



MATARIKI 2024 – MATARIKI 2025 ANNUAL REPORT TO 30 JUNE 2025

**ĀTI AWA
TOA HAUORA**
PARTNERSHIP BOARD





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This year, we tell our story through the two periods that guide our mahi: our Maramataka, from Matariki 2024 to Matariki 2025, and the financial year, from 1 July 2024 to 30 June 2025.



MIHI

Tai Toru.

Anei tā mātou rīpoata mō te tau 2024–2025, mō Te Āti Awa Toa.

Tuatahi, tae atu ki ngā kaimahi, ngā mihi aroha ki a koutou i tō koutou kaha, i tā koutou tautoko i ēnei tau.

Te Poari, Te Tai Toru ki Kāpiti, ki Parirua, tae atu ki Te Whanganui a Tara.

Tai Toru, he hono tahi i ngā whānau, i ngā hapū, i ngā iwi me ngā hapori katoa.

The three tides that flow onto each iwi's shores, even at different tidal times, remain forever connected.

They remind us of our shared whakapapa, our collective commitments and responsibilities, both great and small.

These tides will never cease to echo the dreams and aspirations of our tūpuna – to strive, to seek, and to uphold Tino Rangatiratanga.

Dr Taku Parai

Kaumatua, Mema Poari





KUPU WHAKATAKI

FOREWORD

Whakapūpūtia mai ō mānuka, kia kore ai e whati
Cluster the branches of the mānuka so they will not break.

Te tini o Āti Awa, te maha o Toa Rangatira e whakarauika nei – tēnei ka tangi, tēnei ka mihi ki a koutou katoa. Koutou te hunga e manaaki ana i ō tātou whānau, e rauhi ana i ō tātou papakāinga puta noa i te upoko o te ika nei. Kia whai atu au i ngā kupu a tō tātou pāpā, a Te Whiti, e pēnei ana tana tohutohu – manaakitia rā e te iwi, te iti, te rahi, te katoa. Kia ora tātou katoa.

This year, we tell our story through the two periods that guide our mahi: our Maramataka, from Matariki 2024 to Matariki 2025, and the financial year, from 1 July 2024 to 30 June 2025. In this way, we remain transparent in our financial reporting while also observing our Maramataka calendar.

Among the numbers, there are real signs of change. Māori immunisation rates for pēpi have lifted sharply – from 66% to 81% within just three quarters – showing what’s possible when focus, partnership, and kaupapa Māori approaches align. Screening remains an area of concern, with bowel screening rates stubbornly low at 56% for Māori and 60% for non-Māori, showing little movement over the past year. By contrast, cervical screening continues to improve, rising to 71% for Māori and 76% for non-Māori – a significant gain that reflects focused outreach and provider commitment. The challenge now is to sustain this momentum across all screening programmes to ensure early detection and equitable access.



66% to 81%

Māori immunisation rates for pēpi have lifted sharply within just three quarters.

Since our last report, we have moved with purpose across our four whaitua: Kāpiti, Porirua, Te Awa Kairangi, and Pōneke. We have been guided by our moemoeā: Oranga Whenua, Oranga Wai, Oranga Whānau. Whānau voice has shaped our every step: intergenerational hui, kaupapa-specific wānanga, surveys at Te Matatini, localities kōrero, and ongoing feedback with our providers and partners.

Throughout the past year, we have also strengthened trusted relationships across our Te Ikaroa regional Iwi Māori Partnership Board network, with iwi entities and oranga partners. We did this by focusing on practical collaboration where it matters most – improving whānau access to care, affordability, cultural safety, and connected healing services.

In March we published our first Community Health Plan, setting local priorities grounded in whānau evidence and iwi aspirations. We also grew our digital presence, sharing regular updates through our newsletter He Pūrongo Oranga to keep our communities informed and engaged.

During Matariki 2025 we:

- **Launched Whaitua** – our innovative geo-mapping tool that places data in community hands to reveal strengths, highlight inequities, and help drive change.
- **Released the Monitoring for Oranga Framework** – a tikanga-bound approach to assessing performance and investment for Māori, moving beyond compliance and toward mana motuhake.

Over the past year the political landscape has shifted, with significant changes proposed for the Pae Ora framework. Our stance remains steady: Māori must be active partners, not passive recipients. We work pragmatically with the structures before us while remaining resolute in our responsibilities to mana whenua and the aspirations of whānau.

Looking ahead towards Matariki 2026 we will:

- Focus on consolidating Whaitua and ensuring more communities can use it to tell their own data stories and shape decisions that affect them.
- Deepen access to kaupapa-led, joined-up care close to where people live, expand culturally safe workforce capability, and use our data and monitoring tools to drive smarter, more equitable investment.
- Continue to centre the lived experience and mātauranga of our people.

Our families have told us that oranga happens where whenua, wai, and whānau are strong together. This remains both our focus and our kaupapa.

Kia tau ngā manaakitanga o Matariki ki runga i a tātou – with our mokopuna in mind and our tīpuna by our side, we move forward together.

Ki te hoe!



Hikitia Ropata
Manahautū | Executive Chair
Āti Awa Toa Hauora Partnership Board

HOROPAKI CONTEXT

Āti Awa Toa Hauora Partnership Board is one of 15 recognised Iwi-Māori Partnership Boards established under the *Pae Ora (Healthy Futures) Act 2022* to represent local Māori perspectives in improving hauora outcomes.

We were formed as part of a new vision to move beyond siloed health systems, amplify whānau voices, and address the broader determinants that shape wellbeing in our communities. Our focus is intergenerational: to strengthen the foundations of ora so our mokopuna can thrive.

Our statutory role gives expression to that vision through three interconnected functions:

Whānau Voice.

Collecting, protecting, analysing, and amplifying whānau experiences and aspirations.

Monitoring.

Assessing system performance locally, through a Māori lens.

Planning and Investment.

Setting local priorities for innovation and equitable change in the health system.

OUR JOURNEY TO DATE

Our journey did not begin with the *Pae Ora (Healthy Futures) Act 2022*. Our organisation was founded upon the legacy of earlier Māori Partnership Boards that worked alongside District Health Boards in the early 2000s. Their influence was limited, but their intent, to bring Māori leadership and voice into decision-making, has endured. The 2020 health reforms gave that intent new life in legislation, creating a framework for Māori-led accountability and partnership.

We are accountable to, mandated and guided by the mana whenua of our rohe, Te Āti Awa and Ngāti Toa Rangatira, represented by Te Āti Awa ki Whakarongotai, Te Rūnanganui o Te Āti Awa ki Te Upoko o te Ika a Māui, and Te Rūnanga o Toa Rangatira. Our mahi is

shaped by their aspirations for the health and wellbeing of whānau Māori across our rohe, from Kāpiti and Porirua to Te Awa Kairangi and Pōneke.

As mana whenua, and in keeping with the way our whānau have always lived, we also recognise our responsibility to all people who call our rohe home. Our approach is grounded in whanaungatanga and manaakitanga by connecting systems, communities, and relationships so wellbeing is both shared and enduring.

This is our haerenga: to transform the health system from within, by centering whānau voice, reclaiming mātauranga, and building a future where whenua, wai, and whānau thrive together.

ĀTI AWA TOA HAUORA PARTNERSHIP BOARD TIMELINE

Early 2000s

Māori Partnership Board established to provide local iwi input into DHB decision-making.

April 2021

Government announces major health system reform and the establishment of Iwi-Māori Partnership Boards (IMPBs).

April 2022

Six board members appointed to Āti Awa Toa Hauora Partnership Board (ĀATHPB) with local iwi/hapū mandate.

July 2019

WAI 2575 Report identifies that the health system does not recognise tino rangatiratanga or mana motuhake of hauora Māori.

Mid-2021

Āti Awa Toa IMPB Establishment Committee forms.

July 2023

Manahautū appointed.

August – November 2023

ĀATHPB office opens, establishing key corporate and management functions.

March 2025

ĀATHPB publishes Community Health Plan with priorities for our rohe.

August 2025

ĀATHPB delivers submission opposing the proposed legislative changes.

February 2024

ĀATHPB completes first Strategic Plan and Business Plan **June 2024**.

Te Aka Whai Ora disestablished – IMPB funding relationship shifts to Te Whatu Ora.

July 2025

Healthy Futures (Pae Ora) Amendment Bill proposes to reduce statutory functions and mandate of IMPBs.

ABOUT US WHAKAPAPA

Āti Awa Toa Hauora Partnership Board exists because of the whakapapa and partnership of two iwi – Te Āti Awa and Ngāti Toa Rangatira – represented through three iwi entities that uphold mana whenua across Te Upoko o Te Ika a Māui:

