



2023

# WellSouth Annual Report

## Karakia Timatanga

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As we emerge from the Covid-19 response, we welcome a new more collaborative and innovative way of working together across the health sector.

***Ka haea te ata***

***Ka hāpara te ata***

***Ka korokī te manu***

***Ka wairori te kutu***

***Ko te ata nui ka horaina***

***Ka taki te ūmere***

***He pō, he pō***

***He ao, he ao,***

***Ka awatea***



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## Chairman's Report

*E kā mana, e kā reo, kā hau e whā, e kā karakataka maha o te takiwā. Tēnā koutou, tēnā koutou, kia ora tātou katoa*

Looking back at the 12 months from July 2022 to June 2023, I want to acknowledge the huge changes across the health sector, transitioning out of the Covid-19 response back in to "business as usual" (BAU), with new ways of working and new pressures.

The sector has been moving swiftly along, re-focussing on Pae Ora, which drives a focus on fairness and improved health and wellbeing in Aotearoa New Zealand through better accessibility, quality and efficiency of care; not leaving anyone behind.

WellSouth has been embracing this way of working for the new "BAU". A new strategy calls for a measurable shift to provide widespread equitable, high trust partnerships across the sector with equity driven decision-making and ongoing commitment to Te Tiriti.

These are not just words. WellSouth is transitioning some of the Covid team into equity-based project and engagement roles and creating new roles toward supporting Māori and Pasifika communities, developing and enhancing relationships with community healthcare providers that are highly engaged with their community. Across the pages of this report, you will read more about this approach, the workforce and programmes putting equity at the forefront in active and meaningful ways.

Key for the sector, and for WellSouth, is collaboration. Whether that is across the sector at a national level lobbying for better retention and recruitment strategies for general practice, or through various individuals at WellSouth who are forging those relationships with key healthcare providers and practices. Collaboration is the key to making the health sector work more efficiently, more holistically and with better outcomes for our Southern community.

It's not only staff and senior leadership. As WellSouth moves forward, we will look at our board and how our role and our example can better serve our community. Thank you to the board, whose input and mahi help steer this ship. This year, we farewell Tony Hill, our deputy chair and the chair of our Finance Audit and Risk Committee. Tony has been a long-serving member of the board and has provided strong support and leadership throughout the years. We will greatly miss his experience and wisdom.

I want to take this opportunity to acknowledge and thank the incredible hard work of staff across the sector. Our practices have huge workforce pressures and shortages no matter what the local, national or worldwide health context is. Now, where Covid led the news, our local press cover wait times, closed books and after-hours shortages. It often paints a negative picture when we know how hard doctors, nurses, practice staff and allied health practitioners work, and the pressures they face.

I hope we can all take time to reflect on our successes and acknowledge that success comes from dedication, hard work and collaboration. My thanks to Andrew and his Senior Leadership Team, as well as the staff across Southland and Otago who keep putting patients at the centre of all that they do.

Ngā mihi nui,



**Doug Hill**  
Board Chair



**Collaboration is the key to making the health sector work more efficiently, more holistically and with better outcomes for our Southern community.**



## Chief Executive's Report

As I write the CEO report following our recent elections, I am blown away by how much has changed since the last annual report where we thought Covid would continue to dominate our work.

At the same time, the health sector was undergoing massive reformation. These were two very all-consuming and defining moments in the history of New Zealand's health sector. We could not predict what would happen, because there was no precedent.

Looking firmly forward and trying to anticipate the changes, we have all but forgotten that a year ago we were still in the midst of the Covid pandemic. A total 78,956 COVID-19 cases were reported during this period, emphasising the crucial role of primary care in the response and vaccination effort. We could not have survived the demands of the pandemic without the hard mahi, flexibility, resilience and compassion of the clinicians and general practice staff in our Southern region.

We are all still feeling the effects of the Covid response, though now more indirectly. WellSouth did not escape the great resignation as we were impacted by Covid-related burnout, staff finally being able to catch up on overdue leave, and staff moving on. The positive – and there almost always is – has been the opportunity for us to focus on workforce development to build on our equity commitments and grow our partnerships in the community.

We also learnt a lot from the Covid response. Working more collaboratively and embracing technology through the pandemic has set us up well to respond to workforce challenges and customer demands. Getting triaged over the phone or via a video chat is now an acceptable and normalised experience for patients, following months of social distancing and online collaboration and connection due to Covid.

We must continue to be innovative ourselves and more generally in the health sector, especially with ongoing workforce shortages.

For us in Southern, a large portion of our enrolled population and our practices are rural, and these communities suffer long-standing and ongoing pressures to find and retain clinical staff. These challenges are exacerbated by an aging clinical workforce, the increasing complexity of patients, and an ever-growing administrative workload.

We take our role to facilitate and find solutions to these challenges seriously. WellSouth has been involved in many efforts to support rural communities, including the Rural Health Sector Review. We co-established Te Hau o Te Ora late last year to make healthcare more accessible and affordable for many whānau in Invercargill as well as support Maitua Medical Clinic to keep providing health care to this Southland community. We continue to collaborate with other organisations, PHOs, government and our community healthcare providers to seek the best ways to get community-led health care to more people.

The development of localities across New Zealand was earmarked to be a fundamental part of the reform of the country's health system, a good example of improved care from within and led by community. I had hoped we would be able to report more about our work with Hokonui Locality (featured on page 24), but we must wait and see.

We continue to advocate for funding levels that reflect both the work that is being done and which aligns with patient need, especially with respect to Māori health needs.

Despite the challenges, general practice has continued to provide high-quality primary care services to our communities. Our enrolled population increased by a net 2% in the 22/23 year to more than 325,000. You can read more statistics and success stories in the following pages.

I acknowledge our hard-working clinical practitioners and practice managers and providers. The latter especially are critical to breaking down barriers to healthcare for many in our community who find it harder to access or understand healthcare (and health speak!) or who may have had a bad experience and feel disenchanted. There is a lot of work to be done to reconnect individuals and families with primary health.

Our new strategy and vision (on page 10) lays out our commitment to our community and the ways in which we want to support access and better, more culturally-safe health settings and experiences.

I thank our board of trustees and the senior leadership team for their support and guidance this year, and I applaud our staff for their mahi, their passion, their insight and their support.

Ngā mihi nui,

**Andrew Swanson-Dobbs**  
Chief Executive



“ We must continue to be innovative ourselves and more generally in the health sector, especially with ongoing workforce shortages. ”



Photo: The WellSouth Senior Leadership Team in November 2023 from left to right Damon Campbell, Peter Ellison, Andrew Swanson-Dobbs, Carol Atmore, Stuart Barson, Karen McCleery and Mistelle Jack.

# NEW VISION

Aligned with the changes to the health system and the establishment of Te Whatu Ora and Te Aka Whai Ora, WellSouth has developed a new strategic direction to ensure its relevance in the evolving health system and to support providers and whānau in Otago and Southland.

Grounded in our vision and core purpose, the board has identified five key focus areas for the next 18 months.

WellSouth is funded to deliver and support a wide range of programmes in primary care. Our main aim is to enable the people of Otago-Southland to maintain and improve their health and wellbeing, whether it's managing a medical condition, or working with communities to improve their health. We do this by supporting patients to enrol with general practices or community providers, and offering our own clinical services to help general practices provide better care.

## WellSouth Strategy

### OUR VISION

Better health and wellbeing for Southern communities.

### OUR CORE PURPOSE

To empower, partner with, and support providers to provide sustainable and equitable quality care to our diverse communities.

### OUR VALUES

**He mana tō te whānau**  
Whānau Centered

**Tōkeke**  
Equitable

**Manawa Whakaute**  
Respectful

**Pono**  
Transparent



### KEY SHIFTS

Te Tiriti and equity driven decision-making to ensure routine and robust monitoring and evaluation leading to equitable outcomes.

Support for the development of localities and other health and wellbeing related activities.

Widespread equitable, high trust partnerships across the sector, with all partners understanding the value they bring and the support they need.

Support for all providers to work towards Pae Ora (Healthy Futures).

### FOCUS AREAS

**Reposition and redevelop** the organisation to be a trusted, useful and relevant cog in the new system.

Structure our approach to **listening** to all providers and communities and be responsive to their needs.

Ensure **equity** aspirations/ activities/priorities of localities are supported in a flexible and agile way.

Maximise and utilise **resources** through monitoring and evaluation to ensure equitable health outcomes.

Embrace and develop **partnerships and relationships** that are genuine and meaningful.

### ACTIONS

Develop and strengthen Te Tiriti-based partnerships with mana whenua, and with a broader group of providers.

Develop a workforce that is dynamic and flexible, and whose core work supports providers by training, listening, collaborating, and responding.

Design and implement a monitoring and evaluation framework that focusses on reducing inequity.

# Pathway to Equity

“In my time, at WellSouth I have seen many shifts in the way we work, our strategy, values, and workforce. Our commitment to Māori health and equity has always been strong and now more than ever, alongside Pae Ora and Te Pae Tata, we are making some significant progress. The opportunity to develop and build our workforce, prioritising equity, puts us on a path to more equitable health outcomes for our community. WellSouth’s commitment to equity is aligned with national, regional, and local aspirations to improve outcomes for those who have unfair and unjust differences in health.”



**Peter Ellison, Pou Oraka Matua/Director of Māori Health and Equity, WellSouth.**

## Understanding Equity and Inequity

Equality (treating everyone the same) is often considered to be the ‘fair’ approach but fails to consider the different levels of advantages within New Zealand. By treating everyone the same, we perpetuate inequities.

Equity recognises that different people with different levels of advantage require different approaches and resources to get equitable health outcomes.

WellSouth’s commitment to equity is aligned with national, regional, and local aspirations to improve outcomes for those who have unfair and unjust differences in health.

The historical and current impacts of colonisation, systemic, institutional, interpersonal, and internalised discrimination on Māori and other ethnic groups contribute to the social determinants of health and therefore, overrepresentation in chronic health conditions.



Photo: Peter Ellison looks on as Zinza Mete (seated) is doing as Pou Manaaki Community Hub Coordinator. They are joined by other Pou Manaaki Community Hub Coordinator, Cassidy Hogg (standing left).



## BRINGING EQUITY TO THE FORE-FRONT – POU TŌKEKE

This year marked a significant milestone as we welcomed the new Pou Tōkeke Project Coordinators to the WellSouth whānau. This diverse team consists of four existing staff members, who transitioned from our Covid-19 workforce, and two newcomers. They are dedicated to the mission of advancing, educating, and supporting equity-lead initiatives in healthcare and wellbeing for our Southern community.

Established in December 2022, the Pou Tōkeke Coordination Team have made a significant impact within a short time. They played a crucial role in capturing whānau voices for the upcoming redesign of the Long-term Conditions programme, ensuring the healthcare services aligned with community needs. Additionally, they have created and delivered Equity in Health workshops to general practice, promoting our values and developing our workforce in this space.

The team are learning from and collaborating with other teams within WellSouth, demonstrating their commitment to continuous growth and development, and fostering an environment of shared knowledge and innovation. Their influence extends to the workplace culture itself, exemplified by initiatives like “Waiata Wednesday,” which has fostered a sense of unity and engagement among colleagues.

We look forward to seeing how the The Pou Tōkeke Coordination Team’s passion for improvement and collaboration, continues to drive positive change both within the workplace and in the broader healthcare community.

