

RĀRANGI TAKE AGENDA

Te Komiti Rautaki, Whakahaere, me te Ahumoni | Strategy, Operations and Finance Committee Meeting

I hereby give notice that a Meeting of the Te Komiti Rautaki, Whakahaere, me te Ahumoni | Strategy, Operations and Finance Committee will be held on:

Te Rā | Date: Thursday, 22 February 2024

Te Wā | Time: 9.30am

Te Wāhi | Location: Council Chamber Ground Floor, 175 Rimu Road Paraparaumu

> Kris Pervan Group Manager Strategy & Growth

Kāpiti Coast District Council

Notice is hereby given that a meeting of the Rautaki, Whakahaere, me te Ahumoni | Strategy, Operations and Finance Committee will be held in the Council Chamber, Ground Floor, 175 Rimu Road, Paraparaumu, on Thursday 22 February 2024, 9.30am.

Te Komiti Rautaki, Whakahaere, me te Ahumoni | Strategy, Operations and Finance Committee Members

| Cr Sophie Handford | Chair |
|---|--------|
| Cr Liz Koh | Deputy |
| Mayor Janet Holborow | Member |
| Deputy Mayor Lawrence Kirby | Member |
| Cr Glen Cooper | Member |
| Cr Martin Halliday | Member |
| Cr Rob Kofoed | Member |
| Cr Jocelyn Prvanov | Member |
| Cr Shelly Warwick | Member |
| Cr Nigel Wilson | Member |
| Cr Kathy Spiers | Member |
| Ms Kim Tahiwi | Member |
| Mr Huriwai Paki | Member |
| Ātiawa ki Whakarongotai (André Baker or | Member |
| Janine Huxford) | |

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1 NAU MAI | WELCOME

2 KARAKIA A TE KAUNIHERA | COUNCIL BLESSING

| l a mātou e whiriwhiri ana i ngā take kei mua i ō mātou aroaro | As we deliberate on the issues before us, |
|--|---|
| E pono ana mātou ka kaha tonu ki te whakapau mahara huapai mō ngā hapori e mahi nei mātou. | We trust that we will reflect positively on the communities we serve. |
| Me kaha hoki mātou katoa kia whaihua, kia tōtika tā mātou mahi, | Let us all seek to be effective and just, |
| Ā, mā te māia, te tiro whakamua me te hihiri | So that with courage, vision and energy, |
| Ka taea te arahi i roto i te kotahitanga me te aroha. | We provide positive leadership in a spirit of harmony and compassion. |

3 WHAKAPĀHA | APOLOGIES

4 TE TAUĀKĪ O TE WHAITAKE KI NGĀ MEA O TE RĀRANGI TAKE | DECLARATIONS OF INTEREST RELATING TO ITEMS ON THE AGENDA

Notification from Elected Members of:

4.1 – any interests that may create a conflict with their role as an elected member relating to the items of business for this meeting, and

4.2 – any interests in items in which they have a direct or indirect pecuniary interest as provided for in the Local Authorities (Members' Interests) Act 1968

5 HE WĀ KŌRERO KI TE MAREA MŌ NGĀ MEA E HĀNGAI ANA KI TE RĀRANGI TAKE | PUBLIC SPEAKING TIME FOR ITEMS RELATING TO THE AGENDA

6 NGĀ TAKE A NGĀ MEMA | MEMBERS' BUSINESS

- (a) Leave of Absence
- (b) Matters of an Urgent Nature (advice to be provided to the Chair prior to the commencement of the meeting)

7 HE KŌRERO HOU | UPDATES

7.1 UPDATE ON OPERATIONAL STRATEGIES: ECONOMIC DEVELOPMENT, CLIMATE CHANGE AND RESILIENCE, ENVIRONMENT AND HEALTH

Kaituhi | Author: Kris Pervan, Group Manager Strategy & Growth

Kaiwhakamana | Authoriser: Kris Pervan, Group Manager Strategy & Growth

TE PŪTAKE | PURPOSE

1 This paper provides a short summary of the verbal update on the progress to refresh and establish the suite of Operational Strategies for the Kapiti Coast District for Economic Development. Health, Housing. Climate change and Resilience, and Environment.

TAUNAKITANGA | RECOMMENDATIONS

A. That the Strategy, Operations and Finance Committee **note** the contents of this update and progress to date to refresh the Kapiti Coast District's suite of community focused Operating Strategies.

TŪĀPAPA | BACKGROUND

- 2 During 2023, this Committee progressed discussions and the approach for the Direction of Travel (DoT) documents for four of the five Operational Strategies for the Kapiti Coast District: Economic Development, Health, Climate change and Resilience, and the Environment. The DoT sets out the substantive detail that we seek community feedback on to inform development of formal strategies in these five areas, and to coordinate and connect the associated community ecosystems that engage and deliver services to our community.
- 3 In December 2023, the Committee endorsed the DoT documents for consultation with the community for Economic Development; and agreed to the substantive content for the Climate change and Resilience, and Environment DoT.
- 4 In January 2024, Vision Kapiti operated in Coastlands mall asking people for their 'wish' for Kapiti. Another engagement hub is set to begin in Waikanae, running until 1 March 2024, covering Food, Energy, Land use, and the Economic Development DoT.

HE TAKE | ISSUES

- 5 Economic Development Refresh: The DoT Document was approved for public consultation by SOF in December, and will go live for engagement via our Vision Hub and online through the Have Your Say portal in February and March 2024.
- 6 Climate Change and resilience: The draft DoT and aspirational emissions target were approved by this Committee in December 2023. During February and March 2024, we will be testing the DoT with the Climate Change and Resilience Community Think Tank, including new Community Board and Mana Whenua members, and the DoT will come back to this Committee on 14 March 2024 for approval to consult with the Community in late March.
- 7 Health: Will be discussed in today's Committee meeting. We have worked primarily with the Kapiti Health Advisory Group on the draft Direction of Travel document. Following agreement of the draft DoT, public consultation and engagement with the wider ecosystem will begin from March 2024.

- 8 Environment: the draft DOT is going to Climate and Environment Strategy on 27 February 2024 for their review and endorsement following which this Committee will be asked to consider and approval for public consultation on 14 March 2024.
- 9 The communications team has developed an overview of proposed public engagement through the engagement hub, including for the Long-term Plan, to ensure that engagement is targeted and sequenced through the first quarter of 2024.

NGĀ KŌWHIRINGA | OPTIONS

10 There are no options to consider.

NGĀ MAHI PANUKU | NEXT STEPS

- 11 Outside of the briefings to Council Committees mentioned above, next steps will include attending advisory group meetings (CWB, OPC, Youth Council, Disability advisory group) to introduce the work we are doing and then to discuss and gain feedback on key details as each group prefers, or raises.
- 12 We will also aim to meet with OPC, the age friendly reference group and the youth council to discuss next steps on the Age Friendly approach in our strategies and identified need for a Youth approach.
- 13 In regards to engagement, there will be one further hub from March 2024 featuring our other 3 Strategy DoTs (Health, Environment, and Climate Change and Resilience), and then we are looking forward to May 2024 for our next phase of district engagement, which will focus on reflecting back what we have heard. Community Boards will be starting to do reflecting back discussions from March as well. This Committee will receive a more formal update on progress in March 2024.

