINK Hauora meets its accountabilities, remains financially viable, addresses its risks, and provides relevant and effective services to general practices, users and the community.

In 2023-24 the Committee reviewed our processes and procedures with the Senior Leadership Team. As a part of the review, we have developed stronger systems and procedures leading to enhanced transparency and enabling senior leadership improved capability to address relevant issues within their groups. Coupled with the ongoing changes in the health sector, senior leadership and the members of this Committee have worked together intensely this year.

Our effectiveness has been dependent upon the excellent hard work, transparent reporting, and support of the Senior Leadership Team.

Thank you to all staff and to the members of the Committee for what you have given, for your professional approach, and for making it a pleasure to Chair the Committee.



Colin McJannett

Chair, Finance, Audit, Risk, and
Health & Safety Committee

2 November 2024



General Practice Teams / Integrated Family Healthcare Centre Providers

Palmerston North

169 Medical Centre

Awapuni Medical Centre Limited

Best Care (Whakapai Hauora) Charitable Trust

Broadway Medical Centre

City Doctors

Cook Street Health Centre

Dr Parry's Surgery

Group Medical Chambers

Health Hub Project NZ

Hokowhitu Medical Centre

Kauri HealthCare

Massey Medical Centre

Orbit Medical

The Palms Medical

Sydney Street Health Centre

Victoria Medical

Village Medical

West End Medical Centre

WW Clinic on Grey

Manawātū

Feilding Health Care

Tararua

Short Surgery Dannevirke

Tararua Health Group Ltd

Horowhenua

Te Waiora Community Health Service

Horowhenua Community Practice

Tararua Medical Centre

Queen Street Surgery

Masonic Medical Centre

Levin Family Health

Ōtaki

Ōtaki Medical Centre





Community Contracted Providers

Iwi Māori & Pasifika Providers

Te Tihi Whānau Ora Alliance Charitable Trust

Raukawa Whānau Ora Ltd

Te Kete Hauora o Rangitane Ltd

Muaūpoko Tribal Authority

Mana o te Tangata

He Puna Hauora

Kahungunu ki Tamaki Nui a Rua Trust

Ngā Kaitiaki o Ngāti Kauwhata

Whaioro Trust

Te Aroha Noa Community Services Trust

Niuvaka Trust

Youth Providers

Tararua Community Youth Services
Incorporated

Snapback Gym

YOSS - Youth One Stop Shop

Authentically U

Te Aroha Noa

Waiora Solutions

Massey University

Equine-N-Mind

Radiology

Broadway Radiology Ltd

Pacific Radiology Ltd

Kapiti Coast Ultrasound

The Palms Medical

Tararua Health Group Ltd

Pharmacy

City Health Pharmacy

Unichem Kauri HealthCare Pharmacy

Feilding Health Pharmacy

Unichem The Palms Pharmacy

Berry's Tararua Pharmacy

Berry's Health Centre Pharmacy

Gimblett's Pharmacy Ltd

Hamish Barham Pharmacy Ltd

Cook Street Pharmacy

Vautier Pharmacy - Summerhill Village

Vautier Pharmacy - Pioneer Village

Vautier Pharmacy – Downtown

MidCentral City Pharmacy Group

Interpreting Services

Interpreting Services Ltd

Connecting Now

Retinal Screening

Horowhenua Vision Centre

See Hear Ltd

Visique Dannevirke Optometrist

Eyes on Broadway

Visique Naylor & Palmer

Visique Eye Spy

Visique Feilding Optometry

Physiotherapy

Physio + Rehab

Flex Physiotherapy

Acute Care

Homecare Medical (NZ) Limited Partnership

St John (After Hours)

St John (Training)

Podiatry

Rimutaka Podiatry Ltd

Raukawa Whanau Ora Limited

McRae Podiatry

Sanz Podiatry

Sexual & Reproductive Health and LARC

The Women's Clinic

WW Clinic on Grey

Youth One Stop Shop (YOSS)

Eketahuna Health Centre

Te Ara Rau Access & Choice (Mental Health)

Changing Horses Ltd

Youthline

Ann-Marie Stapp

Mothers Helpers

Reachout Counselling

A Secure Base

Te Aroha Noa Community Services Trust

Whaioro Trust

Tomochology

Rose Allan Counselling

Gill Stacey

Ha Healing through the Breath

Be Well Naturally

Anne Woodside

Authentically U

Waiora Solutions

Alice Kleinsman

Mikari Therapy

Samantha Head

Joanne Te Paiho

04

Financial Statements



THINK Hauora

Summary Consolidated Financial Statements June 2024

THINK Hauora Summary Consolidated Statement of Service Performance For the year ended 30 June 2024

This report has been prepared in accordance with PBE FRS 48 Service Performance Reporting. The Board of Trustees of THINK Hauora believes that the statements contained in this report accurately reflect the overall performance of THINK Hauora for the year ended 30 June 2024.