Photo: Pou Tōkeke team (from left) – Mikaere Teki, Emma-May Loretz, Zara Rahmani, Georgia Te Au, Isabelle Jenkins and Jazmin Clapham, joined by COO Damon Campbell.



**BREAKING DOWN BARRIERS – OUR POU MANAAKI TEAM**

Established in early 2022, the Pou Manaaki team coordinated support for Māori and Pacific communities through the Covid-19 pandemic. During this work, the team developed connections and trust with the community and Māori and Pacific providers, so it was a natural progression to continue to work breaking down barriers for Māori and Pacific to access healthcare as demand for Covid-19 support waned.

The team have stayed on to support more Māori and Pacific patients to get to outpatient appointments at Dunedin and Southland Hospital, reducing Did Not Attend outcomes. Outgoing calls and texts are made at least seven days prior to Māori and Pacific peoples outpatient appointments. They also call patients to talk through the appointment and help reduce any barriers to attending these, and that the patient understands the importance of attending the appointment.

Whānau are supported to attend their appointments through transport options, rescheduling, connection with a local Māori/Pacific provider, or by organising a follow up with their primary care provider.

**Ongoing relationships**

Relationships with Kaupapa Māori, Pacific and community providers that were established through the Covid-19 response have grown, with the Pou Manaaki attending several Whānau Ora Navigator and Community Connector and bi-annual whakawhanaungatanga hui across the Southern region to foster relationships and strengthen community networks.

Other potential workstreams the Pou Manaaki team are looking to support include Te Whatu Ora CCitC, School of Dentistry, Community Oral Health Service, Disability services, Immunisations, Pacific Radiology - Breast and Cervical Screening, Physiotherapy Clinics at providers, and supporting the unenrolled population.

**Investing in the team**

Professional development of the Pou Manaaki is also a key focus as these entry-level roles have paved the way for retention of Māori and Pacific staff within WellSouth. With some Pou Manaaki moving on to the Pou Tōkeke team, Te Aka Whai Ora, and Te Whatu Ora across Te Waipounamu.



**Whānau Ora Navigator Malana Tekani has seen a shifting awareness from patients since WellSouth. She said people now feel valued with the calls and assistance with attending their medical appointments. She also praised the work of the Pou Tōkeke team with their feedback studies with the community and the Pou Manaaki team working alongside the hospital specialist departments.**



**WĀNANGA TŌKEKE: EQUITY IN HEALTH WORKSHOP**

Results from a 2022 survey of practices identified gaps in understanding the purpose of an equity focus, with many respondents from primary care services defining equity the same as equality – everyone being treated the same.

Identifying the need for training and education in this space, WellSouth has introduced a three-hour workshop called Wānanga Tōkeke: Equity in Health Workshop, created and delivered by Project Manager – Health Equity Riiti Conway (pictured above) and Pou Tōkeke Project Coordinator Emma-May Loretz.

Since the initial presentation in November 2022, Wānanga Tōkeke: Equity in Primary Care has been delivered across five sessions to both practices and WellSouth staff.

The workshops focus on basic concepts of cultural competency, key principles of Māori culture and the concept of decolonising primary care with practical tools and skills to work across the different facets of primary care.

Feedback from the workshops has been positive, and they will continue to be rolled out to practices around the motu.



**One of the best cultural competency learning I've done. The work around tapu and noa was new and really helpful. It's the first time I've had decolonisation explained and addressed. Super useful.**



**The presentation was exceptional – equity is more than what I had perceived.**



**POU TŌKEKE POPULATION HEALTH PHARMACISTS**

Pou Tōkeke (Equity) population health pharmacists Brendon McIntosh (Kāi Tahu) and Sandy So joined WellSouth's clinical pharmacy team in January 2023, working with general practices, community pharmacies and Māori and Pacific health providers.

With a strong equity focus, the new roles are working to improve health outcomes through prescribing advice and education, medication reviews, and hospital discharge support (read more on page 31).

Brendon and Sandy have hit the ground running, holding regular clinics, attending community events, connecting with the local providers and building relationships.



**We are listening to providers and communities and want to know how they want to work with us and how we can best help.**



**Angela Renall, WellSouth Clinical Pharmacy Team Leader.**



**BUILDING RELATIONSHIPS WITH OUR SOUTHERN PACIFIC PROVIDERS**

Our Southern Pacific community are well represented by the Southern Pasifika Provider Collective (SPPC) made up of the Pacific Island Advisory Charitable Trust (PIACT) in Invercargill, Pacific Trust Otago (PTO) in Dunedin and the Oamaru Pacific Island Community Group (OPICG).

This is an entity that acts on behalf of its three Pacific providers and WellSouth has joined the collective.

In Otago and Southland, there are approximately 11,000 people from Pacific Island nations or of Pacific Island heritage, with a large percentage of the population under the age of 23.

We support the collective's aspirations and recognise the strength and potential of an integrated Southern Pacific provider network to further serve Pacific populations.

The SPPC aspirations are aligned with WellSouth's goal of delivering equitable healthcare across our region. All agree to work in the spirit of partnership to support Pacific aspirations.

SPPC strives to uphold the identity and status of our Pacific people and communities. We do this by embedding Pacific cultural values that includes integrity, spirituality, respectful relationships, and reciprocity.

As well as providing secretariate and funding advice and support, WellSouth has appointed Dr Letava Tafuna'i as the new Senior Clinical Advisor, Pasifika.

Her focus is working with the collective to improve and promote services for Pacific peoples south of Canterbury. You can read more about Letava on the opposite page.

**About the SPPC**

Each provider within SPPC is autonomous and has its own board, organisational structure, services and local set of priorities.

The SPPC has agreed to establish a working relationship with WellSouth and/or its successors to support its aspirations of providing excellent services that are equitable and promote the health and wellbeing of Pasifika peoples living in the Southern region.

*Photo: Pictured from left to right are Hana Halalele – OPICG general manager and Deputy Mayor, Waitaki District Council; Telemeke Lome, Deputy Chairperson for PIACT; Fa'animo Elisara-Too, CEO of PTO; Dr Letava Tafuna'i Clinical Advisor Pasifika from WellSouth; Dr. George Ngaei, Chairperson for PIACT; Medical Doctor and Professor, Faumuina Fa'afetai Sopoaga, Otago University; Andrew Swanson-Dobbs, CEO WellSouth.*



**PACIFIC CLINICAL FOCUS**

WellSouth's vision to embrace and develop relationships and develop a workforce that supports providers has seen the appointment of Dr Letava Tafuna'i, as New Senior Clinical Advisor, Pasifika – a dedicated clinician for Pacific health providers and communities.

A respected GP and Associate Dean Pacific at the Dunedin School of Medicine, Letava joined WellSouth in February 2023. Before taking on the new clinical advisor role, she was a GP in Dunedin and has worked in primary and secondary care in Auckland, Australia and Samoa.

Letava, who is Samoan-born and has Fijian heritage as well, is working closely with Pacific health providers in Dunedin, Invercargill, and Oamaru, as well as general practices across the region to improve care and the long-term health for Pacific aiga (family).

Her focus has been working with the Southern Pacific Provider Collective (SPPC), the newly formed collective bringing together Pacific Island Advisory Community Trust, Pacific Trust Otago, and Oamaru Pacific Island Community Group to collaborate to improve and promote services for Pacific Peoples in Southern.

In Otago and Southland, there are approximately 11,000 people from Pacific Island nations or of Pacific Island heritage, with a large percentage of the population under the age of 23.

"Diabetes, cardiovascular disease, and other long-term conditions are a concern in Pacific Island populations as they are in other communities, but Pacific people don't always have the same access to treatments and care," says Letava.



**We need to close the gap and help with prevention – particularly where we have such a high percentage of young people. I have a role to play as a connector, doing all I can to reduce disparity and improve health outcomes.**



# Covid Response

## THE CHANGING COVID RESPONSE

The Covid-19 vaccination programme has continued, but as the effects of the pandemic waned worldwide, the need and response locally has changed.

A milestone that marked the end of the programme was when immunisation centres started closing, including on 16 December 2022, the Invercargill Immunisation Centre, after having delivered more than 75,000 doses since its establishment. Nearly 2000 of these were in aged care residential homes (see more about the aged care response on page 21).

The Covid-19 response has been a mammoth effort from our team, our general practices and providers, who have worked incredibly hard and collaborated well to deliver and protect our Southern community. Here are some of the key points from our Covid-19 programme (and check out the timeline below).

During the first year of the Covid-19 vaccination programme, general practice was delivering over 70% of total vaccinations in the Southern region.

From July through to December 2022 the programme concentrated on delivering the 2nd booster as new variants of the virus arrived in the country.

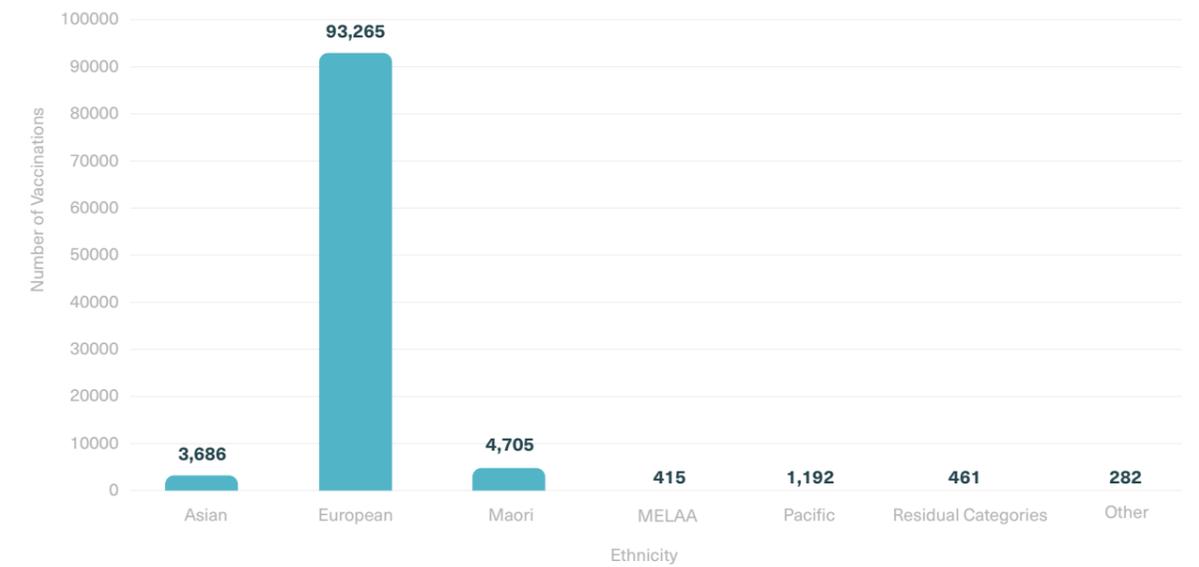
As the programme continued to develop, expectations from members of the public started to change. They looked to other providers that could offer alternative models of vaccinations.

Eligibility criteria changed and we delivered the second vaccination and booster shots. These changes had an immediate impact on the demand, putting pressure on general practice and other providers who were now also moving back into business-as-usual services.