NGĀ ĀPITIHANGA | ATTACHMENTS

Nil

7.2 UPDATE ON THE STRATEGY, OPERATIONS AND FINANCE COMMITTEE WORK PROGRAMME

Kaituhi | Author: Kris Pervan, Group Manager Strategy & Growth

Kaiwhakamana | Authoriser: Kris Pervan, Group Manager Strategy & Growth

TE PŪTAKE | PURPOSE

1 This paper provides a summary of the verbal update on the development of the Committee's 2024 work programme.

TAUNAKITANGA | RECOMMENDATIONS

A. That the Strategy, Operations and Finance Committee **note** the approach for developing the Committee's 2024 work programme.

TŪĀPAPA | BACKGROUND

- 2 During 2023, the Strategy, Operations and Finance Committee (the Committee) established an annual, calendar year, work programme as part of the new triennium arrangements.
- 3 Council officers are now working on the development of the 2024 work programme, in alignment to the Committee's existing delegations.

HE TAKE | ISSUES

4 There are no issues to raise.

NGĀ KŌWHIRINGA | OPTIONS

5 There are no options proposed for consideration.

NGĀ MAHI PANUKU | NEXT STEPS

- 6 Work is under way by Council officers to identify quarterly items and topics for the Committee's consideration.
- 7 We will test proposed items and topics with the Committee during March, and seek endorsement of the work programme following this.

NGĀ ĀPITIHANGA | ATTACHMENTS

Nil

7.3 UPDATE ON RESOURCE CONSENTS

Kaituhi | Author:James Jefferson, Group Manager Regulatory ServicesKaiwhakamana | Authoriser:Kris Pervan, Group Manager Strategy & Growth

TE PŪTAKE | PURPOSE

1 This paper provides a summary of the verbal update that will be provided around resource consenting processes currently underway.

TAUNAKITANGA | RECOMMENDATIONS

A. That the Strategy, Operations and Finance Committee notes this update.

TŪĀPAPA | BACKGROUND

- 2 Kapiti Coast District Council has a role in implementing legislative requirements set through the District Plan and other tools around building and resource consenting.
- 3 Regarding resource consenting, there are two processes relevant for update one is managed by the District Council and the other is a centrally managed process led by the Environmental Protection Authority (EPA).
- 4 To date, Councillors have been briefed on the overall legislative process for fast-track resource consenting, which is managed by the EPA, in two ways:
 - 4.1 Strategy and Growth has provided information where developers have indicated they may apply through the fast-track resource consenting process. The Council is often asked to confirm the alignment of developer plans with the Growth Strategy and Future Development Strategy and supporting increasing housing typologies.
 - 4.2 Regulatory has provided a heads-up when the Council has been asked to provide information around the implications of the proposed development in relation to infrastructure and other matters, as requested by the Panel.
- 5 Currently, and unchanged since we last briefed Elected Members, the fast-track resource consenting process has the following applications relevant to the Kapiti Coast District:
 - 5.1 One fast-track application approved (Summerset Waikanae)
 - 5.2 Three fast-track applications referred to a Panel (Moy Estate, 140 lots; Otaki Maori racetrack, 551 dwellings; Waikanae North, 410 lots)
 - 5.3 One fast-track application has been declined (Marine Parade Hotel).

HE TAKE | ISSUES

- 6 Council staff will update the Committee on the suite of Major projects seeking resource consents from the Kapiti Coast District Council. This includes:
 - 77-109 Kapiti Road, Paraparaumu (12 super lots, up to 1000 dwellings)
 - 37 Greenaway Rd, Waikanae (41 lot subdivision)
 - 221A Rangiuru Road, Otaki (67 Lot subdivision)
 - Harakeke Heights (400 plus lots overall)
 - 109 SH1 (15 lot subdivision for Lindale)
 - 52 Tasman Road, Otaki (12 lot subdivision)
 - 92 Raumati Road, Raumati (26 Lot subdivision)
 - 10-12 Utauta (43 units and associated subdivision)
 - 110 Ngarara Road, Anderson Park (45 Lot subdivision)
 - Manu Park

- 4 Kapiti Road
- 25 Awatea Avenue.

NGĀ KŌWHIRINGA | OPTIONS

7 Not applicable.

NGĀ MAHI PANUKU | NEXT STEPS

8 The incoming Government has already extended the previous COVID fast-track consenting process arrangements, from the last Government's term, and work is now underway by the Ministry for the Environment to implement further change in the 100-day plan to refresh and improve this process. In March 2024, the Policy and Research team will be providing further detail on the approach and submission process for this further legislative change. We will also provide an assessment of resource consents to expected growth projections in our usual Housing and Business Needs quarterly update.

NGĀ ĀPITIHANGA | ATTACHMENTS

Nil

8 PŪRONGO | REPORTS

8.1 HEALTH STRATEGY DIRECTION OF TRAVEL FOR CONSULTATION

Kaituhi | Author: Gina Anderson-Lister, Strategy Manager

Kaiwhakamana | Authoriser: Kris Pervan, Group Manager Strategy & Growth

TE PŪTAKE | PURPOSE

- 1 The paper seeks approval of the Direction of Travel (DoT) document for the Kāpiti Coast Health Strategy (Health Strategy) as the basis of consultation with the community in March 2024.
- 2 Following consultation, a Health Strategy will be presented to the Strategy, Operations and Finance Committee in mid-2024 for adoption.

HE WHAKARĀPOPOTO | EXECUTIVE SUMMARY

3 An executive summary is not required.

TE TUKU HAEPAPA | DELEGATION

4 The Strategy, Operations and Finance Committee has delegation to consider this matter under section B.1. of the 2022-2025 Triennium Governance Structure and Delegations.

TAUNAKITANGA | RECOMMENDATIONS

That the Strategy, Operations and Finance Committee:

- A. **Note** that the Council's Social Sustainability Subcommittee considered and endorsed the substantive content of the DoT at their meeting on 2 November 2023.
- B. **Note** that the Kāpiti Health Advisory Group (KHAG) considered the DoT document and are supportive of it being used for consultation with the public.
- C. Approve the substantive content of the DoT document for public consultation in March 2024.
- D. **Delegate** to the Chief Executive authority to approve the final designed version of the DoT document and any supporting materials for engagement on the Kāpiti Coast Health Strategy, subject to there being no material changes to the substantive content of the document.

