



Taranaki Public Health Unit

STRATEGIC PLAN

2017-2022

He Mihi

Purutia mai te tāuru
O te rangi, kia tina, kia whena
Kia toka te manawa ora
Tina toka te manawa ora ki whea?
Tina toka te manawa ora
Ki Ranginui e tū nei
Ki Papa-tū-ā-nuku e takoto nei e
Ki tēnā, ki tēnā o tātou
Ngā whānau, ngā whanaunga
Me ngā piringa karanga maha –
āpiti atu ki te hunga māuiui
Ki te hunga e tāmia
Ana e te pōuritanga
Koia e Rongo whakairia ki runga
Tūturu whakamoua kia tina
Tina! Hui e! Tāiki e!

Tena koutou e noho mai nei kei raro i te maru o maunga Taranaki.
Ngā mihi rangatira ki ngā manu e rua, ko Tohu Kakāhi raua ko Te Whiti o Rongomai.
No reira, paimarie.

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

*You ask me
What is the most important thing in the world
My reply
It is people, it is people, it is people*

(Dr Huirangi Waikerepuru)

Te Tiriti o Waitangi

The Taranaki Public Health Unit Strategy is underpinned by Te Tiriti o Waitangi principles of partnership, participation and protection.

We acknowledge the special relationship between the Crown and Tāngata Whenua and will actively work with Māori to affirm Te Tiriti o Waitangi principles.

Acknowledgements

We would like to thank the Taranaki Public Health Unit team for their many contributions and input into the development of this Strategy. We would also like to pass on our thanks to Annie Davey (Portfolio Manager, Ministry of Health), Becky Jenkins (GM Planning & Funding, Taranaki DHB) and Ngawai Henare (Chief Advisor Maori Health, Taranaki DHB) for their leadership and guidance during the process of developing this Strategy.

EXECUTIVE SUMMARY

Purpose

The world is changing rapidly. It has been said that “any business still doing business as they did in the 20th century will not survive in the 21st Century”. Many of the health issues currently facing New Zealand are complex and very difficult to solve. The Taranaki Public Health Unit (PHU) Strategy is our response to this challenge. This Strategy outlines the vision, goal and priorities for the Taranaki Public Health Unit over the next five years.

Vision

All New Zealanders live well, stay well, get well. The single word ‘all’ is important as it stresses the importance of equity in terms of health outcomes. This ties in with the Taranaki District Health Board vision of “Taranaki Together, A Healthy Community. Taranaki Whanui He Rohe Oranga.”

Goal

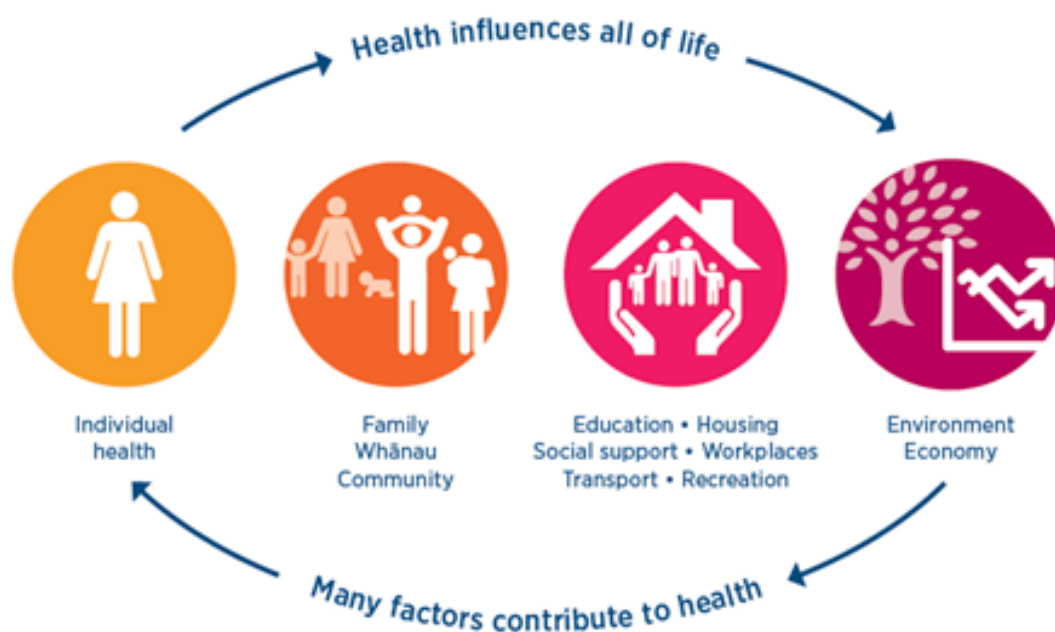
By 2022 our PHU will be considered a ‘centre of excellence’ which is recognised for the quality of its public health expertise and specialist population health advice across Taranaki. First and foremost we want to be acknowledged as a champion of health equity in Taranaki who is not afraid to tackle those complex public health problems that require new ways of working and problem solving.

