

# Family Planning Annual Report Pūrongoā Tau

1 July 2022 - 30 June 2023

# Chief Executive and President's Report

Te Pūrongo a te Mana Whakahaere rāua ko te Pou Whakarae

#### Seismic shift in screening programme

It is exciting to open this report with the implementation of a new national screening programme that will both expand access to testing and save lives. As this report was being written, we were four weeks into the new HPV screening programme. This new cervical screening option is a game changer, meaning that for most people a self-taken cervical swab will replace the previous clinician-taken cervical screen.

The new test looks for the Human Papillomavirus (HPV), that causes more than 95% of cervical cancers. The change to the screening programme means more people will be able to access this safe and accurate life-saving healthcare.

We tautoko the remarks made at the launch of the new scheme by our Director Hauora Māori and Equity Dr Tania Huria who commented: "The shift to HPV screening is a positive step to help eliminate a preventable cancer. Māori and Pasifika wāhine are exponentially at greater risk of developing cervical cancer and dying from it. The HPV screening programme provides more options for wāhine, which leads to greater access, and better outcomes.

"Wāhine should not be dying from a cancer that is preventable. HPV screening is one part of the prevention and treatment pathway, and I am excited to consider Family Planning's role in addressing cervical cancer inequities."

#### Organisation under pressure

Like our colleagues across the primary, community, and telehealth sector, the year under review has been one of immense pressure on every aspect of our service. Unlike recent years, this pressure isn't coming from COVID or COVID restrictions. The fundamental impediment to our ability to deliver the services our clients want, is the pay gap between our nurses and those employed by Te Whatu Ora. We believe all nurses should be well paid for their important mahi, but our reality is that the gap is now such that recruitment and retention of our nursing workforce is impacting our ability to offer clinic services, causing significant disruption for our clients.

In April 2023, the Government announced a pay rise of up to 15 per cent for community nurses, including Family Planning nurses. Almost immediately after this announcement, pay increases were announced for Te Whatu Ora nurses and the parity gap was back. At the time this Annual Report was written, the issue had not been resolved and we were working with colleagues across the sector to make the case for parity for our nurses.

Around 80 per cent of client consultations at Family Planning are led by a nurse working at the top of their scope. Close to a quarter of our nurse roles are vacant with a rolling vacancy rate of some 22 per cent across the year. Much of this is driven by pay parity. Simply put, our nurses can earn more working elsewhere. The impact of the pay gap is apparent in our clinics and impactful for our clients every day – clinics closing due to a lack of staff, appointments being cancelled and rescheduled, and longer waiting times. This is not how we want to work. It is not how our staff want to work.

#### Our role in primary care

Our role as a specialist service within primary health care has been a hot topic of conversation within the organisation over the past year. We are positioning ourselves as a sector partner within the "Living Well" directorate of Te Whatu Ora to ensure we are well placed to be front and centre in sector-wide conversations about sexual and reproductive health. This is likely to involve building on our sector relationships by taking a more collaborative approach and forging closer relationships across the primary health care sector. We believe we can add considerable value in the sector given our specialised knowledge and extensive clinical experience.

#### Women's Health Strategy

Family Planning contributed to the development of New Zealand's first-ever Women's Health Strategy.

We identified 8 priority actions for the health system to improve the health of women and girls. We developed these recommendations based on our experience as a sexual and reproductive health care provider, and the voices of our clients and other stakeholders who have completed our surveys over the years. Our recommended actions are:

- 1. Make contraceptive visits in primary care universally free for any contraceptive type.
- 2. Ensure equitable access to primary care providers specialising in sexual and reproductive health care.
- 3. Undergo regular reviews of contraceptive options in Aotearoa against internationally available products to ensure a full range of modern types of contraception (contraceptive ring and patch, self-injectable) is available.
- 4. Prioritise reducing inequity in sexually transmitted infection (STI) rates for Māori and Pacific women and girls.
- 5. Full fund the cervical screening programme, like all other national screening programmes.
- 6. Fund abortion provision in primary care.
- 7. Strengthen young people's knowledge and skills about relationships and sexuality through culturally appropriate relationships and sexuality education from Year 1 to Year 13.
- 8. Ensure sexism and gender inequity are included in culturally appropriate health promotion initiatives in schools and the community.

