



**HOKONUI**  
LOCALITY

# Locality plan

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April 2023



● **CONNECTION, NAVIGATION  
AND EASE OF USE**  
WHAKAMĀHORAHORA

The health and social services sectors are complex, often confusing and our community has told us they feel unsupported and unwelcome. The community cannot see evidence that GP practices and hospital services are working together. It is often unclear who is available to support people to connect with services or navigate systems. There needs to be sustainable access for a more joined up approach.

● **COMMUNITY INCLUSIVITY**  
WHAKAKAKAU

We have really felt the stresses of the last few years with COVID, the cost of living and the pressures on primary industry. Our younger and older people talk a lot about missing out on shared experiences, community connections and the ever-dwindling community services (first responders, kapa haka, sports volunteers, Lions, marae, etc.) The Hokonui community wants to ensure community resources are available, maintained and relevant. Also, ensuring opportunities to connect intergenerationally in the community, through activity, celebration and shared interests, will contribute to healthy,

● **INFORMATION AND COMMUNICATION**  
HERENGA TANGATA

No medical availability, wait lists that are ridiculous or needing to travel by plane to find a specialist are not acceptable. Knowing who is taking new patients and approximate wait times will help us be informed, but we also need to know what we can do while waiting or what alternative pathways can be pursued.

● **ORAL HEALTH CARE**  
HAUORA Ā-WAHA

No availability, no future availability and costs beyond an average community member's means have ensured terrible oral health in Hokonui. How to address our backlog and service needs locally whilst embarking on preventative care programmes will be paramount.

● **EXPERIENCING RESPECT  
AND COMPASSION**  
MANAWANUI

It's very clear that some of us feel we are not treated with respect or empathy by providers: feeling excluded can mean we don't seek care when we really need it. The Hokonui community has been clear they want to take care of their whole self, especially mental health and wellbeing. The Hokonui community expects a user-centric service.



# Our Locality

## OUR VISION FOR HAUORA

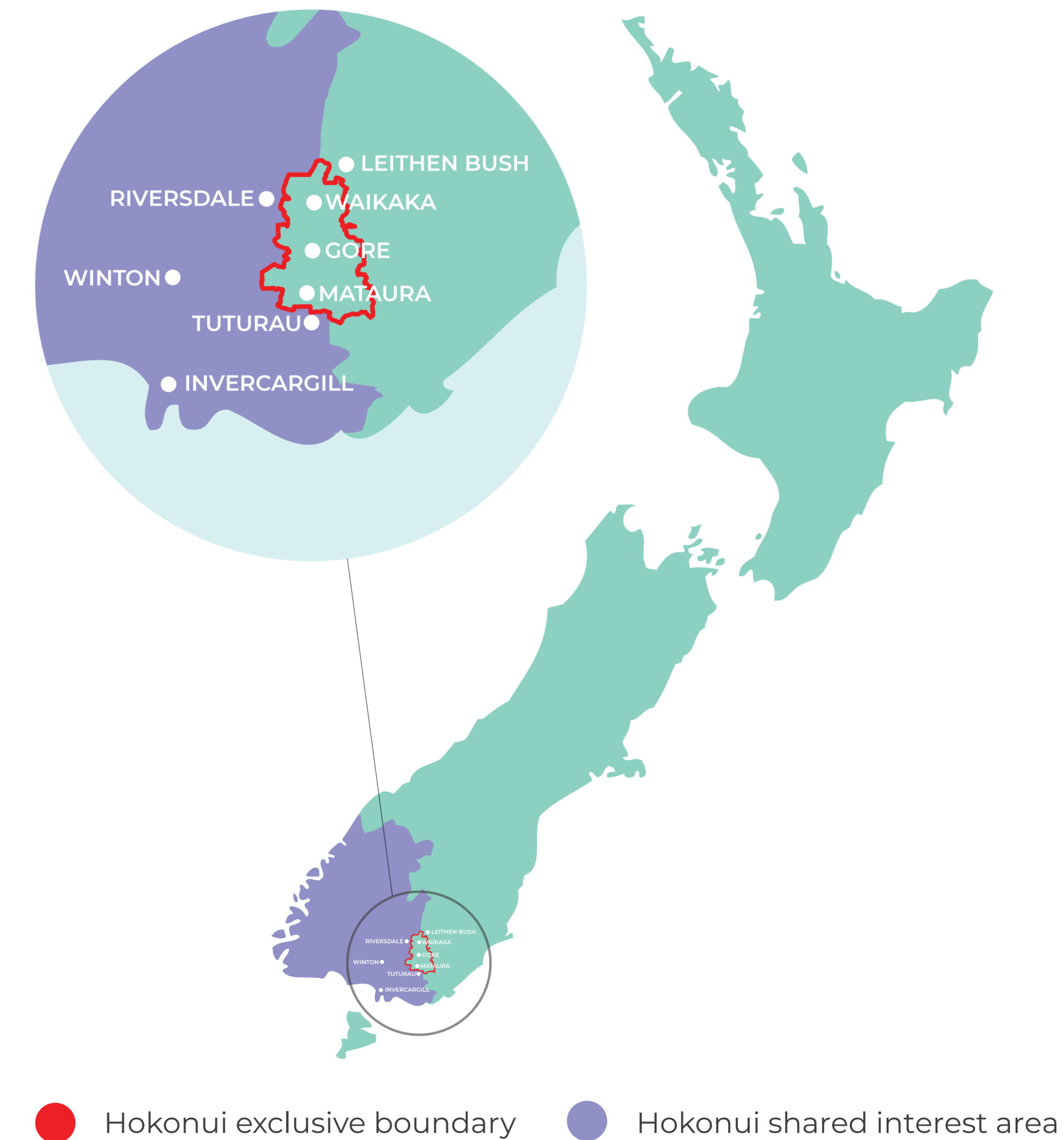
**Everyone in our community feels the appropriate support is in place to enable them and their whānau to achieve health and happiness.**



