Kawerau kaupapa inspires Tūhoe's ambitious primary care expansion



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 $T\bar{u}$ hoe aims to open a fifth medical clinic on the shores of Lake Waikaremoana by late next year

Kawerau Medical Centre's model of care is the philosophical launch pad for central North Island iwi Tūhoe's ambitious expansion plans to improve the health of its people.

Tāmati Kruger, a member of the iwi's trust, Te Uru Taumatua, says Tūhoe is set to open a new clinic in Ruatahuna by next March with another clinic opening later in 2020 at Waikaremoana.

Tūhoe bought the Kawerau clinic in July after opening its first iwi-owned clinics in Waimana and Tāneatua.

"We've got a long-range plan, over the next 20 years, we're hoping to make a dint in the backlog of disease and illness of Tūhoe people," Mr Kruger says.

"After that, we're looking at a more preventative and education-based way forward by making Tūhoe families and communities a lot more responsible for their health and wellbeing, ultimately we will not be dependent on GPs."

Kawerau's kaupapa

Central to the fiercely independent iwi's health and wellbeing plans is adopting the way Kawerau Medical Centre is run by its original owners, GP Emily McNicholas and husband and practice business manager, Lance McNicholas, who opened the clinic in 2014.

Dr McNicholas, who has been appointed the iwi's clinical director, says the Kawerau clinic chose elements of the health care home's model of care which would suit its predominantly high-needs Māori patient base.

About 20 per cent of the Very Low Cost Access clinic's 3800 enrolled patients don't have telephones while about 12 per cent don't have access to vehicles, making the practice's walkin clinic and GP telephone triage service indispensable, Dr McNicholas says.





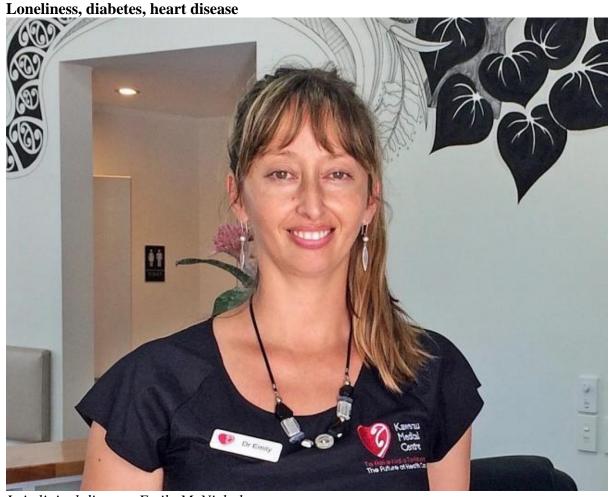
Te Uru Taumatua trustee Tāmati Kruger

Once the Ruatahuna clinic opens, the five clinics will consider introducing telehealth and virtual consults which could be especially beneficial in reaching those unable to travel to practices, she says.

Mr Kruger says, "The importance of the Kawerau clinic is it has a very good model of practice, we're hoping to engage the principals there and utilises a lot of their systems and processes to bring efficiencies to the other practices."

The Kawerau practice also has two healthcare assistants who lift much of the burden from its five GPs and two nurses, Dr McNicholas says.

The "beauty of the merger" is it will make clinical and administration staff sharing possible between the Tūhoe practices.



Iwi clinical director Emily McNicholas

It's hoped enacting the Kawerau model across the iwi's dispersed, largely rural population, will accelerate efforts addressing key health issues such as elder loneliness, type 2 diabetes and heart disease, he says.

Mr Kruger estimates in Tāneatua's patient catchment alone, there are about 500 people who have "never, ever seen a GP".

Dr McNicholas says a similar situation existed in Kawerau when the practice opened.

"Before we opened there were 1600 unregistered patients in Kawerau out of 7000 people, that's massive, they'd never ever seen a GP too."

Of Tuhoe, by Maori, for everyone

When starting the Kawerau clinic, it was important that the practice's staff reflected the population, Dr McNicholas says.

"Eighty per cent of our patients in Kawerau are Māori and most identify as Tūhoe, 80 per cent of our staff are Māori, too including myself, I'm Ngāti Porou."

"It was a little bit controversial at the start, but it's worked well."

Tuhoe's medical services are available to all, Mr Kruger says.

In fact, many non- $T\bar{u}hoe$, non- $M\bar{a}ori$ from outside the tribe's area travel there to use medical services, he says.

The way back to independence

Tūhoe's original plan was to operate independently of any PHO, but Te Uru Taumatua Trust signed up to join Eastern Bay Primary Health Alliance in July 2016.

For now, Tūhoe will stay with the PHA, Dr McNicholas says. Tūhoe is asking the PHA to let it merge its clinic registers so enrolled patients can freely move between clinics.

Yet Tūhoe is trying to do as much as of its healthcare in-house, in an attempt to reassert its historical independence.

"We're really fighting dependency here, dependency on the Crown, dependency on the Ministry of Health, once you go that way you're a passenger on that vehicle and you have no power to customise anything to your needs, we're walking into this wanting full responsibility and control, it is something we're committed to long term," says Mr Kruger.