Te Rūnanganui o Te Āti Awa ki

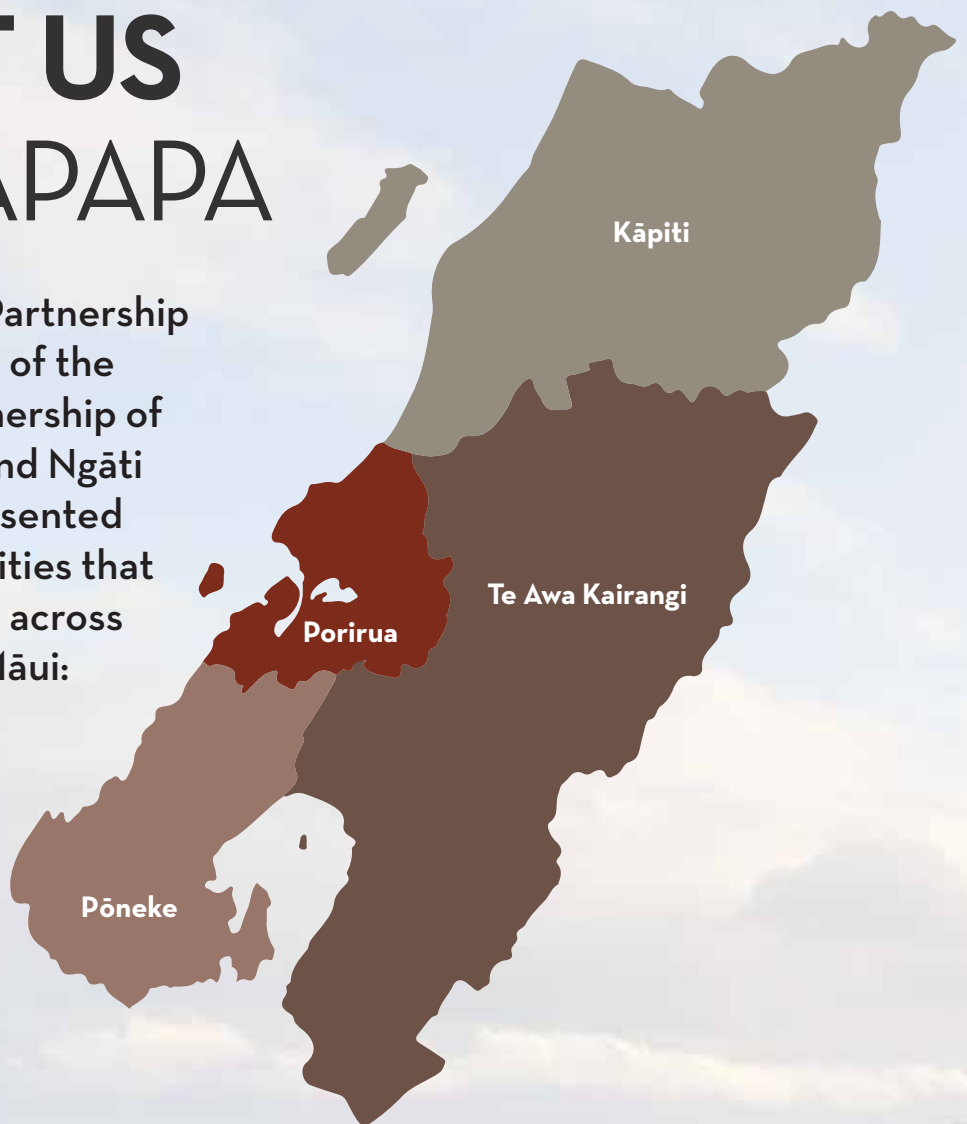
Te Upoko o Te Ika: The tribal authority for Te Āti Awa in Te Whanganui-a-Tara, reflecting the mana, responsibilities, and enduring connection of Te Āti Awa whānau who whakapapa to both the Wellington region and Taranaki whānui.

Te Rūnanga o Toa Rangatira:

The mandated iwi authority for Ngāti Toa Rangatira, whose rohe extends from Kāpiti and Porirua to Te Taihū o te Waka-a-Māui, embodying the histories of migration, settlement, and sustained kaitiakitanga on both sides of Te Moana o Raukawa.

Te Āti Awa ki Whakarongotai:

Representing Te Āti Awa descendants maintaining ahi kā on the Kāpiti Coast, with whakapapa and presence deeply rooted in Whakarongotai Marae and the lands and waters of Waikanae.



Our rohe spans four whaitua – Kāpiti, Porirua, Te Awa Kairangi, and Pōneke – each with distinct communities, strengths, and challenges. Together, they shape a region that is diverse, dynamic, and deeply connected to whenua and wai.

We were established to give life to a simple truth: that Māori health leadership must be local, relational, and accountable. As an Iwi-Māori Partnership Board under the Pae Ora (Healthy Futures) Act 2022, we bring iwi and Crown partners together to ensure decision-making reflects whānau realities and iwi aspirations.

Our whakapapa reaches further back than the legislation. The early Māori Partnership Boards of the 2000s laid the groundwork for Māori voice in the health system, even when their influence was limited. The 2020 reforms formalised that intent – recognising that hauora transformation requires Māori governance, evidence, and whānau voice at every level.

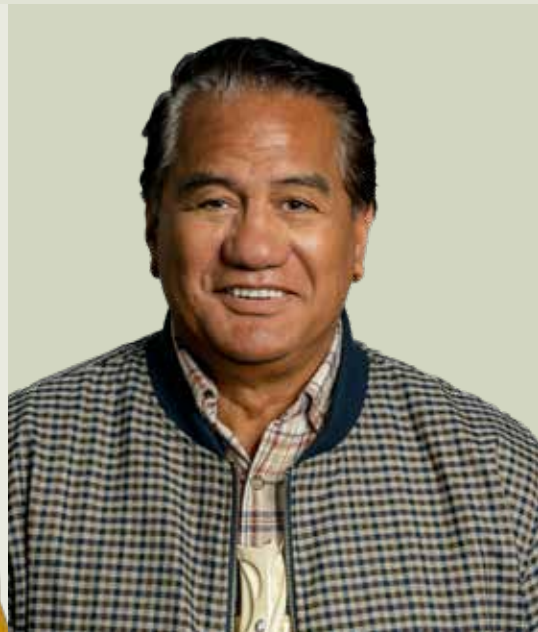
We are accountable to and guided by our mana whenua partners, yet our responsibility extends to all who call this region home. Our kaupapa is grounded in whanaungatanga, manaakitanga, and kotahitanga – connecting people, places, and purpose to build an ora nga ecosystem where our mokopuna can thrive.



OUR BOARD

MANA WHAKAHAERE

Six members have been appointed to represent our rohe on the Āti Awa Toa Hauora Partnership Board. Their terms of office run to 30 June 2026.





Dr Te Taku Parai

Kaumātua

(Ngāti Toa Rangatira)

Kaumātua of Ngāti Toa, Dr Taku Parai has contributed to the Porirua community for more than 50 years and served as a mana whenua representative to Porirua City Council since 1999. Dr Parai has held numerous roles for his iwi, chairing the Ngāti Toa Kaunihera Kaumātua and contributing to preservation of histories and genealogies, wananga waka and

wananga reo. He chaired the Board of Te Rūnanga o Toa Rangatira for six years, overseeing the Treaty settlement and the immediate post-settlement period. He chaired Porirua Council's Treaty Partnership Group from 2002 to 2010 and has been Council Kaumātua since 2011. Taku has an PhD in indigenous Elders/Knowledge Holders – Doctor of Education (EdD) for Indigenous Knowledge and Development from the World Indigenous Nations University.



Hikitia Ropata

Executive Chair/Manahautū and Ngāti Toa Rangatira Representative

(Ngāti Toa Rangatira, Ngāti Raukawa, Te Āti Awa, Ngāti Porou)

Hikitia is deeply committed to ensuring the delivery of high-quality public services for iwi and Māori. She brings extensive experience in social wellbeing, education, healthcare, local government and iwi affairs. Over the years, Hikitia has successfully built and led diverse teams and honed her skills in leadership, change management, and governance. She is highly skilled at building strong relationships and partnerships across various sectors and industries. Hikitia believes that excellent leadership is about removing barriers so we

can collectively create meaningful, sustainable change to achieve hauora outcomes for mokopuna. A dedicated advocate for Māori achievement and success, Hikitia holds several other roles including Regional Councillor for Greater Wellington and membership on the Workforce Development Council (WDC) for Community, Health, Education and Social Services. However, for Hikitia, the “...most important job is being the best role model, Aunty and Nanni to my many nieces, nephews and mokopuna”. Her commitment to those who are the promise of our tomorrow drives her personal and professional life to support hauora outcomes within her community.



Hinemoa Priest

Te Āti Awa Representative
(Te Āti Awa, Ngāruahine ki te Rangi)

Hinemoa has been Kaiwhakahaere Māori and a member of the Joint Leadership Team at Whitireia and WelTec (Wellington Institute of Technology) since 2009. In this role, she has led the integration of te ao Māori and iwi-led kaupapa into industry training and education strategies and services. Prior to this, she served as Māori Liaison Officer at Hutt Valley Polytechnic and WelTec for eight years. Hinemoa is a strong advocate for education and employment opportunities for

rangatahi, particularly in Te Awa Kairangi. In her current role, she manages the Tamaiti Whāngai team, overseeing the development of the annual strategic plan, operational and budget management, and relationship-building with iwi and Māori organisations such as Te Rūnanganui o Te Āti Awa and Waiwhetu Marae. She also manages Māori and Pasifika trade training, ensuring inclusivity across Iwi, Pasifika, and employers, and has extensive experience with mana whenua, marae, kura, and Kokiri Centres within Te Awakairangi.



Tio Taiaki

Deputy Chair | Te Āti Awa ki Whakarongotai Representative
(Te Ātiawa ki Whakarongotai, Ngāti Tūwharetoa, and Te Āti Haunui-ā-Pāpārangī)

Tio has extensive governance and leadership experience in Māori health, education, change management, marketing, and community engagement. He is passionate about empowering individuals to lead healthy, active lives and has worked across government, community, and

corporate sectors. His governance roles include chairing the Whātonga Waka Ama board, serving as a board member for Hora Te Pai Health Services Charitable Trust and Diabetes NZ, and contributing to various iwi and national organisations. As Deloitte's Associate Director in Māori Health and Equity, Tio combines his cultural knowledge alongside expertise in strategy, project management, accountancy, and marketing to deliver impactful outcomes.



Tane Cassidy

Taura Here Representative
(Ngāpuhi)

Tane has extensive experience in health marketing, policy development, and strategic leadership, with a career spanning multiple high-impact roles in the health sector. He currently serves on our board and Te Awakairangi Health Network where he works to ensure health initiatives are responsive to the needs of iwi Māori and local communities. As Deputy Chief Executive for Prevention & Partnerships at ACC New Zealand, Tane led injury prevention strategies and forged partnerships across the health sector.

He also served as Chief Executive of Te Hīringa Hauora/Health Promotion Agency, where he was instrumental in embedding Te Tiriti-centred frameworks, promoting innovative thinking, diversity and sustainable Māori leadership within the healthcare sector. Tane has continuously championed the integration of cultural knowledge into health services, ensuring treatments are grounded in te ao Māori and accessible to those who need them most. His work also extends into digital health solutions, as recognised by his 2021 e-Mental Health International Collaborative Leadership Excellence Award.



Dr Vanessa Caldwell

Taura Here Representative
(Kāi Tahu, Te Rapuwai, Waitaha, and Kāti Māmoe)

Dr Vanessa Caldwell was appointed Deputy Health and Disability Commissioner in 2021. In this role, she has applied her vast knowledge of ethical practice and patient rights, along with her deep commitment to high-quality, patient-centred care. Vanessa is passionate about developing consumer and whānau-centred health systems, workforce development, and ensuring that people of Aotearoa have equitable access to high-quality care when

needed. Throughout her career, she has developed care services, overseen regional design and delivery, and held several key leadership and governance roles in the health sector. Vanessa is a registered psychologist with extensive knowledge of the health system and experience in mental health and addictions. Her previous roles include Clinical Executive, Mental Health & Addictions, MidCentral District Health Board; National Director of Matua Raki. She also has a doctorate in Health Science and a master's degree in business administration.

OUR STRATEGY TĀ TĀTAU RAUTAKI

Whakapūpūtia mai ō mānuka, kia kore ai e whati
Cluster the branches of the mānuka so they will not break.

