



RĀRANGI TAKE AGENDA

Te Komiti Whāiti Toitūtanga Pāpori | Social Sustainability Subcommittee Meeting

I hereby give notice that a Meeting of the Te Komiti Whāiti Toitūtanga Pāpori | Social Sustainability Subcommittee will be held on:

Te Rā | Date: Thursday, 14 September 2023

Te Wā | Time: 1.30pm

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

**Janice McDougall
Group Manager People and Partnerships**

Kāpiti Coast District Council

Notice is hereby given that a meeting of the Te Komiti Whāiti Toitūtanga Pāpori | Social Sustainability Subcommittee will be held in the Council Chamber, Ground Floor, 175 Rimu Road, Paraparaumu, on Thursday 14 September 2023, 1.30pm.

Te Komiti Whāiti Toitūtanga Pāpori | Social Sustainability Subcommittee Members

Cr Martin Halliday	Chair
Cr Rob Kofoed	Deputy
Mayor Janet Holborow	Member
Deputy Mayor Lawrence Kirby	Member
Cr Kathy Spiers	Member
Cr Nigel Wilson	Member
Mr Huriwai Paki	Member
Ms Kim Tahiwī	Member
Ātiawa ki Whakarongotai (André Baker or Janine Huxford)	Member
Mr Guy Burns	Member
Mr Jonny Best	Member
Mrs Jackie Elliott	Member
Ms Sorchā Ruth	Member
Mr Michael Moore	Member

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1 NAU MAI | WELCOME**2 KARAKIA A TE KAUNIHERA | COUNCIL BLESSING**

I a mātou e whiriwhiri ana i ngā take kei mua i ō mātou aroaro, e pono ana mātou ka kaha tonu ki te whakapau mahara huapai mō ngā hapori e mahi nei mātou. Me kaha hoki mātou katoa kia whaihua, kia tōtika tā mātou mahi, ā, mā te māia, te tiro whakamua me te hihiri ka taea te arahi i roto i te kotahitanga me te aroha.

“As we deliberate on the issues before us, we trust that we will reflect positively on the communities we serve. Let us all seek to be effective and just, so that with courage, vision and energy, 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)

(c) Members' Items

7 PŪRONGO | REPORTS

7.1 BECOMING A LIVING WAGE EMPLOYER

Kaituhi | Author: **Morag Taimalietane, Principal Advisor**

Kaiwhakamana | Authoriser: **Janice McDougall, Group Manager People and Partnerships**

TE PŪTAKE | PURPOSE

- 1 This report provides information and recommendations to support the Council to become an accredited Living Wage employer.

HE WHAKARĀPOPOTO | EXECUTIVE SUMMARY

- 2 An executive summary is not required for this report.

TE TUKU HAEPAPA | DELEGATION

- 3 Te Komiti Whāiti Toitūtanga Pāpori (the Social Sustainability Subcommittee) has delegated authority to consider this matter under section C.1 of the 2022-2025 Triennium Governance Structure and Delegations.

TAUNAKITANGA | RECOMMENDATIONS

That Te Komiti Whāiti Toitūtanga Pāpori (the Social Sustainability Subcommittee):

- A. Note that all staff directly employed by the Council are currently paid no less than the Living Wage.
- B. Note that an annual Living Wage remuneration adjustment will occur to ensure all staff directly employed by the Council will continue to be paid no less than the Living Wage, with our remuneration policy to be updated to reflect this.
- C. Note the benefits of becoming an accredited Living Wage Employer.
- D. Note the anticipated cost of \$80,000 (including \$20,000 contingency) to meet Criteria B (indirectly paid workers employed by contractors) of Living Wage accreditation.
- E. Recommends to the Council that Living Wage accreditation is sought via Option A "Immediate Accreditation".

TŪĀPAPA | BACKGROUND

- 1 Over the past five years, Councils within the Wellington Region have been shifting to Living Wage accreditation, with Wellington City Council becoming an accredited Living Wage Employer in 2018, Hutt City Council in 2021, and Porirua City Council in 2022.
- 2 A Notice of Motion and Resolution was considered by the Kāpiti Coast District Council on 25 August 2022. The Council agreed to support the principle of becoming a Living Wage Employer and requested further information. In response to this, a report was presented to Council on 8 December 2022 where the Council agreed the following recommendations:

That the Council:

- A. notes that council officers do not currently have the necessary information to provide detailed cost implications to the Council, or to develop an implementation plan to enable the Council to become an accredited Living Wage Employer.
- B. notes the strategic alignments, benefits, and issues that may result from the Council becoming an accredited Living Wage Employer.

- C. notes that all staff directly employed by the Kāpiti Coast District Council are currently paid above the 2022 Living Wage.
- D. approves to progress with investigating becoming an accredited Living Wage Employer in accordance with Option A “Review all contracts through a staged approach”.

Option A was defined as:

Kōwhiringa Options	Hua Benefits	Tūraru Risks
<p><u>Option A (recommended)</u></p> <p><i>Review all contracts through a staged approach</i></p> <p>a. Focus on the contract types that are identified as a priority and required to become accredited.</p> <p>b. Widen the focus to services that and activities that the Council is required to provide but contract externally which sit outside the accreditation scope.</p> <p>c. Review all remaining contracts, working alongside relevant activity managers and financial analysts.</p>	<p>Council would take a leadership role for our community with regards to our expectations for being a fair and equitable employer.</p> <p>As one of the biggest employees and contractors within our District, Council would be realising the full benefits of requiring those we contract with to pay their employees the Living Wage.</p> <p>Phased approach allows for financial implications to be considered at each stage.</p>	<p>Financial implications of implementing are currently unknown.</p> <p>May impact on Councils ability to ‘support local’ as a shift to the Living Wage for a local small or start-up business could have a significant impact on their financial situation.</p> <p>May result in a significant change in contracted services, which could have a workload impact on Council staff.</p>

- 3 The criteria for a Living Wage Employer is that:
 - a. All directly employed workers are on the current Living Wage prior to accreditation. “Directly employed” means that workers employed by a business/organisation in an employer/employee relationship.
 - b. All indirectly paid workers employed by contractors, delivering a service to the business/organisation on a regular and on-going basis, are either on the current Living Wage or on milestones agreed as part of the License.
 - c. Employers have provided workers with access to a union.
 - d. Employees’ terms and conditions have not been reduced in order to meet the current Living Wage rate. An example of this may be the reduction of hours or other benefits in order to pay for the cost of delivering the Living Wage.
- 4 To become an accredited Living Wage Employer, the Council would need to meet the criteria listed above and make an application to the LWANZ Accreditation Advisory Board, with an annual license fee payable of \$1,500 on application approval (based on the size and type of our organisation). This approval process and license fee payment would need to be undertaken on an annual basis to retain accreditation.