## WHERE WE ARE

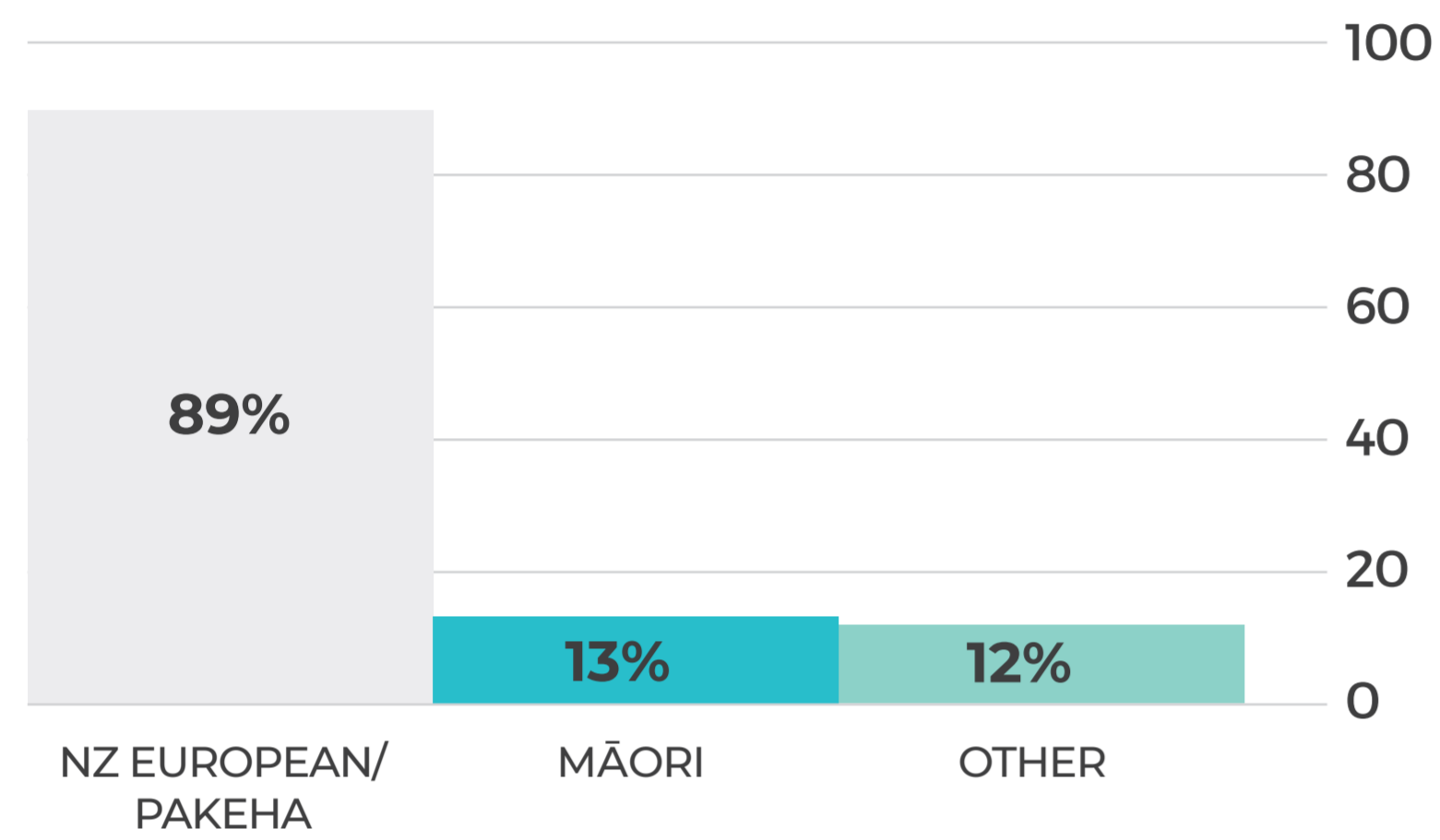
Hokonui Locality boundary has not been set but the Hokonui Rūnanga has exclusive rights & interests within the Gore District boundary.