Public Health Unit Priorities

The Taranaki PHU has identified four specific public health priorities for action over the next five years – health equity, health literacy, reducing the impact of long term conditions, and wai ora / environmental health. See table below. Our priority population groups in Taranaki are identified as Māori, and Mama-Pepe/Tamariki (maternal and child health). Being “agile” will mean that we are constantly looking for opportunities within these priorities where there is potential for significant population health gain. The New Zealand Health Strategy and Pae Ora frameworks underpin our strategy.

| National Strategic Themes | Improving Māori Health | Improving Equity for All | Strengthening focus on prevention and wellbeing | Strong sustainable public health workforce | Continuous quality improvement |
|-----------------------------------|---|--------------------------|---|---|--|
| Taranaki Public Health Priorities | Health Equity <ul style="list-style-type: none"> A core theme in all of our work with a focus on Health Equity Assessment. Health Literacy <ul style="list-style-type: none"> Becoming a “Health-Literate Organisation”. Live well, stay well, get well - reducing the impact of long term conditions <ul style="list-style-type: none"> Using a population health strengths-based approach with a focus on childhood obesity Wai Ora (Environmental Health) <ul style="list-style-type: none"> Water Quality Healthy Housing Parihaka sustainability initiatives (as part of the Crown Relationship Agreement) | | | <ul style="list-style-type: none"> Highly skilled, specialist public health workforce Building capacity in the wider public health sector Health in All Policies Sustainable programme delivery | <ul style="list-style-type: none"> Evidence based practice Ongoing quality improvement Public Health intelligence Innovation & change Evaluation and critical thinking Results Based Accountability Collaborative relationships |





INTRODUCTION

To the Taranaki Public Health Unit Strategy

The Taranaki Public Health Unit (PHU) is one of 12 DHB-owned PHUs providing public health services across New Zealand. Public health units focus on environmental health, communicable disease control, and health promotion programmes. Many of these services include a regulatory component performed by statutory officers appointed under various statutes, though principally under the Health Act 1956. Public health services are purchased directly by the Ministry of Health.

What is “Public Health”?

Public health action focuses on health determinants and prevention and aims to keep populations healthy where they live, learn, work and play, thereby enabling people to fully participate in society and reducing their subsequent need for treatment services.

We use a broad definition of health based on the 1948 World Health Organisation’s “a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity”.

For the purposes of this Strategy, public health is defined as “the science and art of promoting and protecting health and well-being, preventing ill-health and prolonging life through the organised efforts of society”¹.

Public health takes a ‘population health approach’ which can be seen as a unifying force for the entire spectrum of health system interventions – from prevention and promotion to health protection, diagnosis, treatment and care – integrating and balancing action between them.

¹ www.fph.org.uk/what_is_public_health



BACKGROUND

Welcome to the Taranaki Region

The Journey of Mount Taranaki²

In the past many magnificent mountain gods lived near the heart of the North Island Te Ika a Māui (the fish of Māui): Ruapehu, Tongariro, Ngāruahoe, Taranaki, Tauhara and the only female - little Pihanga. Pihanga was a gracefully contoured mountain with bush robed flanks and a delicate nature. All the mountains wanted Pihanga for their own - but particularly Tongariro and Taranaki.

The earth shook as the two fought. Lightning crashed, thunder rolled, ash and molten lava spumed from the mountains. In the fighting Tongariro lost his head, some say he deliberately broke it off to fling it at Taranaki, others say Taranaki sliced it off with a powerful blow. The top flew off and fell into the centre of Lake Taupo where it can be seen today as Moututaiko Island.

But Tongariro was the stronger of the two mountains. He defeated Taranaki, whose peak shuddered and sides convulsed. Tongariro gave a final departing kick to Taranaki's flanks and the defeated mountain dived underground. Toka - a - Rauhotu, a small stone of great mana, acted as a guide stone, leading him to the coast. In his flight he carved the Wanganui River, forming the Ngāere swamp when he stopped to rest.

At the water's edge Toka - a - Rauhotu lead Taranaki beneath the sea and north-west up the coast. He surfaced briefly and glimpsed Pouākai, a beautiful range. He settled beside her, and the guide stone rested on his seaward side.

Taranaki and Pouākai went on to have many children, wind and rain, plants and people, rocks and rivers.