Annual Increase to the Living Wage

- 5 At the time the Council agreed to the progress with Option A, the Living Wage in Aotearoa was \$23.65 an hour and all direct Council employees were paid above this amount.
- 6 This wage is calculated independently each year by the New Zealand Family Centre Social Policy Unit to reflect the hourly wage a worker needs to pay for the necessities of life and participate as an active citizen in the community, such as food, transportation, housing and childcare.

- 7 The updated Living Wage is announced annually on 1 April, with a full five yearly review taking place as part of the 2023 Living Wage calculation, increasing the Living Wage to \$26.00 an hour from 1 September 2023.
- 8 This is a 9.9% increase on the 2022 Living Wage and from 1 September 2023 the Council would need to increase remuneration for a number of roles to continue to meet the criteria that all directly employed workers are paid the Living Wage.
- 9 Therefore, the scope for the first stage of Option A was expanded to include understanding the implications of meeting the criteria that all directly employed workers are paid the Living Wage, as well as investigating contracts where indirectly paid workers are delivering a service to Council, on a regular and on-going basis.

HE KŌRERORERO | DISCUSSION

- 10 The introduction of the Living Wage has been recognised internationally as a means to bring benefits to employers, the community and to the workers who need it the most.
- 11 While it can be difficult to measure, benefits that have been identified by other organisations who introduced the Living Wage payment / have become an accredited Living Wage Employer include:
- Increased productivity
 - Reduced absenteeism
 - Reduced unexplained sickness
 - Increase in staff retention
 - Attracting higher quality staff
 - Preferred contractor through social procurement
 - Sense of authenticity and value within organisation

He take | Issues

Criteria A - Directly Employed Workers

- 12 As noted in paragraph 9, as part of Option A, work was undertaken to understand the implications of meeting the criteria that all directly employed workers are paid the 2023 Living Wage of \$26.00 an hour or above.
- 13 Through the recent 2023 remuneration review it has been confirmed that all directly employed workers at Council will be paid no less than the 2023 Living Wage of \$26.00 an hour. Therefore, the Council continues to meet Criteria A when considering accreditation for the Living Wage.
- 14 The cost to increase remuneration to meet the 2023 Living Wage was considered minor in the context of the overall personal budget.
- 15 Additionally, going forward an annual Living Wage remuneration adjustment will occur to ensure all staff directly employed by council will continue to be paid no less than the Living Wage, with our remuneration policy to be updated to reflect this.
- 16 This operational decision has been made to support the Council to attract and retain skilled and capable staff and ensures that our Council is operating in line with other Councils in the Wellington Region who are accredited as Living Wage Employers - Wellington City Council, the Hutt City Council and Porirua City Council.

Criteria B - Indirectly paid workers employed by contractors

- 17 Council officers have connected with Dunedin City Council to understand their journey to accreditation and lessons learnt, as well as working with the Living Wage Aotearoa New Zealand to ensure our development of steps to accreditation are fit for purpose and will

support our Council to make an informed decision about becoming an accredited Living Wage employer.

- 18 Key learnings from these conversations have supported officers to clarify how we can meet criteria B of accreditation – All indirectly paid workers employed by contractors, delivering a service to the business/organisation on a regular and on-going basis, are either on the current Living Wage or on milestones agreed as part of the License.
- 19 Officers have refined work around criteria B to focus on identifying contracts where service provision / industry traditionally includes low-wage positions such as cleaners, security, road maintenance, park maintenance, facilities management and waste management.
- 20 Where a contract was considered in scope, the relevant Activity Manager or Council Officer has connected with the supplier to understand the financial implications of the Council moving to the Living Wage.
- 21 The majority of suppliers with contracts in scope already pay their staff the Living Wage or above, with only five contracts, across four organisations, paying their staff below the 2023 Living Wage of \$26.00 per hour.
- 22 One of these organisations, which holds two contracts with the Council, confirmed they are hoping to increase all staff over the Living Wage in their 2023 remuneration review.
- 23 The remaining three organisations provide services for cleaning and security. All three are willing to increase the remuneration of their staff working on our contracts to the Living Wage, with a total financial cost across all three contracts of approximately \$60,000 per annum.
- 24 As part of the accreditation process, milestones can be agreed with the Living Wage Accreditation Board for when these contracts shift to meet Living Wage requirements.
- 25 An overview of the work undertaken by Council officers to refine and identify the relevant contracts is currently with the Living Wage Accreditation Board to ensure that the Board is comfortable with the process followed.
- 26 While the cost of approximately \$60,000 has been identified as the required increase to meet Criteria B (Indirectly paid workers employed by contractors), officers recommend that an additional \$20,000 is agreed as contingency should the Council agree to progress with accreditation. This will allow flexibility should any additional contracts be identified through the accreditation process.

Ngā kōwhiringa | Options

Potential approaches to becoming an Accredited Living Wage Employer

- 27 The financial implications of Council becoming an Accredited Living Wage Employer total approximately \$80,000, which includes a contingency of \$20,000.
- 28 The Council could choose to progress with accreditation in a number of ways, as detailed in the table 1 below.
- 29 Council officers recommend that we progress with Option A - Immediate Accreditation.

Table 1: Approaches to Accreditation

Kōwhiringa Options	Hua Benefits	Tūraru Risks
Option A - Immediate accreditation (Recommended) Directly Employed Workers are paid the Living Wage. Indirectly paid workers via contracts moved to Living Wage as soon as possible.	Builds on momentum and the current understanding of financial implications. Ensures benefits of introducing the Living Wage are maximised immediately.	Cost unbudgeted for shifting indirectly paid workers via contracts to Living Wage. 2024 Living Wage will be announced on 1 April 2024.

		Future increases would need to be calculated into budget.
Kōwhiringa Options	Hua Benefits	Tūraru Risks
Option B - Accreditation through LTP Directly employed workers are paid the Living Wage. Introduce Living Wage through the LTP (with option for consultation)	Allows for community to be part of conversation.	2024 Living Wage will be announced on 1 April 2024. Expected increase would need to be calculated into budget. Process with contracts would need to be repeated.
Option C - Status quo Directly employed workers are paid the Living Wage. Do not proceed with ensuring indirectly paid workers via contracts are paid the Living Wage. No accreditation sought.	Removes complexity of annual review of contracts in line with Living Wage increase to retain accreditation.	No benefits for those who we contract on a regular and ongoing basis. No wider benefits for the community.

Mana whenua

- 30 Māori experience generally poorer outcomes in our District, including higher unemployment rates and a higher likelihood of working in low skilled or semi-skilled jobs. Māori are also more likely to have lower levels of qualification attainment, which narrows opportunities, choices and the potential to earn more to support their whānau.
- 31 By becoming a Living Wage Employer, the Council has the ability to make a positive impact for Māori within Kāpiti, and Council officers would want to work with our Iwi Partners to understand and support their aspirations around this kaupapa.
- 32 While the capacity agreements that we have in place with our Iwi Mana Whenua partners would not be considered within scope of stage one, there may be implications as we move through to the future stages when looking at a wider scope of contacts.
- 33 Support about the Living Wage and how we could explore the opportunities and potential implications of the introduction of the Living Wage will be provided as discussions regarding capacity funding agreements for 2023/24 take place with each of our Iwi Mana Whenua partners.