TŪĀPAPA | BACKGROUND

- 5 On 9 March 2023, the Council adopted the doughnut economic model to inform its approach to assessing the needs of the people in our district. This has informed the Councillors' Priorities for 2023/24 and for the development of the 2024-25 Long-term Plan.
- 6 Health is a key aspect of this model, and the identified community need that has been incorporated into the Strategic Priorities is 'improving our overall health through access to affordable health services in our community'. The 2023/24 action notes that Council will develop a health strategy.
- 7 Council is not a direct provider of primary, secondary or specialist health services, but has a role in improving the health of the community as set by legislation. A list of relevant roles is outlined in Appendix 1 including the:
 - 7.1 Health Act 1956
 - 7.2 Local Government Act 2002

- 7.3 Pae Ora Act 2022
- 7.4 Water Services Act 2021
- 7.5 Building Act 2004
- 7.6 Food Act 2014
- 7.7 Gambling Act 2003
- 7.8 Sale and Supply of Alcohol Act 2012
- 7.9 Burial and Cremation Act 1964
- 7.10 Hazardous Substances and New Organisms Act 1996
- 7.11 Litter Act 1979
- 7.12 Local Legislation Act 1964.
- 8 Overall, local government has a role in influencing the direction set by the Director-General of Health, and ensuring there are appropriate bylaws and policies in place to support community and environmental health outcomes. Part of our role is also in facilitating collaboration of local health-related efforts, advocacy, and delivery of targeted services and regulatory actions. For example, since 2017, Kāpiti Coast District Council has been working with its community to support improvements to health service access through the advice provided by the Kāpiti Health Advisory Group (KHAG). This intention was reconfirmed by the Social Sustainability Subcommittee in September 2023, with the agreement of a refreshed terms of reference for this group.
- 9 On 2 November 2023 the Social Sustainability Subcommittee considered the substantive components of the Health strategy DoT including Council's role in health and the proposed areas of future focus. From that time, Council officers have had some initial engagement with key stakeholders including the Kāpiti Health Advisory Group (KHAG) and have now prepared a draft DoT document in preparation for consultation with the Kapiti Coast community.
- 10 The form and content of the draft Health Strategy DoT aligns to the suite of Directions of Travel already prepared for the refresh of the Economic Development Strategy, and the Climate Change and Resilience Strategy, and is consistent with the draft being prepared for the Environment Strategy.

HE KORERORERO | DISCUSSION

- 11 As part of Vision Kāpiti engagement with the community, we have been seeking people's views on what they are concerned about regarding health services, and what can be done to help our community lead healthy lives. To date this engagement has informed our draft DoT and will in turn shape our thinking on the Health Strategy.
- 12 The focus for the Kāpiti Coast District's Health Strategy predominantly targets opportunity to improve public health, rather than to improve the health system itself (eg effectiveness of secondary and tertiary hospital services), aims to bring a more cohesive view of the system as a whole, and ensure our community has access to the services that we need.
- 13 The draft Health Strategy DoT is attached in Appendix 1 for your consideration and approval to take to wider consultation, including targeted engagement with our partners in the health ecosystem. The purpose of the DoT is to engage our community on the substantive, direction setting elements for health in our community over the short to medium term in terms of:
 - 1.1. What we want to achieve, including five 'areas of focus'.
 - 1.2. How we will drive change, including how we will measure our success and progress.

What we want to achieve

- 14 This section sets the scene, providing an overview of the Kāpiti Coast District's health need, and includes a strong focus on:
 - 14.1 Achieving equitable population health outcomes.

Providing an overview of the public health needs and challenges for the Kāpiti Community, incorporating feedback that we have already received through the Vision Kāpiti process. This includes the gap between demand and supply of health services (including mental health), higher than average ageing population (and their growing needs); higher than average rate of disability; changing ethnicity profile with the proportion of Māori continuing to grow; and highlights additional support needs in areas of higher need in parts of our community.

14.2 Ensuring we have a locally coordinated and connected wider health ecosystem.

Acknowledging Council's role in the health ecosystem and the intention of the health strategy supporting good engagement and connection of all 'players' in the wider ecosystem. The boundaries for health services for the Kāpiti Coast District encompass two Te Whatu Ora | Health New Zealand districts; Capital, Coast and Hutt Valley, and Midcentral. This means that connection and coordination across our health ecosystem is critical to ensure our community has access to the services that our people need.

14.3 Introducing the *Te Whare Tapa Whā* model of health, which brings a Te Ao Māori view of health, and the holistic nature of wellbeing.

Acknowledging the measure of uncertainty of the health reforms with the newly formed Government (including direction for the locally focused work under the leadership of Iwi-Māori Partnership Boards), the health strategy will aim to lift the Te Ao Māori view of holistic services to our wider community and health ecosystem, including business and providers of services.

14.4 Introducing five focus areas for health in the Kāpiti Coast District.

Understanding of the Kāpiti community's health challenges and needs is set out, with five responding new areas of focus for the Kapiti Coast Districts health ecosystem proposed:

- Ensuring existing community-based activity improves public health and prevention
- Building and sharing our understanding of community health needs
- Increasing local primary and community health services
- Supporting better access to local after hours, urgent and emergency services
- Advocating for better access to hospital and other secondary health services.
- 15 Of importance, the recent and near-future health system changes heighten the value of the Council's efforts to establish a Health Strategy. The Health Strategy will be a local foundation document for our community and health ecosystem, and enable the Council and Council officers to better participate in and influence any future discussions around the establishment of localities and local health plans led by Te What Ora | Health New Zealand or any of the other organisations that form part of the wider health ecosystem.

How we drive collective change in these five areas of focus

- 16 This section of the DoT outlines desired outcomes, proposed activities, and how success will be measured, with five overall areas of focus proposed:
 - 16.1 Ensuring existing collective activity improves focus on public health and prevention services.

Wider public health activity and responsibilities are delivered, but with an improved focus on public health outcomes and prevention services. The desired outcome is that social determinants of health and public health issues are managed.

The key measure of success is that periodic social assessments of health and wellbeing matters are arranged and that the public health service measures show improvement over time.

16.2 Building our understanding of community health needs.

The health ecosystem develops and shares Kāpiti community health concerns and expectations. We are therefore, proposing that gaining a comprehensive understanding of community needs is a desired outcome.

The key measures of success are the number and quality of data partnerships and links in place, as well as having the periodic community health survey in place. Survey results will be measured, and we would like to see public health metrics show improvement over time.

16.3 Supporting more local primary and community health services.

Support for increasing the local provision and availability of primary and community health services. This would include plan and policy settings that encourage health businesses to expand and new start-ups.

The key measures of success would include increased access to primary health, and satisfaction with provision of local health care.

16.4 Supporting better local after-hours, urgent and emergency services

Improving availability to 24/7 urgent and emergency care services in the Kāpiti community. This would include working the wider health ecosystem to reduce any identified barriers to accessing those services.

The key measure of success is the increase in service availability and access to local after-hours and emergency services and the increase and ease-of-use improves in any local technology-based solutions.

16.5 Advocating for better access to hospital and other secondary health services.

Increasing advocation for accessible and integrated hospital services that meet future needs will seek to reduce barriers to accessing hospitals and other secondary services.

The key measure of success for this focus area is the community satisfaction with access to hospitals and other secondary health services. The goal is to increase this.