Our GP Network and enrolled population

THINK Hauora is the Primary Health Organisation (PHO) for the MidCentral District. This includes Palmerston North, Feilding, Dannevirke, Levin, Ōtaki and the surrounding communities. We ensure everyone across our communities has access to essential primary health care services through a general practice team.

A PHO provides primary health services either directly or through its contracted providers. The services provided aim to improve and maintain the health of the enrolled PHO population, ensuring that general practice services are connected with other health services to ensure a seamless continuum of care.

As a PHO, THINK Hauora supports the community by:

- Developing primary healthcare capacity and capability in the MidCentral District
- Supporting the delivery of high-quality primary healthcare through our contracted general practices
- Working with local communities and enrolled populations
- Identifying and removing health inequities
- Offering access to comprehensive services to improve, maintain, and restore people's health
- Coordinating care across service areas
- Continuously improving programme quality using good information

As a membership-based organisation, ensuring that the work of our GP network is acknowledged and supported is important to us. Ours is a diverse region, with both urban centres and sparsely populated rural areas where people travel significant distances for primary health, served by 31 general practices.

Our enrolled population

Measure	2024 FYE	2023 FYE	% Change between 2023 and 2024
Total number of enrolled patients and as a percent of total population	171,157 87.9%	167,713 87.5%	0.4%
Number of Māori, Pasifika, Deprivation Quintile 5 and CSC-holders patients enrolled	67,033	67,786	5%
Total number of GP consultations	549,982	569,451	(4%)
Number of Māori, Pasifika, Deprivation quintile 5, and CSC-holders consultations	212,941	215,988	(1%)

Data source: THINK Hauora Te Kete Kōrero

THINK Hauora
Summary Consolidated Statement of Service Performance
For the year ended 30 June 2024, continued.

The tables below reflect a sample of health outcome measures from across the continuum of health services that THINK Hauora supports and provides. Broadly, they cover early childhood, screening and prevention, mental health, and use of patient portal systems.

First 2000 Days

THINK Hauora Strategic Objective	Key Performance Indicator	2024 FYE	2023 FYE
Improve immunisation rates for Māori infants and children	≥ 95% of infants fully immunised at 12 months old	83% all infants 73% Māori infants	84% all infants 73% Māori infants
	≥ 95% of children fully immunised at 24 months old	75% all infants 71% Māori infants	76% all infants 62% Māori infants
Prioritise enrolment of newborn/ infants	Percent of newborns enrolled with a general practice by three months	87% all infants 76% Māori infants	83% all infants 66% Māori infants
Babies who live in smokefree households	Increase proportion of babies who live in smokefree households	65%	66%

Early detection and prevention

THINK Hauora Strategic Objective	Key Performance Indicator	2024 FYE	2023 FYE
Identify and provide access to people who need heart checks, diabetes annual reviews, cervical and bowel screening, with a focus on priority populations	≥ 80% of eligible women are up to date and less than 2 years overdue with their cervical screening	79% eligible women 73% eligible Māori women	80% eligible women 72% eligible Māori women
	≥ 60% of eligible population (60-74) screened for bowel cancer every two years	62%	62%
	≥ 80% of Māori men, 30 – 44, have had a cardiovascular risk assessment (CVRA)	48%	45%
Support general practices to achieve smoking brief advice targets	≥ 90% of current smokers aged 15-74 years have been provided with smoking brief advice or cessation support in the last 15 months	58%	62%

**THINK Hauora****Summary Consolidated Statement of Service Performance
For the year ended 30 June 2024, continued.**

Te Ara Rau Access and Choice

THINK Hauora Strategic Objective	Key Performance Indicator	2024 FYE	2023 FYE
Partner with Te Tihi and Te Roopu Waiora to develop an outcomes framework that focuses expectation on equity of outcomes and any related consumer and practice incentives across our communities	% People accessing services by ethnicity against population distribution (Māori 20%, Pasifika 3%, Asian 9%, Other 68% and Youth)	Māori 28.2% Pasifika 2.7% Asian 3.3% Other 65.8%	Māori 26.9% Pasifika 2.0% Asian 2.5% Other 68.6%