Earlier, in September 2022, Family Planning was a host partner for an event led by the Royal Australia New Zealand College of Obstetricians and Gynaecologists which brought together a broad range of stakeholders to discuss their vision to the health and wellbeing of women, girls and gender diverse people in Aotearoa. The meeting produced an outcomes report which was published with the aim of contributing to the development of New Zealand's first Women's Health Strategy.

#### Commitment to equity

We welcomed the announcement in the May 2023 budget to remove the \$5 prescription fee from many prescription items. We believe the initiative will make a difference, especially for young people accessing contraceptives and expect the removal of the charge could mean the difference between people picking up their medication – or not. When it comes to critical medication, like contraception, we want to remove every barrier we can, price being a key impediment, especially for young people. Earlier in the year we signed a petition authored by the United Community Action Network (UCAN), calling for the removal of the prescription fee for people who have a Community Services Card.

#### **Brand review**

Since 1939, we've been called Family Planning, or a version thereof. As foreshadowed at our last Annual General Meeting, in the 2022/2023 Strategic Framework, Family Planning Council included work to review our name and brand to ensure that we have a name that adequately reflects the services we offer, resonates with our diverse audiences, and provides a platform for us to launch into our tenth decade in good heart and well-positioned.

While this Annual Report is too early to report on the final shape of this project, we can report that the brand review has been a significant piece of work across 2023. In line with the brand project, a new website has been in development across the year too and is due to go live at the 2023 Annual General Meeting (AGM). We are excited to make a brand presentation to members at the AGM.

**STOP PRESS:** As this Annual Report was being produced, we were alerted to the death of Jean Lawrie, an Honorary Life Member of Family Planning. Jean worked for many years as a Medical Receptionist at our Christchurch Clinic and was made an Honorary Life Member in 2001. Our sympathies and sincere best wishes go to Jean's family and friends, and to her former Family Planning colleagues who became her friends.



Dr Jacky Percy President Mana Whakahaere



Jackie Edmond Chief Executive Te Pou Whakarae



## **Organisation** Whakahaere

#### Senior Leadership Team

A significant achievement during the year was successfully recruiting to the vacant roles across our Senior Leadership Team and by the end of the year under review we had a full SLT in place. These are key roles for us, providing strategic and operational leadership for the organisation.



**Elizabeth Lowndes** started in July 2022 as our new Director Corporate Services. Elizabeth was Manager of Corporate Service for the Electoral Commission for a number of years. Elizabeth is responsible for the finance and IT business units and is also leading the development and implementation of our new sustainability framework.

In December 2022, our long-standing National Nurse Advisor Rose Stewart stood down from her role. Rose had been a passionate advocate for our nursing workforce, and it was her determination and perseverance that achieved nurse prescribing for our nurses. Rose continues to work clinically from our Wellington and Lower Hutt Clinics.



2022 ended with the appointment of a new Director of Nursing, **Julie Avery**. Julie is a nurse practitioner working clinically from our Takapuna Clinic. She previously ran a nurse-led Early Medical Abortion service at Auckland Medical Aid Centre (AMAC). Julie started in her new role on 16 January 2023.

Julie was drawn to the role as she is passionate about sexual, reproductive health and womens health rights, as well as equitable access

to services for all, as a basic human right. She believes in supporting, educating, and upskilling every nurse who works at Family Planning, as their job makes such a positive impact on a client's experience.

Kia ora koutou katoa Ko Maukatere toku Mauka Ko Rakahuri toku Awa Ko Takitimu toku Waka Ko Kai Tahu raua ko Ngāti Mutunga o Wharekauri oku Iwi Ko Ngāi Tūāhuriri, Ngāi Tūtehuarewa oku Hapū Ko Maahunui Tuarua, Tūtehuarewa oku Marae Ko Tania Huria ahau.



**Dr Tania Huria** (Ngai Tahu/Ngāti Mutunga o Wharekauri) took up the role of Director Hauora Māori and Equity in early June 2023. Tania was previously the Associate Dean of Māori, Associate Dean of Student Affairs and Senior Lecturer at the University of Otago. She was involved with both medical and nursing training programmes at the university.