### Total Covid-19 vaccination doses administered in Southern since the beginning of the programme to 30/06/2023.

<b>Totals</b>	<b>890,673</b>
<b>Asian</b>	61,335
<b>European or other</b>	741,706
<b>Māori</b>	64,685
<b>Pacific Peoples</b>	19,029
<b>Unknown</b>	3,918

Vaccinations totals by prioritised ethnicity 1 July 22 - 30 June 23



**THE SHIFT**

As we entered the second year of delivering the vaccine, the programme was considerably downsized. For many health providers, services were starting to look like “Business as Usual” (BAU) again.

Public attitude towards the Covid-19 vaccine and vaccinations began to change as communities became vaccine resistant or disengaged. It has been challenging to achieve the same level of engagement and immunisation as in the previous year.

Providers’ capabilities, systems and processes changed, and the focus shifted from the virus and vaccine to other important immunisation programmes. Absorbing Covid-19 vaccinations into general immunisation programmes has been an effective way to continue to deliver the Covid-19 vaccinations as BAU.

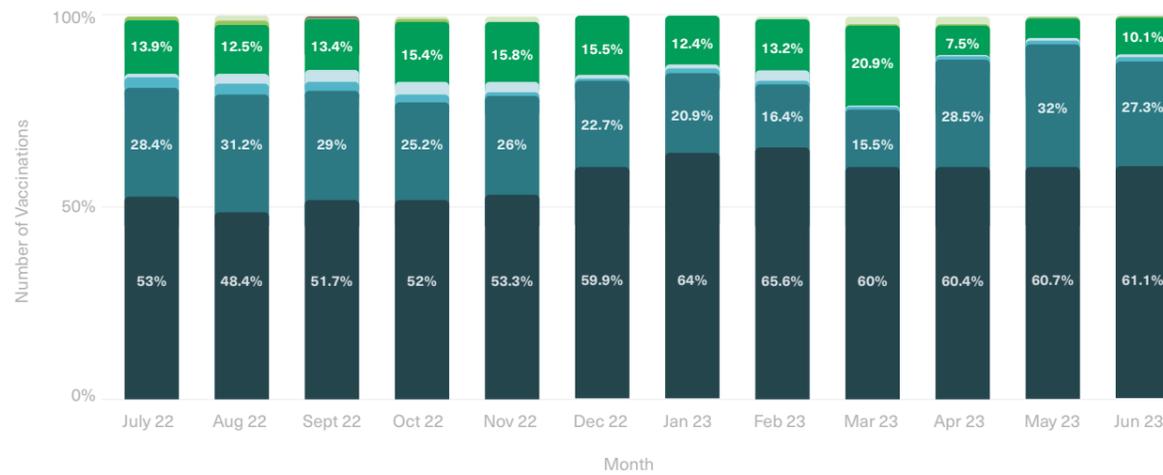
General Practices remain an important part of the programme (see graph), often collaborating with immunisation centres and other providers to provide pop-up clinics.

Practices are especially important in the rural areas where there is less access to clinics and for facilities like Aged Residential Care (ARCs).



Photo: Pacific Island Advisory Charitable Trust (PIACT) in Invercargill hosts a vaccination clinic with WellSouth and Te Whatu Ora Southern staff alongside the regular market day. Vaccinations offered included measles, flu, the Covid-19 booster and whooping cough.

**Percentage of vaccinations done per month by site type**



Site Type:  
 ● Community Pharmacy ● General Practice ● Mobile Clinic ● Mobile or Pop-up site  
 ● Permanent vaccination centre ● Places of Worship ● Residential facilities ● Workplace

**WORKING IN AGED RESIDENTIAL CARE**

The WellSouth Covid-19 Immunisation Team played a significant role ensuring the 3000 residents at the 65 Aged Residential Care (ARC) facilities in Southern were current with their vaccinations.

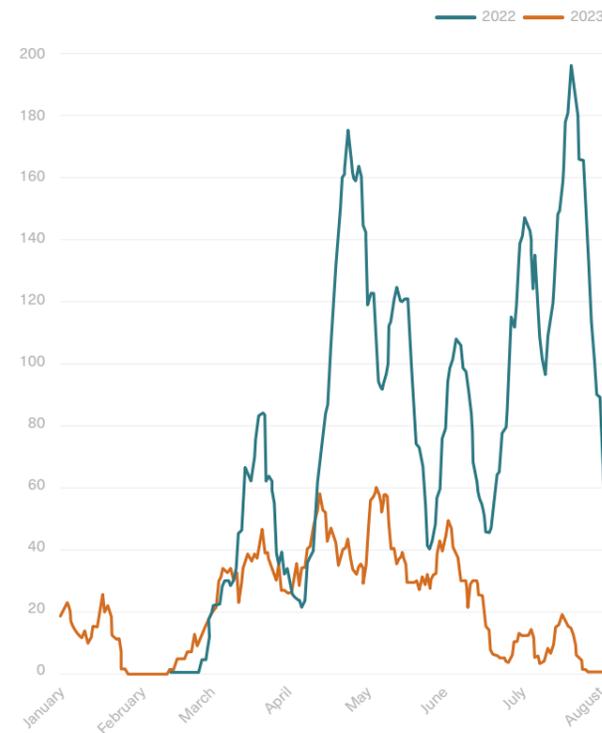
This cohort was particularly challenging due to the continued outbreaks of Covid-19 positive cases and health frailties of the patients.

The programme used a variety of providers to conduct the service, general practices, Te Whatu Ora outreach teams, pharmacies, Hauora Māori Partners, Pacific, and Community/Hapori Providers.

This was a very labour-intensive part of the programme, but the WellSouth team did an incredible job - our region was constantly one of the most successful programmes in the nation. By the end of December, 95% of our residents had received a 2nd booster.

In March, the ARCs were responsible for organising their residents to receive influenza vaccinations and additional Covid-19 boosters (3rd booster) through community providers. This was timed in a way that providers could administer both Covid-19 and influenza vaccines in just one appointment or visit. Initially there had been some challenges, but by the end of June, most ARC facilities have had at least one visit by a provider.

**ARC Residents Covid Positive**



The Covid-19 vaccine was one critical to keeping our elderly safe. The graph demonstrates a reduction in Covid-19 positive cases over the first 7 months of 2023.

**COLLABORATIVE EFFORTS**

The Southern Covid-19 Vaccination Programme has transitioned into an "All Immunisation" approach, where providers combine their resources to deliver a variety of vaccines at clinics.

While general practices are returning to a business-as-usual model following the all-encompassing Covid-19 outbreak, they still remain an important part of the programme.

Collaborative efforts have been critical to the continued success for vaccination, at a time when people were becoming disengaged with Covid-19 vaccination programmes.

The Southern Vaccination Programme called "Spring Fling" was launched in mid-October. It was a series of planned pop-ups collaborating with providers to offer a range of vaccinations and increase capacity. This one stop approach was more convenient for patients, providers and practices.

An example was a two-day pop-up clinic in Queenstown, with the Southern Immunisation Team in partnership with WellSouth, Queenstown Medical Centre, The Doctors Whakatipu, The Village Medical Centre and Mountain Lakes Medical in late November, 2023. COVID-19, MMR, Boostrix, flu and HPV vaccinations were available free to those eligible.



Photo: Pictured welcoming people to the clinic are Te Whatu Ora Southern staff Mary Millen and Wendy Den Hertog on either side of The Village Medical Centre GP Fiona Green.

Collaborative efforts and combined vaccination offering has been critical to rural uptake. A successful combined clinic in Balclutha in June 2023, included Clutha Health First, a General Practice and the Dunedin Immunisation Centre (DIC) teams working together providing a variety of vaccines, with 151 Covax, 60 Influenza, and with a few MMR, Boostrix and Bexxero delivered.

**Pop-up vaccinations** Walk-ins welcome

- **Ettrick Hall**  
Monday 7 November, 9am - 12pm
- **Lake Roxburgh Village Hall**  
Monday 7 November 2pm-5pm
- **Omakau Community Centre**  
Tuesday 8 November, 1pm - 6pm



- Free vaccinations against:**
- COVID-19 (adults and children)
  - Measles, Mumps and Rubella
  - Tetanus, Diphtheria, Whooping Cough
  - Human Papillomavirus (HPV)
- Eligibility criteria vary by vaccine, come and have a chat about what vaccinations you need.



**BOOK MY VACCINE**

Providers used different models to deliver Covax, including clinics or appointments including on Book My Vaccine (BMV), closed in house clinics, daily opportunistic (during business hours), special one-off events, extended hours alongside other providers or part of community activities.

BMV improved with a new 'listing' option, allowing users of the site to access vaccinations. The site can link to a provider's internal booking system, walk-in clinics, site website, vaccination events or other vaccination opportunities. Sites can display a 'Listing' regardless of their use of the Book My Vaccine booking portal.

Consumers can now book Influenza, Covax, Boostrix and MMR appointments on BMV. They will also be able to book any combination of vaccines (more than one) at any one time provided it is complying with the medical guidelines.

Photo: Staff efforts are recognised (top and bottom, right) as the Dunedin Immunisation Centre closes in December 2022.



# Hokonui Locality

## ESTABLISHING LOCALITIES – A COMMUNITY-LED APPROACH

The establishment of localities has been a fundamental part of the reform of Aotearoa New Zealand’s health system. It is a new way of delivering healthcare closer to people’s homes – a place-based approach to improving the health of populations, as well as a mechanism for organising health and social services to meet the needs identified by whānau, community and mana whenua.

There are 12 areas around the country being trialled including Hokonui in the wider Gore district in our Southern region.

### There are three characteristics to a locality:



It is a **partnership** with mana whenua, recognising their tino rangatiratanga.



The approach supports locally- led solutions that take a **holistic approach to wellbeing**, acknowledging the range of other factors that impact on a person’s health.



The locality approach aims to join up care across **communities** and **improve integration** with different layers of the health and social system.

### Hokonui

Set up in October 2022, the Hokonui Locality is a partnership formed across iwi, health, social care and community organisations, and working with the Ngai Tāhu Iwi-Māori Partnership Board, Te Whatu Ora – Health New Zealand and Te Aka Whai Ora – Māori Health Authority.

The local steering group is made up of the Community Networking Trust, Gore District Council, Gore Health, Gore Medical Centre, Hokonui Rūnanga, Regional Public Service, Te Hau o Te Ora Partnered Primary Care Services, Mataura Marae, Waihopai Toetoe Community Board, a Community Health Council representative, and Time for Change-Te Hurihanga. WellSouth was involved in establishing and supporting the development of the Hokonui Locality, including our Pou Tōkeke out and about in Gore and Mataura helping with community consultation (as pictured).



### Consultation

The community was asked about what health and happiness meant for them. From a survey, the majority of responses were about access to healthcare, coping with the increasing cost of living, and the effects of Covid on families with issues such as children missing school. For many people, this came across as stress and worry about their wellbeing.

### Next steps

The Locality has sent a plan to Te Whatu Ora and Te Aka Whai Ora focused on five priorities. The first new services and roles to deliver on these are starting to come.

**1070**

Responses, with nearly half coming from those aged over 50.

**75%**

of respondents were female and about 80% were Pākehā.



Many people identified community resources and activities, such as public events and shared gardens, as good ways to deal with stresses and worries.



# CLINICAL SERVICES

We at WellSouth are proud of the work we do to support our primary care teams, largely based in general practices, to provide ongoing excellent health care to our communities.

