MAORI PLAN

PURPOSE

Amberley Medical Centre is committed to delivering accessible and quality health services to all Māori. We will ensure we consider the Principles of the Treaty of Waitangi. These principles – partnership, participation, and protection – underpin the interactions between general practice teams, enrolled Māori patients and their Whānau.

- **Partnership** means we work together with our enrolled Māori by acting in good faith as Treaty partners; having an agreed common purpose, interest, and cooperation to achieve positive health outcomes; using an all-inclusive approach in the decision-making process and ensuring their integrity and well-being is preserved.

- **Participation** means we recognise the citizen rights of our enrolled Māori and the rights to equitable access and involvement in health services by facilitating the same access and opportunities for Māori as there are for non-Māori and pursuing parity and fairness in health outcomes.

- **Protection** means we recognise that health is a taonga (treasure). We act to protect the health of all our enrolled Māori by recognising that Māori health is worthy of protection to achieve positive health outcomes, ensuring that our health services and delivery are appropriate and acceptable to all our Māori patients and their Whānau and are underpinned.

We are committed to identifying, reaching, and encouraging the Māori patients in our community to improve their health and reduce inequality by participating in screening programs and other targeted initiatives at the Practice.

Underlying principles of our Māori health plan

- All Practice staff have participated in cultural competency training within the last three years and understand the impact of the Treaty of Waitangi on the services we provide.

- Staff appreciate and understand the Treaty of Waitangi, particularly the principles of partnership, participation, and protection.

- We work alongside local iwi, hapu, whānau and Māori health providers to develop services relevant to our Māori patients.

- Our Practice is aware of Māori values, beliefs, protocols, and cultural issues.

THE PLAN

This plan is a living document regularly monitored by practice staff and reviewed annually. We identify Māori within the practice by collecting ethnicity data at enrolment time, aligning with the Ministry of Health's principles of patient self-identification.

Our Māori Population

Breakdown of our Māori Population **Date:** 31/08/2023							
Female							Total
Age	0-4	5-14	15-24	25-44	45-64	65+	
Māori	***28***	*53*	*40*	*50*	*39*	*22*	***224***
Male							Total
Age	**0-4**	5-14	15-24	25-44	45-64	65+	
Māori	***20***	***69***	***44***	***50***	***40***	***17***	240
Gender Diverse							Total
Age	**0-4**	5-14	15-24	25-44	45-64	65+	
Māori	0	***0***	0	0	***0***	0	0
Total Percentage of Enrolled Population who are Māori is 7.52							444

This plan is motivated by recognising a need for primary care to be involved in Māori health and reflects the direction of the Te Whatu Ora's guidelines.

Several studies and ongoing research have established that Māori have the poorest health of all the ethnicities living in New Zealand. Te Whatu Ora acknowledges that Māori suffer poorer overall health when compared to non-Māori groups. They recognise that if Māori are to enjoy longer, healthier lives and participate fully in the community. Issues that cause poor health and perpetuate health inequality must be identified, prioritised, and actioned. This can be done most effectively from within the communities; therefore, it is essential that Primary Care pioneer and develop this improved model of care.

As the Government's advisor for health and disability, the Te Whatu Ora is charged with setting the direction for Māori health and guiding the sector as they work to increase access, achieve equity and improve outcomes for Māori. Our Practice aims to work within the Ministry of Health guidelines to deliver a quality service for our Māori population.

Amberley Medical's team is committed to healthcare that ensures Māori have at least the same level of health as non-Māori and safeguarding Māori cultural concepts, values and practices.

We will build upon relationships with the Māori community to improve health outcomes for Māori. The Māori community will be consulted regarding developing and implementing health promotion activities impacting Māori health issues.

Our Māori health model (Te Whara Tapa Wha) is built on four cornerstones:
Taha Whānau (family health)
Taha Tinana (physical health)
Taha Hinengaro (mental health)
Taha Wairua (spiritual health)
This relationship between family, physical, mental, and spiritual health will be incorporated into any care plans and health strategies we develop for our patients.

To deliver these targeted health improvements, Amberley Medical Centre will utilise resources and support from the following groups:

Primary Health Organisation (PHO) – *Waitaha Primary Health*
District Health Board (DHB) – *Te Whata Ora Waitaha Primary Health*
Chronic Disease Management Plans
Amberley Medical Centre Wellness Team
Stop Smoking Programme
PHO/Māori Health Nurses
National Cervical Screening Programme
He Waka Tapu – check who they are
Te Hā – Waitaha

Priority areas for addressing the health needs of our Māori population.