² <http://pukeariki.com/Learning-Research/Taranaki-Research-Centre/Taranaki-Stories/Taranaki-Story/id/578/title/the-journey-of-mount-taranaki>

The Taranaki Region

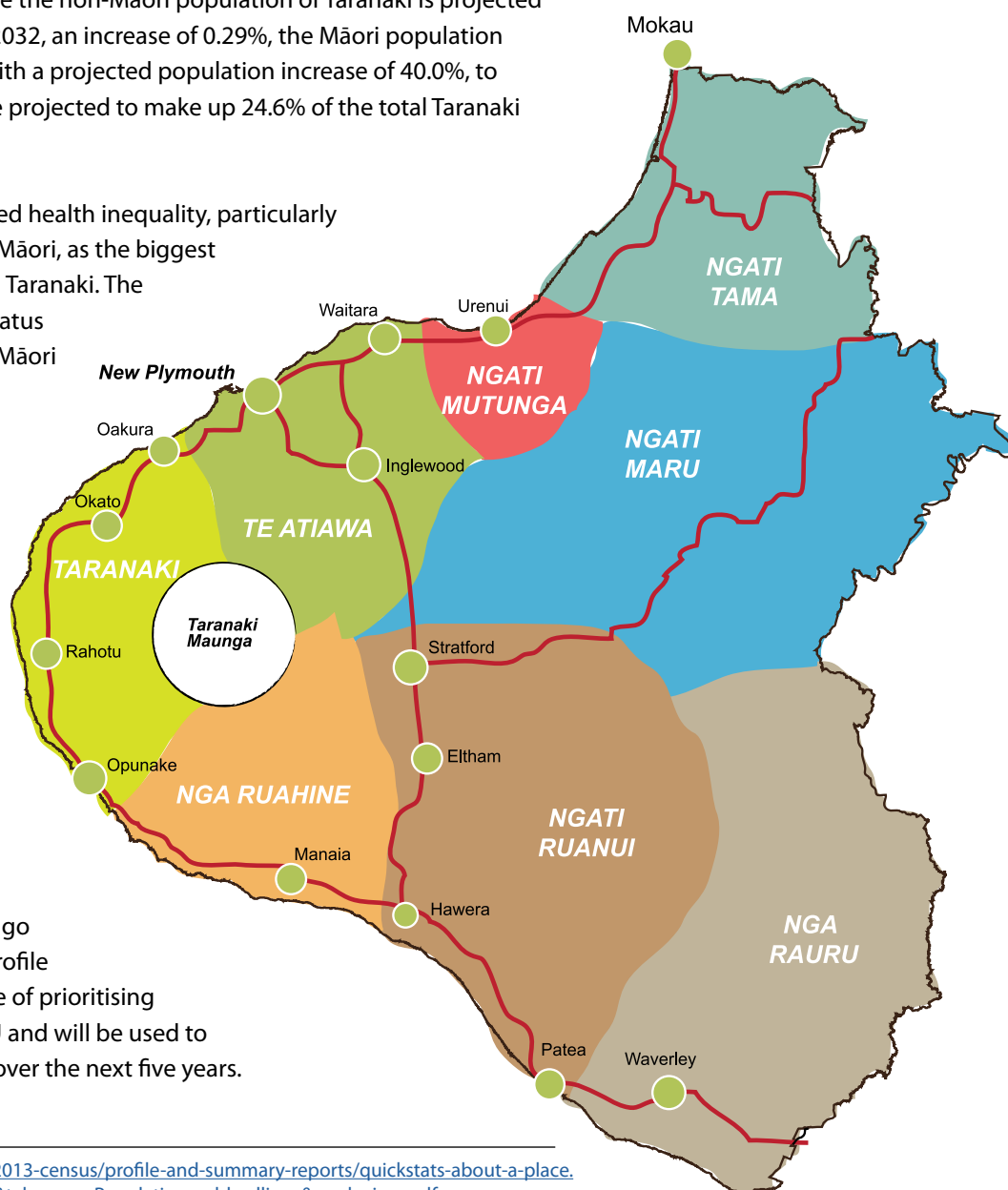
The Taranaki PHU covers the Taranaki District Health Board (DHB) region, from Mokau in the north to Waitotara in the south. The geographic boundaries of Taranaki District Health Board cover the council areas of Taranaki Regional Council, New Plymouth District Council, Stratford District Council and South Taranaki District Council.

Taranaki is home to eight local iwi (tribes) including Ngāti Mutunga, Ngāti Maru, Ngāti Ruanui, Taranaki, Te Āti Awa, Nga Rauru, Ngāruahinerangi and Ngāti Tama.

Taranaki had a population of 109,608 based on the 2013 census³. Of this total population, Māori made up 16.6% (or 18,150) which is a slightly higher proportion than the national average of 14.1%. Projections for 2016/17 (based on the 2013 Census) show Taranaki DHB serving a population of 118,110, with 18.9% of the population identifying their primary ethnicity as Māori.

The Taranaki region has a higher percentage of people aged over 65 years compared to the national average (16.2% compared to 14.3% nationally) and a slightly higher percentage of people aged under 15 years (21.1% compared to 20.4% nationally). While the non-Māori population of Taranaki is projected to increase to 96,020 by 2032, an increase of 0.29%, the Māori population is growing much faster with a projected population increase of 40.0%, to 31,370. By 2032 Māori are projected to make up 24.6% of the total Taranaki population.