Panonitanga Āhuarangi me te Taiao | Climate change and Environment

- 34 This decision will not impact on Council's ability to respond to the impacts of climate change.

Ahumoni me ngā rawa | Financial and resourcing

- 35 Should the Council decide to proceed with becoming an accredited Living Wage Employer, the following financial implications have been identified:
- 34.1 Annual license fee payable of \$1,500 on application approval.
- 34.2 Cost of approximately \$80,000 (including \$20,000 contingency) to meet Criteria B (Indirectly paid workers employed by contractors).
- 36 The financial implication of meeting Criteria A (directly employed workers) has been absorbed by the organisation as part of the 2023 remuneration review and is considered minor in the context of the overall personal budget.

- 37 High level assumptions for ongoing annual increases will be developed, to enable future financial implications to be included in forward planning for budgets, including a more significant increase in line with the full review of the Living Wage which happens five-yearly.

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

- 38 As an accredited Living Wage Employer, the Council would be required to increase remuneration in line with the annual Living Wage increases, to continue to meet the criteria for accreditation.
- 39 While the Council currently meets Criteria A (directly employed workers) the future costs of maintaining this, and meeting market movements are unknown, and could potentially become unsustainable.
- 40 As noted in paragraph 36, high level assumptions for ongoing annual increases will be developed to mitigate this risk by enabling future financial implications to be included in forward planning for budgets, including a more significant increase in line with the full review of the Living Wage which happens five-yearly.

Ngā pānga ki ngā kaupapa here | Policy impact

- 41 The Council's Remuneration Policy will be updated to reflect the organisational decision to pay directly employed workers of the Council no less than the Living Wage.
- 42 If the Council agrees to progress with becoming an accredited Living Wage Employer, the Council's Procurement Policy will be updated to reflect the requirement for organisations who provide services to Council on a regular and ongoing basis to pay those working on the contract no less than the Living Wage.

TE WHAKAWHITI KŌRERO ME TE TŪHONO | COMMUNICATIONS & ENGAGEMENT

Te mahere tūhono | Engagement planning

- 43 An engagement plan is not needed to implement this decision. Council will communicate this decision through its established communications channels.

Whakatairanga | Publicity

- 44 Council will use its established communications channels to inform the community of this decision and to explain the rationale for why it made this decision

NGĀ ĀPITI HANGA | ATTACHMENTS

Nil

7.2 KĀPITI HEALTH ADVISORY GROUP TERMS OF REFERENCE

Kaituhi | Author: **Gina Anderson-Lister, Principal Advisor**

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

TE PŪTAKE | PURPOSE

- 1 This report seeks the Social Sustainability Committee's endorsement of the Kāpiti Health Advisory Group's (KHAG) Terms of Reference and work plan for 2023/24. It also provides background on the establishment of the KHAG, its current role, and advice on the acceptance of the draft terms of reference.

HE WHAKARĀPOPOTO | EXECUTIVE SUMMARY

- 2 An executive summary is not required for this report.

TE TUKU HAE PAPA | DELEGATION

- 3 The Social Sustainability Subcommittee may consider this matter under section C.1. of the Governance Structure and delegations 2022-2025.

TAUNAKITANGA | RECOMMENDATIONS

That the Social Sustainability Subcommittee:

- A. **Endorses** the Terms of Reference and, subject to agreed funding, the work plan for the Kāpiti Health Advisory Committee for 2023/24
- B. **Recommends** that the Strategy, Operations and Finance Committee approves the Terms of Reference and, subject to agreed funding, the work plan for the Kāpiti Health Advisory Committee for 2023/24.
- C. **Recommends** that Chair of the Strategy, Operations and Finance Committee, delegates responsibility for receiving updates against, the Kāpiti Health Advisory Committee's, work plan to the Social Sustainability Subcommittee.
- D. **Endorses** the Kāpiti Health Advisory Committee drafting a proposal for funding to support the agreed activities.

TŪĀPAPA | BACKGROUND

- 4 Kāpiti Health Advisory Group's (KHAG) was originally established as the Kāpiti Health Advocacy Group (Group) in 2017 with the scope of identifying and advocating for health service improvements in the Kāpiti community. This included the development of a subgroup that arranged a petition to government seeking a hospital for the area.
- 5 Through the progress of this petition, a stronger relationship was established with Capital & Coast District Health Board to engage on health needs for Kāpiti. Some good initiatives were established, including the ambulance diversion service which allowed people calling an ambulance to be triaged by ambulance staff and taken to a primary care clinic where appropriate, instead of to Wellington Hospital.
- 6 By the end of 2018, the Group and Council recognised that the community expected a greater emphasis on action. In July 2019, the Group evolved into a smaller Kāpiti Health Advisory Group, providing advice to the Mayor.
- 7 Since that time there has been significant structural changes across the health system, and a new Council triennium and Mayor in 2022. The health system changes include improving access to primary care, and a greater focus on local planning, with the new health legislation, the Pae Ora Act 2022, specifying the development of 'localities' and 3-year locality plans across the country. These localities and plans will be the responsibility of Te Whatu Ora –

Health New Zealand, Te Aka Whai Ora – the Māori Health Authority and health related Iwi-Māori Partnership Boards. The legislation specifies that these entities must consult with local authorities in setting a locality boundary, and in setting the plans.

- 8 In addition, the Future for Local Government final report emphasises the ongoing importance of local authorities in working with and understanding the needs of their communities.
- 9 In March 2023, the Mayor and Chair of the Social Sustainability Committee agreed that KHAG should be refreshed to enable free and frank, independent advice to Council.
- 10 In May 2023, the Council released the ‘top-10’ Councillor priorities. Health is one of the Councillor Priorities, and the development of a health strategy is a key action for delivery in 2023/24. The Council has started development of a Health Strategy, which will outline our population’s health needs, aspirations, and actions for the Council to support the health and wellbeing of the people in our district. This includes the availability, affordability, and accessibility of health services in our district, as well as wider action to support overall health and wellbeing.
- 11 As part of the development of the strategy, Council will outline the ecosystem, or network of existing players and providers, that contribute to achieving positive health outcomes for the people in our district, such as KHAG and others. These relationships are key to the success of the strategy.