Our Vision | Tō Tātou Moemoeā

ORANGA WHENUA, ORANGA WAI, ORANGA WHĀNAU

A place to stand, a place to connect, a place to belong.



Our moemoeā emerged through hui with whānau, iwi and rūnanga across the rohe, expressing our collective vision for intergenerational wellbeing: that all who live here have a place to stand, a place to connect, and a place to belong.

Our Mission | Whainga

Our mission is to lead a movement toward an oranga ecosystem. A system where our mokopuna can thrive, sustained by the strength of whenua, wai, and whānau.

This mission is grounded in the identity and connection of mana whenua in our rohe, through Āti Awatanga and Toarangatiratanga. These foundations remind us that oranga begins with who we are, where we stand, and how we care for one another.

Te Tiriti o Waitangi provides the foundation for how our poari will walk alongside others to achieve this vision – guided by mātauranga Māori and a Te Ao Māori worldview that recognises balance, relationship, and reciprocity.

Our focus is not on expanding access to siloed models of care that have failed our whānau, but on transforming systems so that they reflect whānau voices and aspirations, respond to the social determinants of pae ora, and uphold intergenerational wellbeing.

By investing in and embedding kaupapa Māori approaches, we create a system that is fair, mana-enhancing, and grounded in manaakitanga – a system that benefits everyone who calls our rohe home.



Honouring Te Tiriti o Waitangi me ōna mātāpono

Āti Awa Toa Hauora Partnership Board recognises that genuine transformation in health requires a living relationship with the Crown – one that upholds the articles of Te Tiriti o Waitangi as set out in the original te reo text agreed to by Rangatira and the Crown.

We are committed to giving practical effect to both the articles and the principles of Te Tiriti as articulated through case law and the Waitangi Tribunal: particularly those affirmed in the WAI 2575 Health Claim.

Pātuitanga – Partnership: working together with mutual respect and shared decision-making.

Tino Rangatiratanga: upholding Māori authority over Māori aspirations and wellbeing.

Ōritetanga – Equity: ensuring fair outcomes and access to services for all whānau Māori.

Kōwhiritanga – Options: Ensuring Māori can design and deliver kaupapa Māori solutions.

Active Protection of Mana Motuhake: safeguarding our autonomy, language, and culture.

These principles are not abstract ideals. They are woven into our Monitoring for Oranga Framework, guiding how we measure progress, hold systems to account, and define success for whānau Māori.

Our Values: Ō Tātou Mātāpono

We are guided by five core values that shape and sustain our mahi.

- **Tika** – we act to ensure health, healing and wellbeing services are culturally grounded, authentic, relevant to our rohe.
- **Pono** – we support health, healing and wellbeing that enhances mana, stands with integrity and is fair to all whānau in our rohe.
- **Aroha** – we demand that health, healing and wellbeing services operate with kindness, aroha, compassion and care.
- **Kaitiakitanga** – we expect that health, healing and wellbeing services connect, protect, and advance the health, healing, and wellbeing of our whenua, wai and whānau for the generations to come.
- **Wairuatanga** – we acknowledge the spiritual dimension of holistic health, healing and wellbeing expressed through the synergy of tikanga, kawa and mātauranga Māori.



Our Three Strategic Goals

1. Respect and Elevate Whānau Voice

We will continuously uplift and prioritise whānau perspectives to shape local services and community solutions.

How we will achieve this:

- Amplify whānau voices in identifying local priorities aimed at improving the oranga (wellbeing) of whenua (land), wai (water), and whānau
- Leverage our networks to build and sustain meaningful community connections, especially with whānau whose voices we need to raise clearly and consistently
- Monitor and evaluate the responsiveness of health and other sectors in addressing whānau aspirations and needs.

2. Redefine Narrow Concepts of Health

We will champion a kaupapa Māori view of hauora, the four winds of wellbeing.

How we will achieve this:

- Promote a broader understanding of hauora, recognising the interconnectedness of the health of our whenua, wai, and whānau.
- Protect and empower mana motuhake by embedding compassion, fairness, and holistic care into our health approach.
- Combine modern scientific advances with the knowledge of our tūpuna, tikanga, kawa, and kaupapa Māori value system to protect and enhance the health and wellbeing of our mokopuna.

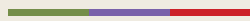
3. Re-imagine Health System Investment

By taking an integrated, systems-level approach to health investment that addresses the broader determinants of wellbeing, we are seeking to create an oranga ecosystem where our mokopuna can thrive.

How we will achieve this:

- Prioritise investment strategies that address social, cultural, economic, and environmental determinants of health.
- Better harness collective efforts, insights, and resources from iwi, hapū, whānau, government, local agencies, health and disability providers, social services, industries, workforce, and community groups.

Together, these strategic goals represent our commitment to lasting, transformative change that is culturally grounded, equitable, and forward-thinking.



Our Organisational Development Goal

Build Culture, Capability and Capacity

To ensure we can deliver on our strategic priorities, now and in the future, we will invest in the ongoing development of our people and a strong workplace culture aligned with our values. This includes:

- supporting our iwi and rūnanga partners, and
- strengthening our relationships with these partners, with our Ikaroa regional Iwi Māori Partnership Board collective, national Iwi Māori Partnership Board network and with government and community groups.

KEY MILESTONES

Over the past year, Āti Awa Toa Hauora Partnership Board has reached several strategic and organisational milestones – each strengthening our role, deepening whanaungatanga, and giving practical effect to our responsibilities under the *Pae Ora (Healthy Futures) Act 2022*.

July 2024

The (former) Minister of Health directed all iwi-Māori Partnership Boards to develop and submit a Community Health Plan for their rohe, including a local health needs assessment, whānau-informed priorities, a monitoring framework, and a three-year work plan. This directive accelerated mahi already underway across our four whaitua.

Completed analysis of two *Oranga* surveys conducted with Māori participants at *Te Rā o Raukura* and *Te Mātoe o Te Reo*.

August 2024

Completed data collection and analysis with iwi-Māori health providers on what they are hearing from whānau, the *oranga* initiatives they are leading, and their aspirations for intergenerational wellbeing in our rohe.

October 2024

The Porirua Localities Rōpū shared whānau voice insights gathered over 18 months of community hui focused on dental care, māmā and pēpē wellbeing, mental health, diabetes, cancer, disability support, and resilience to organised crime.

The *Poari* endorsed the **Whānau Voice Collection Framework 2024 – 2028**, a tikanga-led guide outlining culturally grounded methodologies for capturing whānau voice ethically and effectively.

November–December 2024

Hosted five *intergenerational hui-a-whānau* across the rohe, alongside a dedicated wānanga with *Te Ohu Reo Manawataki o Ngāti Toa Rangatira* (reo and kapa haka experts of Te Rūnanga o Toa Rangatira). Each gathering explored what *oranga* means to whānau – their needs, aspirations, and lived experiences – with immediate visual feedback shared back to participants.

December 2024

Submitted the draft **Community Health Plan** to *Te Whatu Ora*, informed by whānau insights, earlier surveys, Porirua Locality kōrero, and regional data on Māori health outcomes.

Signed the **ĀATHPB – Tū Ora Compass Health Manaaki Agreement**, enabling ongoing information sharing to improve Māori health outcomes across our rohe.

February 2025

In partnership with Manatū Hauora, jointly commissioned Nicholson Consulting and Catalyst NZ to advise on a culturally appropriate technical specification and data solution to support the secure storage, protection, and sharing of whānau voice data. The project involved significant engagement and oversight over an eight-month period.

The **Te Matatini 2025 Oranga Survey** was completed with **108** participants from our rohe, providing insights into the relationship between kapa haka and oranga, and experiences across primary, oral, and mental health services.

March 2025

The **Community Health Plan 2024 – 2028** was formally endorsed by *Te Whatu Ora* and published on our website – setting out initial priorities to build an oranga ecosystem for our mokopuna to thrive.

www.atiawatoaimpb.nz/Community-Health-Plan

Released a standalone report on insights from engagement with *Te Ohu Reo Manawataki o Ngāti Toa Rangatira*.

www.atiawatoaimpb.nz/Key-Findings-Ngati-Toa

May 2025

Signed a **Data Sharing Agreement** with Te Tāhū Hauora | Health Quality & Safety Commission (HQSC) to access Māori feedback from the Primary Care Patient Experience Survey, focusing on involvement in care decisions and cultural responsiveness.

June 2025

Signed a **Data Sharing Agreement** with Awakairangi Health Network to strengthen collaboration and improve Māori health outcomes.

Launched **He Pūrongo Oranga**, our weekly digital monitoring report sharing news, policy updates, and analysis of oranga whenua, oranga wai and oranga whānau developments.

During Matariki 2025, we celebrated two milestones:

The launch of Whaitua, our innovative geo-mapping tool that places data in the hands of communities to reveal strengths, highlight inequities, and inform advocacy and investment.

reports.hqsc.govt.nz/whaitua

The release of the Monitoring for Oranga Framework, our tikanga-bound approach to measuring performance and investment for Māori – more than compliance, an expression of *mana motuhake*.

www.atiawatoaimpb.nz/Monitoring-Framework-Report-2025

Matariki 2025 also marked the completion of analysis from the Te Matatini 2025 Oranga Survey, providing insights to inform future engagement with whānau who have lived experience of long-term conditions – both (preventable and non-preventable).

SPOTLIGHT

Whaitua: Putting local knowledge in whānau hands

Whaitua is our new online mapping tool that reveals how the places we live shape our health. It shows the realities behind whānau experiences: where vape shops outnumber GP clinics, where damp homes outpace healthy ones, and where access to affordable kai or safe outdoor spaces remains unequal.

Developed by Āti Awa Toa Hauora Partnership Board in partnership with Te Tāhū Hauora (Health Quality & Safety Commission) and with the support of our nationwide Iwi Māori Partnership Board network, *Whaitua* translates complex data into clear, visual stories across our four whaitua – Kāpiti, Porirua, Te Awa Kairangi, and Pōneke. It brings together national and local datasets to highlight both progress and persistent gaps in wellbeing. Free, online and accessible for whānau, iwi and health providers, *Whaitua* is a game changer.

For too long, Māori health data has been locked inside systems that speak about us, not to us. *Whaitua* changes that. It returns knowledge to the people it belongs to – whānau – making information accessible, usable, and meaningful. This is data sovereignty in action: enabling whānau to see their realities reflected, to ask why, and to drive change from the ground up.

As one voice in our E-Tangata opinion piece reminded us: “If we can map where the vape shops are, we can also map where the solutions need to be.” That’s what *Whaitua* makes possible.