He take | Issues

17 There are no specific issues to raise.

Ngā kōwhiringa | Options

18 We are presenting three options here, as follows in Table 1.

Table 1: Options for the Approval of the Health Strategy Direction of Travel

| Kōwhiringa Options | Hua Benefits | Tūraru Risks |
|---------------------------------------|---------------------|-----------------------------|
| Option A (recommended) | This would enable | Detail the key risks of the |
| Approve the Health Strategy DoT for | consultation to be | option including possible |
| consultation use, with delegation of | undertaken in March | consequences and |
| final signoff to the Chief Executive. | 2024. | mitigation strategies. |
| Option B | The Committee can | Engagement is unable to |
| | see and approve any | occur as planned, but |

| Kōwhiringa Options | Hua Benefits | Tūraru Risks |
|--|--|---|
| Approve the Health Strategy DOT, with any changes to the final document to be brought back to the Committee. | final changes prior to community consultation. | completion by June 2024 may still be doable. |
| Option C Not approve the Health Strategy DOT at this time. | This decision would provide opportunity for the Committee to provide further feedback on what they would like to see in the DOT. | This would impact the ability for engagement to be undertaken with the community and the completion of the Health Strategy prior to June 2024. |

Mana whenua

19 On 31 October 2023 Te Whakameninga o Kāpiti agreed to provide advice on iwi involvement in the development of Council's strategies. While we are seeking to engage further with iwi throughout the public consultation period and development of the final strategy, following feedback at Council sessions to date, we have used the Te Whare Tapa Whā model to inform our DOT, as a widely recognised Te Ao Māori model of health and wellbeing.

Panonitanga Āhuarangi me te Taiao | Climate change and Environment

20 There are no specific climate change or environment matters to raise. Some actions in the DoT that Council already undertakes will also contribute to climate change and environment related action.

Ahumoni me ngā rawa | Financial and resourcing

21 There are no direct financial or resourcing implications from this decision that impact on existing baseline funding. Funding to support the initial implementation of actions, including support for coordination and facilitation of the health ecosystem, outlined in the Health Strategy can be met within budgets of the Long-Term Plan currently in progress.

Tūraru ā-Ture me te Whakahaere | Legal and Organisational Risk

22 There are no significant legal risks to highlight. The development of the Health Strategy is a risk treatment for organisational risk 6 on our top 10 risks (responding to central government reform). It supports us being able to respond to central government change in the health space.

Ngā pānga ki ngā kaupapa here | Policy impact

23 There are no direct policy impacts from this report. The direction of the final strategy will influence the shape for future related policies, for example, the consideration of a Local Alcohol Policy.

TE WHAKAWHITI KŌRERO ME TE TŪHONO | COMMUNICATIONS & ENGAGEMENT

- 24 Awareness engagement has already commenced with some key stakeholder groups including the Older Person's Council, Cycleways Walkways and Bridleways Advisory Group, Disability Advisory Group, Te Whatu Ora | Health New Zealand and the Ōtaki Health and Wellbeing Advisory Group. To date, these groups have been given a brief overview of the context for the Council's work on the strategies, including the proposal for a Health Strategy.
- 25 We have worked closely with the Kāpiti Health Advisory Group in the development of the Direction of Travel document. The Group is supportive of the direction indicated and pleased to see Council's efforts in this area.

Te mahere tūhono | Engagement planning

As part of the proposed consultation process with the community in March 2024, an engagement plan is being developed with Council's Communications Team. In effect consultation on the strategies will come under the broader consultation for Vision Kāpiti, but with additional stakeholder engagement activities to support this.

Whakatairanga | Publicity

27 Publicity associated with the public consultation process will be prepared with the Communications team and be in line with the publicity on Vision Kāpiti.

NGĀ ĀPITIHANGA | ATTACHMENTS

1. Draft Health Strategy Direction of Travel J

Health Strategy

Direction of Travel: consulting with our community

February 2024



Purpose

Kāpiti Coast District Council (the Council) is currently working with the community to develop a Vision 2060 for the Kāpiti Coast. Health is one of five key operating strategies¹ supporting this Vision and respond to the highest-ranking concerns facing the Kāpiti Coast community.

This document shares an approach to set the agenda for the Council's work in support of health and wellbeing in the Kāpiti Coast District. We want to hear from you, our community, whether we've got the right focus and right priorities, before we finalise our Health Strategy.

What we want to achieve

Equitable population health outcomes

We know our communities have particular health demands, and people are worried about the lack of availability and access to affordable health services. The Council wants to make sure health services develop in a way that is equitable, sustainable and affordable, supporting all of our communities.

It is essential that the community voice helps shape the design for a health strategy to create more partnerships, better integration and coordination, and more health service capacity and access.

We know a lot already about the Kāpiti district. Existing data and information tell us that we have some specific challenges in health.

Higher than average overall age profile²:

Our population has an older profile than the country's average with about 26 percent (24.2 percent male, 28.1 percent female) of our population over 65 years, compared to 15.3 percent nationally. There is ethnic variation in Kāpiti Coast – overall median age is 47.9 years; but the median age of Māori is only 26.9 years.

The percentage of elderly in the Kāpiti Coast is expected to grow to 30 percent in the next 25 years. In line with our older age profile, we have a high proportion of people 'not in the labour force', included those who are retired.

We have a lower proportion of people aged 20-35 years, as many have moved away to access higher education or employment opportunities. However, younger working families may now be moving in because of lifestyle and/or affordability factors, and because of the expressway improving travel times between Kāpiti Coast and Wellington.

There are two associated challenges:

- There is a need for health services to keep pace with growth and maturing life course.
- There is a need for health services caring for children and young people.

¹ Housing, Health, Climate Change and Resilience, Environment and Economic Development.

² All population statistics are sourced from Stats NZ from the 2018 Census.

Ethnic diversity is changing:

This finding is based on the 2018 Census. The Kāpiti community has a strongly European ethnicity at 87.7 percent of the population. However this percentage reduced from the previous Census while Asian, Māori, Pacific and Middle East/Africa/Latin American numbers increased. As our ethnic profile changes, there is likely to be an associated shift in the needs and aspirations for health.

Higher than average rates of disability:

This finding is based on the 2018 Census report on "activity limitations". These are persons who have 'a lot of difficulty' or 'cannot do at all' one or more of the following activities: walking, seeing, hearing, cognition, self-care, and communication. Kāpiti has 7.6 percent of its population reporting one or more activity limitations. Wellington region has 6.0 percent and New Zealand has 6.5 percent.

Ōtaki presents as needing support:

According to 2018 census information, 28 percent of Ōtaki residents are living in the highest levels of deprivation (deciles 9 &10). In comparison to the New Zealand population, Ōtaki has a much higher proportion of Māori residents at 24.9 percent compared to New Zealand with 14.1 percent.

A high proportion of those living in Ōtaki are also classified as living in the most socio-economically disadvantaged areas. There is some evidence to suggest that the health outcomes of those in Ōtaki are better than those seen in other populations with similar demographic profiles.