Patient Portal/Open Notes

THINK Hauora Strategic Objective	Key Performance Indicator	2024 FYE	2023 FYE
Support practices to offer a broader range of activities via patient portal to increase the efficiency and benefits offering a patient portal	≥ 70% of the enrolled population is with a general practice that offers patient portal	90.5%	88.4%

THINK Hauora**Summary Consolidated Statement of Comprehensive Revenue and Expense
For the year ended 30 June 2024**

	Group	
	2024	2023
	\$	\$
Revenue from Non-Exchange Transactions	71,725,580	69,175,561
Revenue from Exchange Transactions	1,339,270	1,246,500
Interest Revenue	312,107	172,553
Direct Project Expenditure	(54,048,745)	(53,057,034)
Operating Expenditure	(18,589,119)	(15,523,801)
Operating Surplus/ (Deficit)	739,093	2,013,779
Share in Surplus/ (Deficit) of Joint Venture	(170,963)	(161,220)
Total Comprehensive Revenue and Expense for the Year	568,131	1,852,559

THINK Hauora**Summary Consolidated Statement of Financial Position
As at 30 June 2024**

	Group	
	2024	2023
	\$	\$
Assets		
Current Assets	10,352,282	11,956,893
Non-current Assets	4,672,545	1,064,719
Total Assets	15,024,828	13,021,612
Liabilities		
Current Liabilities	5,693,801	4,258,719
Non-current Liabilities	-	-
Total Liabilities	5,693,801	4,258,719
Net Assets	9,331,023	8,762,893

Th summary consolidated financial statements were authorised for issue for and on behalf of the Trustees on 6 March 2025.

Trustee

Trustee

The notes on pages 6, 7, and 8 are an important part of, and should be read in conjunction with, these summary consolidated financial statements.

**THINK Hauora****Summary Consolidated Statement of Changes in Net Assets/ Equity
For the year ended 30 June 2024**

	Accumulated Revenue and Expenses Group \$
Balance as at 30 June 2022	6,910,334
Net Surplus for the year	1,852,559
Balance as at 30 June 2023	8,762,893
Net Surplus for the year	568,131
Balance as at 30 June 2024	9,331,023

THINK Hauora**Summary Consolidated Statement of Cash Flows
For the year ended 30 June 2024**

	Group \$	\$
Net cash flows from operating activities	708,133	2,776,800
Net cash flows from investing activities	4,047,321	(53,075)
Net increase/ (decrease) in cash and cash equivalents	(3,339,189)	2,723,725
Cash and cash equivalents at the beginning of the year	8,845,799	6,122,074
Cash and cash equivalents at the end of the year	5,506,613	8,845,799
<i>Comprising:</i>		
Cash on hand, current accounts and call accounts	5,506,613	8,845,799
Total cash and cash equivalents	5,506,613	8,845,799

The notes on pages 6, 7, and 8 are an important part of, and should be read in conjunction with, these summary consolidated financial statements.

THINK Hauora
Notes to the Summary Consolidated Financial Statements
For the year ended 30 June 2024

1. Statement of Compliance

The group is THINK Hauora (“the Trust”) and its controlled entities. The Trust is domiciled in Aotearoa New Zealand and is a charitable organisation registered under the Charities Act 2005. The consolidated financial statements comprising of the Trust and its controlled entities THINK Hauora Limited and Central Primary Health Organisation Limited, together the “Group” are presented for the year ended 30 June 2024.

The Group provides health services to people living in the Ōtaki, Tararua, Manawatū, and Horowhenua regions. THINK Hauora also operate a general practice in Levin providing primary health services as Horowhenua Community Practice.

2. Basis for Preparation

The summary consolidated financial statements have been extracted from the full financial statements of the Group and have been prepared in accordance with PBE FRS 43 Summary Financial Statements. The summary consolidated financial statements do not include all disclosures provided in the full financial statements and cannot be expected to provide as complete an understanding as provided by the full financial statements. Information extracted from the full financial statements has not been restated or reclassified.

The full consolidated financial statements are available on request by contacting the Financial Controller, PO Box 2075, 200 Broadway Avenue, Palmerston North or email accounts@thinkhauora.nz. The full consolidated financial statements have been prepared in accordance with Generally Accepted Accounting Practice in New Zealand (“NZ GAAP”). They comply with Tier 1 Not-For-Profit Public Benefit Entity International Public Sector Accounting Standards (“PBE IPSAS”) and other applicable financial reporting standards as appropriate that have been authorised for use by the External Reporting Board for Not-For-Profit entities. For the purposes of complying with NZ GAAP, the Group is a public benefit not-for-profit entity and is applying Tier 1 Not-For-Profit PBE IPSAS as it has expenditure of more than \$30 million. The Board of Trustees has elected to report and is in compliance with Tier 1 Not-For-Profit PBE Accounting Standards.