Taranaki PHU has identified health inequality, particularly between Māori and non-Māori, as the biggest public health issue facing Taranaki. The discrepancies in health status between Māori and non-Māori are stark. As is the case nationally, avoidable hospitalisation and death rates are significantly higher for Māori than non-Māori. An overview of the specific health equity challenges facing our region currently are outlined in the most recent Maori Health Profile⁴, conducted by Te Rōpū Rangahau Hauora a Eru Pōmare, University of Otago Wellington. This health profile reinforces the importance of prioritising health equity for our PHU and will be used to guide much of our work over the next five years.



3 www.stats.govt.nz/Census/2013-census/profile-and-summary-reports/quickstats-about-a-place.aspx?request_value=14110&tabname=Populationanddwelling&sc_device=pdf

4 Robson B, Purdie G, Simmonds S, Waa A, Brownlee G, Rameka R. 2015. Taranaki District Health Board Māori Health Profile 2015. Wellington: Te Rōpū Rangahau Hauora a Eru Pōmare. www.otago.ac.nz/wellington/otago152491.pdf



THE FUTURE WE WANT

What is our Vision?

"All New Zealanders live well, stay well, get well" is the core theme of the 2016 NZ Health Strategy. The single word 'all' is important as it stresses the importance of equity in terms of health outcomes. This ties in with the Taranaki District Health Board vision of "Taranaki Together, A Healthy Community. Taranaki Whanui He Rohe Oranga." Public health action is a key component of achieving this theme.

Our goal is that by 2022 our PHU will be considered a 'centre of excellence' which is recognised for the quality of its public health expertise and population health specialist advice across Taranaki. We want to be seen as a strong, collaborative partner who plays a lead role in building public health capacity across our region. First and foremost we want to be acknowledged as a champion of health equity in Taranaki who is not afraid to tackle those complex public health problems that require new ways of working and problem solving.

Why do we need a Taranaki Public Health Unit Strategy?

The world is changing rapidly. It has been said that "any business still doing business as they did in the 20th century will not survive in the 21st Century". Many of the health issues currently facing New Zealand are complex and very difficult to solve. The Taranaki Public Health Unit Strategy is the Taranaki PHU's response to this challenge.

What does this mean for the Taranaki Public Health Unit?

The driving vision for the Public Health Unit in the development of this Strategy has been the concept of a 'Public Health Unit without walls'. This concept acknowledges that we are part of a much wider public health team outside of the physical PHU building. It also signals our willingness to become agile and work in new ways and in different locations, as required, to deliver the most effective public health outcomes. High level collaboration – in terms of the sharing of our resources, knowledge and expertise with key strategic partners – will be critical to achieving this. Complex problems require complex solutions. For complex health solutions it is clear that a single agency will not have all the tools, knowledge, or capacity to address this complexity.

This way of working will have impact on all of our services. For example it will involve the PHU moving away from the direct delivery of some non-regulatory activities with a greater focus on supporting and enabling our strategic partners and key community groups to deliver coordinated quality public health services. The PHU aims to work smarter and more strategically with key stakeholders, taking a 'Health in All Policies' (HiAP) approach and identifying opportunities where we can work together more collaboratively on shared population health outcomes.

The PHU will continue to be the lead service provider for the delivery of health protection functions using specialised and designated officers to perform this work. However our strategy seeks to improve the quality of this work in order to improve health equity in our region.

Frameworks used to develop the Strategy

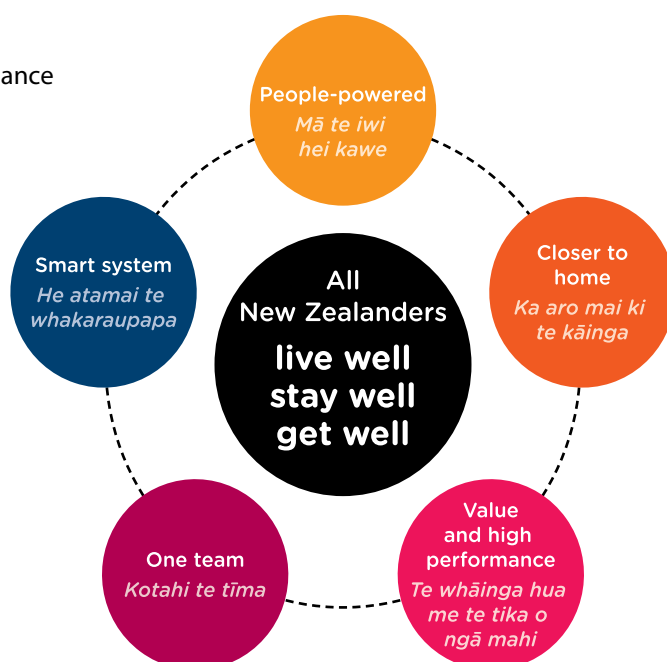
Two main frameworks have been used to inform the development of the Taranaki Public Health Strategy:

- New Zealand Health Strategy (2016)
- Pae Ora (Healthy Futures for Whānau)

New Zealand Health Strategy (2016)

The New Zealand Health Strategy sets the direction of health services to improve the health of people and communities. It identifies five strategic themes for the changes that will take us toward this future:

- People-powered
- Closer to home
- Value and high performance
- One team
- Smart system



Pae Ora – Healthy Futures

Pae ora is the Government’s vision for Māori health. It provides a platform for Māori to live with good health and wellbeing in an environment that supports a good quality of life.

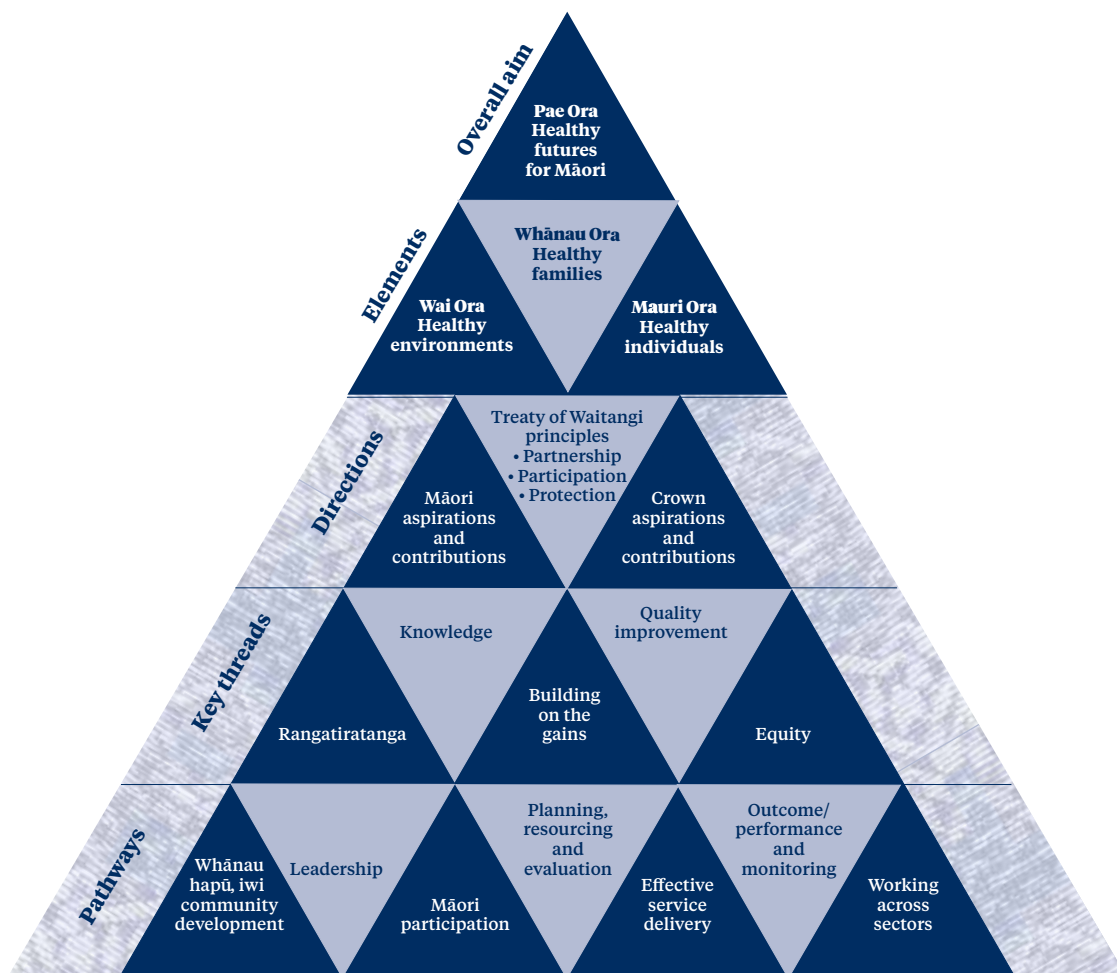
Pae ora encourages everyone in the health and disability sector to work collaboratively, to think beyond narrow definitions of health, and to provide high-quality and effective services.

Pae ora is a holistic concept and includes three interconnected elements:

- Mauri ora – healthy individuals
- Whānau ora – healthy families
- Wai ora – healthy environments

It is a positive strength-based approach which taps into and promotes the resilience and strengths of vulnerable populations.

See the Roadmap of Actions at the end of this document for how our strategy fits in with the New Zealand Health Strategy and Pae Ora frameworks.