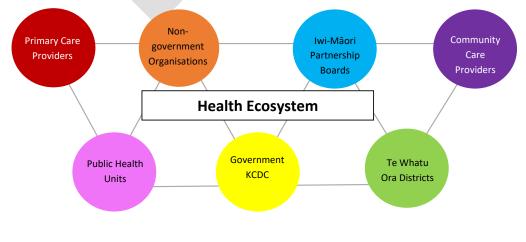
Increasing utilisation of mental health and addiction services:

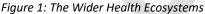
The 2021 General Social Survey conducted by Stats NZ indicated that 28 percent of the New Zealand population report poor mental wellbeing. The demographic groups with poorest wellbeing are disabled, LGBT+ and solo parents. The Kāpiti population would likely reflect these national indicators.

A locally coordinated and connected wider health ecosystem

Council is not a provider of more traditional primary, secondary, or tertiary health services but it does have a health-related role set through legislation. We have outlined these in Appendix 2.

As part of a wider health ecosystem, which includes a mix of local and national participants. Successful ecosystems are those that are well connected, with strong levels of collaboration and inclusion to allow innovation and creative amongst participants to thrive. Accordingly ensuring that our health ecosystem is coordinated and connected is a focus for our community. The following diagram outlines the wider ecosystem context for the Kāpiti Coast:





3

Holistic health management so that treatment focuses on the person, not the service

Ensuring people can access relevant health services is critical

The Council, and health sector, is working in a context of health system uncertainty and change. On 1 July 2022 District Health Boards were disestablished and two new entities – Te Whatu Ora | Health New Zealand and Te Aka Whai Ora | the Māori Health Authority – were established. The intention being to improve access to primary care, and give a greater focus to local planning, with the new health legislation (the Pae Ora Act 2022) specifying the development of 'localities' and 3-year locality plans, in consultation with local government, across the country.

The Council is now looking to see how the new government may stay with or alter this approach. Coalition agreements and proposed legislation support disestablishing the Māori Health Authority'. The full impacts of this on the work to identify localities and local health plans is not yet clear.

The Council considers that the current policy uncertainty from Wellington heighten the potential value of the Kāpiti Coast's efforts in establishing a Health Strategy. The Health Strategy will be a local foundation document enabling the Council to better influence any future discussions led by Te Whatu Ora | Health New Zealand around the establishment of localities and local health plans.

Health and wellbeing is about more than just services

The Te Whare Tapa Whā model of health is one model of the holistic nature of wellbeing. It shows different elements that are important for wellbeing and emphasises that they must all be supported for the wellbeing 'wharenui' to work well.



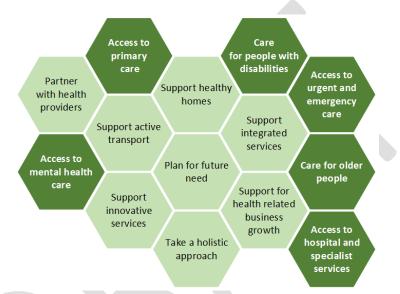
Figure 2: The Te Whare Tapa Wha holistic model of health

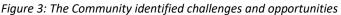
This model has informed the way we are thinking about our role in health, as it is a key factor in the wellbeing of our people. The Council is not a direct provider of primary, secondary or specialist health services, but has a role, as set by legislation, in improving the health and wellbeing of the community and in providing core public health services.

Addressing our most significant challenges and opportunities through our five health focus areas

What we have already heard from our community through the work of the Kāpiti Health Advisory Group, our elected members, and engagement programmes like Vision Kāpiti that is currently in progress, is in line with the findings above.

We have identified key challenges (dark green); and opportunities (light green) for businesses operating in the Kapiti Coast District which will inform the priority actions we progress in our Focus Areas. In summary these are:





We have identified five areas of focus which we believe will provide support for better health outcomes for people in our community.

These are:

- Ensuring existing Council activity improves its focus on public health and prevention services
- Building our understanding of community health needs
- Supporting more local primary and community health services
- Supporting better local after hours, urgent and emergency services
- Advocating for better access to hospital and other secondary health services

5

How we will drive change

Council is proposing that the District's Health Strategy will strengthen its existing public health responsibilities as well as new "areas of focus", including supporting the coordination and connectedness of the health ecosystem. The Health Strategy will expand on the following ideas that we have for the new activities to be done to achieve the outcomes and community impacts wanted. We want our community to experience an improvement in access, availability, and affordability of day-to-day health services to meet the growing health needs of people in our community.

For the new areas of focus" the following material gives an overview of the outcomes and impacts wanted and the activities proposed (table 1), and the success factors (table 3). Appendix 1 gives a simple overview of outcomes and activities that support the Council's mandated responsibilities.

| Та | Table 1: The outcome, impacts and proposed activity for each area of focus | | | |
|----|--|---|---|--|
| Ar | reas of Focus | Outcome | Impacts | Proposed Activity |
| 1) | Ensuring existing collective activity | Social determinants of health and public health | Preventable health issues are mitigated | Ensure continued activity across the public health and prevention services provided by the Council and others in the health ecosystem. |
| | improves focus on public health and prevention services | issues are managed | Community social needs informs health focus | Council works with the local sector to land an agreed picture of the broader social service needs of the Kāpiti community; a social impact assessment will be produced and include health in its remit. |
| 2) | Building our understanding of community health needs | Comprehensive understanding community needs | Kāpiti health ecosystem partners working effectively together | Council facilitates bringing the Kapiti Coast District health ecosystem together to bring a more comprehensive view to the table, partners/links with other agencies to build a health-related data set it has confidence in, and obtains community information such as around health status and service satisfaction. |
| | | | | A periodic Kāpiti community survey of health matters (either stand alone or coupled with existing surveys) is put in place. |

What are the outcomes and impacts we want to see and what will deliver this?

| Та | Table 1: The outcome, impacts and proposed activity for each area of focus | | | |
|----|---|---|---|---|
| Ar | eas of Focus | Outcome | Impacts | Proposed Activity |
| 3) | Supporting more local primary and community health services | Increased local provision and availability of services | More health businesses start up in Kāpiti (includes after hour and emergency services) | Targeted focus on increasing local health service provision and incentivising provision of such services in the Kapiti Coast District. This will include but it not limited to reviewing economic development settings to determine whether they attract or hinder future investment in health businesses; and how Council can address any issues or do more to attract services. For example, how we might support a single site integration of health services. |
| | | | Publicly provided service and resource from the increases in line with need | Advocate for services to be delivered locally, particularly for aged- care and disability support. |
| 4) | Supporting better local after-hours, urgent and emergency services | 24/7 urgent and emergency care services in our community | Barriers to accessing emergency and after- hours services are reduced | With connection to the the wider health ecosystem, work with Te Whatu Ora Health New Zealand, and after-hours and emergency service providers (both existing and new) on improving service provision. This could include local technology-based solutions. |
| 5) | Advocating for better access to hospital and other secondary health services | Accessible and integrated hospital services that meet future need | Barriers to accessing secondary services are reduced | With connection to the the wider health ecosystem, work with Te Whatu Ora Health New Zealand to evaluate access to hospitals and other secondary health services. This will focus on ensuring accessibility for older people, people with disabilities and young people. Attention will be given to transport options including ambulance services as well as technology-based solutions. |

More detailed actions will be set out in the implementation plan, following engagement with the wider Kapiti Coast District Health Ecosystem and community on this document. **Appendix B** provides the outcomes and activities in a diagram.