Monitoring Our Oranga:

A kaupapa Māori framework for meaningful measurement

Alongside *Whaitua*, we launched *Monitoring Our Oranga* an innovative approach that redefines how wellbeing is measured and understood. The framework complements *Whaitua* by grounding the data in Māori worldviews and values such as mana, mauri, and whanaungatanga.

Rather than focusing on deficits, *Monitoring Our Oranga* highlights what wellbeing looks like when Māori thrive – when whānau are connected, whenua and wai are healthy, and systems are accountable. Together, *Whaitua* and *Monitoring Our Oranga* form a powerful pairing: one gathers and visualises knowledge; the other interprets and activates it through a Māori lens.



SUMMARY OF INSIGHTS FROM WHĀNAU

NGĀ KŌRERO MAI I NGĀ WHĀNAU

Whānau Voice remains the heartbeat of our work. It drives our commitment to a whānau-centred approach that empowers Māori to exercise mana motuhake and tino rangatiratanga over our health and wellbeing. These insights reveal not only the challenges whānau face, but also the clarity of their aspirations – for systems that listen, heal, and restore balance across whenua, wai, and whānau.

1. Whānau-centred, Integrated Services

Whānau want health and social support systems that are joined up, culturally grounded, and responsive to their realities. They describe a vision of a “no wrong door” approach – a place where whānau can access everything they need in one space.

“Everything is one stop shop – and no entry is wrong – you get the manaaki you need.”

“The tikanga and process is the same, not different at every service.”

“Kai provided as well as housing haumaruru for whānau.”

“You go there for everything – primary care, specialists, dental.”

Whānau told us that true integration would mean seamless collaboration and communication between providers, guided by the Te Whare Tapa Whā health model. Recognising the physical, mental, social, and spiritual dimensions of health.



2. Access to Care – Proximity, Affordability, and Wait Times

Access to services and reducing barriers, especially in terms of cost, distance and wait times is a critical need. Long wait times, the cost of healthcare, transport challenges and limited access to after-hours services were cited as major barriers.

HQSC data identifies that in August 2024, 25.2% of Māori in Āti Awa Toa said they cannot get access to primary care when they need it. The most common reason was waiting times to get an appointment being too long (21% of respondents) and difficulties taking time off work (2.7%).¹

Whānau shared:

“First point of focus is tūroro/disabilities and servicing them in their home and in the community.”

“Designing accessible environments everywhere.”

“After-hours access isn’t great; must front cost.”

“I don’t go [to the dentist] because of the cost – only if I am in unbearable pain.”

“Service is ok but booking an appointment depends on doctor availability which can take a long time.”

“Access to what we need, when we need it.”

3. Connection to Whenua, Identity, and Whakapapa

Whānau consistently emphasised that oranga extends beyond physical health – it includes hinengaro and wairua. A truly healthy system must reconnect people with whakapapa, whenua, and wai.

“Tikanga ā iwi – connectiveness to your iwi and tikanga Māori healing.”

“Use of wai when I am not well or whānau members/tamariki mokopuna especially.”

“Connecting whānau to wai ora – springs, awa, moana to whakanoa.”

Whānau said these elements should be visible and accessible within health settings, especially during times of distress. Culturally safe care is inseparable from the ability to stand in one’s identity.



¹ Though the differences are not statistically significant, Māori responses across all the questions were slightly less positive than for non-Māori.



4. Cultural competency in healthcare: manaakitanga and respect

The principle of manaakitanga – care, hospitality, and respect – sits at the heart of whānau expectations. Whānau want services that not only treat illness but honour Māori values, traditions, and protocols.

Many participants expressed frustration that cultural needs continue to be overlooked or dismissed. Te Tāhu Hauora | Health Quality and Safety Commission Primary Care Experience Survey (August 2024) supports these experiences, showing that Māori patients were less likely than others to have their names pronounced correctly by healthcare professionals, and less likely to be asked for guidance when pronunciation was uncertain.

These findings reaffirm that cultural competence, pronunciation, and relational care are not details – they are essential to trust, safety, and healing.

In the same primary care experiences survey Māori responded slightly less positively than non-Māori when asked “Do they feel...

- they are listened to?
- able to involve their whānau in discussions around their care?
- they are treated fairly from health care practitioners
- they are treated with respect and kindness from reception/admin staff,
- as if they are involved in decisions around their care,
- as though things are explained to them in an understandable way and, that their accessibility needs had been met.

“No respect for cultural needs.”

“It is Māori owned/run which is great and I am better supported to access and the whole feels familiar but as soon as we get into the doctors it is very pākehā system focus not suited to us”.

“Front house staff are Māori and can kōrero basic Māori which is very welcoming.”

5. Workforce Development and Educated Whānau

Whānau told us they want to see a strong, visible Māori workforce in healthcare – people who understand our culture, speak te reo, and live the values of our communities. Increasing the Māori hauora workforce is seen as essential to improving health outcomes across our rohe. Whānau are more likely to engage with Māori practitioners – people whose practice honours tikanga Māori and who work in environments that nurture holistic wellbeing. Building cultural competence across the wider health workforce is equally critical to ensuring safe, respectful, and connected care.

Whānau also want to take a more active role in their own oranga – to be informed, confident, and supported to care for their families.

Many spoke about reconnecting with traditional knowledge and practices as part of this journey. Suggestions included:

- More Māori practitioners and leaders across all levels of the system.
- Training for non-Māori staff to build cultural safety and responsiveness.
- Opportunities for whānau to become active participants in their own oranga.
- A whare pūkenga where whānau can grow their own workforce and grow their own oranga solutions.
- Support us to be better equipped to help whānau with more complex health needs.



In Reflection

Our five themes tell a consistent story: whānau are clear about what oranga looks like. They want systems that are joined-up, affordable, and grounded in tikanga, where manaakitanga is felt, not promised.

Their aspirations align closely with our moemoeā – Oranga Whenua, Oranga Wai, Oranga Whānau – showing us that we are on the right path.

In 2025 – 2026, we will expand engagement to include whānau whose voices are less often heard: those not enrolled with primary care and more likely to be disconnected from traditional support networks. This will help us to ensure our mahi continues to be shaped by lived experience.



OUR YEAR IN NUMBERS

NGĀ TATAURANGA O TE TAU

Whānau voices

137

whānau members shared with us their experiences, needs, and aspirations for hauora Māori.

Immunisation

81%

of pēpi Māori were **fully immunised** at 24 months compared with 92% of non-Māori (Q4 2024–2025).



Up from **66%** (Māori) and 85% (non-Māori) (Q1 2024–2025) – a strong improvement toward the **95% target by 2030**.

HPV Vaccination (14 years)

53%

were fully vaccinated (Q4 2024–25).



Down from **57%** (Māori) and **66%** (non-Māori) (Q3 2023–24).

Access and Choice – Primary Mental Health

ONLY

68.6%

of Māori in Te Awa Kairangi | Lower Hutt were seen within one week – **the lowest rate in Aotearoa**.

All-ethnicity rates dropped from above the **80% target** a year ago to **70.1%** in Quarter 4.

Across **Capital & Coast**, Māori were seen within one week **77.5%** of the time, compared with **79.4%** for all ethnicities: **80%** is the target.

Emergency Department (ED) Wait Times

65%

of Māori and 61% of non-Māori were admitted, discharged, or transferred within six hours (Q4 2024-25) – up from 56% and 51% respectively in Q1, but still well short of the 95% 2030 target.

For Māori presenting with mental-health or addiction-related conditions:

45.7% (Capital & Coast) and 55.8% (Te Awa Kairangi | Hutt Valley) were admitted or discharged within six hours.

The 2025 milestone is 74% and the 2030 target is 95%.

Specialist Mental Health and Addiction Services

In Q4 2024-25,

72.2% (CAPITAL & COAST)

75.1% (HUTT VALLEY)

of Māori patients were seen within three weeks: These rates remain steady from Q1, with a 2030 target of 80%.

In Quarter 4 of 2024-25, only 45.7% of Māori patients presenting to the Capital & Coast emergency department with a mental health or addiction-related condition were admitted, discharged, or transferred within 6 hours.

At Hutt Valley Hospital, the rate was higher at 55.8%.

While the Capital & Coast rate has remained largely unchanged since Quarter 1, Hutt Valley has shown a noticeable improvement. These results remain well below the 2025 milestone of 74% and the 2030 target of 95%.

Elective Treatment Wait Times

66%

of Māori and 68% of non-Māori patients waited for less than 4 months for elective treatment in Quarter 4 of 2024-25. A small decrease from Quarter 1 when the rates were 64% and 67%. The 2030 target is 95%.

OUR YEAR IN NUMBERS

NGĀ TATAURANGA O TE TAU

Cancer Treatment

86%

of Māori and non-Māori received cancer treatment within 31 days from the decision to treat (Q4 2024-25). Rates have remained stable (high of 92% Māori in Q1). Our rohe is close to the 2030 target of 90%, noting small absolute numbers affect interpretation.

First Specialist Appointments

66.5% CAPITAL & COAST
HOSPITAL

60% HUTT VALLEY
HOSPITAL

of patients waited less than four months.

The 2024/25 milestone was 62%, and the 2030 target is 95%. This continues a downward trend since 2023-24 (83.1% Capital & Coast; 63% Hutt Valley). Ethnicity data is unavailable.

Screening

Bowel Screening (60-75 years)

56% Māori and **60%** non-Māori had a bowel screening test in the past two years (Q4 2024-25). These rates are very low with little change from Q1.

Cervical Screening (25-69 years)

71% Māori and **76%** non-Māori women were up to date (Q4 2024-25).

Up from 56% Māori and 65% non-Māori (Q4 2023-24) – a notable increase.

68% of Māori and **70%** of non-Māori women aged 45-69 years and eligible for breast cancer screening had been screened in the previous two-year period. These rates have remained relatively static since reporting started in Quarter 4 of 2023-24.

Communications and engagement

62% **94%**
OPEN RATE SUBSCRIBER GROWTH

He Pūrongo Oranga, our weekly e-newsletter, achieved an average open rate of 62% – nearly 2x the national benchmark for public-sector communications – and our subscriber list has grown by 94% since launch.

2.5×
LINKEDIN FOLLOWERS

Our LinkedIn page launched and grew its following by 2.5x, with engagement rates well above sector benchmarks.