There must be consideration for the large area that community members must travel for service, as many are residing in shared interest areas of multiple Rūnanga.



# Our Locality cont.

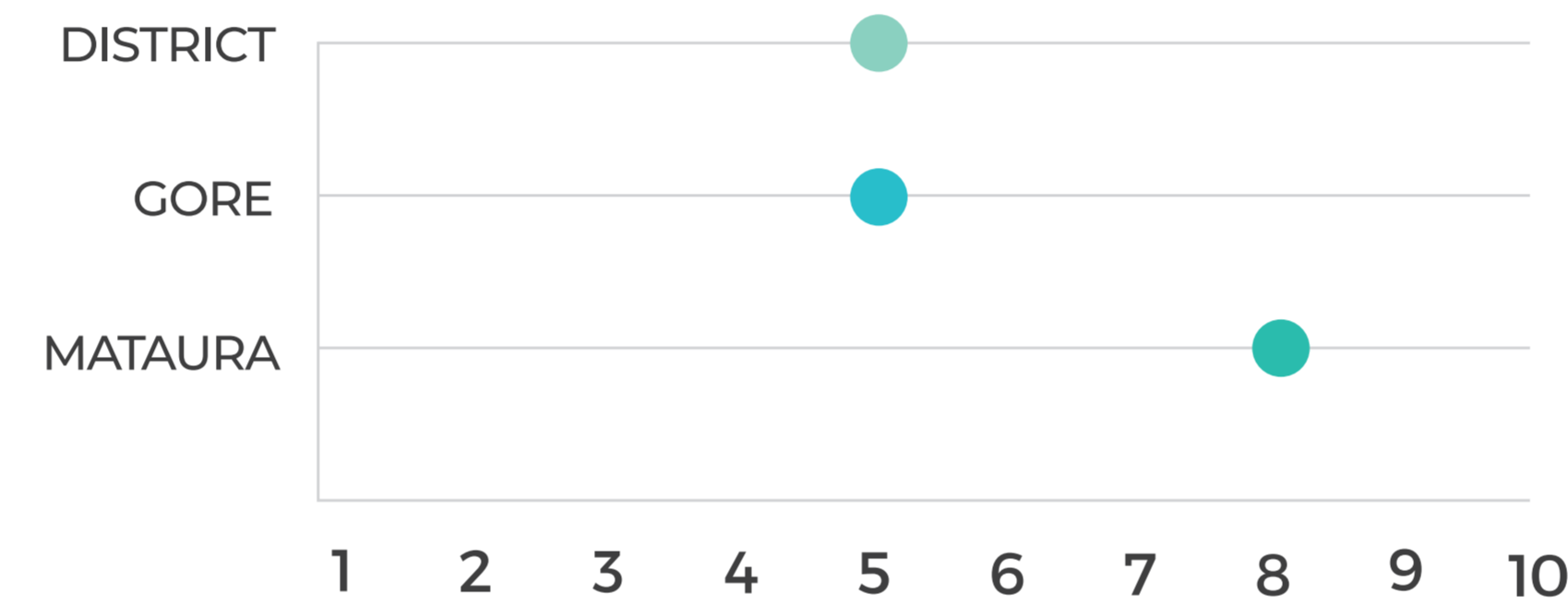
## ETHNICITY



Some residents identify with multiple ethnicities

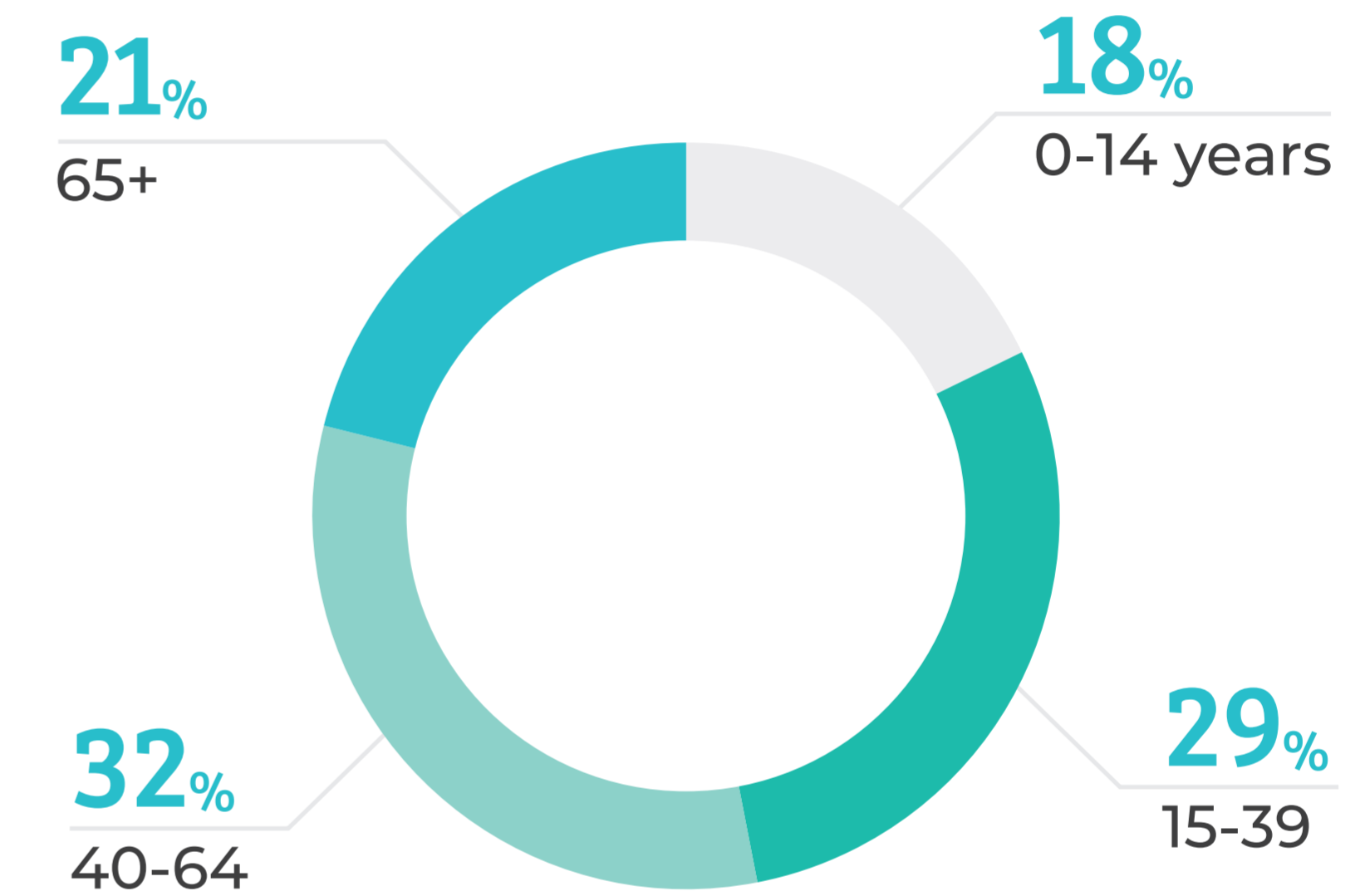
## DEPRIVATION

Access to services is the biggest issue, followed by education outcomes and employment



On the IMD index from 1 (least deprived) to 10 (most deprived)

## AGE



Gore population is older than average, other parts of the district are not.

## POPULATION GROWTH



## AGEING POPULATION

**51%**

growth in 65+ age group since 1996

4% total population decline over the same period

## ECONOMIC DRIVERS

- > Agriculture
- > Manufacturing
- > Retail

41% of jobs are low skilled work

# Locality Governance Group



Time for Change Te Hurihanga  
Southern Mental Health  
and Addictions Network



**Community Networking Trust**  
'A Healthy, Resilient and Connected Community'

**Community Health Council**

# Community Engagement

WE ASKED OUR COMMUNITY

“What do you need to achieve health and happiness in Hokonui?”