How will we know we are successful?

| Table 2: The measure of success for each area of focus | | | |
|---|--|--|--|
| Areas of Focus | Proposed measure of success | | |
| Ensuring existing collective activity improves focus on public health and prevention services | Periodic social assessment of health and wellbeing matters Existing public health related service levels | Arranged and shows improvement over time Maintained | |
| Building our understanding of community health needs | Number and quality of data partnerships and links Periodic Health survey is done | Increase Arranged and shows improvement over time | |
| 3) Supporting more local primary and community health services | Number of clinics, GPs and specialist health- care practitioners, and as a percentage of population Satisfaction with local provision of care for older and disabled people Satisfaction with mental health service access | IncreaseIncreaseIncrease | |
| Supporting better local after-hours, urgent and emergency services | Service coverage and access to local after- hours and emergency service Local technology-based solutions increase and ease-of-use improves | Improve Improve | |
| 5) Advocating for better access to hospital and other secondary health services | Satisfaction with access to hospitals and other secondary health services | Increase | |

Community feedback

The purpose of this Direction of Travel document is to gather feedback, from the community and stakeholders, on the proposed focus and approach for Council's proposed Health Strategy. The key questions we are seeking feedback are:

Questions for our community:

We will ask the community and stakeholders:

- Have we reflected the key issues faced by and aspirations of our community? Are we missing anything important?
- Are the areas of focus the right ones to resolve issues and meet our community's aspirations?
- > What actions or areas of focus do you think are the highest priority?

Next Steps

Following engagement, a Health Strategy will be prepared for endorsement by Council in mid-2024.

Once adopted, the Health Strategy will be part of a suite of 5 operating strategies for Council. These represent pathways and the direction of key activities to address local issues that will help us achieve our collective future aspirations.

They will be used to inform the Council's work into the future.

Appendix 1: Council public health-related activity

Our Legislation

| Legislation | Role |
|-------------------------------------|--|
| Local Government Act 2002 | Promoting social, economic, environmental, and cultural wellbeing. Allows for power to make |
| [Sections 145, 147(2)] | bylaws to protect, promote and maintain public health and safety. |
| Health Act 1956 | Provide sanitary works; waste disposal, water and sewage, public toilets and related facilities, |
| [Sections 23, 25, 81, 86] | pools, dressing sheds, cemeteries and crematoria, collection and disposal of refuse and offensive matter, regulation of housing (healthy), and disinfecting and cleansing premises where directed by the Director General of Health. |
| Pae Ora Act 2022 | Locality planning. |
| [Section 55] | |
| Water Services Act 2021 | Fulfil responsibilities as drinking water supplier to maintain drinking water to national standard and |
| [Section 21 and 22] | provide sanitary, wastewater and stormwater services to good quality. |
| Building Act 2004 | Provide for public safety in relation to building consents and inspections including in relation to |
| [Section 222] | dangerous or unsanitary buildings |
| Food Act 2014 | Regulatory activities relating to food safety |
| [Section 4, and 176] | |
| Burial and cremation Act 1964 | Burial services, and maintenance of cemeteries. |
| [Section 4] | |
| Litter Act 1979 | Litter control including grants, schemes, and campaigns. |
| [Sections 10 and 11] | |
| Hazardous Substances and New | Regulatory and enforcement activity relating to hazardous substances |
| Organisms Act 1996 | |
| Sale and Supply of Alcohol Act 2012 | Ability to make Local Alcohol Policy of the supply of alcohol and appointment of district licensing |
| | committees and licensing inspectors |
| [Sections 75, 99, 186, and 196] | |
| Gambling Act 2003 | Ability to make local policy on class 4 gambling venues |
| [Section 102] | |

10

Our Activity

| A of with a second | Astivity forward | Desired outcomes |
|-------------------------|---|---|
| Activity area | Activity focus | |
| Water and waste | Manage drinking water and waste, or affordable | Ensure continued protection from |
| management services and | waters transition | hazards |
| regulatory services | | |
| Open Spaces | Provide and maintain open spaces | Support active lives and connection |
| Connected communities | Support community connection activities especially | Support social interaction and |
| | for youth and older people | support |
| Environment/Climate and | Deliver against environmental protection | Support health of the |
| Resilience | activities | environment underpinning |
| | Deliver action to mitigate and adapt to climate | human health |
| | change | Limit impact of climate change |
| | Ensure resilience and recovery planning | on human health |
| | following emergency response situations | Support health and wellbeing |
| | | in recovery |
| Transport | Ensure transport enables access to health | Ensure people are able to |
| - | services | access the services they need |
| | Support active transport options | within and outside of the |
| | | district |
| | | Promote healthy lifestyles |
| ED/Income and | Take action to support fulfilling employment | Enable wellbeing and ability to |
| employment | options and good incomes in the district | make healthy choices |
| Growth | Support good growth and planning for future | Ensure provision of adequate |
| | health service need in the district | health service over time |
| Housing | Ensure availability of range of affordable | Ensure people have homes |
| | housing types | that provide healthy |
| | Ensure housing is good quality | environments and wellbeing |
| Healthy activities | Education and promotion of healthy lifestyles | Enable people to make choices |
| | with National Public health Service | that support healthy lives and |
| | Ensure local alcohol, gambling and | wellbeing |
| | smoke/vapefree policies and other bylaws | - |
| | support and promote healthy choices | |

Appendix 2: Areas of Focus – Diagram

| Focus Area 1: Service Continuity Preventable health issues Community needs inform | Focus Area 2: Understanding Kāpiti health ecosystem | Focus Area 3: Primary Services Health NZ allocated services and | Focus Area 4: After Hrs, Emergency Barriers to accessing after-hours | Focus Area 5: Access to hospital Barriers to accessing secondary |
|---|--|--|---|---|
| are mitigated health focus | works effectively | in Kāpiti resource increases | emergency services reduce | services reduce |
| Ensure continued activity across the public health and prevention services provided by the Council. Work needs to be done to gain a better picture of the broader service needs of the Kāpiti community. | A periodic Kāpiti community survey of health matters (either stand alone or coupled with existing surveys) needs to be put in place. Partner/link with other agencies to build a health related data set it has confidence in. Obtain community information such as around health status and service satisfaction. | Advocate for services to be delivered locally, particularly for aged-care and disability support. | Work with Te Whatu Ora Health New Zealand, and after- hours and emergency service providers (both existing and new) on service provision. This could include local technology-based solutions. | Work with Te Whatu Ora Health New Zealand to assess access to hospitals and other secondary health services. This will focus on ensuring accessibility for older people, people with disabilities and young people. Attention will be given to transport options including ambulance services as well as technology- based solutions. |

9 TE WHAKAŪ I NGĀ ĀMIKI | CONFIRMATION OF MINUTES

9.1 CONFIRMATION OF MINUTES

Author: Jessica Mackman, Senior Advisor, Democracy Services

Authoriser: Kris Pervan, Group Manager Strategy & Growth

TAUNAKITANGA | RECOMMENDATIONS

That the minutes of the Strategy, Operations and Finance Committee meeting of 7 December 2023 be accepted as a true and correct record.