E-TANGATA ARTICLE REACHED

15k–20k
ESTIMATED READERS

E-Tangata Op-Ed Spotlight: Our e-Tangata article “*Why are there more vape shops than GPs in my suburb?*” (20 July 2025) reached an estimated 15,000–20,000 readers across website and social channels in its first week, sparking kōrero on hauora while also unveiling our Whaitua data tool.

2k–8k
FACEBOOK POST
REACH PER WEEK

On Facebook, posts reached an average of 2,000–8,000 people per week, with strong interaction on videos featuring whānau voices and Whaitua stories.

ORANGA PRIORITIES FOR OUR ROHE

In our March 2025 Community Health Plan, we set out shared priorities shaped by the voices of whānau, iwi, and communities across our rohe.

These priorities are grounded in whānau aspirations and in our early assessment of how the health system is performing for whānau and what needs to change.

**Our overarching priority is:
to increase access to affordable,
kaupapa-led care in every whaitua.**

This means creating spaces where care is local, culturally safe, and joined up – not fragmented or conditional.

In practice, this looks like:

- Building on successful whānau-centred models already led by our rūnanga, such as the tamaiti whāngai philosophy of Te Rūnanganui o Te Āti Awa ki Te Ūpoko o Te Ika and the mauri ora model that guides Te Rūnanga o Toa Rangatira.
- Ensuring services are safe, mana-enhancing, affordable, and integrated – located where whānau already go and feel at home.
- Growing a culturally competent workforce with a high proportion of Māori kaimahi where the manaaki feels the same across every doorway.
- Expanding home-based care and support for those who need it most, including whānau with pēpī hou and people with mobility needs.
- Strengthening outreach services that use trusted relationships – kaiawhina, aunties, uncles – to connect with unenrolled or isolated whānau, supported by technology such as telehealth, apps, and podcasts.
- Taking a collective impact approach built on partnership, shared goals, and common values.

Where Services Will Be Based

To reach whānau where they live, learn, and gather, services will be based:

- In whaitua with high Māori populations and other priority groups.
- At marae, community hubs, whānau centres, faith-based sites, kura, and youth spaces.
- In homes, mobile clinics, and transitional support settings, including drop-in and refuge spaces.
- Within existing kaupapa Māori sites such as Ngā Rārangī Whare (Waiwhetu), Kōkiri Marae (Seaview), Te Whare Whakaruruhau o Raumanuka (Naenae), and Whakamaru (Wellington City Mission). These services already demonstrate excellence but require long-term, integrated investment to grow.
- In new or redeveloped locations such as the Kenepuru site, designed to reflect kaupapa Māori values from the ground up.

What Services Will Be Offered

Te Whare Tapa Whā based care:

Primary and community health, mental health, and dental services.

Screening, health education, and support groups.

- Traditional healing practices – rongoā, mirimiri, tohunga, wai ora.
- Specialist and minor surgical services that can safely be delivered in community settings, reducing hospital pressure.
- Post-operative and rehabilitation care, supported by clinicians who also build capability in primary care and with whānau.
- Whānau Ora and Social Support Services:
- Disability, employment, youth, tenancy, and transport support – ideally on-site or nearby.
- Community Connections:
- Access to wider amenities such as mara kai, social supermarkets, and transitional housing.

Proximity to kōhanga, kura, libraries, sports and recreation facilities that strengthen whānau wellbeing.

Clinical and Public Health Priorities

As we expand kaupapa-led, community-based care, we will focus on ten critical priorities:

1. Increase Māori enrolment in primary health care (currently 84%, meaning 16% remain unenrolled).
2. Lift immunisation rates – only 65% of Māori tamariki are fully immunised at 24 months.
3. Strengthen early-years support for māmā, pēpē, and whānau – the first 2000 days are crucial for lifelong ora.
4. Reduce poor housing conditions – Māori are 5.2 times more likely to be hospitalised for respiratory disease.
5. Improve oral health access – only 57.9% of Māori 5-year-olds are seen by oral health services; many rangatahi are unaware of their free entitlement.
6. Improve mental health and wellbeing – 22.2% of wāhine and 17.4% of tāne Māori experience high psychological distress; hospitalisation rates for mental health remain more than twice those of non-Māori.
7. Prevent and better manage long-term conditions – diabetes, obesity, cancer, COPD, and cardiovascular disease through proactive care in homes and communities.
8. Improve kai security and nutrition knowledge, including mara kai initiatives and the restoration of traditional kai practices.
9. Protect and restore waiora – improving the safety and quality of water in awa and moana to sustain physical, spiritual, and cultural wellbeing.
10. Increase supply of accessible housing for tangata whaikaha, kaumātua, and multigenerational whānau – ensuring people can age in place, connected to culture and community.



KI TE HOE LOOKING AHEAD

As we move toward Matariki 2026, our focus is clear: to deepen whanaungatanga, strengthen our foundations, and continue shaping a system that upholds mana motuhake.

We carry our mokopuna in mind and our tipuna by our side as we steer our waka forward – together.

Looking ahead, we remain committed to achieving system transformation, not just improved service delivery.

Our next phase will focus on:

- Embedding kaupapa Māori service models within each whaitua.
- Building sustainable funding partnerships with iwi, government, and community organisations.
- Using data and insights from *Whaitua* and the *Monitoring for Oranga Framework* to measure progress and drive equitable investment.

Together, these priorities form a pathway toward an oranga ecosystem – one where whānau thrive, whenua and wai are restored, and our mokopuna inherit a system that truly serves them.

Looking ahead, we remain committed to achieving system change, not just service delivery. We carry our mokopuna in mind and our tipuna by our side as we steer our waka forward – together. Ki te hoe!



APPENDIX

FINANCIAL PERFORMANCE

FINANCIAL STATEMENTS – PŪRONGO PŪTEA



Performance Report

AATHPB

For the year ended 30 June 2025

Prepared by Convex Accounting Ltd



Entity Information

AATHPB

For the year ended 30 June 2025

'Who are we?', 'Why do we exist?'

Legal Name of Entity

Āti Awa Toa Hauora Partnership Board

Entity Type and Legal Basis

Charitable Trust

Registration Number

CC61040

Entity's Purpose or Mission

To lead a movement towards an oranga ecosystem for our mokopuna to thrive

- Our mission is strengthened through the identity and connection of mana whenua in our rohe to Āti Awatanga and Toarangatiranga
- Te Tiriti o Waitangi provides a foundation for how this Poari will work to achieve an oranga ecosystem through the application of our mātauranga and a Te Āo Māori world view.
- It is not about expanding access to siloed models of health support that have failed our people; it is about system change that reflects the voices and aspirations of whānau, speaks to the social determinants of pae ora, and supports intergenerational wellbeing.
- Improving hauora outcomes by investing in and embedding kaupapa Māori approaches will benefit everyone - our goal is to build a system that will be fair, mana enhancing, and demonstrate aroha for all consumers and whānau who reside in our rohe .

Our rohe includes Kapiti, Porirua, Poneke and Te Awa Kairangi . Within and across these whaitua we serve a diverse population with wide-ranging needs and inconsistent access to appropriate health, disability, housing, transport and other services and social supports.

Entity Structure

Formally established as a charitable trust and recognised under Order in Council in November 2022, the Ātiawa Toa Haoura Partnership Board is one of 15 iwi Māori partnership boards now established across Aotearoa under the Pae Ora (Healthy Futures) Act 2022.

There are six seats on the Ātiawa Toa Partnership Board; four of which are reserved for mana whenua (including a kaumatua role), one for mātauranga and one for a Hauora specialist. Our Board includes representatives from two iwi: Te Āti Awa and Ngāti Toa Rangitira (Ngāti Toa) and three rūnanga: Ātiawa ki Whakarongotai, Te Rūnanganui o Te Āti Awa ki te Upoko o te Ika A Maui and Te Rūnanga o Toa Rangitira.

Current members of the Poari , including its inaugural Chair, Hikitia Ropata, were appointed on 13 April 2022 for a term of three years .

The Board is also part of the Te Ikaroa (Central) regional collective of IMPBs and works closely with these IMPBs as well as with the national network of IMPBs to share insights, ideas and resources and to identify opportunities for joint action.

Main Sources of Entity's Cash and Resources

The sole source of funding for is a contract with Government. This was signed with Te Aka Whai Ora and is now managed by Te Whatu Ora.

This contract assists the Ātiawa Toa Partnership Board to fulfil its function under the Pae Ora (Healthy Futures) Act 2022.

Main Methods Used by Entity to Raise Funds

No funds have been raised outside of the contract signed with Te Aka Whai Ora.

Entity's Reliance on Volunteers and Donated Goods or Services

The Ātiawa Toa Partnership Board will seek to maanaki and provide koha to whānau and organisations who participate in engagements on improving hauora Māori in this rohe. However, the Board will rely on whānau willingness to give their time, energy and insights.

Contact Details

Physical: 45 Rugby Street, Mount Cook, Wellington

Approval of Performance Report

AATHPB

For the year ended 30 June 2025

The Governing Body are pleased to present the approved Performance Report including the historical financial statements of Āti Awa Toa Hauora Partnership Board for year ended 30 June 2025.

Approved for and on behalf of Āti Awa Toa Hauora Partnership Board.



Board Member

23 October 2025

Date



Board Member

23 October 2025

Date

Statement of Service Performance

AATHPB

For the year ended 30 June 2025

'What did we do?', 'When did we do it?'

Description of Entity's Outcomes

Our primary accountability is to our Iwi and rūnanga who elected us and to the local whānau whose interests we represent. We also have a statutory role and functions to fulfil under the Pae Ora Act (Healthy Futures) Act 2022 to enable and ensure Māori have a meaningful role in the planning and design of local services.

As set out in the Act, our overall purpose (s29) is to represent local Māori perspectives on:

- the needs and aspirations of Māori in relation to hauora Māori outcomes; and
- how the health sector is performing in relation to those needs and aspirations; and
- the design and delivery of services and public health interventions within localities.

We will carry out our current legislative functions (s30) by:

- Discussing local health and disability support priorities with whānau and hapū.
- Creating a picture of hauora in our rohe and determining priorities for improvement.
- Sharing insights with the relevant agencies to inform better decisions and services.
- Monitoring how health and other sectors are meeting the hauora needs of our communities over time.
- Supporting kaupapa Māori investment and innovation.
- Reporting back to whānau whānui about progress, opportunities, updates and more.
- Nominating people to represent our rohe on national health planning and advisory groups.

The Pae Ora Act also places requirements on health sector agencies to support Iwi Māori Partnership Boards to achieve their purpose; including “sufficient and timely information” (s15), “administrative, analytical, or financial support” “and engag[ing] with iwi-Māori partnership boards when determining priorities for kaupapa Māori investment” (s21).