These services range from support for Former Refugee communities in our cities of Dunedin and Invercargill, to supporting our remote communities, for example those in Te Anau where we provide extended primary care services to people who would otherwise have to travel two hours to Southland Hospital. These are just two examples of where our mahi directly supports whānau in our community.

Supporting the primary care workforce directly is a key focus for us, too, and we continue to provide support and education to general practice teams across our takiwā. Time and time again, it has been heartening to see the uptake and interest of our hard-working clinical staff across Southern to adopt new programmes, get upskilled and attend events and webinars.

Here are several examples of the work and services we provide.

**Dr Carol Atmore - Clinical Director, WellSouth**



## NEW PROFESSIONAL NURSE ADVISOR

Dr Kate Norris started in the role as Professional Nurse Advisor in May 2023.

Kate is a registered nurse (RN) with more than 30 years' experience including clinical, nursing management and education roles. Before joining WellSouth, she worked as a senior lecturer delivering and coordinating post-graduate nursing education. Kate has extensive experience working with nurses as they prepare for roles as RN prescribers and nurse practitioners.

She is passionate about supporting nurses to work to the top of their scope, and is motivated by the opportunity her role offers to support innovative, interprofessional models of primary health care delivery.

*Photo: Pictured from left to right are Lana John - Uruuruwhenua Health, Kate and Erin Cappie, WellSouth Former Refugee Community Nurse at the 2023 Nurses Forum.*



## GETTING READY FOR WINTER

As the financial year came to a close, WellSouth recognised there would be a need to support patients and practices for winter. Covid-19 was no longer a focus and with the end of lockdowns, less mask wearing and no need to distance, we predicted high rates of other infections and disease for our 2023 winter. We wanted to provide additional preventative care for patients who were at most risk of deteriorating or being admitted to hospital over the winter months.

The Winter Wellness Checks programme was created and launched in April 2023.

The Winter Wellness Check was made available via general practice, to provide additional preventative care for high needs patients with specific long-term conditions such as asthma, cardiovascular disease and diabetes. They were offered a funded appointment with their health practitioner to go over preventative measures ahead of the middle of winter.

During the health check, clinicians checked medications and adequate supply, flu and Covid-19 vaccination status, and discussed potential back pocket prescription to be held by the patient. Specific disease related action plans were a key part of the programme to help people to know what to do if they did become unwell, and to offer guidance on when to seek medical support, if they did deteriorate.

Fast forward and over winter, 2,929 of these checks have been carried out across WellSouth practices. The programme will be evaluated over coming months, with a view to understanding if there is value to offering winter wellness checks at the beginning of each winter.





## FALLS AND FRACTURE PREVENTION SERVICE

The Falls and Fracture Prevention Team work to help reduce the risk of falls and fall injuries for older people in the Southern region.

The main goal of this service is to help older people keep fit, well, and independent, to enable strong connections with whānau, friends, and their communities.



### In-Home Programme

The in-home programme focusses on supporting those over 75 years (over 65 for Māori and Pacific) who have fallen in the last year and cannot access a community strength and balance class or group.

In the financial year, 197 people have received an in-home strength and balance exercise programme, as part of a 12-week plus programme to deliver a fall prevention assessment and an individualised exercise programme. *Pictured above is Geo Joseph from the WellSouth team helping a client in Dunedin.*

New to the service, is that patients who do not meet criteria for the service can now be referred to the Access and Choice Teams (*read more on page 32*).

### Community Strength and Balance

Live Stronger For Longer community exercise programmes support participants to improve their strength and balance, with classes available across the Southern District.

New to clients, is ACC's free balance exercise app called Nymbi. The app lets you choose games and quizzes on your device and gives you balance exercises to do at the same time, connecting the brain and body.

In the financial year, 58,945 clients attended Community Strength and Balance classes.



## STARTING IN THE SOUTH - TAURITE TŪ

In March, we celebrated the success and expansion of the Te Ao Māori guided programme, Taurite Tū.

Taurite Tū was created in Ōtepoti Dunedin, designed and researched at Ōtākou Marae with kaumātua Māori, Māori physiotherapists, and Māori movement experts in mau rākau (Māori martial arts), tī rākau (Māori stick games), poi, tākaro (games) and whare tapare (Māori performing arts).

In its third year, Taurite Tū is delivered at nine marae and other organisations and is being rolled out to another 14 across Aotearoa this year.

WellSouth is proud to support the delivery of the programme at Awarua Whānau Services, Bluff; Ngā Kete Matauranga Pounamu Charitable Trust, Invercargill; Hokonui Marae, Gore; Ōtākou Marae, Puketeraki Marae and Te Kāika in Dunedin; Tūmāi Ora Health, Oamaru; as well as expansion into other Māori/Rūnanga based organisations throughout Otago and Southland.

## ON THE WORLD STAGE

WellSouth runs the Fracture Liaison Service (FLS), currently the only Primary Health Organisation to do so.

ACC, working with trusted partners to prevent injuries throughout Aotearoa New Zealand, funds Fracture Liaison Services and the Australia and New Zealand Fragility Fracture Registry (ANZFFR). The ANZFFR is a gold standard practice management system and database for fragility fracture management, recording and research.

Submission to the International Osteoporosis Foundation saw the FLS service assessed against international best practice standards and awarded a bronze star.

This led to WellSouth being accepted to the Global Fragility Fracture Network Congress, that was held in Oslo to showcase our unique and world-leading service.



**197**

People have received an in-home strength and balance exercise programme



**58,945**

Attendances at Community Strength and Balance classes



**369**

People have been assessed through the Fracture Liaison Service



**153**

People have received a DEXA Scan following the identification of a fragility fracture

### HELPING FORMER REFUGEES RESETTLE

Did you know that more than 1 in 10 Invercargill residents were born overseas, with the most granted citizenships from the United Kingdom, India, South Africa, China and Samoa?

When it comes to former refugees, the city hosts around 200 Colombian former refugees who have settled in Invercargill since 2017.

In October 2022, Invercargill began resettling refugees from the Congo as part of the NZ refugee quota programme. The group has been growing steadily, and although settling well, this group has significantly different health and cultural needs than the other former refugees who have settled across our Invercargill and Dunedin Sites.

WellSouth's Former Refugee Team's strength is with its Health Navigators, who assist former refugee families to help them settle into their new New Zealand life and to help them navigate and access health systems and understand what to expect from local health services. They are not only working with the clients, but are often bridging the cultural gap with clinicians, supporting them to understand how culture impacts on health and decision making.

In the case of the growing Congolese community, during the annual report period, WellSouth has begun to create opportunities for a dedicated health navigator for the Congolese community to reduce barriers to accessing health services.

#### Our team's vision:

That our former refugee families achieve independence, autonomy and integration in health and their lives here in Aotearoa New Zealand.

From 2022-2023 the number of former refugees supported by WellSouth has grown from

**127 to 267**

### REGISTERED NURSE PRESCRIBING IN COMMUNITY HEALTH

WellSouth has taken the lead in delivery of a Te Waipounamu-wide Registered Nurse Prescribing in Community Health (RNPCH) programme since the programme was accredited by Nursing Council of New Zealand (NCNZ).

This work-based education programme prepares experienced registered nurses (RNs) to prescribe from a limited list of medications.

This medication list includes medicines for minor ailments and illnesses in normally healthy people without significant comorbidities. This prescribing endorsement enables patients with more timely access to medications in the community. In addition to benefiting patients, community prescribing endorsement allows RNs the ability to work to the top of their scope of practice, providing greater autonomy and job satisfaction.

The increased scope of practice for RNs offers career progression opportunities, while helping patients to access to more timely, convenient and affordable healthcare within their own general practice.

The course is delivered over six months via a combination of online modules and virtual webinars.

Memorandums of Understanding have been signed this year with other districts and nurses have been welcomed to the programme from across Te Waipounamu.

Three cohorts are run each year, with between 10-20 registered nurses on each. Many of those accessing the programme are practice nurses, but included school nurses, district nurses and other community based roles.

At the end of the 2022/2023 year there are a total of 30 community nurse prescribers who have been educated through this WellSouth-led programme and are now registered as designated community nurse prescribers with NCNZ.



### CLINICAL PHARMACY

#### Growing the team

The Clinical Pharmacy team has expanded with the addition of two new pharmacists added to the WellSouth team in early 2023, to identify and address disparities in the uptake of medicines by underserved communities in Southern (read more on page 15). The role was established to work collaboratively with all providers including Māori and Pacific health providers, practice nurses, general practitioners, community pharmacy, Allied Health Services, and appropriate secondary specialist health services to work towards achieving more equitable health outcomes for people in Otago and Southland.

In addition, they assist the pharmacy team in the analysis and improvement of prescribing practices across primary care where issues have been identified as contributing to inequities, inappropriate prescribing and sub-optimal health outcomes. To facilitate this, the team are working closely with the data and digital team to identify and develop tools to help initiate and drive quality use of medicines initiatives for Māori and Pacific Peoples. A great example of this has been the diabetes dashboard and you can read more about this on page 46.

Our practice-based clinical pharmacists sit in practice, seeing individual patients for complex medication reviews, helping to develop and deliver quality improvement projects within practices, responding to medicine information queries, and to provide quality independent evidence-based in-house education.

We have six pharmacists working in nine practices across Southern, two of which are prescribing pharmacists. We are currently supporting two additional pharmacists through the programme this year who will become prescribers in December 2023.

Practices who do not have a practice-based pharmacist, are supported by our office-based clinical pharmacist. In addition to supporting practices, this dedicated clinician also provides in house support to fellow WellSouth clinicians and input into WellSouth programmes.

*Photo: WellSouth's prescriber team including clinical pharmacists and population health pharmacists, from left to right, Sonia Cox, Catherine Herd, Angela Renall, Simon Chittock, Kate Farmer, Brendon McIntosh, Rebekah McDonald, Sandy So and Nick Leach.*

### DIETITIANS

The Dietitian Service has moved away from the traditional individualised consultations and are working to facilitate greater patient access and improved health outcomes by transitioning to group education sessions. The service has continued to offer a hybrid model, with in-person and virtual options available.

Reaching the broader community and enhancing relationships with general practices and community providers is the goal for the service. The team will build these relationships by providing training sessions for GPs, community providers, and Māori and Pasifika stakeholders.

The dietitians are collaborating with Tōku Oranga (our Southern Access and Choice) teams to support service integration. Our dietitians are supporting and upskilling health coaches to be able to safely deliver basic healthy eating advice in general practice.

# MENTAL HEALTH & WELLBEING

## More choice, more access – Tōku Oranga for wellbeing at primary care.

Tōku Oranga is our Southern Access and Choice programme, integrating the roles of Health Improvement Practitioners (HIPs), Health Coaches (HCs) and Community Support Workers (CSWs) with general practice teams to create better integrated support for those with mild to moderate mental health and general wellbeing needs.

*Tōku Oranga translates to My Wellbeing and was gifted to our programme by Tracey Tawha-Wright from Ngā Kete Mātauranga Pounamu Charitable Trust.*

Tōku Oranga – Access and Choice is delivered by WellSouth in partnership with health providers in the region: Active Southland, Ngā Kete Mātauranga Pounamu Charitable Trust, Pact Group, Sport Otago, Te Hau o Te Ora, Te Kāika and Arai Te Uru Whare Hauora.