NGĀ ĀPITIHANGA | ATTACHMENTS

1. Minutes of Strategy, Operations and Finance Committee Meeting 7 December 2023 J

STRATEGY, OPERATIONS AND FINANCE COMMITTEE MEETING7 DECEMBER 2023MINUTES

MINUTES OF THE KĀPITI COAST DISTRICT COUNCIL STRATEGY, OPERATIONS AND FINANCE COMMITTEE MEETING HELD IN THE COUNCIL CHAMBER, GROUND FLOOR, 175 RIMU ROAD, PARAPARAUMU ON THURSDAY, 7 DECEMBER 2023 AT 9.32AM

PRESENT: Cr Sophie Handford (Chair), Cr Liz Koh, Mayor Janet Holborow, Cr Glen Cooper, Cr Martin Halliday, Cr Rob Kofoed, Cr Jocelyn Prvanov, Cr Shelly Warwick, Cr Nigel Wilson, Cr Kathy Spiers
 Via Zoom: Ms Kim Tahiwi (Ngā Hapū o Ōtaki), Mr Huriwai Paki (Ngāti Toa Rangatira)

IN ATTENDANCE: Mr Simon Black, Mr Bede Laracy, Mr Glen Olsen, Mr Darren Edwards, Ms Hara Adams, Mr James Jefferson, Mr Sean Mallon, Mr Mike Mendonça, Ms Kris Pervan, Ms Steffi Haefeli, Ms Jessica Mackman, Mr Evan Dubisky, Mr Darryn Grant, Mr Mark Ward, Ms Gina Anderson-Lister, Mr Doug Simpson, Ms Sandra Daly

WHAKAPĀHA | Mr Michael Moore, Kim Tahiwi (early departure) APOLOGIES:

LEAVE OF Deputy Mayor Lawrence Kirby ABSENCE:

1 NAU MAI | WELCOME

The Chair, Cr Sophie Handford welcomed everyone to the final Strategy, Operations and Finance Committee meeting of the year.

2 KARAKIA A TE KAUNIHERA | COUNCIL BLESSING

Councillor Shelly Warwick read karakia a te Kaunihera.

3 WHAKAPĀHA | APOLOGIES

The Chair, Cr Sophie Handford, noted that Deputy Mayor Lawrence Kirby had a leave of absence, Kim Tahiwi would join the meeting online though may depart early and Waikanae Community Board representative Michael Moore was unable to attend.

APOLOGY

COMMITTEE RESOLUTION SOF2023/69

Moved: Cr Nigel Wilson Seconder: Mayor Janet Holborow

That the apologies received from Michael Moore for absence and Kim Tahiwi for early departure, be accepted.

CARRIED

STRATEGY, OPERATIONS AND FINANCE COMMITTEE MEETING 7 DECEMBER 2023 MINUTES

4 TE TAUĀKĪ O TE WHAITAKE KI NGĀ MEA O TE RĀRANGI TAKE | DECLARATIONS OF INTEREST RELATING TO ITEMS ON THE AGENDA

There were no declarations of interest made.

5 HE WĀ KŌRERO KI TE MAREA MŌ NGĀ MEA E HĀNGAI ANA KI TE RĀRANGI TAKE | PUBLIC SPEAKING TIME FOR ITEMS RELATING TO THE AGENDA

The Chair, Councillor Sophie Handford noted that Sandra Daly would speak during item 8.1 Kāpiti Health Advisory Group Terms of Reference.

6 NGĀ TAKE A NGĀ MEMA | MEMBERS' BUSINESS

(a) Leave of Absence

There were no requests for a leave of absence.

(b) Matters of an Urgent Nature

There were no matters of an urgent nature notified to the Chair prior to the commencement of the meeting.

7 HE KŌRERO HOU | UPDATES

There were no updates scheduled.

8 PŪRONGO | REPORTS

8.1 KĀPITI HEALTH ADVISORY GROUP TERMS OF REFERENCE

The Chair, Cr Sophie Handford acknowledged that the report had been to the Social Sustainability Subcommittee.

Kris Pervan, Group Manager Strategy & Growth and Sandra Daly, Chair of the Kāpiti Health Advisory Group introduced the report. Gina Anderson-Lister, Strategy Manager, Kris Pervan, Sandra Daly and Councillor Martin Halliday, as Chair of the Social Sustainability Subcommittee, answered questions from members and members discussed the matter.

Cr Jocelyn Prvanov joined the meeting at 9.37am.

Kim Tahiwi joined the meeting via Zoom at 9.39am.

COMMITTEE RESOLUTION SOF2023/70

Moved: Cr Martin Halliday Seconder: Cr Kathy Spiers

That, on the recommendation of the Social Sustainability Subcommittee, the Strategy, Operations and Finance Committee:

- A. **Approves** the attached Terms of Reference and, subject to agreed funding, the work plan for the Kāpiti Health Advisory Group for 2023/24
- B. **Delegates** responsibility for receiving updates against the Kāpiti Health Advisory Group's work plan to the Social Sustainability Subcommittee.
- C. **Invites** the Kāpiti Health Advisory Group drafting a proposal for funding to support agreed activities.

CARRIED

STRATEGY, OPERATIONS AND FINANCE COMMITTEE MEETING 7 DECE MINUTES 7

7 DECEMBER 2023

8.2 CLIMATE CHANGE AND RESILIENCE STRATEGY - DIRECTION OF TRAVEL

The Chair, Cr Sophie Handford noted that the report had been to the Climate and Environment Subcommittee.

Kris Pervan, Group Manager Strategy & Growth introduced the report. Gina Anderson-Lister, Strategy Manager and Doug Simpson, Principal Advisor – Strategy, provided further context and the Chair acknowledged the engagement which had informed the work.

Kris Pervan and Doug Simpson answered members' questions and members discussed the matter.

COMMITTEE RESOLUTION SOF2023/71

Moved: Cr Sophie Handford Seconder: Cr Jocelyn Prvanov

That the Strategy, Operations and Finance Committee:

- A. Approve an aspirational districtwide greenhouse gas emissions reduction target of net zero by 2040, following endorsement of this target by the Climate and Environment Subcommittee in November 2023.
- B. **Note** the content of draft Direction of Travel (DOT), in supporting the aspirational districtwide target, (above), and the broad support to date from the Climate Change and Resilience Community Think Tank (CRCTT) on this work.
- C. **Note** that this Committee will be asked to approve the Direction of Travel (DOT) for public engagement in February/March 2024, following the formal input from the full Climate Change and Resilience Community Think Tank (CRCTT), and that engagement timeframes will be confirmed at this time.
- <u>For:</u> Crs Sophie Handford, Liz Koh, Janet Holborow, Martin Halliday, Jocelyn Prvanov, Shelly Warwick, Nigel Wilson and Kim Tahiwi

Against: Crs Glen Cooper, Rob Kofoed and Kathy Spiers

CARRIED 8/3

The meeting adjourned at 10.30am and resumed at 10.43am.