The Pae Ora pyramid above shows the recommended framework required to guide the Government and the health and disability sector to achieve the best health outcomes for Māori ⁵.

⁵ Ministry of Health. 2014. The Guide to He Korowai Oranga: Māori Health Strategy 2014. Wellington: Ministry of Health.



Our Four Priorities

The Taranaki PHU has identified the following four specific public health priorities for action over the next five years:



We have already identified a number of projects as part of these priorities. However being “agile” means constantly looking for opportunities within these priorities where there is potential for significant population health gain.

Our strategic approach aligns with the six strategic themes that the Ministry of Health identified in its planning guidance for 2017/18.

The linkages between the national strategic themes and our specific public health priorities, and the specific areas of work proposed in the first 1-3 years of the Strategy, are shown below:

| National Strategic Themes | Improving Māori Health | Improving Equity for All | Strengthening focus on prevention and wellbeing | Strong sustainable public health workforce | Continuous quality improvement |
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| | Health Literacy <ul style="list-style-type: none"> Becoming a “Health-Literate Organisation”. | | | | |
| | Live well, stay well, get well - reducing the impact of long term conditions <ul style="list-style-type: none"> Using a population health strengths-based approach with a focus on childhood obesity | | | | |
| | Wai Ora (Environmental Health) <ul style="list-style-type: none"> Water Quality Healthy Housing Parihaka sustainability initiatives (as part of the Crown Relationship Agreement) | | | | |

Priority Populations:

Our priority population groups in Taranaki are:

- Māori
- Mama-Pepe and Tamariki (maternal and child health)

Identifying Māori as a priority population group reflects our ongoing commitment to improving health equity. We have also chosen to prioritise mama and pepe, as we know that investment in maternal and early child health will have the biggest health impact per dollar spent in the longer term.



IMPLEMENTATION

Implementation of this Strategy will involve doing new things, doing some things differently and stopping other things. There will undoubtedly be challenges in putting this Strategy into action – it is ambitious and will involve significant change. To achieve the future we want, we will need to do things differently and we need to be brave.

Some of the priorities identified in our Strategy are considered ‘wicked problems’ – by this we mean they are complex issues which are highly resistant to resolution. Wicked problems such as obesity, health equity, health literacy and poor housing require a reassessment of some of the traditional ways of working and problem solving. Successfully tackling wicked problems requires broad recognition and understanding that there are no quick fixes or simple solutions. Such problems require thinking that is capable of grasping the big picture, including the relationships between the causal factors underlying them. We will need broader, more collaborative and innovative approaches which are part of learning and improvement cycles, and which acknowledge occasional failure as part of our learning process.

At the same time we will need to continue to monitor our performance and regularly scan the environment to check that our Unit is functioning well and responding to changes as they arise. Critical thinking, which is the objective analysis and evaluation of an issue in order to form a judgement, will become part of our daily work. Is anyone better off and how do our programmes compare against the 3 E’s (Equity, Effectiveness, Efficiency)? We need to prioritise where we think our resources will achieve the biggest population health impact.

We also need to be flexible and responsive as new issues or opportunities emerge. This will involve a shift away from delivery of long-term programmes to a short-term project-based approach based on sustainability and community ownership. This means that, in future, we are unlikely to deliver specific projects for any longer than 1-3 years. It is always better wherever possible to take a sustainable community development approach which enables communities to develop their own solutions and to mobilise their resources in order to achieve their vision.



Learning and Improvement Cycle⁶

⁶ Ministry of Health. 2015. Suicide Prevention Toolkit for District Health Boards. Wellington: Ministry of Health.

Implementing our Priorities

Health Equity

Taranaki PHU is committed to creating a fairer society where everyone has the opportunity for good health and where our health care system meets the needs and aspirations of Māori. Eliminating health outcome differences which are “unnecessary and avoidable, but in addition are considered unfair and unjust” is a core theme of all our work. We will demonstrate leadership by going upstream and working in collaboration with other agencies on the social determinants of health as well championing the provision of high-quality health care that delivers equity of health outcomes for Māori. A key strategy for this work will be through applying the Ministry of Health’s Health Equity Assessment Tool (HEAT) to our own programmes, and supporting and enabling the DHB to integrate the use of HEAT into their own service planning, development and evaluation.





Health Literacy

Taranaki PHU will champion a culture shift so that health literacy is core business within the PHU, ultimately allowing us to champion health literacy across the DHB. Health literacy contributes to health equity and has the potential for an improved consumer experience, a reduction in health-related costs, and empowerment of individuals/whanau to make appropriate choices for their health and wellbeing. An essential part of health literacy is a focus on how health systems, health care providers and practitioners can support consumers to access and understand health services. Taranaki PHU will lead this work by first becoming the change we wish to see. Our objective is to become a “health literate organisation”.