Description and Quantification of the Entity's Outputs

To 30 June 2025, the Ātiawa Toa Partnership Board has been focused on developing its 2024-2040 Board Strategy, and setting up a small Secretariat to support our Poari in carrying out its legislative and governance functions.

The milestones set for Ātiawa Toa Partnership Board by Te Aka Whai Ora during the 2025 year are:

Milestone	Status
Progressing whānau voice engagement and reporting of insights	Completed
Respond to Ministerial directive to develop and submit a Community Health Plan (CHP) with the following components: <ul style="list-style-type: none"> Local health needs assessment Set of local priorities informed by whānau voice and other evidence Monitoring framework Three-year work plan Assessment of alignment with government health priorities and targets 	Completed
Reporting back to Māori in our rohe	Completed
Monitoring and reporting on health sector performance	Ongoing
Influencing strategic commissioning and supporting system stewardship of hauora Māori	In Progress

Additional Output Measures

1. Whānau Engagement: Regular hui and engagements with iwi, rūnanga, and whānau to gather insights and feedback.
2. Monitoring and Reporting: Development of an oranga monitoring framework to track the performance of health and other sectors in meeting the needs of whānau.
3. Strategic Relationships: Building and maintaining relationships with government agencies, community organizations, and other IMPBs for collaborative efforts and shared resources.

Additional Information

Long-term Strategy and Business Plan

Our Strategic Plan for 2024-2040 and our Business Plan for 2024-2025 were completed and approved by the Poari in February 2024. Our Strategy sets out our vision, mission, three high-level strategic goals, and an organisational development goal of building our capability and capacity to deliver. Our Business Plan sets out our work plan to achieve the following immediate priorities:

Respect whānau voice at all stages of the process

Over the coming year we will work with our iwi and others to establish ongoing mechanisms for collecting and elevating whānau voices in our rohe on all dimensions of oranga – oranga wai, oranga whenua, and oranga whānau.

Redefine what gets monitored

While data rich in some areas, the health system does not routinely measure or report on oranga wai, oranga whenua and other key dimensions of oranga. We will listen to what whānau tell us is most important to them for their health, healing and wellbeing, and develop a monitoring framework with key outcomes, indicators and data sources that will enable us to assess how well how the system is performing in those areas.

Re-imagining health system investment

This means working collectively across the social, economic and environmental sectors to develop and implement solutions that address the broader determinants of health as part of our mission to develop an oranga ecosystem.

Organisational Development

Over the coming year we need to further develop our internal capability and capacity to effectively deliver on our strategic priorities and possible new priorities that may emerge.

Statement of Financial Performance

AATHPB

For the year ended 30 June 2025

'How was it funded?' and 'What did it cost?'

	NOTES	2025	2024
Revenue			
Revenue from providing goods or services	1	1,246,688	1,584,187
Interest, dividends and other investment revenue	1	38,699	32,181
Total Revenue		1,285,387	1,616,369
Expenses			
Volunteer and employee related costs	2	873,285	496,572
Costs related to providing goods or service	2	272,009	232,354
Grants and donations made	2	-	1,810
Other expenses	2	105,086	94,366
Total Expenses		1,250,380	825,103
Surplus/(Deficit) for the Year		35,007	791,266

This statement has been prepared without conducting an audit or review engagement, and should be read in conjunction with the attached Compilation Report.

Statement of Financial Position

AATHPB

As at 30 June 2025

'What the entity owns?' and 'What the entity owes?'

	NOTES	30 JUN 2025	30 JUN 2024
Assets			
Current Assets			
Bank accounts and cash	3	1,346,915	1,817,230
Debtors and prepayments	3	400,021	416,411
Total Current Assets		1,746,936	2,233,641
Non-Current Assets			
Property, Plant and Equipment	5	34,990	44,124
Total Non-Current Assets		34,990	44,124
Total Assets		1,781,927	2,277,765
Liabilities			
Current Liabilities			
Creditors and accrued expenses	4	135,150	89,715
Other current liabilities	4	340,158	916,438
Total Current Liabilities		475,307	1,006,153
Total Liabilities		475,307	1,006,153
Total Assets less Total Liabilities (Net Assets)		1,306,619	1,271,612
Accumulated Funds			
Accumulated surpluses or (deficits)	6	1,306,619	1,271,612
Total Accumulated Funds		1,306,619	1,271,612

This statement has been prepared without conducting an audit or review engagement, and should be read in conjunction with the attached Compilation Report.

Statement of Cash Flows

AATHPB

For the year ended 30 June 2025

	2025	2024
Cash Flow from Operating Activities		
Interest, Dividends and Other Investment Receipts	66,859	3,505
Cash Receipts from Other Operating Activities	659,014	948,462
GST	(1,865)	(206,884)
Payments to Suppliers and Employees	(1,185,815)	(818,532)
Donations or Grants Paid	-	(1,810)
Total Cash Flow from Operating Activities	(461,807)	(75,259)
	2025	2024
Cash Flows from Investing and Financing Activities		
Payments to Acquire Property, Plant and Equipment	(8,508)	(52,593)
Total Cash Flows from Investing and Financing Activities	(8,508)	(52,593)
	2025	2024
Net Increase / Decrease in Cash		
Net Increase / Decrease in Cash	(470,315)	(127,852)
	2025	2024
Cash Balances		
Cash and Cash Equivalents at Beginning of the Year	1,817,230	1,945,082
Cash and Cash Equivalents at End of the Year	1,346,915	1,817,230
Net Change in Cash for Period	(470,315)	(127,852)

Statement of Accounting Policies

AATHPB

For the year ended 30 June 2025

'How did we do our accounting?'

Basis of Preparation

The entity has elected to apply PBE SFR-A (NFP) Public Benefit Entity Simple Format Reporting - Accrual (Not-For-Profit) on the basis that it does not have public accountability and has total annual expenses equal to or less than \$2,000,000. All transactions in the Performance Report are reported using the accrual basis of accounting. The Performance Report is prepared under the assumption that the entity will continue to operate in the foreseeable future.

Goods and Services Tax (GST)

The entity is registered for GST. All amounts are stated exclusive of goods and services tax (GST) except for accounts payable and accounts receivable which are stated inclusive of GST.

Income Tax

Āti Awa Toa Hauora Partnership Board is wholly exempt from New Zealand income tax having fully complied with all statutory conditions for these exemptions.

Bank Accounts and Cash

Bank accounts and cash in the Statement of Cash Flows comprise cash balances and bank balances (including short term deposits) with original maturities of 90 days or less.

Tier 2 PBE Accounting Standards Applied

The Board has not adopted any Tier 2 PBE Accounting Standards in the preparation of these accounts.

Changes in Accounting Policies

There have been no changes in accounting policies. Policies have been applied on a consistent basis with those of the previous reporting period.

Notes to the Performance Report

AATHPB

For the year ended 30 June 2025

	2025	2024
1. Analysis of Revenue		
Revenue from providing goods or services		
Te Aka Whai Ora - Contract 381667-00	660,500	998,000
Te Aka Whai Ora - One-off Locality Boundary Determination Support	586,188	586,188
Total Revenue from providing goods or services	1,246,688	1,584,187
Interest, dividends and other investment revenue		
Interest Income	38,699	32,181
Total Interest, dividends and other investment revenue	38,699	32,181
	2025	2024
2. Analysis of Expenses		
Volunteer and employee related costs		
Salaries & Wages	718,882	334,265
Subcontractors	152,527	159,028
Staff Training	1,425	3,279
Professional Development	450	-
Total Volunteer and employee related costs	873,285	496,572
Costs related to providing goods or services		
ACC	536	-
Bank Fees	315	300
Entertainment-Manaaki Deductible	1,128	3,300
Freight & Courier	84	42
General Expenses	-	284
Kaitiaki - Travel	14,319	16,498
Kaitiaki - Honorarium	93,202	86,591
Kaitiaki - Venue Hire & Manaaki	7,710	2,189
Low Value Assets	-	3,171
Motor Vehicle Expenses	-	80
Office Expense	19,542	21,275
Program Cost - Strategic Commissioning	1,938	260
Program Cost - Strategic Policy	17,437	59
Program Cost - Whanau Voice	32,034	15,175
Rent	36,068	30,056
Stationery, Photocopying & Printing	16,003	10,291
Subscriptions	23,832	16,463
Travel International	-	15,732
Travel National	424	9,405
Telephone & Internet	7,438	1,185
Total Costs related to providing goods or services	272,009	232,354

	2025	2024
Grants and donations made		
Donations	-	1,810
Total Grants and donations made	-	1,810
Other expenses		
Accounting	38,634	30,691
Audit Fees	7,300	(4,150)
Consulting	16,960	37,772
Depreciation	17,642	8,469
Interest Expense	-	64
Legal Expenses	23,216	19,020
Research & Development	-	2,500
Sponsorship	1,334	-
Total Other expenses	105,086	94,366
	2025	2024

3. Analysis of Assets

Bank accounts and cash		
Atiawa Toa Hauora	148,647	570,830
Term Deposits	1,200,000	1,250,000
Credit Card	(1,732)	(3,600)
Total Bank accounts and cash	1,346,915	1,817,230
Debtors and prepayments		
Accounts Receivable	391,181	379,788
Accrued Revenue	516	28,676
Prepayments	8,324	7,948
Total Debtors and prepayments	400,021	416,411
	2025	2024

4. Analysis of Liabilities

Creditors and accrued expenses		
Accounts Payable	67,341	36,157
GST	41,364	42,349
Holiday Pay Liability	26,445	11,209
Total Creditors and accrued expenses	135,150	89,715
Other current liabilities		
Income in Advance	340,158	916,438
Total Other current liabilities	340,158	916,438

	2025	2024
5. Property, Plant and Equipment		
Buildings		
Buildings at cost	11,180	11,180
Accumulated depreciation - buildings	(1,873)	(839)
Total Buildings	9,307	10,342
Plant and Equipment		
Plant and machinery owned	49,921	41,413
Accumulated depreciation - plant and machinery owned	(24,238)	(7,630)
Total Plant and Equipment	25,683	33,783
Total Property, Plant and Equipment	34,990	44,124
	2025	2024

6. Accumulated Funds

Accumulated Funds		
Opening Balance	1,271,612	480,346
Accumulated surpluses or (deficits)	35,007	791,266
Total Accumulated Funds	1,306,619	1,271,612
Total Accumulated Funds	1,306,619	1,271,612

7. Commitments

There are no commitments as at 30 June 2025 (Last year - nil).