Launched in Southern in August 2020, the service has grown steadily. At the end of the June 2023 period, more than half of WellSouth's 81 general practices were providing the programme. It was accessible to 250,000 patients - approximately 75.8% of the Southern population.

HIPs, HCs and CSWs provide wellbeing support for depression and anxiety, sleep problems, drug, and alcohol use. The teams also help patients and whānau with self-management of long-term conditions and support people to access other social and community services.

What sets it apart is that it is free and immediate and there is no wrong referral – meaning there is no charge for practices' enrolled patients, appointments are often available same or next day, and can be booked directly, at reception or warm handover from a GP or nurse.



**50**  
General practices have Access and Choice available to their patients

**15,396**  
People seen

**46%**  
of people were seen on the day – via self-referral or warm handover



### A report found

A commissioned report researched and written by Synergia found that there were meaningful and measurable benefits for patients and that the 'evidence of the programme's effectiveness', includes 'significant improvements in mental, physical and social health for patients.'

Synergia's work was carried out between September and November 2022 with interviews of 12 consumers and analysis of a year's worth of programme data from a sample 13 practices representing 116,084 individuals who had at least one contact with the programme in the 12-month period.

In addition to favourable outcomes, the research indicated that the model of care responds to a broader range of needs and is more flexible and practical than traditional counselling with consumers able to access support faster.

It also noted that the dedication of general practices and providers has been a significant success factor.



The report confirms what we have been hearing and what our clinicians and practices experience: the Tōku-Oranga – Access and Choice service has a tangible impact on people's lives, making preventative care more readily available.



**Jodie Black, WellSouth Clinical Services Manager for Primary Mental Health Services.**

**10.1%**  
Māori experienced a 10.1% average improvement in their Duke (perception of health related quality of life) score compared to 9% average for Pākehā

**93%**  
Session rated as very helpful

**86%**  
Confident carrying out session plan



**SUICIDE PREVENTION/POSTVENTION SUPPORTING COMMUNITIES**

The WellSouth Suicide Prevention/Postvention Team, which coordinates suicide prevention initiatives in the Southern region, has been strengthening its engagement and collaborative efforts.

The team has strongly focussed on community connections and cultural competency, with equity at the heart of this. For example, we have strengthened our cultural advice and networking with Te Rau Ora, Te Aka Whai Ora, Kia Piki Te Ora and Ngā Kete, as well as strengthened links between Whakawhanaungatanga and Victim Support.



We would like to extend a heartfelt thank you to our volunteer postvention chairs, who continue to support this mahi on behalf of their communities.



You can read more about WellSouth's work in equity space at the start of this Annual Report.

In terms of raising awareness of the support available to people and communities, the team partners with organisations around important weeks and days such as Mental Health Awareness week with Life Matters Suicide Prevention Trust.

Developing and designing better information helps identify trends. The team have improved the way they capture data to better track trends and identify themes that inform future targeted prevention mahi. The data shows that persons from the rainbow community, Māori, males and older persons are still at a higher risk.

These connections are key to the planning work the team will do when it writes a new Suicide Prevention Action Plan for the Southern region covering 2024-2027.

*Photo: The team pictured from left to right at the National Suicide Prevention Hui hosted by Te Aka Whai Ora are Zac Kim, Bonnie Macgregor and Bella Pullon.*

**BRIEF INTERVENTION SERVICE – LEARNING FROM THE PAST**

WellSouth's Brief Intervention Service (BIS), which provides up to five sessions for people who are 20 years and over with mild to moderate mental health and / or drug and alcohol issues, continues to be in demand.

BIS received a consistent number of referrals from the previous year, slightly down. The successful impact of Tōku Oranga Access and Choice (read more on pages 32) has seen the reduction in referrals, which means we've been able to offer shorter wait times in most areas.

There was significant turnover of staff over the first six months of 2023, which has contributed to a review of our systems and processes which is ongoing. The wider team met in person earlier this year in Balclutha. This was not only a great opportunity to meet the new staff but also to be able to spend time devising a wish list of what we could do to improve BIS.

**The priorities are to**

- Focus on working toward equitable wait times across the districts
- Ensuring high priority referrals are identified

**1,767**

Referrals received

**1,751**

People seen

**5,301**

Appointments attended (accounting for some people being seen more than once).

**IMPROVING MENTAL HEALTH SERVICE**

Improving Mental Health Service (IMH) has continued to deliver a quality service to people in the care of Corrections at Invercargill Prison, Otago Corrections Facility and Dunedin Community Corrections with many targets achieved. Further contractual achievements for the past year:

**496**

Client referrals to Prison and Community IMH

**106%**

of target achieved by Prison IMH for face-to-face clinical hours

**115%**

of target achieved by Wraparound Family Service for face-to-face clinical hours

**FAMILY MENTAL HEALTH SERVICE GROWING**

Changes in the last few years to our Family Mental Health Service (FMHS), which is based in Mosgiel, have seen the service grow. In the last financial year, referrals increased by 10% strongly represented by young adults in comparison to previous years.

Accessing FMHS is principally by GP referral, but other community agencies, schools or, in some instances, self-referrals are accepted as well.

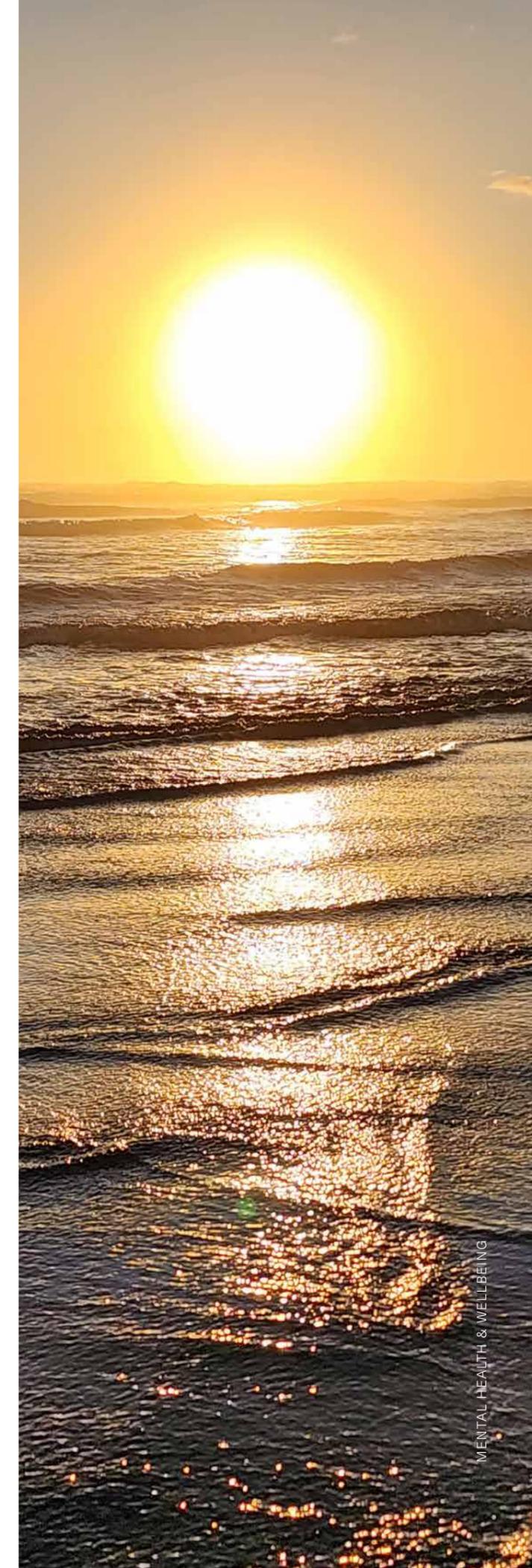
As it continues to evolve, the team will prioritise new parents, increasing maternal mental health, and taking referrals from a greater number of practices across Dunedin.

**317**

People seen

**2,820**

Appointments attended



# HEALTH PROMOTION

Our Health Promotion team, with staff across Southland and Otago, seek to help members of our community to increase control over, and to improve, their own health and wellbeing.

We focus on mental wellbeing and breastfeeding/First 1000 days working in the community and in the environments where we live, learn, work and play, working within our communities.

## SUPPORTING NEW MUMS BREASTFEEDING

The Health Promotion team continued to support the First 2000 Days of māmā, pēpi and whānau across the Southern region.

The Breastfeeding Peer Support programme builds the community capacity to support mothers and whānau through the normal course of breastfeeding.

The following case study from the Queenstown Lakes area is a highlight.

In 2022, the Headlight Trust delivered six GoodYarn workshops to volunteer Breastfeeding Peer Supporters across the region including one online course.

Designed to empower, the workshops helped the peer supporters develop the skills, knowledge, and confidence to talk to parents about their mental health and wellbeing. All 50 participants that attended the workshop said they would recommend it, and 83% showed an increase in knowledge about where and how to get help.

Online antenatal breastfeeding classes continued to run monthly, often at full capacity and booked out in advance. Ten classes have been run over the past year and have been attended by over 100 participants from across the region with evaluation showing positive feedback.

World Breastfeeding Week 2022 saw over 120 reusable breast pads distributed to new mums, events were run through the region such as a film night, promotions, competitions and events to bring the new māmā, pēpi and whānau communities together.



33

New volunteer breastfeeding peer supporters trained across the region

9

Breastfeeding Peer Support run drop-in groups across the region



**Having a support group like this was invaluable at such a vulnerable period in my parenthood journey. I felt comfortable turning up even when we were not having a great day. Having a place where you can go in times like this, and knowing that no one will judge you, only support you, was immensely valued.**



Drop-in group participant.



## COMMUNITY CONNECTION

The Health Promotion team continued to connect with local communities across the Southern Region and supported community-led initiatives to improve wellbeing outcomes. The team supported long-standing events such as Otago Polyfest and the more recently established Moana Nui Festival (pictured on right), both important cultural celebrations that acknowledge the importance of identity in wellbeing.

The Bluff community led a new initiative in 2022 called the Rangatahi Zone Festival. The event was set up to tautoko and uplift the wellbeing of Southland Rangatahi. Over three days, the pedal-powered Smoothie Bike (pictured above) proved popular and a good initiator for kōrero between the team and young people attending the event.

Being present and supporting this kaupapa proved invaluable for developing and strengthening relationships with local community leaders and other organisations.

The Health Promotion team also supported the new Pātaka Ora Community Kitchen initiative trialed in Dunedin running out of Araiteuru Marae. Bringing people together through food, the initiative provided a free weekly meal service open to anyone from the community to connect. The team volunteered regularly to support the initiative, contributing to reducing the impacts of food insecurity, social isolation, and food waste.





**SUPPORTING WAYS FOR MENTAL WELLBEING**

Throughout Mental Health Awareness Week 2022, the Health Promotion team supported, coordinated and promoted events and media across the district.

Books on Prescription is a programme run by WellSouth and the libraries of Otago and Southland to increase access to quality health information. During Mental Health Awareness week, a coffee mug promotion for the Books on Prescription programme was run through local libraries. The promotion encouraged people to take time to make a hot drink and enjoy a book that promotes mental wellbeing.

The team also coordinated mindfulness sessions, walks, wellbeing talks, and Tai Chi. They distributed 350 chat packs in Alexandra to encourage conversation and connection and provide an opportunity for different groups to come together.

