

Rapua Te Āhuru Mōwai - ADHB Mental Health Homelessness Pilot

Governance Group meeting minutes

22 April 2022

Present:

Hineroa Hakiaha	Co-Director Māori MHA	ADHB
Teremoana Te Hira	Service Manager	Mahitahi
Stephen Hart	Operations Manager	CORT
Katie Ferguson	Service Clinical Director	ADHB
Zoe Truell	Project Manager	ADHB
Kara Beckford	Consumer Advisor Manager	DHB/Kāhui Tū Kāha
Kate Sladden	Manager, Planning and Funding	ADHB
Cinnamon Whitlock	Pouwhakahaere Matua – Hauora	Mahitahi
Matilda Barrell	Senior Commercial Advisor	HUD

Apologies:

Mark Goldsmith	Regional Commissioner	MSD
Jacqui Matthews	Senior Advisor	Te Puni Kokiri
Kirsty Buggins	Manager Support Service Design and Implementation	HUD
Raewyn Allan	CEO	Mahitahi
Alison Hudgell	General Manager, Mental Health	ADHB
Segina Te Ahuahu	Principal Advisor Maori/Project Lead	MoH

1. Project Managers report

a. Update on referrals and whaiora in the service.

Referrals Accepted:

- 22 whaiora are currently in the Rapua Te Āhuru Mōwai service.

Demographics of those accepted:

- *Gender:* 11 women, 11 men
- *Ethnicity:* 11 Māori, 8 Pākēhā, 1 Pasifika, 2 African.
- *Current accommodation:*
 - 12 in permanent Rapua homes
 - 3 in Buchanan Rehabilitation Centre
 - 2 in Te Whetu Tawera
 - 4 in interim housing situations waiting to move into their new Rapua homes
 - 1 is in Prison

b. Interim Housing

Work is continuing to try and ring fence some Transitional Housing Units for interim Rapua accommodation. Kāhui Tū Kaha who has worked closely with Rapua, is willing to collaborate and

make around three units available for this purpose. A request has been made to HUD to provide the support needed to put this in place. It has been proposed that this initiative be trialled for 12 months.

c. Developing the Service

The Steering Group continues to oversee the operations, interface and development of the service. Reflective practice is embedded at all levels of the programme, and as a result, ongoing learning and small adjustments are being made to the delivery on the service. There are a number of areas that are being explored including: the involvement and support of whānau, feedback from whaiora on their experience of the service, specialised interim housing, further involvement and championing of the pilot across the wider ADHB mental health services, data gathering, improved assessment for identification of potential Rapua referrals in Te Whetu Tawera, and prevention of readmission planning.

d. Evaluation

Awa Associates have scheduled a workshop with the key partners in the Auckland pilot on 28 April to develop the evaluation framework. They also plan to develop a Theory of Change.

2. CORT report

Stephen Hart reported that the team continues to find good homes for people to move into. When they have a vacancy they look at who will best fit where. Then it can become like dominoes, enabling people to shuffle around houses to best meet their needs. They have been successful in finding homes that Rapua whaiora want.

They now have Makinsie and Tony on board (as well as Jade) in the Rapua CORT team.

Kāinga Ora homes that are being built are fantastic but there is an issue about how Kāinga Ora and CORT see how they are offered. Stephen will meet with HUD and John Tubberty to discuss and report back next meeting. The funding pots need to be worked through to see if they can fit the Rapua model.

3. Mahitahi report

Cinnamon said that things are going really well from their perspective. They continue to receive referrals and there are no struggles. Everyone communicates really well. Relationships are phenomenal. Rapua is a model of how a service should run.

4. Clinical Report

Katie supported CORT and Mahitahi's reports, and emphasized the strength of the relationships.

The clinical teams in ADHB are coming on board more as they see the success. A roadshow will be rolled out for the community teams in the coming months to further inform the services about Rapua and how it works differently.

The Governance Group gave good feedback on the flyer that has been produced largely for Clinicians in the various ADHB mental health services.