HE KŌRERORERO | DISCUSSION

- 12 The proposed Terms of Reference for KHAG is attached for the Committee’s consideration, along with the proposed programme of work (subject to agreeing funding).
- 13 Acknowledging the context of change and the health strategy development, the focus of the Terms of Reference and work plan for this year highlight the provision of advice to support the development of the Health Strategy and to support the Council’s role in engaging with the community on health matters; with health providers in our district; and with other key stakeholders.
- 14 Some aspects of the work plan are still to be confirmed. These will be updated as work progresses, funding levels are set, and with the agreement of the Social Sustainability Subcommittee. Council officers will facilitate and support the work of the KHAG and ensure it feeds into the wider work that Council is doing. This will include KHAG supporting the development of the Health Strategy which will inform KHAG’s work and priorities over time.

He take | Issues

- 15 The KHAG Chair has advised that a budget proposal will be drafted once the work programme is confirmed. It is likely that funding requests will be made to support engagement activity and visibility of KHAG in the community. Depending on funding level agreed, this may limit what can be achieved against the proposed work plan.

Ngā kōwhiringa | Options

- 16 To resolve the issue noted above relating to funding, it is recommended that the Social Sustainability Subcommittee either:
 - a) Endorses KHAG drafting a proposal for funding to support the agreed activities, OR
 - b) Does not endorse KHAG drafting a proposal for funding to support agreed activities, following which council officers will discuss implications and alternative options further with KHAG.

Mana whenua

- 17 KHAG’s Terms of Reference acknowledges that KHAG will seek to build a relationship with Kāpiti iwi and mana whenua. However, this will be subject to iwi capacity and preference. It

may be that a specific relationship between KHAG and iwi is not a priority at this time, and engagement key work will continue to be via the Council.

- 18 KHAG has considered whether it is necessary to have a member to represent iwi. It is acknowledged that the group cannot represent all interests through direct membership. It is also acknowledged that the Group will be one advisor to Council, and that Council will continue to have responsibility for integrating the views of all its stakeholders into its decisions. Therefore, at this time, it is considered appropriate to continue with the existing membership and not seek a specific iwi representative.
- 19 Should additional members be considered necessary to represent specific interests at a future date, the Terms of Reference will be updated by joint agreement between KHAG and the Social Sustainability Subcommittee.

Panonitanga Āhuarangi me te Taiao | Climate change and Environment

- 20 This matter does not contain outcomes and actions specifically related to sustainability or climate change goals. However, there will be opportunities to support the Council's climate change and sustainability goals in the development of the Health Strategy.

Ahumoni me ngā rawa | Financial and resourcing

- 21 KHAG's Terms of Reference note that KHAG may submit proposal for funding based on the requirements of the annual work programme. The KHAG Chair advises that, should the Subcommittee agree to consider a funding proposal, KHAG will draft this for consideration once the work programme is formally agreed.

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

- 22 There are no legal considerations for the purposes of this report.

Ngā pānga ki ngā kaupapa here | Policy impact

- 23 There is no direct policy impact from this paper or the terms of reference. The work KHAG progresses will inform relevant policy development, including the Health Strategy.

TE WHAKAWHITI KŌRERO ME TE TŪHONO | COMMUNICATIONS & ENGAGEMENT

- 24 Engagement that KHAG is planning to undertake, in order to carry out its role, is outlined in the work plan. Where opportunities arise over the year for further engagement that may be significantly different from the activity outlined the Group will make Council aware.
- 25 From time to time, the group will update its stakeholders on the work it is doing, significant updates will follow updates to the Subcommittee.

Te mahere tūhono | Engagement planning

- 26 This section is not applicable as no engagement is required.

Whakatairanga | Publicity

- 27 KHAG will advise its stakeholders about the new arrangement it has as an advisory group to the Social Sustainability Subcommittee through its existing newsletter. No further publicity is planned.

NGĀ ĀPITI HANGA | ATTACHMENTS

1. Draft Terms of Reference [↓](#)
2. Draft Work Plan 2023/24 [↓](#)

KĀPITI HEALTH ADVISORY GROUP**TERMS OF REFERENCE****Purpose**

1. These Terms of Reference (TOR) set out the role, responsibilities and requirements of the Kāpiti Health Advisory Group (KHAG). They will be reviewed periodically to ensure they represent the changing requirements of the Kāpiti Coast District Council (the Council) and the wider stakeholders of the Kāpiti District. A review will occur at the publication of the Council's Health Strategy.
2. For the purposes of defining the KHAG scope of work, 'health' includes consideration of related matters that contribute to the direction of the Health Strategy.

Background

3. Health is one of ten Council priorities set for the 2023/24 – 2026/27 period, and a key area of focus in the Annual Plan 2023/24. The key purpose of KHAG is to provide experience and evidence-based advice to the Council primarily through its Social Sustainability Subcommittee (the Subcommittee) to support and pro-actively contribute to its health-related work, including work relating to disability services. This includes a key focus on supporting the development of Council's Health Strategy and Vision 2060 work for Health.

Scope

4. The scope of the KHAG work is to:
 - 4.1. Understand and provide a joined-up view and advice to Council on:
 - the health services provided within the Kāpiti District.
 - who the providers of those services are.
 - the health requirements of the Kāpiti community and their health services experiences.
 - health needs and service trends and projections in the short, medium and long terms.
 - 4.2. Analyse the responses of health service organisations to Kāpiti community requirements and determine how and where needs are being met and where gaps exist now and in the future.
 - 4.3. Determine and then present to the Council an assessment of the Kāpiti community health status and opportunities for gaps to be addressed.
 - 4.4. Research the effectiveness of Council supported health initiatives and report back on any required changes.
 - 4.5. Provide input into the Health Strategy being developed by Council.
 - 4.6. Provide advice on other health related matters as agreed with the Subcommittee.
5. KHAG work will not include :
 - 5.1. provision of health and wellbeing services.
 - 5.2. implementation of changes to health services.
 - 5.3. advice on matters that are not health or health related.
6. KHAG will not bypass the Council when collaborating with stakeholders.
7. KHAG will have regard to the role of Council and its elected members in engagement with the community and other organisations and authorities. It will seek Council's agreement and desire

KĀPITI HEALTH ADVISORY GROUP**TERMS OF REFERENCE**

to be involved in proactive engagement undertaken in relation to Council business. This may be via an agreed work plan, or on a case-by-case basis.

8. KHAG will work within the parameters outlined in legislation set for Te Whatu Ora and Te Aka Whai Ora regarding the establishment of locality boundaries and plans, and for health work more generally.
9. KHAG advice will be based on:
 - 9.1. the wellbeing roles and responsibilities of the Local Government Act 2002.
 - 9.2. the Pae Ora Act 2022, including but not confined to engagement over localities and locality planning.
 - 9.3. engagement with Te Whatu Ora (Health New Zealand) and Te Aka Whai Ora (Māori Health Authority) to promote and advance the design, establishment and funding of healthcare and wellbeing services for Kāpiti. Such engagement to be noted in the Annual Work Programme or discussed with the Council as appropriate.
 - 9.4. engagement with health organisations and other non-government organisations (including providers) on healthcare and wellbeing issues and on opportunities to improve access to healthcare and wellbeing services for the Kāpiti population as outlined in the Annual Work Programme and as required to maintain good relations with groups.
 - 9.5. interaction with the Kāpiti population and Kāpiti organisations to determine their assessments of health status and needs as indicated in the Annual Work Programme.
 - 9.6. information on the impact and outcomes of the Council's strategies, plans and initiatives for the potential improvement of Kāpiti health outcomes.
 - 9.7. assessment of the resource requirements, including funding, workforce and facilities, to support health initiatives.