Feedback was positive, and people appreciated the time to chat and share stories, particularly post Covid-19, when many of our community had felt isolated.



**TE HAU TOKA SOUTHERN LAKES WELLBEING GROUP**

WellSouth staff from the Health Promotion and Suicide Prevention teams are part of this collaborative group which has been evolving since the Covid-lockdown in 2020. The group utilise targeted Ministry of Business Innovation and Employment funding to build community resilience and support wellbeing in the Southern Lakes communities of Fiordland, Wānaka, Whakatipu and Cromwell. Three Community Wellbeing roles have been established in Fiordland and Central Lakes that have become the central point of reference for communities to co-ordinate and support wellbeing initiatives.

Three Connecting Communities funding rounds of small grants up to \$1000 significantly impacted the 198 successful formal and informal community group recipients. Activities are as diverse as exercise to art classes, new parent social events, music and movement for toddlers, volunteer speed dating and senior citizens social events. The funds also help multi-cultural events, youth and business networks.

*Photo: Loran Verpill & Nik Woolford from Te Kāhano Aotearoa Trust at the 'Find your Perfect Match' volunteer speed-dating event, one of the 91 initiatives assisted by Connecting Communities Rounds.*

# PEOPLE & CULTURE

**CLINICAL WORKFORCE DEVELOPMENT**

Workforce development and training are important in supporting our practices, providers and staff to deliver quality care. WellSouth is proud to facilitate, promote, and deliver a range of training opportunities across Southern.

For example, during the financial year, and this is an ongoing trend, our CPR courses were popular, with the majority of the sessions booked out as was our Advance Care Planning and Serious Illness conversation guides.

**Staff workforce development**

Thanks to the popularity of our Wānanga Tōkeke: Equity in Health Training (*featured more widely on page 15*) with practices, we are planning to roll out the training internally to our WellSouth staff over the coming months.

Part One of the course will be added as a permanent fixture in the quarterly induction going forward. We hope this training will help ensure our workforce have a strong introduction to equity and a more informed understanding of both Māori tikanga and working in all spaces of WellSouth with a more equitable approach.

**Recruitment**

Complementing the development of our current workforce, we have also been working on our recruitment strategy.

We attended career expos to engage with the future workforce about opportunities with WellSouth and across the primary healthcare sector. The expos were a great opportunity to speak to current students, understand their career aspirations, and promote the work of WellSouth.

**WELLBEING, HEALTH AND SAFETY**

WellSouth has an excellent group of trained Health and Safety Representatives, who are passionate about wellbeing and encouraging safe work practices.

We have taken part in several events on our wellbeing calendar, which features a mix of awareness days, health initiatives and events throughout the year such as the Dunedin Marathon and Sweat with Pride Challenge. Our Diversity, Equity and Inclusion (DEI) committee have been working to promote awareness within WellSouth around these values, so everyone continues to feel included, respected and supported.

WellSouth entered a team of 33 staff into the Emerson's Dunedin Marathon in September. Led by a couple of keen staff members, we put out the call to all staff to take up the challenge of an event, from 5km to the full marathon (*pictured below*). Through this event we built a strong community of staff training for these challenging courses. The event brought the team together and was a great reminder to take care of our own health and wellbeing.

The Sweat with Pride challenge was another great event the team were involved in, challenged to exercise for at least 21 minutes a day throughout the month of June to raise money in support of Rainbow Kiwis. Together, we sweated a massive 21,173 minutes. The event created some healthy competition in the team across the month!



# PRACTICE SUPPORT

While Covid-19-related patient care is becoming less of a burden on practices, the effects of the pandemic are putting pressure on practices in other ways; in our region, this is especially felt across recruitment and retention.

While workforce shortages are not a new issue, it is now also impacted by Covid-19-related burnout, staff finally being able to catch up on overdue leave, and Covid-19-related ways of work, such as decreased hours or a preference for virtual health provision, becoming embedded. These challenges are exacerbated by our aging clinical workforce, the increasing complexity of patients, and an ever-growing administrative workload.

We continue to advocate for ways to alleviate these pressures.

Despite the challenges, general practice has continued to provide high-quality primary care services to our communities.



## ON THE GROUND TRAINING

Our Primary Care Relationship Managers have been working with practices to introduce new clinical digital and data tools.

There has been a strong focus on equity, where we have been showing how information on platforms such as Thalamus can pick up who in the Māori and Pacific community they can provide more support for, with for example information on recalls, who hasn't had labs, who's medication is out of date – with specific examples to discuss how the patient got there – and how we could improve that in the future.

Ethnicity audits uncover people that might be eligible for programmes that currently are not, simply because of the way their data is being recorded.

You can read more about this in the data and digital section on pages 46.

## IMPROVING DATA TO OUR PRACTICE NETWORK

We have been working with our data and digital team to redevelop data tools, such as dashboards, to make it easier for practices to see information about patients and conditions. This is saving time for clinical staff and improving the everyday patient care experience.

You can read more about our diabetes and cardiovascular disease risk assessment on page 46.



Thanks so much for the Thalamus training – it was great. The graphs are easy to read and navigate and relevant to our work in supporting our patients. Such a great resource, so thanks so much for working on this for us all.



General Practice staff member.



## A NEW NAME FOR OUR TEAM

This year, the Practice Network Team have had a name change to 'Primary Care Network Team'. While a seemingly small change to wording this reflects an important shift towards supporting a range of primary care providers beyond general practice as we move further down the path of the health reforms.

*Photo: Some of the WellSouth Primary Care Network Team at the Women you can bank on event held last year in Dunedin. Pictured from left to right Petria Falconer – Health Care Home Facilitator, Daniela Byrne – Relationship Manager, Ruth Zeinert – Relationship Director, Karen Bolch General Practice Operations Advisor, Karla Stiles – Relationship Manager, Alison Wilden – Change Facilitator Health Care Homes and Carolyn Martin – Relationship Manager.*

## OUR ENROLLED POPULATION

329,142

Current enrolled population

33,102

Māori

8,339

Pasifika

## SOUTHERN STATS

The following data is approximate and reflects an average during the financial year. The data also only reflects data captured for full time equivalents.



325

General Practitioners  
198 FTE

373

Nurses, including nurse practitioners, enrolled, registered and prescriber nurses

## WORKING IN OUR RURAL SECTOR

The continuity and sustainability of primary health services is a key priority for our region and it is especially so for our rural communities.

Te Whatu Ora Southern has the largest geographic catchment of New Zealand, with a number of isolated communities throughout the catchment. The primary care landscape has changed in the seven years since the changes to rural funding were made in 2015. The Covid-19 pandemic has forced providers to think differently about how services are provided, including using technology and new treatment protocols.

We must continue to work with our rural health partners to improve health services and outcomes for our rural communities across the Southern Region.

A major project for us is the Rural Services Review working in partnerships with Te Whatu Ora - Southern. It was established in April 2023 to provide input and advice on the planning and delivery of rural health services within the Southern region. Over time, the group will be asked by the partners to focus on specific areas of planning and delivery, determined by service planning timeframes and the priorities of the partners and wider stakeholders at the time.

The Rural Review Group was appointed and met for the first time on the 3rd May 2023. The Review Group's renewed purpose:

**To identify the key priorities of Rural Health and Community Providers and develop actionable strategies that will enhance services and outcomes in rural areas.**

The Rural Review Group continues to meet monthly and has endeavoured to achieve this revised purpose through consultation with its key Rural and Community Provider Stakeholders to gather clear feedback, analyse and develop their key priorities.

The Review Group consists of Māori, Pacific and Rural community representatives as well as health sector experts from various Rural Health Providers and a representative from WellSouth. At the time this was WellSouth Rural Funding & Services Review Project Manager Jonathon Amos.

35 of 77

General practices contracted to WellSouth are defined as rural for funding purposes.

44%

of enrolled patients in the southern region are enrolled at a rural general practice.

## What is considered Rural?

For funding purposes, a rural practice in Southern was defined by the Review group in 2014 as being more than 35km or 35 minutes' drive from a base hospital including Dunedin Public Hospital or Southland Hospital.



### THE HEALTH CARE HOME MODEL

The Health Care Home (HCH) model is a nationwide general practice model that provides a framework for true patient-centred care.

It's about finding ways to spend more time with patients who really need it, improving patient experience, and improving processes to make things easier for staff.

Our Southern HCH Programme is a two-year funded programme which focuses on four areas of general practice including:

- Sustainability,
- Urgent and Unplanned Care,
- Proactive Care for those with Complex Needs, and
- Routine and Preventative Care.

#### For the long term

Although only a two-year programme, the model provides a framework for sustainable care and continuous improvement, and we know that many of the practices who have completed the programme continue to use principles of the model.

#### Huddle

A great ongoing tool for practices is the huddle. Feedback to WellSouth at various events, conferences, and via our Primary Care Relationship Managers is that the huddle has contributed to greater staff awareness and inclusiveness which has improved organisational culture.

#### What is a huddle?

A short, stand-up meeting of no more than 10 minutes aimed at providing a forum for important daily concerns. Huddles are a fast and efficient way to identify crunch points throughout the day and deal with them before they arise.

Practices that use huddles have reported their staff feel more engaged, with greater teamwork and communication skills. The huddle also helps to increase awareness of important issues and encourage a culture of increased efficiency and planning within the practice.



#### A success story

The Gore Medical Centre has been the first general practice in Otago and Southland to be credentialled as a Health Care Home practice. The accreditation was the culmination of more than four years of work for the practice.

Gore Medical Centre started the programme in 2018 with three other practices in Southern.

"It has been incredibly helpful to have these improvements and better processes in place," says Susan Jones, Gore Medical Centre practice manager. "It's been a lot of work on the part of all our staff but the most important thing is that there's improved experience for patients, including better access to the care they need, and, in some cases that care can be delivered without them having to physically come into the practice."

"For some patients who live some distance from town, the opportunity to have a telephone consultation has been a win-win and saves the patient time."

Among the highlights that have helped improve how the practice with more than 8,000 enrolled patients operates and delivers care to patients are the GP/clinical triage and telehealth offering, the patient portal and a new phone system.

For staff they have implemented a workforce plan including recruiting Health Care Assistants and introducing morning staff huddles.

Prioritising equity has been key with clinical and cultural leadership focus on Māori health, wellbeing and ongoing collaboration with Hokonui Rūnanga. The practice has recently resumed holding clinics at the local kōhanga reo in Gore and Maitāwhiri.

Staff commitment and support were critical to help the practice achieve its goals, says Susan. "We owe our success to our staff who were willing to make changes and had the attitude to improve as a result. It's made all the difference."

*Photo: Gore Medical Practice Manager Susan Jones receives Health Care Home accreditation certificate from WellSouth Health Care Home Facilitator Ali Wilden.*



Compared to last year, the number of practices and patients benefitting from Health Care Homes has been steady.

Here are the 2023 figures:

**26**

Practices using the Health Care Home Programme

**203,077**

Patients supported by HCH MoC quality improvements

**20,609**

Māori patients supported by HCH MoC quality improvements

**5,514**

Pasifika patients supported by HCH MoC quality improvements

# DATA & DIGITAL

## MAKING DATA WORK FOR PRACTICES AND PATIENTS

Data is critical to supporting practices to get clear and consistent information that is easy to understand. WellSouth has been collaborating with primary care practices to co-create and customise clinical intelligence tools including Thalamus for the specific requirements and workflows of our 80 plus general practices.