## HOW WE ENGAGED



# 1

### SURVEY

To identify key themes – including in-person engagements at events and public facilities, paper-based survey and online survey.



# 2

### FOCUS GROUPS

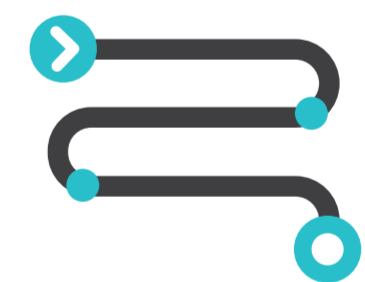
With priority communities and those under-represented in the survey to better understand themes.



# 3

### FEEDBACK REQUESTED

From community and key stakeholders on themes and to agree priorities.



# 4

### DRAFT PLAN

# Who we engaged

## SURVEY



# 1,070

people provided survey responses

**The following groups were under-represented:**

- Men
- Younger people
- Māori and Pasifika

## FOCUS GROUPS



Used to reach under-represented groups:

- Rangatahi at schools and alternative education
- Young mothers
- Families with children with intellectual and/or physical disability
- Men via large employers
- Over 65s
- Matura marae community
- Hyde Street marae kaumātua

## EXISTING RESEARCH



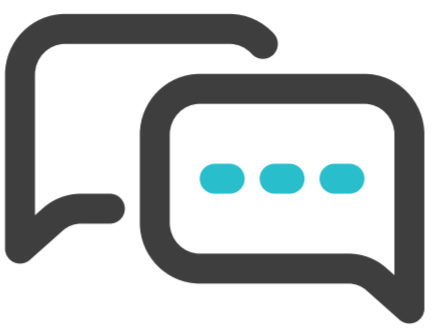
Existing information and parallel community engagements also informed the plan:

- Hokonui Huanui evaluation
- Gore District Council Ready for Living >65s engagement
- Time for Change Te Hurihanga Mental Health and Addictions Strategy