Priority Areas	Goals	Actions	Evidence of Achievement
Te Tiriti o Waitangi/Treaty of Waitangi	The general practice team is trained in Te Tiriti O Waitangi, including Partnership, Participation and Protection principles.	All practice staff have attended an appropriate Te Tiriti O Waitangi and its application to the healthcare workshop.	All staff members have attended a Treaty workshop and provide evidence of this.
Use of Te Reo Māori/the Māori language within the practice	The practice team increase their knowledge and use correct pronunciation of the Māori language within the practice	Engage Waitaha PHO for team training around pronunciation. The general practice team can access Māori language resources. Include bilingual signage in the practice. Phonetic alert on a patient to assist with correct pronunciation Increase Amberley Medical Centre forms to be bi-lingual.	Complete team training of pronunciation with Waitaha PHO Evidence of the use of Te Reo in the practice Te Taura Whiti shortcut shared on common desktop. Introduction bilingual signage in the practice Forms are bi-lingual.
Cardiovascular Risk Assessment (CVRA)	All eligible enrolled Māori are invited to have a CVRA	Invite all enrolled Māori, males ≥ 35 years and females ≥ 45 years, to have a CVRA. All CVRA are followed up with appropriate and timely interventions. Culturally appropriate lifestyle and treatment options are offered. Recall every 3 years referrals to appropriate agencies/Māori health providers	Total number of eligible Māori screened using: Dashboard Query Build Current status is 48% of Māori patients complete with CVRA, leaving 52% patients who need to be followed up. Practice goal is to reach target of 70% by end of August 2024. All Māori patients with increased CVRA risk are referred to appropriate Māori Health providers when required.

Smoking cessation/Smoking brief advice	All Māori patients who smoke are supported to stop	Deliver and record ABC to all Māori who smoke Offer effective cessation support/motivational interviewing Offer quarterly on-site visits from the Waitaha waka Offer culturally appropriate community cessation support services, i.e. Te Hā-Waitaha and Quitline	Recorded in clinical notes; Reduction in the smoking status of current smokers The number of quit attempts Brief advice given Evidence of abstinence from smoking Monthly Quality reports from PHO 93 pts currently recorded smoking. The practice goal is to reduced total number of current smokers by 20% by August 2024.	
Cervical screening	All enrolled Māori women ≥ 25 years are offered the opportunity to have a cervical smear/HPV screen.	Recall all eligible Māori women who are due for a smear. Offer free smear. Refer to free outreach clinic/Māori health providers as necessary. • Check dashboard Sending out recalls with info and alternative providers list Opportunistic smear taking/HPV screening taking when patients come in for other health reasons. Invite patient to the Waitaha waka to attend drop in cervical screening /HPV bus	All Māori women between the ages of 25-69 yrs have been offered a cervical smear **Total number**. Currently, 48 women have been identified with no record of smears Aim: reduce this number by half by August 2024. Patients will have been contacted and coded Increase take up of smears/HPV screening by 50% by August 2024	

Bowel Screening	Māori patients who are between the age of 60 and 74 are offered the opportunity to participate in bowel screening.	Bowel screening reports printed off identifying patients who are eligible for screening. Contacting patients by recall letter, providing information. Follow-up phone calls. Internal PMS query builds ident	All Māori patients between the ages of 60-74 yrs have been offered bowel screening. Currently, 33 patients have been identified with no record of bowel screening Aim: reduce this number by half by August 2024. Patients will have been contacted and coded Add in total numbers.
Diabetes management	Diabetes patients of Māori ethnicity will receive ongoing education and management/monitoring of their condition and co-morbidity. This will include patients with impaired glucose intolerance.	All Māori diabetic patients are seen at least twice per year by a doctor or a nurse specialising in diabetes, ensuring all relevant checks are carried out at routine appointments. Using access funds and diabetes management funds for subsided appointments involving family-orientated care plans. Subsides appointment with Enhance Cap and Diabetes funding Using dashboard Recalls for retinal screening - Annual Foot checks are completed annually. Involving community diabetes teams/cultural providers. - who	Audits on Hba1C results Dashboard Add in range where are we at – where to get to Yearly query builders to show diabetic review targets. 58.4% of Māori diabetic patients currently have all components completed. Number of patients – type 1 and 2 and impaired Practice goal is to have 85% coded by end of January 2024.

Rheumatic Fever	Māori children who present with sore throats are swabbed for Strep throat.	Educate Patients and Whanau on the importance of seeking medical advice for sore throats, especially in young children. Screen and swab patients at high risk of developing rheumatic fever (as per Health Pathway recommendations) Provide patients and whanau printed information from Health info.	Targeted advertising campaign, facebook, practice booklet and local media.

Partnerships

Priority Area	**Goals**	**Actions**	**Evidence of Achievement**
Partnership with local Māori organisations, provider groups and whanau.	The general practice team works in partnership with local Māori organisations, provider groups and whanau	Referrals to agencies as needed. Keep accurate contact details. Ensure all staff are aware of the provider and services available. Book available educational sessions. Attend educational sessions at our local marae Tuahiwi	Follow up on patients we have referred to ensure the provider helped meet the need. Discussions with providers if care needed is met/successfully engaged Record of educational sessions attended