The full consolidated financial statements have been audited and an unmodified opinion was given on the financial statements for the year ended 30 June 2024. The full financial statements were authorised for issue on 6 March 2025.

These summary consolidated financial statements are in respect of the Group's full financial statements that comply with Tier 1 Not-For-Profit PBE Accounting Standards.

The summary consolidated financial statements are presented in NZ dollars and all values are rounded to the nearest dollar. The Group's functional currency is NZ dollars.

3. Capital Commitments

THINK Hauora has no capital commitments as at 30 June 2024. (2023: Nil).

**THINK Hauora****Notes to the Summary Consolidated Financial Statements
For the year ended 30 June 2024, continued****4. Contingent Assets or Liabilities**

Unquantifiable contingent liabilities as at 30 June 2024:

THINK Hauora is currently undergoing a process to review its compliance with the Holidays Act 2023. THINK Hauora is continuing to perform a detailed analysis in order to review and finalise calculations and the potential impact of any non-compliance. The outcome of this review is likely to result in an outflow of resources. At the reporting date the amount of the contingent liability cannot be measured reliably and it has not been recognised as a provision within the financial statements.

Other than the above, there were no contingent assets or liabilities as at the reporting date (2023: Nil).

5. Related Party Disclosures

Related Party	Description of Transaction	Value of Transactions		Amount Outstanding	
		2024	2023	2024	2023
		\$	\$	\$	\$
Te Waioira Partnership (TWP)	Capitation payment paid to TWP	(1,301,276)	(1,372,026)	-	-
	SLM fees paid to TWP	(7,045)	(14,418)	-	-
	Expenses recovered by THINK Hauora	-	-	135,733	103,437
	Other fees paid to TWP	(194,384)	(187,685)	-	1,937
	Consulting costs paid by TWP	42,934	40,000	-	-

5.1 Key Management Personnel

The key management personnel, as defined by PBE IPSAS 20 Related Party Disclosures, are the members of the governing body which is comprised of the Board of Trustees, CEO, and the Senior Leadership Team. The aggregate remuneration of key management personnel and that number of individuals, determined on a full-time equivalent basis, receiving remuneration as follows:

	Group	
	2024	2023
	\$	\$
Trustees		
Total Fees	74,986	56,472
Number of persons	12	12
Senior Leadership Team		
Total Remuneration	828,367	924,129
Number of persons	5	5

The following THINK Hauora board members are also members of a governing body that THINK Hauora contracts with. All related party transactions are at arms length.

THINK Hauora
Notes to the Summary Consolidated Financial Statements
For the year ended 30 June 2024, continued

5.1 Key Management Personnel, continued

Trustee	Interest	Transactions
Bruce Stewart <i>Chair</i>	Director and GP, Feilding Healthcare	Receives payments for capitation and contracted health services. Provides medical advisory services to THINK Hauora.
Anna Skinner <i>Board member</i>	Shareholder/ Director/ GP, Kauri Healthcare	Receives payments for capitation and contracted health services.
Danielle Harris <i>Deputy Chair</i>	Trustee, Best Care (Whakapai Hauora) Charitable Trust Chair, Te Tihi o Ruahine Whānau Ora Charitable Trust Chair, Ora Konnect Alliance Group	Receives payments for capitation and contracted health services.
Di Rump <i>Board member</i>	CEO, Muaūpoko Tribal Authority Governance member, Te Tihi o Ruahine Whānau Ora Alliance	Receives payments for capitation and contracted health services.
Robyn Richardson <i>Board member</i>	Board member, Te Runanga o Raukawa Inc.	Receives payments for capitation and contracted health services.

Advisory and other fees totalling \$71,167 (2023: \$57,937) were paid at market rates to members of the Board for the provision of expert advisory and medical services advice outside of the scope of their normal duties.

6. Subsequent Events

The Board of Trustees and management are not aware of any other matters or circumstances since the end of the reporting period, not otherwise dealt with in these consolidated financial statements that have significantly or may significantly affect the operations of the Group. (2023: Nil).

7. Health Reforms

With the Royal asset of the Pae Ora Legislation on the 1 July 2022, two new entities Te Whatu Ora and Te Aka Whai Ora were established. Existing revenue contracts have been renewed to June 2024, September 2024, or June 2026 and the PHO Services Agreement remains in place. The Trustees anticipate THINK Hauora will have an ongoing role within the rohe in partnership with the newly established Iwi Māori Health Partnership Board.