## IMPORTANT VIEWS

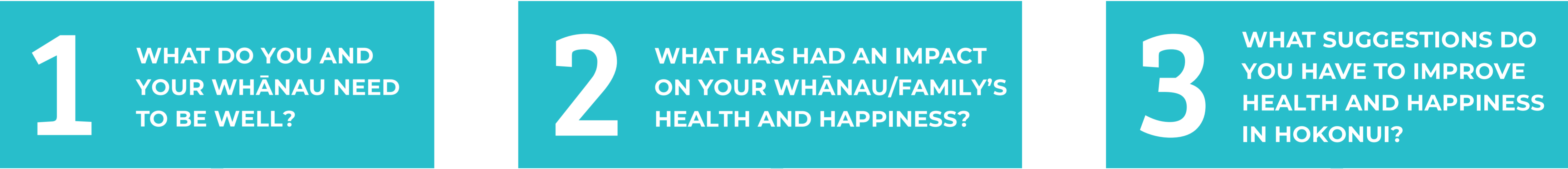
**We ensured voices from the community included:**  
**tāngata whaikaka**  
 – disabled people, Pasifika, pēpi and their whānau,  
**rangatahi, kaumātua**

# What you told us

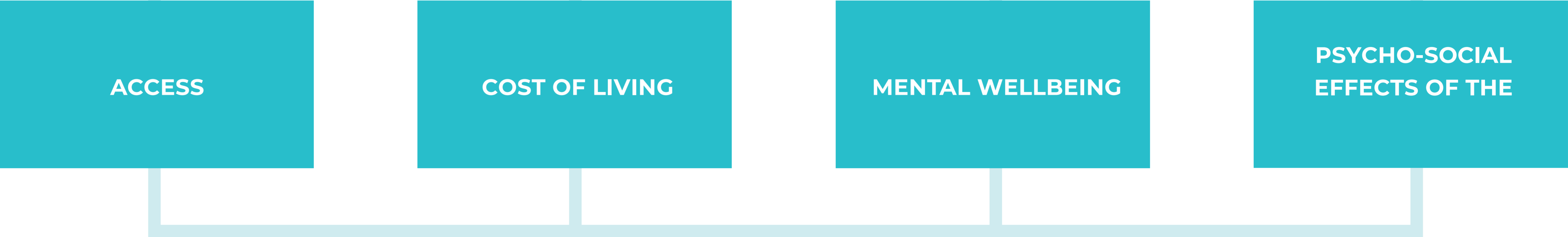


We recently asked the people of Hokonui to tell us what was needed to achieve health and happiness in the region. We conducted surveys and focus groups to collect thoughts and ideas.

The three questions asked included:



The following are the four main themes we identified from the feedback received and represent common responses for all three questions.



The priorities identified for our locality were informed by the themes. Each priority included aspects of at least one theme.





PRIORITY

# Connection, navigation and ease of use Whakamāhorahora

**The health and social services sectors are complex, often confusing and our community has told us they feel unsupported and unwelcome.**

The community cannot see evidence that GP practices and hospitals services are working together. It is often unclear who is available to support people to connect with services or navigate systems. There needs to be sustainable access for a more joined up approach.

The voice of the community has clearly asked for services to be developed that are in fact available, engaged and suit community usage. Our community is seeking active treatment plans with regular updates and complementary wraparound services.

## What does success look like?

- All community members know who/ where to reach out so they can find a navigator/connector (connector/ HIP/navigator) to help connect to the right service, navigate its complexity and/or advocate for whānau.
- Managed treatment lists, categorised urgency, clear expectations of treatment process and timing by public.
- Medical service provision has been tested for relevancy of delivery (fit for purpose testing).
- Scope and determine best model to manage connectors/navigators/ kaiawhina in Hokonui.

## THIS SCOPING IS LIKELY TO EXPLORE:

1. Gaps in service
2. Shared value for delivery across all positions
3. Sustainable funding lines to ensure retention and career pathway

## How can we measure that success?

- Providers have a formal partnership agreement on how they will work together, including customer assessment process - scope relevance of mystery customer programme.
- Client list engagement. Model of best efficiency regarding time and motion, best case management practices for these connection and navigation roles.
- Improved wait times with continual quarterly improvements with clear public tracking available on communication platforms.



**“I have to share this experience of a whānau member that had their person diagnosed with bipolar disorder and given an appointment letter. They did not show up for appointments and they were discharged because they did not attend. BPD is one of those complex MH illnesses and one of the features is the inability to hold on to schedules or programme one’s life. So being discharged for not attending your appointments almost looks like someone with a broken leg not getting a cast because they can’t drive themselves to the hospital.”**

## Who does it?

Hokonui providers and external visiting agency stocktake, sustainability scoping and funders.