8. Contingent Liabilities and Guarantees

There are no contingent liabilities or guarantees as at 30 June 2025 (Last year - nil).

9. Related Parties

There were no transactions involving related parties during the financial year.

10. Events After the Balance Date

There were no events that have occurred after the balance date that would have a material impact on the Performance Report (Last year - nil).

11. Ability to Continue Operating

The entity will continue to operate for the foreseeable future.

INDEPENDENT AUDITOR'S REPORT



INDEPENDENT AUDITOR'S REPORT

To the Trustees of Āti Awa Toa Hauora Partnership Board

Report on the Performance Report

We have audited the performance report of Āti Awa Toa Hauora Partnership Board (Trust) on pages 6 to 15 which comprises the entity information, the statement of service performance, the statement of financial performance and statement of cash flows for the year ended 30 June 2025, the statement of financial position as at 30 June 2025, and the statement of accounting policies and other explanatory information.

In our opinion:

In our opinion the accompanying performance report presents fairly, in all material respects:

- a) the entity information and service performance for the year ended 30 June 2025 in that the service performance information is appropriate and meaningful and prepared in accordance with the entity's measurement bases or evaluation methods;
- b) the financial position of Āti Awa Toa Hauora Partnership Board as at 30 June 2025, and the statement of financial performance and cashflows for the year ended in accordance with Public Benefit Entity Simple Format Reporting – Accrual (Not-For-Profit) issued by the New Zealand Accounting Standards Board.

Basis of Opinion

We conducted our audit of the financial statements in accordance with International Standards on Auditing (New Zealand) (ISAs (NZ)) and the audit of the service performance in accordance with the ISAs (NZ) and New Zealand Auditing Standard (NZ AS) 1 (Revised) *The Audit of Service Performance Information*. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Performance report* section of our report. We are independent of the entity in accordance with Professional and Ethical Standard 1 *International Code of Ethics for Assurance Practitioners (including International Independence Standards (New Zealand))* issued by the New Zealand Auditing and Assurance Standards Board, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Other than in our capacity as auditor we have no relationship with, or interests in, Āti Awa Toa Hauora Partnership Board.

Whanganui | Ngāmotu | Taupō | Te Papahoa | Rotorua
(06) 345 8539 | tanderson@silks.co.nz | ctown@silks.co.nz | www.silksaudit.co.nz

Responsibilities of the Trustees for the Performance Report

The Trustees are responsible for the preparation of the performance report in accordance with Public Benefit Entity Simple Format Reporting – Accrual (Not-For-Profit) issued by the New Zealand Accounting Standards Board.

- (a) The selection of elements/aspects of service performance, performance measures and/or descriptions and measurement bases or evaluation methods that present service performance information that is appropriate and meaningful in accordance with the applicable performance reporting framework, The preparation and fair presentation of service performance information in accordance with the entity's measurement bases or evaluation methods, in accordance with the applicable performance reporting framework; The overall presentation, structure and content of the service performance information in accordance with the applicable performance reporting framework; and;
- (b) the preparation and fair presentation of the performance report on behalf of the entity which comprises:
 - the entity information;
 - the statement of service performance; and
 - the statement of financial performance, statement of financial position, statement of cash flows, statement of accounting policies and notes to the performance report in accordance with Public Benefit Entity Simple Format Reporting – Accrual (Not-For-Profit) issued by the New Zealand Accounting Standards Board, and
- (c) such internal control as the Trustees determine is necessary to enable the preparation of the performance report that is free from material misstatement, whether due to fraud or error.

In preparing the performance report, the Trustees are responsible on behalf of Āti Awa Toa Hauora Partnership Board, for assessing the entity's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the Trustees either intend to liquidate Trust or to cease operations, or have no realistic alternative but to do so.

Auditor's Responsibilities for the Audit of the Performance Report

Our objectives are to obtain reasonable assurance about whether the performance report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (NZ) and NZ AS 1 (Revised) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate or collectively, they could reasonably be expected to influence the decisions of users taken on the basis of this performance report.

A further description of the auditors' responsibilities for the audit of the financial statements is located at the External Reporting Board's website at:

<http://www.xrb.govt.nz/standards-for-assurance-practitioners/auditors-responsibilities/audit-report-18/>

Restriction on Responsibility

This report is made solely to the trustees, as a body, in accordance with section 42F of the Charities Act 2005. Our audit work has been undertaken so that we might state to the trustees those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the trustees as a body, for our audit work, for this report, or for the opinions we have formed.



Cameron Town
Silks Audit Chartered Accountants Ltd
Whanganui, New Zealand
Date: 23 October 2025

Report to Governance

Āti Awa Toa Hauora Partnership
Board

For the Year ended 30 June 2025

23 October
2025

23 October 2025

26 Ngatitua Street
Takapuwahia, Porirua
New Zealand, 5022

Tena Koutou Chairperson and members of the board,

Report to Governance – Management Letter

We completed the audit of Āti Awa Toa Hauora Partnership Board on the 23 October 2025 financial statements for the year ended 30 June 2025. Please find attached our Report to Governance in connection with the audit.

We would like to emphasise that our audit work involves the review of only those systems and controls in your organisation upon which we rely on for audit purposes. Our examination may not have identified and should not be relied upon to identify all control weaknesses that exist.

We take this opportunity to thank members of governance, management and staff for the co-operation afforded to us during the course of the audit.

If we can be of further assistance, please advise.

Nga mihi nui
Silks Audit Chartered Accountants

A handwritten signature in blue ink, appearing to read 'Cameron Town'.

Cameron Town
Engagement Partner

Email: ctown@silks.co.nz
Encl: Report to Governance

Executive summary

This report details the processes, findings and recommendations from our audit of Āti Awa Toa Hauora Partnership Board in accordance with International Standards on Auditing (NZ), and the terms of our engagement as set out in our audit engagement letter. In accordance with our normal practice we enclose our comments on certain areas of the internal control and accounting practices which came to our attention during our recent audit. We also offer recommendations for possible courses of action.

We have prepared this report solely for the use of Āti Awa Toa Hauora Partnership Board. It forms part of the continuing dialogue between the organisation and ourselves and contains constructive suggestions to improve some practices which we identified in the course of our normal audit procedures. We would like to emphasise that our audit work involves the review of only those systems and controls in your organisation upon which we rely for audit purposes. Our examination may not have identified and should not be relied upon to identify all control weaknesses that exist, and this report should not be relied on to include all such matters as we will expect management to apply continuous improvements in these areas and Governance members to continually monitor the level of controls and procedures in place at the organisation.

Overall, we are satisfied that the organisation has presented its results for the year ended 30 June 2025 to a good level of compliance with applicable financial reporting standards. Adjustments made during the audit are noted in Appendix 1.

We would like to thank Governance, management, and staff for their co-operation extended to us, during the course of the audit. We have received full co-operation.

Overall result

Our audit work is complete. We have issued an unmodified audit report on the financial statements of the organisation for the year ended 30 June 2025. The audit report contains no matters or items that the Board needs to consider further.

Accounting policies

Auditing standards require us to discuss with you the qualitative aspects of the Organisation's accounting practice and financial reporting. We reviewed the financial statements of the Organisation against the Financial Reporting Standards and templates applicable to the organisation Tier 3: Public Benefit Entity Simple Format Reporting – Accrual (Not-for-profit) and noted no material departures from the requirements.

These findings and recommendations should be discussed and agreed with the organisations management and those charged with governance. Provided below is a summary of key findings:

New Recommendations

Item #	Findings and recommendations	RATING
1	Approval of payroll report	Necessary
2	Credit card Statement approval	Necessary

The following framework for ratings has been developed to facilitate discussion with the Organisation's management in order to prioritise issues according to their relative significance.

Rating	Definition
Urgent	Issue represents a control weakness, which could have or is having major adverse effect on the ability to achieve process objectives. This needs to be addressed immediately.
Necessary	Issue represents a control weakness, which could have or is having significant adverse effect on the ability to achieve process objectives. Address at the earliest reasonable opportunity, generally within 6 months.
Beneficial	Issue represents a minor control weakness, with minimal but reportable impact on the ability to achieve process objectives. Address generally within six to 12 months.

Summary of previous recommendations

Rating	Priority			
	Urgent	Necessary	Beneficial	Total
Open	0	2	0	2
Implemented or Closed	0	0	0	0
Total	0	2	0	2

Audit scope and objectives

Silks Audit Chartered Accountants Limited has been engaged to carry out the audit of Āti Awa Toa Hauora Partnership Board.

Auditor responsibilities include a requirement to express an opinion on the organisation's financial statements arising from our audit conducted in accordance with the International Standards on Auditing (NZ).

Our audit objectives are to:

report on whether the financial statements give a true and fair view, and

report to Management about control environment issues that should be addressed by the organisation.

A strong control environment would feature adequate segregation of duties over important financial processes, and independent reviews as compensating controls should it not always be practicable for the duties to be separated.

We have documented, tested and assessed the controls supporting the Organisation's key transaction streams, and there are some significant weaknesses to report. Control weaknesses identified during the audit have been included in the Summary Findings section of this report.

Confirmation of audit independence

In conducting our audit, we are required to comply with the independence requirements of the Code of Ethics issued by the Professional Standards Board of Chartered Accountants Australia and New Zealand and the External Reporting Board.

Our own internal policies and procedures are put in place to identify any threats to our independence, and to appropriately deal with and, if relevant, mitigate those risks.

For the comfort of the Board, we note that the following processes assist in maintaining our independence:

No other work is permitted to be undertaken by Silks Audit Chartered Accountants.

We have not provided any non-audit services to the organisation. We confirm the independence of the Silks Audit engagement team.

Key financial statement audit risks

We have set out below our findings in areas we have identified as risks.

Revenue Recognition

Identified audit risks

A key audit risk is in relation to revenue recognition. There is a rebuttable presumption under Auditing Standards that there is a risk of fraud in relation to revenue recognition.

Conclusion of our work

From our audit work performed we found no issues regarding revenue recognition in the financial statements. However, there are recommendations included to ensure appropriate approval and checks are being performed at a Senior management and governance level.

Payroll not Approved or Checked

Identified audit risks

Payroll is processed in MYOB payroll. The accuracy of payroll processing is dependent on appropriate approval of payroll changes and checking of the payroll report.

Conclusion of our work

From our audit work performed we found issues regarding payroll balances included in the financial statements. However, there are recommendations included to ensure appropriate approval and checks are being performed at a Senior management and governance level.

Investment Existence and Valuation

Identified audit risks

A significant audit risk is in relation to Investment Existence and Valuation. An investment must exist before it can be measured. The measurement of investments is its valuation. Valuation may be determined either at fair value or at cost less any impairment.