Live Well, Stay Well, Get Well - Reducing the Impact of Long Term Conditions

It is predicted that as we go into the future there will be an increasing number of patients in Taranaki with complex needs and long term conditions. The Public Health Unit has knowledge and expertise in population health strengths-based approaches which aim to improve the quality of people's lives through reducing the impact of long term conditions.

Obesity is an example of a major risk factor for a number of long term conditions. There is extensive evidence that obese children and adults are at greater risk of short-term and long-term health consequences including Type 2 diabetes, ischaemic heart disease (IHD), stroke and several common cancers. The Midlands Public Health Network recently agreed to make the prevention of childhood obesity a regional priority. Taranaki PHU, along with other members of the network, has adopted the Toi Te Ora Childhood Obesity Prevention Strategy to guide its work in this area. The focus of our work, which will be guided by the Toi Te Ora strategy, will be on upstream preventative initiatives including reducing the consumption of sugary drinks (sugar sweetened beverages or SSBs) and supporting good maternal and infant health and nutrition.



Wai Ora (Environmental Health)

Taranaki PHU have identified three areas of work within this priority – water quality, healthy housing and our commitments to Parihaka as part of the Crown Relationship Agreement that supports the Taranaki Iwi treaty settlement.

Water quality

The term 'wai ora' refers to water, both as a resource and as an essential part of the environment that provides sustenance for life. The concept recognises the importance that water plays in Te ao Māori, and its role in creating healthy environments that support and sustain a healthy life. Our focus on water quality will include ensuring high quality drinking water supplies, promotion of water as the drink of choice for young children, and working with the Regional Council, District Councils and Iwi / Hapu to ensure that rivers, lakes and coastlines are as safe as it can possibly be for swimming, recreation, and the collection of food.

Healthy housing

New Zealand housing tends to be old, poorly constructed and inadequately insulated. There is increasingly robust evidence of the role of housing as a determinant of health and research has highlighted the disproportionate number of people on lower incomes living in older housing stock. The PHU has identified housing as a public health issue that would benefit from public intersectoral action with a range of stakeholders including district councils, Housing NZ, Ministry of Social Development and private landlords. The PHU

believes this work has significant potential to improve health outcomes and reduce health inequalities. As part of this priority the PHU will also continue to coordinate the regional intersectoral response when cases of extreme hoarding and squalor are identified.

Parihaka papakāinga community development initiative

The PHU's commitment to work with the Parihaka papakāinga has arisen from the negotiations between Taranaki iwi and the Crown, as part of the Treaty settlement process that seeks to reconcile the Crown's relationship with the Parihaka community. A number of crown agencies, including the Taranaki DHB, have committed to work with the community to improve service provision and to support projects that strengthen the infrastructure at Parihaka. As part of this agreement, Taranaki DHB and the Taranaki PHU have agreed to provide support over the next 2-3 years with the development of primary care and health promotion services on the papakāinga, establishment of an assisted living facility for kaumātua and support with identifying a sustainable water supply and waste water treatment system.



Building our Workforce

Building a strong and sustainable public health workforce is critical to the success of this Strategy. This does not just apply to the development of a highly skilled, specialist public health workforce within our unit, but also reflects our role in building capacity in the wider public health sector. As part of a One Team approach, we need to work with other partners towards shared goals and be able to work beyond organisational boundaries, proactively helping people and populations in need.

One of the ways in which the PHU intends to achieve this is by adopting a Health in All Policies (HiAP) approach. Health in All Policies is defined as “an approach to public policies across sectors that systematically takes into account the health implications of decisions, seeks synergies, and avoids harmful health impacts, in order to improve population health and health equity.” HiAP work is underpinned by the fact that health is influenced by a wide range of factors beyond the health sector and recognises our responsibility to work in partnership to achieve lasting change for the health and well being of our community.

Our workforce will need to become increasingly agile, having the ability to move quickly and easily in order to identify and respond to public health

opportunities as they arise. To achieve this we need to have the flexibility to rapidly change or implement new initiatives or innovations. We will therefore require a public health workforce whose size and skills match New Zealand’s current and future needs. This will mean developing new or stronger skills for some, within an environment that is committed to ongoing professional development. There is also a need to reduce the barriers that currently prevent people from using their skills flexibly and fully.

The one team approach also requires the strengthening of the capability of NGO providers. This involves not only developing the capability of their people but also increasing their access to funding, training and technology infrastructure to allow them to work to their full potential. We need to reduce the fragmentation of public health services in our health system and foster greater trust and collaboration by sharing our resources and expertise. Supporting and enabling others to deliver some of the work that we currently do will be the first step in this process. Beyond the formal workforce it is also important to empower families, whānau and individuals in communities in their roles as carers of people close to them. This support could involve the provision of specialist public health information or health literacy to community groups.