## When?

Immediately

Scoping of current community service availability & sustainability of roles and locations and develop solution focussed strategy.

## He kitenga Māori

- Stocktake of practitioners
- Gap analysis
- Action plan to address gaps

PRIORITY

# Information and communication Herenga Tangata

**No medical service availability, wait lists that are ridiculous or needing to travel by plane to find a specialist are not acceptable. Knowing who is taking new patients and approximate wait times will help us be informed, but we also need to know what we can do while waiting or what alternative pathways can be pursued.**

It's difficult to see any health practitioner, but we don't know the alternatives or how to access them. Having some information about wait times at GPs and the hospital would help us know what next steps to take for ourselves in the meantime.

There needs to be much clearer, obvious and locatable communication with community about the type of help that is available and how to access it. This will make getting the right help quicker and easier and will help us look after ourselves and our families.

## What does success look like?

- Community know what services are available and how to access them.
- Developing the knowledge Kete for ourselves and our families.
- Providers are active listeners and modify their service delivery to suit community.

- Whether you have arrived in Hokonui today or have lived in the rohe all your life, information about your health needs will be obvious for easy engagement or connection to a navigator in multiple communication spaces.

## How can we measure that success?

- There is a communication and education programme in place that will increase public engagement and can be measured through correspondence and media platforms.
- Service provision analytics for increased efficiency and positive health results.
- Increased service use.
- Innovative communication channel use and resource development.



**“If it’s not at our fingertips then we just tough it out, there are more important things to worry about.”**

## Who does it?

Hokonui Locality will be recruiting a Programme Manager with high-level communication experience.

## When?

Immediately

The locality rōpu can start this immediately.

● Target 30 June 2023

## He kitenga Māori

- Review Māori plan of main medical providers
- Quarterly Whānau health days/fairs (for all of hapori)
- Shared stories

PRIORITY

# Oral health care Hauora ā-waha

**No availability, no future availability and costs beyond an average community member's means have ensured terrible oral health in Hokonui. How to address our backlog and service needs locally whilst embarking on preventative care programmes will be paramount.**

There needs to be a major re-think about dentistry in Hokonui. We know there are some more efficient things like aligning the contracts for dentistry at Birch Lane Dental, making sure people know their entitlements for financial support, improving access to the mobile dental bus and working with families on basic prevention. Also, some longer-term things largely outside our control like attracting the right workforce.

Understanding the exact volume of need for age cohorts and how we can meet their needs will require some scoping.

## What does success look like?

- Immediate action for reducing the current vast list of community members who are either waiting for treatment, or have no pathway to treatment locally
- Manageable local wait lists – long term action plan
- Prevention programmes implemented with reduced needs as a result

## How can we measure that success?

- Waiting times for dentistry reduces
- Number of oral hygiene products distributed across community
- Number of oral health care champions identified, upskilled, equipped and supporting community
- Number of new oral healthcare enrolments for tamariki & rakatahi
- The number of five-year-olds needing fillings reduces
- Fewer people needing emergency dental care at Southland Hospital



**“I have been supporting a young person to get access to dental care. There is nothing available in the Gore district and we could not find anything in Invercargill either. The options available were Queenstown, Central Otago, Milton or Dunedin. That is a huge barrier if you are a single parent on a low income. Dental care is expensive, but it becomes more unattainable if you have to travel 1-2 hours one-way to access it. You need access to transport, there are additional fuel costs and potentially having to take time off work to attend.”**

## Who does it?

Hokonui providers and the community need to work with central government to make this happen, including the government committing to resource a plan to re-think dentistry.

## When?

Immediately

Scoping exercise to establish priority target

● Before 30 June 2023

## He kitenga Māori

- Fluoridation plan delivery
- Māori oral health promotion
- Local workforce plan regarding role types scoping and availability of employment when trained

PRIORITY

# Experiencing respect and compassion Manawanui

**It's very clear that some of us feel that we are not treated with respect or empathy by providers: feeling excluded can mean we don't seek care when we really need it. The Hokonui community has been clear they want to take care of their whole self, especially mental health and wellbeing. The Hokonui community expects a user-centric service.**

Fixing some of this can happen quickly: some basic work with clinicians and front-of-house staff to make providers more customer-centred and make sure our experience is as good as it can be. It is also important to support our local providers with a robust review of services and how it can be improved for users and kaimahi alike.