Working with our clinical advisors and primary care relationship team, we have been able to provide training directly at the practice level. This has helped us identify pain points, and collaboratively develop solutions to address them. The improved clinical dashboards show how this collaborative approach has improved the day-to-day patient care experience.

## CLINICAL DASHBOARD REDEVELOPMENT

We worked on the redevelopment of multiple clinical dashboards, tailored to practice needs. These dashboards cover critical areas such as Diabetes, Cardiovascular Disease Risk Assessment (CVDRA), and Register management.

Additionally, we implemented quick response reporting tools to facilitate drug changeovers, enabling practices to make informed decisions promptly.



## TECHNOLOGY FOR EQUITY

Our Primary Care Relationship Managers have been visiting practices to demonstrate how they can use Thalamus to gain insight into high need groups. With a growing recognition for more equitable health outcomes, this data is an incredible useful tool to improve outcomes for patients.

One example of the Thalamus demonstration was showing practice staff how to build lists in Excel so they can filter down to the people who are in most need of help, and target the limited health resources available.

Ethnicity audits are another example, where practices can uncover people that may be eligible for programmes, who are currently ineligible due to the way their data is recorded.

Also, critically, they showed staff what they didn't know, i.e., who hasn't received recalls, who hasn't had labs, and whose medication is out of date, with specific examples to discuss how the patient got there and how we could improve that in the future.

### Success

As a testament to the value and impact of our efforts above, we observed a significant uptake in use and traffic across the platform by primary care providers, indicating the platform's effectiveness (see graph below).

Thalamus usage stats (excluding PHO users)



# CLINICAL GOVERNANCE

## Clinical Governance Group (CGG)

WellSouth Primary Health Network (WSPHN) is committed to continuously improving the safety, quality and equity of services provided to patients and their whānau/families. This requires strong, transparent governance of all aspects of our clinical activities. Clinical governance provides a framework by which staff, management, governors and consumers, led by clinicians, can be involved in contributing to improving patient safety, quality and equity. We undertake these functions through our two clinical governance related committees.

The Clinical Governance Group (CGG) is a sub-committee of the Board and takes a strategic focus within our organisation. Its purpose is to ensure equitable, high-quality health care is provided in our district. Aspects of the four pillars of clinical governance – engaged effective workforce; consumer engagement and participation; quality improvement, equity and safety; and clinical effectiveness across the services WellSouth provides and contracts for, are reviewed cyclically through our workplan.

### CGG MEMBERS

Dr Susie Meyer

Dr Carol Atmore

Professor Sue Crengle

Dr Letava Tafuna'i.

Dr Lynley Cook

Dr Kate Dixon

Dr David Gow

## Clinical Quality Committee (CQC)

The Clinical Quality Committee (CQC) is a sub-committee of the WellSouth's CGG. It is more operationally focused, and its purpose is to provide expert advice and guidance to the WellSouth Management Team with the development and implementation of clinical programmes, models of care, and clinical services delivery. CQC also provides advice regarding existing programmes regarding improvements to address quality and equity to improve health outcomes. Examples include advice regarding the Winter Wellness Checks, and the redesign of our approach to long term conditions management.

### CQC MEMBERS

Dr Carol Atmore (Chair)

Dr Daniel Pettigrew

Dr Natasha Sharp

Gaylene Hastie

Angela Ryley

Teresa Manahi

Jo Sandford

Danielle Millar

Rev. Alofa Lale

Dr Anu Shinnamon

Dr Rachel Greenwood (part of the year)

## Community Health Council

In the past year, WellSouth has faced many challenges, most notably those brought about by the Health Reforms, workforce shortages and funding gaps.

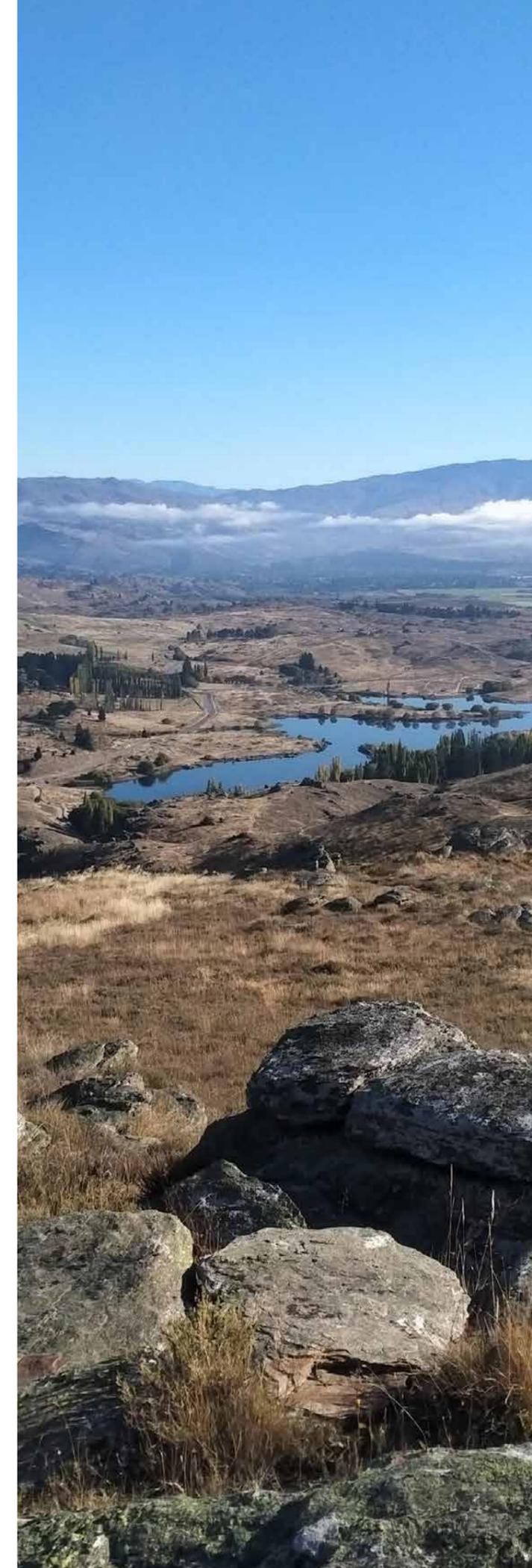
As the new Chair of the Community Health Council, I have appreciated the welcome, support and respect from WellSouth, and in particular Chief Executive, Andrew Swanson-Dobbs. WellSouth's active engagement with the Community Health Council demonstrates the value it places on the input of consumers into the primary care services provided in our southern region.

Andrew's regular communication with the Council enables Council members to share updates with their communities. The WellSouth relationship with the Community Health Council also provides a forum for discussion and follow up action, when required, on concerns or queries that the Community Health Council members have brought from their communities.

Alongside, and despite, the significant challenges in primary care, it has also been great to see positive change, such as the great outcomes for Pasifika and Māori communities through Pou Manaaki, which contribute to equitable health outcomes in our southern region.

We look forward to continued engagement with WellSouth, engagement which is pivotal to improving quality across the southern primary health and disability system, and which serves for the benefit of all patients, their whānau and communities.

**Lyneta Russell, Chair Community Health Council,  
Te Whatu Ora Southern and WellSouth.**



# FINANCIALS

## Statement of comprehensive revenue and expense for the year ended 30 June 2023

	Notes	2023	2022
<b>Operating revenue</b>			
Operating revenue - non-exchange transactions	4	126,488,677	142,978,029
<b>Operating expenses</b>			
Contractual payments		103,691,789	122,987,640
Personnel expenses	5	15,332,755	14,267,189
Other operating expenses	6	4,529,182	4,057,043
Depreciation, amortisation, impairment and loss on disposal of assets	9	270,684	306,241
Total expenses		123,824,411	141,618,113
<b>Operating surplus/(deficit)</b>		<b>2,664,266</b>	<b>1,359,916</b>
<b>Financing revenue</b>			
Interest income		41,622	4,030
<b>Financing expenses</b>			
Interest on borrowings		629	11,501
<b>Financing surplus/(deficit)</b>		<b>40,993</b>	<b>(7,471)</b>
Share of surplus/(deficit) of equity-accounted investments	14	(93,269)	33,257
<b>Total surplus/(deficit)</b>		<b>2,611,990</b>	<b>1,385,702</b>
Other comprehensive revenue and expense		-	-
<b>Total comprehensive revenue and expense</b>		<b>2,611,990</b>	<b>1,385,702</b>

## Statement of changes in equity for the year ended 30 June 2023

	2023	2022
<b>Balance at 1 July</b>	4,047,443	2,661,741
Total comprehensive revenue and expense for the year	2,611,990	1,385,702
Other movement	-	-
<b>Balance at 30 June</b>	<b>6,659,433</b>	<b>4,047,443</b>

These statements should be read in conjunction with the notes to the financial statements.

## Statement of financial position as at 30 June 2023

	Notes	2023	2022
<b>Equity</b>			
Accumulated trust funds		6,659,433	4,047,443
<b>Total equity</b>		<b>6,659,433</b>	<b>4,047,443</b>
<b>Current assets</b>			
Cash and cash equivalents	7	5,601,227	3,575,988
Trade debtors and other receivables	8	5,285,944	8,821,366
Good & services tax receivable		-	143,980
Prepayments and deposits		93,489	780
Total current assets		10,980,661	12,542,114
<b>Non current assets</b>			
Equity-accounted investments	14	199,988	293,257
Property, plant and equipment	9	677,273	737,584
Total non current assets		877,261	1,030,841
<b>Total assets</b>		<b>11,857,921</b>	<b>13,572,954</b>
<b>Current liabilities</b>			
Trade creditors and other payables	10	4,072,020	8,033,192
Good & services tax payable		113,472	-
Deferred revenue	11	1,012,997	1,492,320
Total current liabilities		5,198,488	9,525,512
<b>Non current liabilities</b>			
Total non current liabilities		-	-
<b>Total liabilities</b>		<b>5,198,488</b>	<b>9,525,512</b>
<b>Net assets</b>		<b>6,659,433</b>	<b>4,047,442</b>

These financial statements were approved by the Trustees on 10 October 2023.

Dr Doug Hill (Chairman)  
Trustee

Trustee

This statement should be read in conjunction with the notes to the financial statements.

## Statement of cashflows for the year ended 30 June 2023

	Notes	2023	2022
<b>Cash flows from operating activities</b>			
Receipts from contracts		129,544,775	139,251,234
Interest received		41,622	4,030
Interest paid		(629)	(11,501)
Payments to suppliers		(112,274,853)	(124,673,363)
Payments to employees		(15,332,756)	(14,807,571)
GST (net)		257,451	(300,981)
<b>Net cash flows from/(used in) operating activities</b>		<b>2,235,610</b>	<b>(538,152)</b>
<b>Cash flows from investing activities</b>			
Receipts from sale of property, plant and equipment		1,507	5,699
Purchase of property, plant and equipment		(211,880)	(353,563)
Acquisition of equity-accounted investments		-	(260,000)
<b>Net cash flows from investing activities</b>		<b>(210,373)</b>	<b>(607,864)</b>
<b>Net increase/(decrease) in cash and cash equivalents</b>		<b>2,025,237</b>	<b>(1,146,016)</b>
Cash and cash equivalents at the beginning of the year		3,575,988	4,722,004
<b>Cash and cash equivalents at the end of the year</b>	7	<b>5,601,225</b>	<b>3,575,988</b>

## Notes to the financial statements

### 1 Reporting entity

WellSouth Primary Health Network Trust (the "Trust") is a charitable organisation, based in Dunedin, which is incorporated under the Charitable Trusts Act 1957, registered under the Charities Act 2005, and is subject to New Zealand law. The primary activity of the Trust is the provision and enhancement of primary health care in Otago and Southland. The Trust until 7 October 2014 was known as the Southern Primary Health Organisation.