Continuous Quality Improvement

Quality improvement in public health involves continuous efforts to achieve measurable improvements in the quality in public health services or processes, which are responsive to community needs and aim to achieve equity and improve the health of communities. The Taranaki PHU is committed to the delivery of high quality public health services and recognises that this is critical to our vision of becoming a centre of excellence in future.

In order to become recognised as a centre of excellence we will need to demonstrate ongoing quality improvement which will include:

- Evidence based practice
- Public Health intelligence
- Innovation & change
- Evaluation and critical thinking
- Results Based Accountability
- Relationships
- Workforce development



Measuring our Performance

Measuring our success in achieving the outcomes we are striving for is a vital aspect of this Strategy. It is reliant on us having access to good quality data and smart information systems that inform evidence-based decisions and enable meaningful reporting on outcomes. Not only does this encourage our service to become a 'learning system', by seeking ongoing improvements and innovations as a programme progresses, but it also ensures that we are able to demonstrate whether what we are doing is making a difference to our community.

Developing robust Results Based Accountability (RBA) measures will be one of the ways we demonstrate that people are better off as a result of the services we deliver. Ensuring robust systems for identifying the impacts of our programmes and activities on the Māori population will be essential in order for us to demonstrate that our efforts to improve health equity for Māori are effective. As well as publicly available data we will need to develop sound systems for analysing our own service data in order to answer the question: "how are our communities, whānau and clients better off as a result of our work?" is central to RBA. Developing appropriate population and accountability measures that demonstrate the contribution linkage between the services we deliver and the outcomes or wellbeing of our population will be an important focus in the first year of our Strategy.



ROADMAP OF ACTIONS

This final section of our Strategy summarises, at a high level, the actions that we will need to take over the next five years to implement this Strategy. The actions are summarised under the five strategic themes of the New Zealand Health Strategy and the three components that make up Pae Ora.

The actions outlined below link to our four priorities:

**Health
Equity**

**Health
Literacy**

**Live well, stay
well, get well
- Reducing
the impact
of Long Term
Conditions**

**Wai Ora
(Environmental
Health)**

- Health equity
- Health literacy
- Live well, stay well, get well - reducing the impact of long term conditions
- Wai ora (environmental health)

These actions will guide our annual planning over the next five years to ensure that our activities, both regulatory and non-regulatory, align with the vision and direction of this Strategy.



TARANAKI PUBLIC HEALTH UNIT STRATEGY FIVE YEAR ROADMAP (2017-2022)

The Taranaki Public Health Unit has developed this road map to guide decision making around public health priorities for the next five years.

Māori whānau experiencing the unfair burden of health inequities in our society are our priority. Inequities are driven by avoidable and fixable differences in access to the determinants of health, exposure to health risk factors, access to health protective factors and access, timeliness and quality of health care.

Value and High Performance

- Striving to become a centre of excellence.
- Providing consistently high quality services that are equitable, effective and efficient.
- Equity - Building our knowledge base, and being a champion for health equity in our region.
- Effectiveness - Delivering excellent services, supported by evidence and research.
- Efficiency - Delivering services efficiently to those people who most need them.

People Powered

- Embracing partnership, participation and protection.
- Focusing on eliminating health differences that are unfair and unjust.
- Building leadership and knowledge in health literacy.
- Engaging community expertise in public health service planning and development.
- Embracing new technologies to enable engagement wherever people are based.

Closer to Home

- Working together with agencies, people and communities particularly those at risk of poor health or social outcomes to focus on prevention and well-being.
- Prioritising early intervention in child and maternal health.
- Using a whānau ora approach to improve health equity for Māori.
- Preventing childhood obesity through population based strategies make healthier choices easier.

Whānau Ora

- Acknowledging the central role that whānau play for Māori.
- Supporting whānau to become self-managing, living healthy lifestyles and confidently participating in te ao Māori.

Mauri Ora

- Developing programmes that are appropriate for Māori and support strong cultural identity and Māori self determination.
- Addressing the pathways both within and outside the health system that promote health equity.

Smart System

- Developing a learning and improvement culture where knowledge and innovation is readily shared.
- Smart use of data to support evidence-based decisions and targeting of interventions.
- Using emerging technologies to promote health equity.

One Team

- Building a strong, sustainable and specialised public health unit workforce that is agile and responsive to changing needs.
- Strengthening public health leadership at all levels
- Building and supporting public health workforce capacity in the NGO sector.
- Leading intersectoral collaboration on shared goals and outcomes using a Health in All Policies approach.
- Strengthening the Māori workforce to support us in achieving health equity.

Wai Ora

- Ensuring Māori have access to quality housing, safe drinking water, and that the rivers, lakes and coastlines are as safe as can possibly be for swimming, recreation and collection of food.
- Supporting Parhaka to achieve its vision and aspirations using a community development approach.



Taranaki Together, a Healthy Community
Taranaki Whanui He Rohe Oranga