She established the Wāhine Ora service at He Waka Tapu. Tania was awarded a contract to provide outreach Wāhine Ora services in

the Canterbury District Health Board region, including addressing equity for wāhine Māori for cervical and breast screening. She also worked to establish relationships with other Hauora Māori services locally and nationally.

Tania succeeded Maria Halligan who took up the role of Director Hauora Māori and Equity in August 2022. Family commitments limited Maria's time with us, but we are grateful for the groundwork she laid for our work in health equity and services for Māori. Staff changes in health promotion presented the opportunity to review the work of this team and to take a strategic look at the full Health Promotion function to ensure we have the right mix of resources, skills, and expertise in the right locations to meet the needs of the communities we support with particular emphasis on:

- Equity Focus Family Planning has a strategic focus to work in partnership particularly with Māori, Pasifika and people with disabilities to promote diversity; enhance understanding on inclusion issues and embed equity principles into policy, process, practice and services
- Ensuring we have a supported, skilled and enabled workforce to deliver high quality SRHR and RSE content
- Ensuring collective impact and courageous advocacy

As a result of the review, we established a new role of Director of Health Promotion. The National Director of Operations role, which had previously included oversight of the health promotion team, became the Director of Clinical Services with a focus on clinical provision of services and professional training and development.



**Fiona McNamara** was appointed to the new Director of Health Promotion. Fiona's background was in sexual violence prevention. She set up the charitable trust RespectEd Aotearoa, where she was Chief Executive. She was also the tauiwi primary prevention portfolio holder for the Paetakawaenga for TOAH-NNEST. She has a background in theatre, as a director, producer and performer and has made performances about gender, sexual violence and other social justice issues.

Fiona succeeded National Health Promotion Advisor Helen Topham who left to return to study.

#### **Position statements**

Our position statements express the values and positions of the organisation on issues central to sexual and reproductive health and rights.

Every three years we review our position statements to make sure they are current. This work was completed in the year under review, including review of our statement on abortion, historically the most read of all our position statements.

Other updated statements are: access to sexual and reproductive health services; equity and racism; reproductive rights; relationships and sexuality education; and, sexual orientation and gender identity.

The reproductive rights statement replaces a statement on violence because we wanted to broaden the way we talk about threats to reproductive rights to include violence but also other threats like policy decisions and racism.



#### Sustainability journey

Family Planning has embarked on its sustainability journey with a strategic framework in development for early implementation in 2023/2024.

A number of early initiatives have been undertaken by a Green Team based at National Office. These include sustainability training, implementing a composting system, an all staff workshop with Ethically Kate, and a clothes swap. The Green Team has also supported the development of the strategic framework.

The Green Team also developed the resource What's the link? Sexual and Reproductive Health and Rights and Sustainability.

- Preventing and reducing waste helps stop pollution and climate change.
- Changes to our environment, like pollution and climate change, impact sexual and reproductive health and rights.
- Clean water is needed for hygiene, managing periods, and during pregnancy and childbirth.
- Extreme weather and natural disasters can make it hard to get health services and supplies, like abortion and contraception.
- Evidence is growing that some of the chemicals polluting our environment can interfere with fertility and hormones.
- Environmental disasters can cause a crisis, and gender-based violence is worse in times of crisis.

# Clinics

## O Mātou Whare Haumanu

#### **Reimagining Clinic Services**

This year we began Phase 1 of a project to reimagine the way our clinical services are delivered. The key focus of the project is to develop and deliver a fit for purpose clinical service delivery model, within current resources and capacity, that is client-centered, meets our contractual obligations, improves equity, access, and choice, and is aligned with Family Planning's strategic framework.

The priorities of this project are:

- 1. Improved service design that is accessible to target populations, culturally appropriate and youth friendly.
- 2. Reduced wait times at all client touch points in the pathway.
- 3. Better use of systems and technology to improve efficiency and remove waste better value for money.
- 4. Fast track nurse development to reach the top of their scope of practice.

The project began with a review of the way clients make their appointments with us and the ways clients come into the Family Planning clinics. We also reviewed our appointment types, lengths and structures and our internal processes to ensure that we were doing everything we can to make it as easy as possible for clients to access our services.



A key piece of work was to redesign our booking processes. We developed and implemented a new booking tool for use by the call takers in our Client Contact Centre (CCC). Aligned with this was a review of our booking templates so that we could increase capacity in our clinics and reduce wait times for appointment.