Kim Tahiwi did not return to the meeting following the adjournment.

8.3 DIRECTION OF TRAVEL - KAPITI COAST ECONOMIC DEVELOPMENT STRATEGY REFRESH

Kris Pervan, Group Manager Strategy & Growth and Darryn Grant, Strategic Development Director introduced the report.

Kris Pervan, Darryn Grant and Mark Ward, Economic Development Manager answered members' questions and members discussed the matter.

Cr Glen Cooper left the meeting at 10.55am.

Huriwai Paki joined the meeting via Zoom at 10.55am.

Cr Glen Cooper returned to the meeting at 11.12am.

COMMITTEE RESOLUTION SOF2023/72

Moved: Cr Liz Koh

STRATEGY, OPERATIONS AND FINANCE COMMITTEE MEETING 7 MINUTES

7 DECEMBER 2023

Seconder: Cr Martin Halliday

That the Strategy, Operations and Finance Committee:

- A. **Note** work progressed by the Economic Development Kotahitanga Board with key stakeholders to refresh the direction for the Economic Development Strategy for 2024 to 2027.
- B. **Approve** the Direction of Travel document for the Kapiti Coast Economic Development Strategy Refresh and for engagement to be undertaken with the Community in February / March 2024 (Option A).
- C. **Delegate** to the Chief Executive and the Chair of the Economic Development Kotahitanga Board the authority to approve the final designed version of the Direction of Travel document, and any supporting materials for engagement on the Kapiti Coast Economic Development Strategy Refresh, subject to there being no material changes to the content of the document.

CARRIED

8.4 ELEVATE ŌTAKI AND NEXT STEPS

The Chair, Cr Sophie Handford foreshadowed that alternative recommendations to those in the report would be proposed by Cr Shelly Warwick.

Kris Pervan, Group Manager Strategy & Growth and Darryn Grant, Strategic Development Director introduced the report and answered members' questions. Members discussed the matter.

Cr Jocelyn Prvanov requested that the alternative recommendations proposed be decided part by part.

Cr Kathy Spiers left the meeting at 11.38am and returned at 11.43am.

Huriwai Paki left the meeting at 11.45am and did not return.

COMMITTEE RESOLUTION SOF2023/73

Moved: Cr Shelly Warwick Seconder: Cr Rob Kofoed

That the Strategy, Operations and Finance Committee **note** the discontinuation of Elevate Ōtaki following the opening of the Peka Peka to Ōtaki Expressway (PP2O) and eminent establishment of an Otaki and Te Horo Business Association.

CARRIED

COMMITTEE RESOLUTION SOF2023/74

Moved: Cr Shelly Warwick Seconder: Cr Rob Kofoed

That the Strategy, Operations and Finance Committee **acknowledge** and **thank** the current and previous Elevate Ōtaki Board Members for their contribution.

CARRIED

COMMITTEE RESOLUTION SOF2023/75

Moved: Cr Shelly Warwick

STRATEGY, OPERATIONS AND FINANCE COMMITTEE MEETING 7 DE MINUTES

7 DECEMBER 2023

Seconder: Cr Rob Kofoed

That the Strategy, Operations and Finance Committee **approve** that residual Waka Kotahi funds allocated to Elevate Ōtaki, of \$49,052, be transferred to the new Ōtaki and Te Horo Business Association for the purpose of delivering on the First Retail strategy (attached) and supporting local businesses.

<u>For:</u> Crs Sophie Handford, Liz Koh, Janet Holborow, Glen Cooper, Martin Halliday, Rob Kofoed, Shelly Warwick, Nigel Wilson and Kathy Spiers

Against: Cr Jocelyn Prvanov

CARRIED 9/1

COMMITTEE RESOLUTION SOF2023/76

Moved: Cr Shelly Warwick Seconder: Cr Rob Kofoed

That the Strategy, Operations and Finance Committee **request** that the balance of Elevate Ōtaki funding, of \$60,292, be held in contingency by the Economic Development team until further advice from the Chair of the Economic Development Kotahitanga Board is available regarding the optimal allocation of these funds given the priorities set by the refreshed Economic Development strategy and assessed need for the Ōtaki business community.

CARRIED

Cr Rob Kofoed left the meeting at 12.21pm.

9 TE WHAKAŪ I NGĀ ĀMIKI | CONFIRMATION OF MINUTES

9.1 CONFIRMATION OF MINUTES

COMMITTEE RESOLUTION SOF2023/77

Moved: Cr Nigel Wilson Seconder: Mayor Janet Holborow

That the minutes of the Strategy, Operations and Finance Committee meeting of 16 November 2023 be accepted as a true and correct record.

CARRIED

10 PURONGO KÃORE E WÂTEA KI TE MAREA | PUBLIC EXCLUDED REPORTS

RESOLUTION TO EXCLUDE THE PUBLIC

PUBLIC EXCLUDED RESOLUTION SOF2023/78

Moved: Cr Sophie Handford Seconder: Mayor Janet Holborow

That, pursuant to Section 48 of the Local Government Official Information and Meetings Act 1987, the public now be excluded from the meeting for the reasons given below, while the following matters are considered.

The general subject matter of each matter to be considered while the public is excluded, the reason for passing this resolution in relation to each matter, and the specific grounds under

STRATEGY, OPERATIONS AND FINANCE COMMITTEE MEETING MINUTES

7 DECEMBER 2023

| General subject of each natter to be considered | Reason for passing this resolution in relation to each matter | Ground(s) under section 48 for the passing of this resolution |
|--|---|---|
| 10.1 - Confirmation of Minutes | Section 7(2)(a) - the withholding of the information is necessary to protect the privacy of natural persons, including that of deceased natural persons Section 7(2)(b)(ii) - the withholding of the information is necessary to protect information where the making available of the information would be likely unreasonably to prejudice the commercial position of the person who supplied or who is the subject of the information | Section 48(1)(a)(i) - the public conduct of the relevant part of the proceedings of the meeting would be likely to result in the disclosure of informatior for which good reason for withholding would exist under section 6 or section 7 |

CARRIED

The Rautaki, Whakahaere, me te Ahumoni | Strategy, Operations and Finance Committee meeting went into public excluded session at 12.22pm.

COMMITTEE RESOLUTION SOF2023/80

Moved: Cr Sophie Handford Seconder: Cr Nigel Wilson

That the Rautaki, Whakahaere, me te Ahumoni | Strategy, Operations and Finance Committee moves out of a public excluded meeting.

CARRIED

The Rautaki, Whakahaere, me te Ahumoni | Strategy, Operations and Finance Committee came out of public excluded session at 12.24pm.

Cr Rob Kofoed returned to the meeting at 12.24pm.

11 **CLOSING KARAKIA**

The Chair, Cr Sophie Handford invited Mayor Janet Holborow to close the meeting with karakia.

The Rautaki, Whakahaere, me te Ahumoni | Strategy, Operations and Finance Committee meeting closed at 12.25pm.

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HEAMANA | CHAIRPERSON

10 CLOSING KARAKIA