Plan and Deliverables

10. KHAG will develop a work plan, including engagements and deliverables, each year for review and approval by the Subcommittee.
11. The KHAG Chair will provide a brief written report on progress against plan at the six weekly meetings of the Subcommittee as appropriate to keep the Subcommittee up to date with progress against the work plan and representatives of KHAG will report in person to the Subcommittee at least quarterly.

Funding and administrative support

12. KHAG may submit to Council for approval an annual proposal for specific funding to enable KHAG to undertake its agreed work. This will be discussed at the time of consideration of the work plan for the upcoming year.
13. Kāpiti Coast District Council will provide administrative support to the running of KHAG meetings.
14. Council staff will be available to support the functioning of KHAG, including providing information regarding work on the Health Strategy and Vision 2060 Health work for KHAG to

KĀPITI HEALTH ADVISORY GROUP

TERMS OF REFERENCE

advise on. The Group Manager, Strategy & Growth, or a delegate, will attend monthly meetings to support the work.

Membership

15. KHAG will comprise :

- Up to 12 members from the Kāpiti Community (one of whom will be Chair and one Deputy Chair)
- 5 of these members plus the Chair and Deputy Chair will form the Executive Committee
- The Chair of the Subcommittee will maintain a relationship with KHAG and may be supported by other representatives with an interest in the work of KHAG (to be agreed between the Chair of the Subcommittee and the Chair of KHAG).
- Working groups comprising other individuals and representatives of Kāpiti organisations will be set up to work on specific issues, each led by a member of the Executive Committee. Working Groups have no membership limitation.
- Membership is voluntary and positions are not remunerated, consistent with other advisory groups to Council.
- The Chair and Deputy Chair will be appointed by the Chair of the Subcommittee.
- Membership will be for three years aligned with the local authority triennium. Replacements for people who leave will be recommended to the Subcommittee by the Chair of KHAG.
- Members may also be designated as a Finance Committee for KHAG to assist in the management of any funds received to support its work.
- Initial membership under these ToR will comprise members currently actively involved in the work of KHAG as outlined below :

16. Proposed Membership of the Committee is as follows:

Chair	Sandra Daly*
Deputy Chair	Jackie Cumming*
Graham Scott*	
Don Hunn* (Finance Committee)	
Sue Emirali*	
Gareth Jones* (On Leave until 30 October 2023)	
Ian Powell*	
Clare Hyne	
Liz Annandale	
Iride McCloy (Finance Committee)	
Helen Anderson (Finance Committee)	
Roger Booth	
David Robinson	
<i>Member of Executive Committee*</i>	

KĀPITI HEALTH ADVISORY GROUP**TERMS OF REFERENCE****Governance**

17. KHAG reports to the Social Sustainability Subcommittee of the Council. It is expected that an update will be provided to the Subcommittee at least quarterly, noting progress against each work plan item with a brief written supplementary report to be provided to other six weekly Subcommittee meetings as required to keep the Subcommittee updated on progress.
18. KHAG may consider other relevant matters providing they are consistent with these terms of reference and not inconsistent with positions of the Subcommittee. It will ensure Council is aware of this activity and discuss with the Subcommittee as required.

Operating Model

19. KHAG will meet monthly and operate a monthly planning and implementation cycle.
20. Working groups will also meet separately to progress their parts of the work plan. Each Working Group will report progress on their work to the KHAG monthly meeting through its lead.
21. KHAG will seek to establish sound relationships with Kāpiti iwi and mana whenua as may be required above the Council's existing relationship and responsibility to engage with iwi and mana whenua.



Work Programme for 2023

This Work Programme outlines the proposed programme of work for the Kāpiti Health Advisory Group (KHAG) for the 2023/24 Year. It includes support to Kapiti Coast District Council (the Council) for its work to develop a Health Strategy and will be adjusted in consultation with the Social Sustainability Sub Committee (SSSC) of the Council.

A separate budget will be provided to SSSC for approval to cover needs for the period.

Working Group	Leader	Working Party	Proposed Activity for 2023/24 Year
Access to Services	Sandra (interim)	Ian	Identify best option for development of health facility in Kāpiti
		Don	Deliverable : Compelling case and proposal for development of facility
		Jackie	Engagement : Engage with Te Whatu Ora, Te Aka Whai Ora and community and other groups
		Sue	
		Gareth (on break)	More services delivered at Kāpiti Health Centre
			Deliverable : Increase in range and volume of outpatient, mental health and other services at Kāpiti Health Centre

			Engagement : Work with identified staff from the Centre and with Te Whatu Ora staff to progress
			Telehealth Deliverable : Adoption of more Telehealth services throughout Kāpiti including via Kāpiti Health Centre, Medical Centres and pharmacies. Engagement:
			Improved Urgent Care in Kāpiti Deliverables : Extension to Ambulance Diversion Services Better access to after hours care Explore ways in which extended hours for urgent care can be delivered in Kāpiti Need for dedicated 24 hour A&E in Kāpiti to be included as part of the compelling case for the development of the Kāpiti Health Centre Engagement :
Mental Health	Graham	Clare	Identify additional and extra services required in Kāpiti Identify how these can be achieved Deliverables

			Engagement
Disabled People	Sue		[On hold as other groups in Kapiti more able to provide input]
Public Health	Don		Identify how Public Health delivery in Kāpiti can be improved
Young People Including First 1000 days, KYS, Schools	Liz	Sandra	Identify how the health of children and young people in Kāpiti can be improved, including dental care, mental health care and services for schools Deliverables Engagement
Care of Older People			[On hold as other groups in Kāpiti currently providing good support to the Council]
Communication including engagement	Sandra		Ensuring Kāpiti residents are aware of the work of KCDC and KHAG in improving health services in Kāpiti Deliverables : Communication plan for next twelve months Support for KCDC Engagement on Health Strategy Engagement
Needs Assessment	Jackie		Identifying the health needs of Kāpiti based on existing evidence Deliverables : Collation of existing data and information Accessing other sources of data

			Engagement :
Transport Sub Committee	Sandra	Kim Nye (ASK Shuttle) Diana Ponsford (Kapiti Carers)	Identifying ways to ensure Kapiti Residents are aware of ways to access transport to health services and producing material to assist Deliverables: Brochures and posters to replace existing collateral Engagement:
Locality Development			