We increased the capacity of our virtual consultation service – the phone clinics – for clients that don't want or need a face-to-face appointment. Across the year, some 16,800 appointments were done over the phone. This service is popular for young people, and services such as pill repeats and condom prescriptions.

To improve capacity and reduce wait times, we reviewed and redesigned our booking templates.

It has been well documented that our service is under pressure and our CCC takes the brunt of this pressure. Call volumes – the number of people calling us to try and make an appointment has risen year on year since the CCC was first opened in 2013. This year we introduced webchat to the Family Planning website as a way for clients to be able to contact us without needing to make a phone call or having to wait on the line for their call to be answered.

#### What's next (Phase 2)?

Online booking – where clients can book their appointments with us online – is our goal. There are a number of issues that prevent that from being achieved immediately or easily. Work across the new year will focus on developing self-service options for clients to book their own appointments.

We will continue to work collaboratively and engage with key stakeholders to ensure services meet the needs of our clients. Fundamental issues like pay parity, and our ability to recruit and retain nurses, will continue to impact our ability to deliver this work.

#### **SNOMED** implementation

In March 2023 we were the first national primary care service to implement SNOMED coding. SNOMED enables national and global standards for health terms and client journeys.

Data review of codes used to date has given us an improved picture of our clients' experiences and journey within Family Planning. It will be exciting to see how the data improves services to health users.

## Refresh of Blenheim Clinic

Blenheim Clinic had a makeover during the year, resulting in a new accessible client toilet. The clinic has been repainted and has new flooring. Some structural changes have been made



too, to move the building from the 1970s to the 2020s.

#### Henderson Clinic in new location

In September 2022, Henderson clinic opened in its new location at Level 2, 362 Great North Road. We have two clinics in West Auckland now – Henderson Clinic and our New Lynn Clinic.

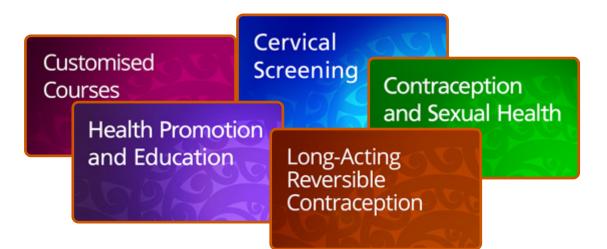
#### **Professional Training and Development**

This year we undertook a significant upgrade of our Learning Management System, which is the platform we use to offer our Professional Training and Development and Health Promotion Courses. This improved the functionality of the system and enhanced options for internal staff training as well.

Since it was first implemented in 2018, there has been a significant growth in the number of online and blended learning courses and enrolments.

During the COVID-19 pandemic we were able to deliver the majority of our courses online, with the exception of our Family Planning Certificate Course, Cervical Screening and LARC practical training.

During the year, there were 16 unique clinical courses available, 9 of these were self-directed online learning and 7 were facilitator-lead workshops. There were total of 2741 enrolments across these clinical courses.



#### New courses

This year we have been developing a fee-paying long-acting reversible contraception practical training course due to be released at about the time this Annual Report is published. We have over 100 clinicians who have expressed interest in undertaking this training already. The Cervical Screening course has been overhauled to reflect the new HPV screening programme launched by National Cervical Screening Programme in September 2023.

Clinics O Mātou Whare Haumanu

# **DECIDE - national abortion** telehealth service

Whakatau – te ratonga hauora ā-waea whakatahe ā motu

#### **DECIDE** Phase 3 launch

Family Planning is a partner in the delivery of DECIDE, the National Abortion Telehealth Service, with our colleagues at Magma Healthcare.

Phase 3 of DECIDE officially launched in November 2022 with a small function to acknowledge what was a really a seismic shift in the provision of abortion in New Zealand. Associate Health Minister Hon Ayesha Verrall spoke at the event. Dame Margaret Sparrow also spoke about the path from abortion prohibition through law reform to the DECIDE service being an actuality. Dame Margaret reminded those present that the vote at the Third Reading of the Abortion Legislation Bill, which laid the groundwork for the DECIDE service, was 68 in favour to 51 against which means that we must remain vigilant about attempts to roll back abortion rights.