Conclusion of our work

From our audit work performed we found no issues regarding Investment Existence and Valuation in the financial statements. However, there are recommendations included to ensure appropriate approval and checks are being performed at a Senior management and governance level.

Management judgements and estimates

Under International Standards on Auditing (NZ) we have a responsibility to ensure that you have been informed about the process used by the Organisation in formulating particularly sensitive accounting estimates, assumptions or valuation judgements. Overall, we note that the judgements and estimates by management in preparing the results for the year ended 30 June 2025 appear reasonable.

The most significant areas of judgement, assumptions and estimates applied by management relate to:
Employee leave entitlements

We are not aware of any other sensitive accounting estimates, assumptions or valuation judgements made by the Organisation.

Matters requiring board input

We have placed reliance on the Board's review and approval of the following matters:

Minutes of the Board meetings;
Implementation of such controls as is needed to ensure that financial statements are presented fairly;
Review and approval of management accounts;
Review and approval of 2025 and 2026 budgets;
Notification of fraud; and
Review and approval of the financial statements.

Governance and accountability

Good governance and accountability need and support each other and, if done well, enhances trust and confidence by the beneficiaries and the public. Good governance encourages and can result in good accountability. In turn, accountability is a vital element of good governance.

Materiality and adjusted / unadjusted differences

Materiality means, in the context of an audit or review, if financial information is omitted, misstated or not disclosed it has the potential to affect the decisions of users of the financial statements. Materiality is used by auditors in making judgements on the amount of work to be performed, which balances require work and for evaluating the financial report. Materiality is initially calculated at the planning stage and has an influence on the amount of work we do, as well as where we direct our audit efforts. Materiality is not only based on a numeric quantification but is assessed qualitatively for some balances and disclosures.

During the course of our audit, we did not identify any adjustment. All adjusted differences have been detailed in Appendix 1 of this report.

It should be noted that the auditing standards do not require us to communicate misstatements that are considered "clearly trivial" and as such, if we identify such misstatements, we will not communicate these to you. We consider "clearly trivial" to be 10% or less of our performance materiality.

Going concern

Management and governance are required to make a formal assessment on going concern. Under Auditing Standards, we are required to review this assessment for appropriateness.

During the course of our audit we have identified no material misstatements. All unadjusted differences (none of which we consider material, either individually or in aggregate) have been detailed in Appendix 1 of this report.

Paragraph 15 of ISA (NZ) 570 states:

15. The auditor shall enquire of those charged with governance as to their knowledge of events or conditions beyond the period of their assessment that may cast significant doubt on the entity's ability to continue as a going concern. The assumption of going concern was concluded as appropriate for the Organisation given the Organisation's funding sources and its Year to date performance for the following financial period.

Fraud

During the audit, no matters relating to fraud, concerning either employees or management, have come to our attention. It should be noted that our audit is not designed to detect fraud, however, should instances of fraud come to our attention, we will report them to you.

Compliance with laws and regulations

We have made enquiries in relation to compliance with laws and regulations during the course of our audit. We have not become aware of any instances of non-compliance with laws and regulations which has materially impacted the financial position or performance of the Organisation.

Audit Quality

To enhance audit quality - PES-3 Equivalent to International Standard on Quality Management 1 (ISQM 1) (Effective on 15 Dec 2022) was introduced in New Zealand to change the system of quality control to a system of quality management.

These changes require Silks Audit Chartered Accountants Limited which perform audits, reviews of financial statements, and undertake other assurance engagements, and agreed-upon procedures engagements are required to design, implement and operate a system of quality management using a risk-based approach.



How do we deliver audit quality

Confidence in our business communities is essential to New Zealand's prosperity. High quality, independent audit is the cornerstone of that confidence and audit quality.

To achieve audit quality

- Governance and Leadership – We have assigned Cameron Town as the person responsible and accountable of Silks Audit leadership.
- To establish and ensure all ethical requirements are complied and fulfilled in our day to day audit work.
- Establish client acceptance and continuance procedures of our client relationships whether new or existing which to ensure our strategic direction is in line with the type of clients we engage with.
- Establish quality objectives within Silks Audit to ensure we conduct high quality audits, reviews and or other assurance work. We ensure we have our audit methodology reviewed both internal and external to ensure we are carrying out the work in accordance with the current standards. Silks Audit engage external firms to provide both quality reviews and consultation advice to ensure we are providing a quality audit and assurance service.
- Silks Audit utilize technology and external resources for maintaining, allocating and assigning resources in a timely manner and utilize those resources to perform our audit engagements.
- Ensure we effectively communication with our clients and external parties.

New trusts act 2019

The Trusts Act 2019 came into force on 30 January 2021 and applies to all trusts (including charitable trusts). The Charities Commission have a webinar which explains what you need to know about the Trusts Act, and whether you need to make variations to your Trust Deed. We recommend you discuss with your Lawyer whether any amendments need to take place.

Statement of service performance

We have audited your statement of service performance New Zealand Auditing Standard (NZ AS) 1 (Revised), The Audit of Service Performance Information for the year ended.

Under NZ AS 1 – “The objective of the auditor is to express a reasonable assurance opinion on whether the service performance information presents fairly, in all material respects the service performance in accordance with the applicable financial reporting framework”.

Under NZ AS 1 – paragraph 7 - The auditor may achieve the objective of this NZ AS by considering the following two steps:

(a) Assess whether each of the following aspects of the service performance information are appropriate and meaningful in accordance with the applicable financial reporting framework: (Ref: Para. A3)

- The elements/aspects of service performance that the entity has selected to report on.
- The performance measures and/or descriptions the entity has used to report on what it has done in relation to those elements/aspects of service performance during the reporting period.
- The measurement basis or evaluation method used to measure or evaluate the performance measure and/or description.

(b) Assess whether the reported service performance information fairly reflects the actual service performance and is not materially misstated.

We have found no matters which have to be reported to the governing body based upon our audit of the statement of service performance or the following matters have been brought to our attention:

Summary of findings

1. No evidence of payroll report approval		Rating of finding: Necessary	
Observation			
During our review of the payroll process, we were unable to sight evidence that payroll reports are reviewed and approved by authorised personnel before processing.			
Recommendation			
We recommend implementing a formal payroll approval process where payroll reports are reviewed and signed off by an authorised official before processing. This approval should be documented and maintained for audit purposes. Additionally, a segregation of duties should be enforced to ensure payroll preparation, approval, and disbursement are handled by separate individuals.			
Management and Governance comments and actions			
First raised	2024	Status	Progressing

2. No evidence of Credit card statement approval		Rating of finding: Necessary	
Observation			
During our review of the credit card statements, we were unable to sight evidence of credit card statements are being reviewed and approved by an appropriate authority before payment.			
Recommendation			
We recommend implementing a formal review and approval process for all company credit card statements. By implementing these controls, the board can strengthen financial oversight, reduce risk exposure, and promote responsible spending.			
Management and Governance comments and actions			
First raised	2024	Status	Progressing

Appendix 1 – adjusted and unadjusted differences

Adjusted differences

The following audit adjustments were made to the financial statements:

None

Unadjusted differences

No unadjusted differences for the year ended 30 June 2025

Appendix 2 – Required communication

Standard ✕	Our Response ✓
<i>Auditors responsibility under General Accepted Auditing Standards</i>	<i>We are responsible for the completion of an audit in accordance with the International Standard on Auditing (New Zealand). The detailed terms are included in our letter of engagement signed off by the Board.</i>
<i>Significant accounting policies</i>	<i>We had read the accounting policies and are satisfied that these comply with the relevant accounting standards and disclosure.</i>
<i>Management judgements and accounting estimates</i>	<i>No management judgement or accounting estimate issues identified.</i>
<i>Significant matters</i>	<i>No significant matters identified.</i>
<i>Disagreements with management</i>	<i>No disagreements were had with organisation management.</i>
<i>Difficulties encountered during the audit</i>	<i>No difficulties were encountered during the audit.</i>
<i>Independence</i>	<i>There were no independence issues identified between the Silks Audit employees and/or spouses of those employees and the Board.</i>
<i>Independence – other services</i>	<i>We can confirm no other services were provided to the entity during the course of the audit</i>
<i>Laws and Regulations</i>	<i>The Organisation have confirmed that the Board have complied with all necessary laws and regulations. We did not identify any significant breaches.</i>
<i>Fraud or Illegal Acts</i>	<i>From our enquiries with management and our audit testing we have not become aware of any significant fraudulent or illegal acts during the period.</i>
<i>Accumulation of unadjusted errors</i>	<i>We can confirm that all audit adjustments identified have been adjusted for in the financial statements. We can confirm that there is no accumulation of unadjusted errors which would impact on the financial statements</i>
<i>Deficiencies in internal control</i>	<i>As reported in the internal control section above.</i>

Appendix 3 - Disclaimer

IMPORTANT NOTICE

This report is presented under the terms of our audit engagement letter.

- Circulation of this report is restricted
- The content of this report is based solely on the procedures necessary for our audit.

Purpose of this report

This report has been prepared in connection of our audit of the performance report of Āti Awa Toa Hauora Partnership Board (the 'Trust'), prepared in accordance with prepared in accordance with PBE SFR-A (NFP) Public Benefit Entity Simple Format Reporting - Accrual (Not-For-Profit), as at and for the year ended 30 June 2025.

This report has been prepared for the Trustees in order to communicate matters that are significant to the responsibility of those charged with oversight of the financial reporting process as required by ISAs (including ISA 260 communication with Those Charged with Governance), and other matters coming to our attention during our audit work that we consider might be of interest, and for no other purpose.

Limitations on work performed

This report is separate from our audit report and does not provide an additional opinion on the Trust's performance report, nor does it add to or extend or alter our duties and responsibilities as auditors.

We have not designed or performed procedures outside those required of us as auditors for the purpose of identifying or communicating any of the matters covered by this report.

The matters reported are based on the knowledge gained as a result of being your auditors. We have not verified the accuracy or completeness of any such information other than in connection with and to the extent required for the purposes of our audit.

Restrictions on distribution

The report is provided on the basis that it is only for the information of those charged with governance of the Trust; that it will not be quoted or referred to, in whole or in part, without our prior written consent; and that we accept no responsibility to any third party in relation to it.



**ĀTI AWA
TOA HAUORA**
PARTNERSHIP BOARD

LEVEL 1, SUITE 1
45 RUGBY STREET
MOUNT COOK

WWW.ATIAWATOAIMPB.NZ