8 HE KŌRERO HOU | UPDATES**8.1 HEALTH STRATEGY PLANNING****AUTHOR: GINA ANDERSON-LISTER, PRINCIPAL ADVISOR****AUTHORISER: KRIS PERVAN, GROUP MANAGER STRATEGY & GROWTH****TE PŪTAKE | PURPOSE**

- 1 Talking through the process and scope of the Health Strategy

NGĀ ĀPITI HANGA | ATTACHMENTS

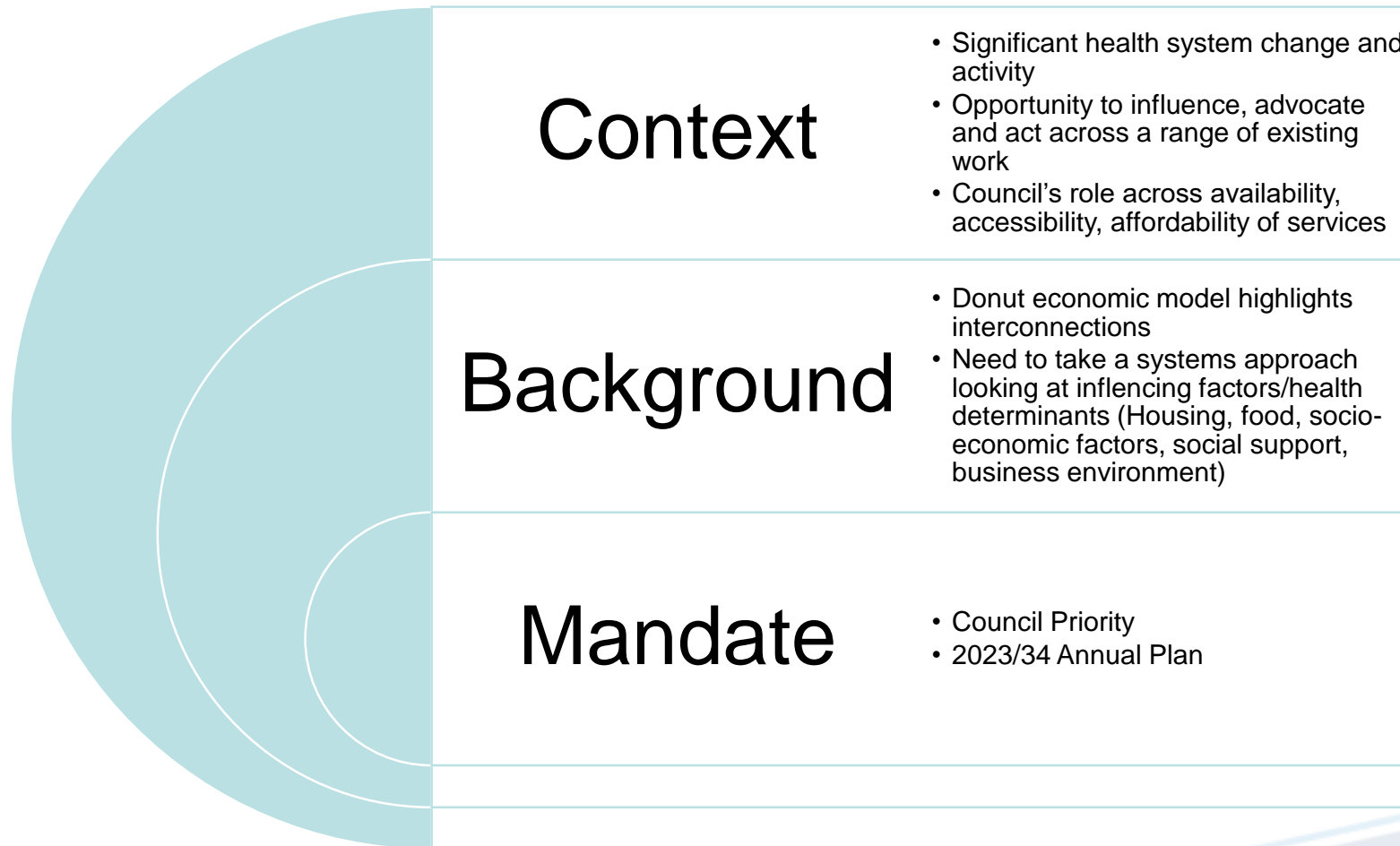
1. Presentation - Health Strategy Overview [!\[\]\(2cbb40928a34ecf5ce700a63c52aa374_img.jpg\)](#)

Health Strategy

Draft approach and framing for
discussion September 2023



Why are we doing this work?



How will we do it?

Key Milestones	Delivery Date
High level narrative for LTP 24	Sept 2023
Incorporate feedback from Vision Lab and produce outline of focus areas	Sept 2023
Socialise focus areas with stakeholders	Sept/Oct 2023
SSSC interactive briefing on roles, areas of focus, insights from stakeholders	Oct/Nov 2023
Council on estimated activity and costs	Nov 2023
SSSC substance of strategy for community engagement and pathways of focus (for rec to SOF)	Nov 2023
Te Whakameninga o Kāpiti on engagement and focus	Dec 2023
SOF on engagement and focus	Feb 2024
Drafting strategy	Nov 2023 -Mar 2024
Engagement Hub Focus with Community	Mar/Apr 2024
Changes/Finalisation	Apr/May 2024
Council/SOF considers for adoption	Jun/Jul 2024
Strategy in place	Jul 2024