Other priorities like communications and connectors will also help. In the longer-term, other work going on with the council, government agencies and the community around inclusion will help.

## What does success look like?

- We feel confident accessing health services and feel heard and respected.
- Providers feel confident and are equipped and supported to deal with our mental, spiritual and whānau health.
- Community receives quality and equitable services without needing advocacy.
- Reduced acute cases as the public will access medical care earlier in illness.

## How can we measure that success?

- There's a training programme for health and social services providers in place.
- Rates for preventive health statistics like cervical screening and blood pressure checks are the same for everyone.
- Improved immunisation rates due to re-established trust by user.
- Practices can try and encourage increased response rates for patient experience surveys.



**“To have access to knowledgeable medical practitioners. To be taken seriously and listened to. To understand about our health. To have support for mental health issues as well as physical.”**

## Who does it?

- Source funding to scope appropriate training programme.
- The locality rūpu to ensure inclusion strategies incorporated strongly as action points in delivery.

## When?

**Immediately**

The training programme.

**Longer term**

All agencies working together on inclusion.

● Between 1 July 2023 and 30 June 2026

## He kitenga Māori

- Te whare tapa whā education and delivery
- Medical environments that reflect whānau
- Local workforce plan opportunities

PRIORITY

# Community Inclusivity Herenga Tangata

**We have really felt the stresses of the last few years with COVID, the cost of living and the pressures on primary industry. Our younger and older people talk a lot about missing out on shared experiences, community connections and the ever-dwindling community services (first responders, kapa haka, sports volunteers, Lions, marae etc.)**

The Hokonui community wants to ensure community resources are available, maintained and relevant. Also ensuring opportunities to connect intergenerationally occur frequently in the community, through activity, celebration and shared interests, will contribute to healthy well whānau.

Hokonui people want to be active and to participate both indoors and outdoors.

We think more effort going into creating and supporting inclusive community events and activities will reduce stress, anxiety and loneliness, and increase resilience and community pride. Looking after natural and built environments is also really important as much of what we want to do starts with having a cleaner healthier environment, in particular the Mataura River.

## What does success look like?

- Everyone in Hokonui feels a sense of belonging and can participate in what they want to with support when they need it.
- The Hokonui community respects diversity and will debate important issues to resolve them and problem solve collectively.

- Health and wellbeing is strengthened through activity-based initiatives.
- There is a joined-up approach to address barriers to good health and wellbeing, such as access to healthy homes.

## How can we measure that success?

- Increase rates of participation in community activities and events
- Active citizenship – increased voter turnout, encouraging more members of the public to stand for election and representing their community.
- Improving active volunteer database membership.



**“To be well, a whānau needs healthy food, open spaces to exercise, sports facilities to encourage our children into sports, a healthy home, chemists, GPs, specialist care and healthy relationships with others.”**

## Who does it?

Hokonui Locality with support from government agencies.

## When?

Immediately

● Between 1 July 2023 and 30 June 2026

## He kitenga Māori

- Shared hapori events (Matariki/Waitangi/mahika kai - titi)
- Celebratory career profiles
- Working closely with Māori kaimahi in predominant industries to meet whānau needs

# Timeframe

Locality prototype, working group operating, governance group appointed, community engagement begins.

Priorities identified and plan drafted in collaboration with Te Whatu Ora – Health New Zealand and Te Aka Whai Ora – Māori Health Authority.

Immediate solutions to priorities implemented.

2022

30 July 2023

30 June 2026



Secure required funding to Scope, strategise and problem solve community priorities and begin delivery of action plan. Progress against the plan reviewed by Te Whatu Ora, and agreed by the Iwi-Māori Partnership Board.



Community engagement continues to provide updates on progress and seek further feedback on how we are meeting their needs.