Phase 3 of the service means that in the first 10 weeks of pregnancy women will be able to access medication for an early medical abortion over the phone. DECIDE will connect callers to a health practitioner over the phone who can help guide them through the process of an early medical abortion. After consulting with the practitioner if they choose to go ahead with the termination, they can then choose whether to have medicines couriered to them or to pick them up from a supporting pharmacy. This will significantly improve healthcare for those who live in rural areas, have concerns about privacy or don't have a medical professional they feel comfortable seeing.

## **DECIDE** Joins the Zero Data Initiative

The DECIDE website is now supported by Te Whatu Ora's Zero Data initiative. Zero Data allows clients access to digital health services — without paying for mobile data.

Financial insecurity often limits people's access to adequate healthcare and health information. Zero Data means that the cost of mobile data will no longer be a barrier between clients and the essential health service that DECIDE provides.

# **Human Resources**

## Pūmanawa Tāngata

## **HRIS Implementation**

We have completed the implementation of our Human Resource Information System. This includes a recruitment and onboarding module, a HR core module which provides capturing and insights of employee data and workflows to complete HR process along with an online performance review module to capture performance conversations and track progress.

## Diversity, Equity and Inclusion strategy

We have developed and are implementing a new strategy to strengthen our Diversity, Equity and Inclusion practices and infrastructure for all people within Family Planning. The strategy is focused on building an inclusive leadership team, encouraging biculturalism, identifying and reducing inequity to ensure an equitable experience for all staff.

## Wellbeing

As an employer, we are committed to the wellbeing of our staff. This year we have established a common understanding of wellbeing by introducing Te Whare Tapa Whā as our model of wellbeing – at both an individual and organisational level.

We have established a Wellbeing Working Group with staff representation from across the organisation. This group will support the organisation to develop wellbeing initiatives and benefits that can be offered to all our staff.

In 2023 we introduced a Wellbeing Day for our staff. Everyone has one day they can take off work to do something that replenishes their wellbeing and equilibrium.

Other initiatives across the year include developing an approach to measuring levels of wellbeing and ways of identifying and mitigating risks.

## Leadership Development

We have developed a Leadership Development Programme designed to support and grow the capability of our leaders. The focus of this work will be on the development of inclusive leadership.







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## **Health Promotion**

## Whakatairanga Hauora

#### Health Promotion Vision 2025

Throughout 2022-2023, Family Planning has reviewed its Health Promotion services and developed a vision for our health promotion work in the future.

The four areas of the vision are:

- 1. Equity focused
- 2. Collective impact and courageous advocacy
- 3. High quality sexual and reproductive health and rights and relationships and sexuality content
- 4. Supported, skilled and enabled workforce.

This vision is informed by, and supports, our Strategic Action Plan, which aims to achieve equity and deliver excellence by supporting embedding equity into all our work and equitable access to our services.

The review identified the need to take a more flexible approach to Health Promotion, that includes, but is not limited to, traditional modes of education. We envision a community-driven service that uses a range of methods to engage and meet the needs of our target group – rangatahi and those who support them.

During the first half of 2023, we have begun to implement the first phase of the vision – which has involved changes to staff positions: appointing a Director of Health Promotion, Health Promotion Team Leader, and a Health Promotion Specialist, and updating the position descriptions for Senior Health Promoter and Community Health Promoters. To work towards achieving equity, we have increased the staffing hours of Community Health Promoters in locations where there are higher Māori and Pasifika populations, and higher deprivation.

The next phase of the project involves developing the quality of the services we are providing and the modes of delivery, by creating a strategy for rangatahi engagement, resource design and maintenance and using social media as a health promotion tool.

#### Relationships and sexuality education (RSE)

In 2022, Family Planning, Canterbury University and the New Zealand Health Education Association collaborated on a nationwide survey of secondary school teachers' perspectives on teaching RSE in Aotearoa New Zealand. The report, which shows that lack of time and lack of subject status for RSE are significant barriers in New Zealand schools, launched at Avonside Girls' High School in Ōtautahi.