We will incorporate information in the LTP for 24

We will hear the feedback from the Vision Kāpiti work

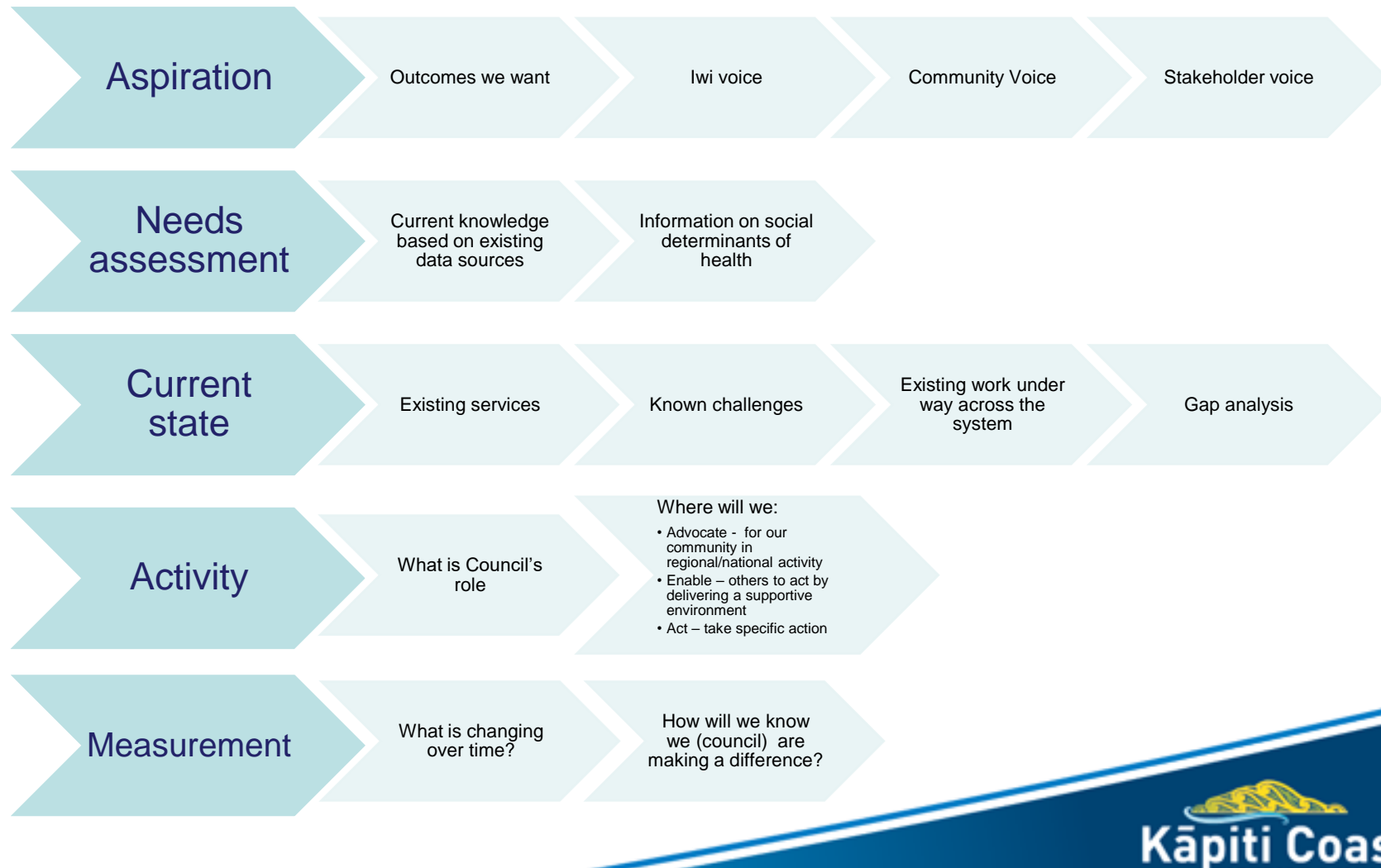
We will conduct key stakeholder consultations and through Vision Kāpiti

We will use our engagements to support prioritisation of actions

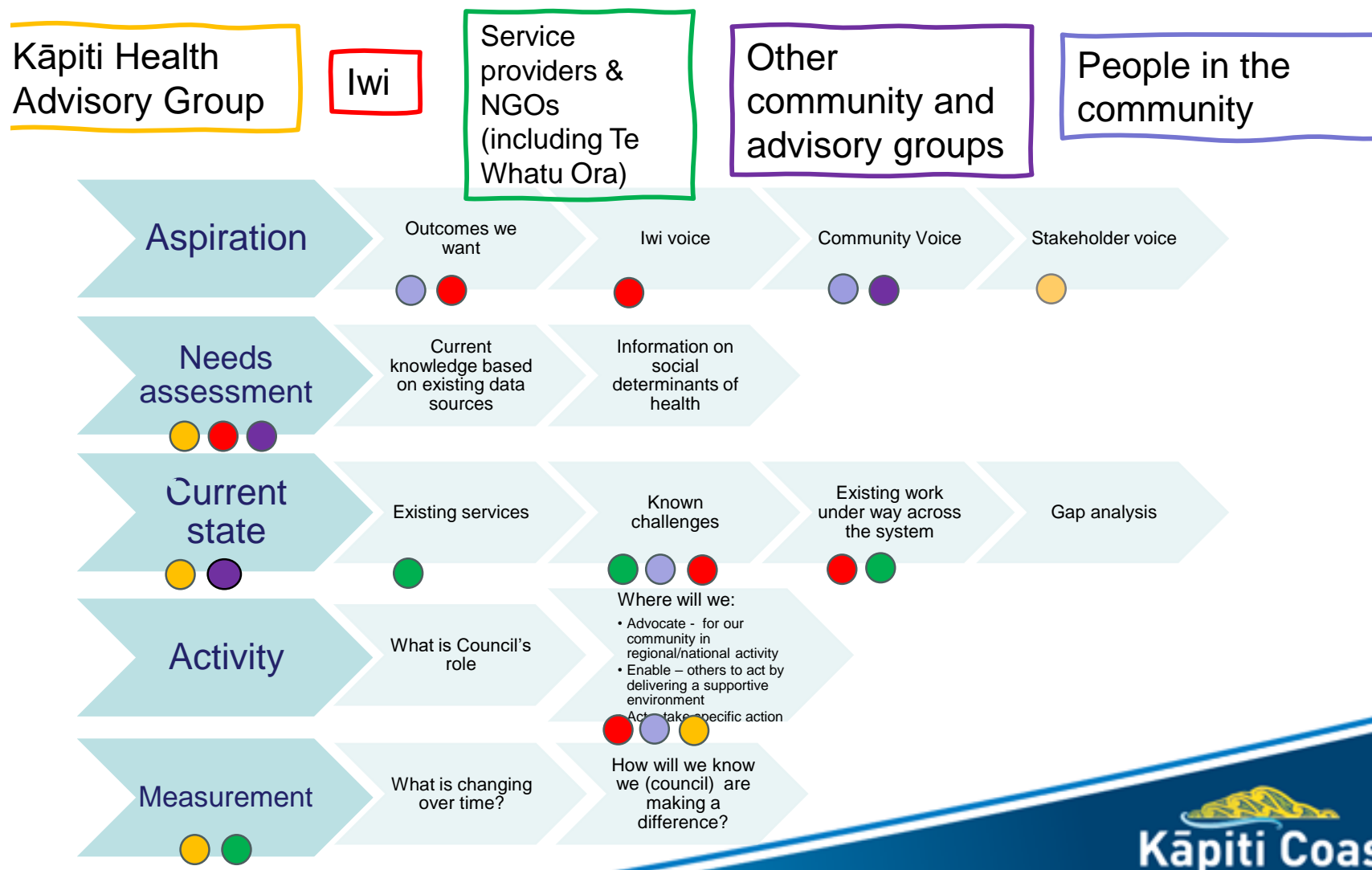
We will outline action in the shorter term, and build a comprehensive process over time

Kāpiti Coast

What will it look like?



What will it look like?



What do we expect to see?