The Trust has been established to carry on activities for the exclusive benefit of charitable purposes within New Zealand.

### 2 Basis of preparation

The results represented in the summary financial statements have been extracted from the full financial report for the year ended 30 June 2023, authorised for issue by Chairman, Dr Doug Hill on 10 October 2023. As such, this extract of key financial statements does not include all the disclosures provided in the full financial report and cannot be expected to provide as complete an understanding as provided with accompanying notes.

The Trust's full financial report has been prepared in accordance with New Zealand Generally Accepted Accounting Practice (NZ GAAP). They comply with Not for Profit Public Benefit Entity Accounting Standards (PBE Standards (NFP)), being New Zealand equivalents to International Public Sector Accounting Standards (NZ IPSAS) and other applicable financial reporting standards as appropriate to Public Benefit Entities. The accounting policies adopted are consistent with previous years except for instances where the accounting or reporting requirements differ under PBE Standards (NFP) compared to IFRS (PBE).

The Trust is deemed a public benefit entity for financial reporting purposes, as its primary objective is to provide services to the community for social benefit and has been established with a view to supporting that primary objective rather than a financial return.

The Trust has prepared the financial statements in accordance with Tier 1 PBE Standards (NFP).

The presentation currency is New Zealand Dollars.

### 3 Nature of Audit Opinion

The full financial report of WellSouth Primary Health Network for the year ended 30 June 2023 and 2022 have been audited with an unqualified audit opinion.

## Where we operate

AT JUNE 2023

### CENTRAL OTAGO

Alexandra Family Medical  
Altimus Health  
Cromwell Family Medical  
Cromwell Medical Centre  
HealthCentral  
Junction Health  
Ranfurly Medical Centre

### CLUTHA

Catlins Medical Centre  
Clutha Health First  
Tuapeka Community Trust  
Milton Medical Centre  
West Otago Health

### DUNEDIN

Albany Street Medical  
Amity Health Centre  
Aurora Health  
Broadway Medical Centre  
Dunedin City GP  
Dunedin Health Centre  
Dunedin North Medical Centre  
Dunedin South Medical Centre  
East Otago Health  
Gardens Medical  
Gordon Road Medical Centre  
Green Island Family Health Care  
Harbour Health Centre  
Helensburgh Medical Centre  
Kenko Care

Māori Hill Clinic

Meridian Medical Centre  
Morningson Health Centre  
Mosgiel Health Centre  
Musselburgh Medical Centre  
Otago Peninsula Medical Centre  
Outram Medical Centre  
Portsea Medical Practice  
Roslyn Health Centre  
Saddle View Health Centre  
Servants Health Centre  
Te Kāika Caversham  
Waverley Health Centre

### INVERCARGILL

Bester Mckay Family Doctors  
Catherine St Medical Centre  
Gaius Health  
Glengarry Medical Centre  
He Puna Waiora - Wellness Centre  
Invercargill Medical Centre  
Murihiku Medical Services  
Queens Park General Practice  
Te Hau O Te Ora - Invercargill  
Te Hau O Te Ora - Maitaia  
South City Medical Centre  
Vercoe Brown & Associates  
Victoria Avenue Medical Centre  
Wāihopai Health Services Ltd  
Waikiwi Medical Centre  
West Invercargill Health

### QUEENSTOWN LAKES

Aspiring Medical Centre  
Mountain Lakes Medical  
Queenstown Medical Centre  
The Doctors, Whakatipu  
The Village Medical  
Wānaka Medical Centre

### WAITAKI/NORTH OTAGO

Central Medical Oamaru  
Kurow Medical Centre  
North End Health Centre  
Oamaru Doctors  
South Hill Medical

### SOUTHLAND/GORE

Bluff Medical Centre  
Fiordland Medical Practice  
Gore Health Centre  
Gore Medical Centre  
Lumsden Medical Centre  
MonARC Health  
Otautau Medical Centre  
Riverton Medical Centre  
Tuatapere Medical Centre  
Winton Medical Centre

# Senior Leadership Team



**Andrew Swanson-Dobbs**  
Chief Executive



**Dr Carol Atmore**  
Clinical Director



**Peter Ellison**  
Pou Oraka Matua  
Director of Māori Health and Equity



**Damon Campbell**  
Chief Operating Officer



**Stuart Barson**  
Integrations Director



**Karen McCleery**  
Executive Assistant



**Mistelle Jack**  
Chief Financial Officer



**Lyn Hurring**  
Acting Chief Financial Officer  
*(1 July - 9 October 2022)*



**Paul Rowe**  
Practice Network Director  
*(Until 10 August 2022)*



**Fiona Grayson**  
People & Culture Manager  
*(Until December 2022)*



**Moira Finn**  
Communications Manager  
*(Until 19 June 2023)*



**Amira Dabaliz**  
Programme Manager  
*(Until 12 May 2023)*



**Dr Doug Hill**  
Chair



**Tony Hill**



**Professor Sue Crengle**



**Dr Keith Abbott**



**Associate Professor  
Emma Wyeth**



**Paul Larson**



**Amanda McCracken**



**Dr Keri Milne-Ihimaera**



**Dr Susie Meyer**



**Laeliifanovalevale Erolia  
Eteuati Rooney**



**Nicky Burwood**

## Karakia Whakamutunga

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As we look ahead at the next financial year, we take stock and celebrate our successes.

This karakia seeks to clear the tapu/ sacredness and calls to Rongo – the god of peace or peace-making – to clear any ailments or troubles and allow us a way forward in peace and with good intention.

***Unuhia, unuhia***

***Unuhia ki te uru tapu nui***

***Kia wātea, kia māmā***

***te ngākau, te tinana, te***

***wairua i te ara tangata***

***Koia e Rongo whakairia***

***ake ki runga***

***Kia tina! Tina!***

***Haumi ē, hui ē, tāiki ē!***



## ANNUAL REPORT CREDITS

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Thanks to the staff who have provided us with articles and images for the annual report. We would also like to acknowledge the photographers of the landscape images.

Cover Kapukataumahaka - Mt Cargill, Dunedin - Simon Chittock

Page 27 Mt Brewster, Mt Aspiring National Park - Marc Haughey

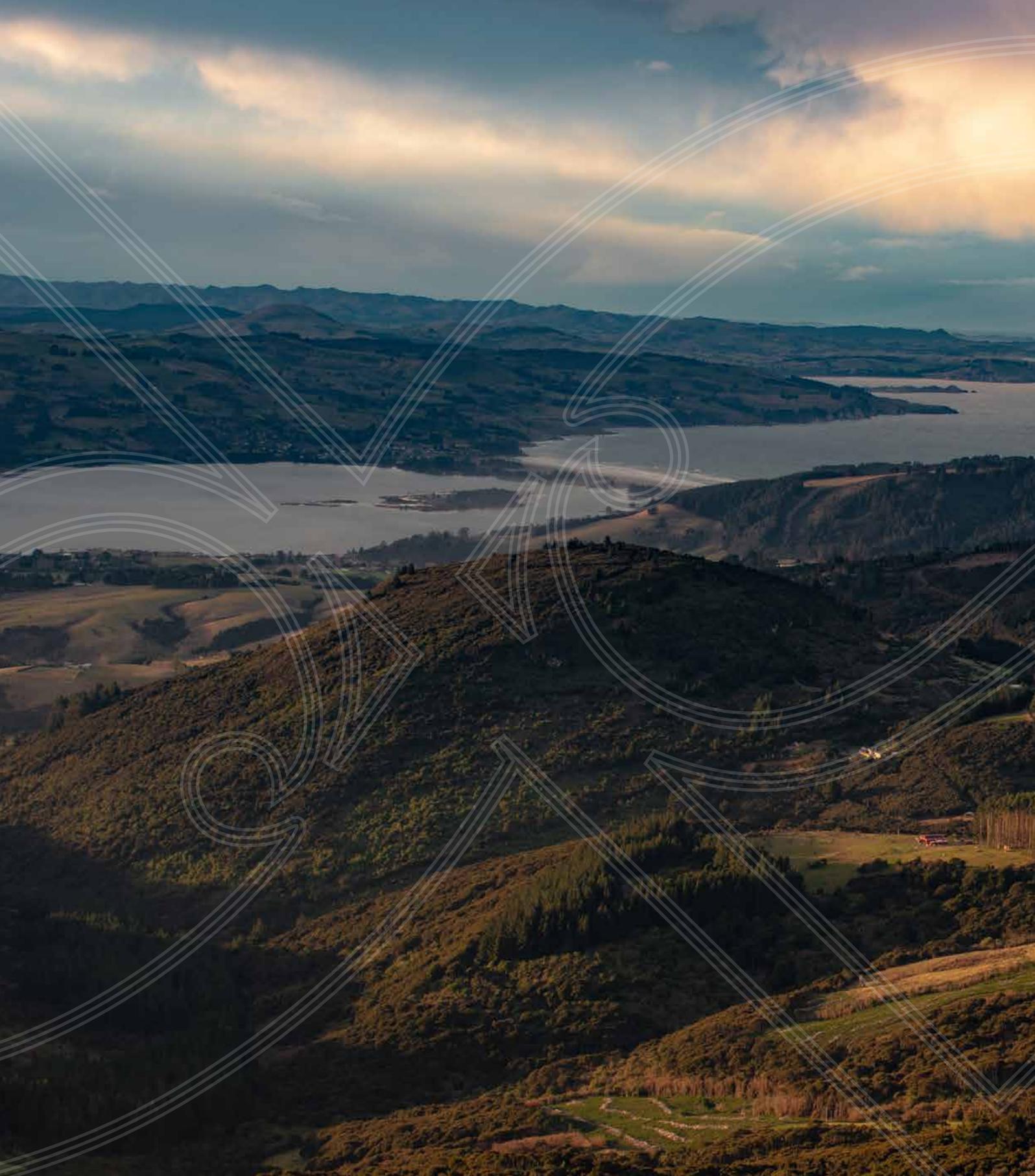
Page 35 Oreti Beach, Waihopai/Invercargill - Ashleigh Taomia

Page 43 Lowther Downs, Southland - Lauren Chittock

Page 49 Butcher's Dam, Alexandra - Deb Gallon

This report was compiled and edited by Taylor Te Au and Frederique Gulcher of the WellSouth Communications and Engagement Team.

Designed by Judith Henning.



**He mana iō te whānau**  
*Whānau Centred*

**Tōkeke**  
*Equitable*

**Manawa whakaute**  
*Respectful*

**Pono**  
*Transparent*

**Alexandra**  
4/59 Russell St  
Alexandra 9320

**Dunedin**  
333 Princes St  
Dunedin 9016

**Invercargill**  
40 Clyde St  
Invercargill 9810