Known Needs

- Higher than average age profile
- Higher than average rates of disability
- Pockets of disadvantage that need more support
- Need for service provision to keep pace with growth, across the life course and especially for youth

Known Challenges

- Access to primary care (GPs)
- Access to hospital and specialist services:
- Access to urgent or emergency care
- Access to mental health care (including for youth)
- Limited care for people with disabilities
- Limited local care for older people

Possible priorities

- Understanding - gain more in depth data on community needs
- Prevention – act on social determinants (housing, food, social connection)
- Local and integrated services - Advocate for and enable locally based community and specialist services, including in relation to aged residential care
- Urgent care - Advocate for and enable locally based urgent, after hours and emergency services
- Forward focus – enable smart, technology based solutions to care access

Stakeholder list

- Advisory Groups
 - Kāpiti Health Advisory Group
 - Te Whakameninga o Kāpiti
 - Age Friendly Reference Group
 - Kāpiti Disability/Accessibility Advisory Group
 - Youth Council
 - Older Persons Council
- Iwi – including via Iwi-Māori Partnership Board and localities design processes
- Service Providers/planners
 - Te Whatu Ora
 - Regional Public Health
 - Commissioning/'locality management'
 - Te Aka Whai Ora
 - PHO
 - Primary care providers
 - Local specialist providers
 - A Safe Kāpiti health shuttle
 - Hora Te Pai
 - Kāpiti Community Health Network
- NGOs
 - Kāpiti Youth Support
 - Cancer Society
 - Grey Power
 - Age Concern
 - Dementia New Zealand
- Economic Development Kotahitanga Board (enablers for business)
- Regional Public Health (Kai Strategy and public health)
- Kāpiti Community Health Network
- Other councils involved in early locality areas (Porirua and Horowhenua)

7 TE WHAKAŪ I NGĀ ĀMIKI | CONFIRMATION OF MINUTES**9.1 CONFIRMATION OF MINUTES**

Author: Jessica Mackman, Senior Advisor, Democracy Services

Authoriser: Janice McDougall, Group Manager People and Partnerships

Taunakitanga | Recommendations

That the minutes of the Social Sustainability Subcommittee meeting of 3 August 2023 be accepted as a true and correct record.

NGĀ ĀPITI HANGA | ATTACHMENTS

1. Minutes of Social Sustainability Subcommittee Meeting 3 August 2023 [↓](#)

SOCIAL SUSTAINABILITY SUBCOMMITTEE MEETING MINUTES**3 AUGUST 2023**

**MINUTES OF THE KĀPITI COAST DISTRICT COUNCIL
SOCIAL SUSTAINABILITY SUBCOMMITTEE MEETING
HELD IN THE COUNCIL CHAMBER, GROUND FLOOR, 175 RIMU ROAD, PARAPARAUMU
ON THURSDAY, 3 AUGUST 2023 AT 9.40AM**

PRESENT: Cr Martin Halliday, Cr Kathy Spiers, Mayor Janet Holborow, Deputy Mayor Lawrence Kirby, Cr Nigel Wilson, Jonny Best, Ms Kim Tahiwī (via zoom), Mr Michael Moore

IN ATTENDANCE: Cr Sophie Handford, Mandy Savage, Kate Neyland, Janice McDougall, Kris Pervan, Hamish McGillivray, Steffi Haefeli, Evan Dubisky, Anna Smith

**WHAKAPĀHA |
APOLOGIES:**

**LEAVE OF
ABSENCE:** Cr Rob Kofoed

1 NAU MAI | WELCOME

The Chair welcomed everyone to the meeting.

2 KARAKIA A TE KAUNIHERA | COUNCIL BLESSING

The Chair read the Council blessing.

3 WHAKAPĀHA | APOLOGIES

There were no apologies for this meeting.

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

No declarations of interest were 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**

There were no members of the public who wished to speak at the meeting.

6 NGĀ TAKE A NGĀ MEMA | MEMBERS' BUSINESS

- (a) No additional leaves of absence were requested.
 - (b) No matters of an urgent nature had been provided to the Chair prior to the commencement of the meeting.
- Item 6 (c) Members' Items was moved to a later point in the agenda.

SOCIAL SUSTAINABILITY SUBCOMMITTEE MEETING MINUTES

3 AUGUST 2023

7 HE KŌRERO HOU | UPDATES**7.1 DISCUSSION OF SMOKING AND VAPING HARM IN KAPITI, IN THE CONTEXT OF THE REVIEW OF OUR SMOKEFREE POLICY**

Hamish McGillivray, Manager of Research and Policy introduced Kate Neyland, Public Health Advisor from Te Whatu Ora, and Mandy Savage from the Cancer Society. Kate Neyland and Mandy Savage spoke on smoking and vaping harm within the Kāpiti District, and the upcoming review of Council's Smokefree Policy. The presenters and Kris Pervan, Group Manager Strategy and Growth answered questions from members.

7.2 TE NEWHANGA KĀPITI COMMUNITY CENTRE

Dave Hardy, Manager Project Management Officer and Janice McDougall, Group Manager People & Partnerships spoke on the background, proposals and progress of work on Te Newhanga Kāpiti Community Centre. They answered questions from members.

Mr Michael Moore left the meeting at 10:52 am.

Mr Michael Moore returned to the meeting at 10:54 am.

The meeting adjourned at 11:12 am and resumed at 11:29 am.

Item 6 (c) Members' Items was moved from an earlier point in the meeting.

6 NGĀ TAKE A NGĀ MEMA | MEMBERS' BUSINESS**(c) Members' Items.**

Cr Halliday gave a brief update on his attendance at the LGNZ Conference 2023 and the Kāpiti Health Advisory Group meetings. Cr Halliday publicly acknowledged Donna Bridgeman for her work regarding homelessness, and also former Councillor Rob McCann for his work in that space.

He also answered questions from other members in relation to the Conference.

Cr Halliday requested an update from the Mayor on the Regional Transport Committee and the contribution the members might make to the transport space.

Mayor Holborow indicated that Council's Road Safety Advisory Group would be re-started shortly.

8 TE WHAKAŪ I NGĀ ĀMIKI | CONFIRMATION OF MINUTES**8.1 CONFIRMATION OF MINUTES****COMMITTEE RESOLUTION SSS2023/2**

Moved: Cr Nigel Wilson

Seconder: Mayor Janet Holborow

That the minutes of the Social Sustainability Subcommittee meeting of 22 June 2023 be accepted as a true and correct record.

CARRIED

SOCIAL SUSTAINABILITY SUBCOMMITTEE MEETING MINUTES3 AUGUST 2023

9 CLOSING KARAKIA

The Chair closed the meeting with karakia.

The Te Komiti Whāiti Toitūtanga Pāpori | Social Sustainability Subcommittee meeting closed at 12:03pm.

.....
HEAMANA | CHAIRPERSON

Unconfirmed

8 CLOSING KARAKIA