## **International Programmes** Ngā hōtaka puta noa i te ao

# Project success despite drought and supply issues

The Kiribati Healthy Families Project has completed the third year of the five-year project. Kiribati Family Health Association have continued to deliver key project activities including mobile and after-hours clinical services, training and workshops and awareness raising in communities. As a country, Kiribati is extremely vulnerable to climate change and natural disasters, which can in turn impact supplies such as fuel, water, food and medicines in country. This year despite experiencing a drought and continued supply issues for sexual and reproductive health commodities, the project has continued to deliver services and advocacy to people in Kiribati. During year 3 there were 114 contraceptive appointments for clients in Kiribati through this project, an increase from 82 in the previous period. This is the second consecutive reporting period that displays an increase in contraceptive appointments indicating a positive trend of contraceptive take up. There were 512 people who benefitted from training and workshops including teachers, nurses, youth groups and school students.

#### Vanuatu project current phase ends

The current phase of Planem Gud Famili Blong Yumi in Vanuatu will come to an end later in 2023. As a nation with just over 300,000 people living across around 60 islands, geographical spread and access to services continues to be a barrier for people to meet their sexual and reproductive health needs. This project focuses on overcoming these barriers by bringing clinical services and awareness raising to hard-toreach communities. During the last year through this project, the Vanuatu Family Health Association has delivered clinical services to 1201 people in two outreach locations. Vanuatu Family Health Association have also continued to deliver advocacy and health promotion activities to further raise awareness about sexual and reproductive health and rights. We hope to continue our work in Vanuatu into a third phase of this project.

#### Productive year for NZPPD

It has been a productive year for the New Zealand Parliamentarians' Group on Population and Development (NZPPD). Successfully chaired by MP Angie Warren-Clark, and supported by deputy chair,

Hon. Louise Upston, the group hosted a number of events including the launch of the 2023 State of World Population report at Parliament which included Björn Andersson from UNFPA and a film screening of Power Meri. NZPPD

NZPARLiamentarians' Group on Population and Development



was also represented on the international stage at several international conferences, where attending members used their platform to advocate for sexual and reproductive health and rights in the Pacific, such as the Women Deliver conference in Kigali, where two Pacific parliamentarians were also supported to attend.



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# **Global SRHR**

Ao whānui

#### **Commission on Population and Development**

In April 2023, Chief Executive Jackie Edmond attended the 56th session of the Commission on Population and Development in New York. This commission is one of the only Commissions that has a focus on sexual and reproductive health. There is an outcome document that is negotiated over the time that the meeting is held, generally the main sticking points are around language like- Comprehensive Sexuality Education (CSE), LGBTQI, and, sexual and reproductive health services.

The theme this year was Population, Education and Sustainable Development. It was a particularly challenging meeting as CSE was a key area that was being debated. CSE is very polarising in the UN, and the inability to agree continued this year with the failure to produce an outcome document.

#### Washington meeting

Jackie Edmond also attended a meeting for International Planned Parenthood Federation (IPPF) Member Associations who have international programmes teams. The meeting was in Washington DC and brought together organisations like ours from Scandanavia, Europe, and Australia.

The meeting talked about global issues impacting on sexual and reproductive health and rights - global politics, the election of right-wing governments, the war in Ukraine, the cost of food and power.

The meeting was held at the Planned Parenthood office in Washington and included a briefing from the team at Planned Parenthood that is dealing with the fallout of the Roe v Wade decision. This really brought home what impact this decision is having on people accessing abortion services. For example, South Carolina is trying to stop people being able look up any information about abortion and restrict internet access as well as trying to figure out ways that they can stop people travelling to access an abortion.

The meeting was able to visit a Planned Parenthood Clinic in Washington DC. This was notable for how much primary care work had been included in their sexual and reproductive health work. Also notable was the presence of protestors outside the clinic, and the need for every client to have an escort into the building.

## International Planned Parenthood (IPPF) General Assembly

The IPPF General Assembly was held this year in Bogota, Colombia. The General Assembly happens every three years. Three people from each Member Association are funded to attend. Council members Dr Elizabeth McLean and Dr Waimarama Matena and Chief Executive Jackie Edmond were able to attend. Our immediate past president Andreas Prager is on the IPPF board.



# Our People

## Ko mātou

#### Staff Anniversaries for 2022/2023

Some momentous staff anniversaries were celebrated this year! Congratulations and thank you all.

#### 40 years

Robyn Kemp, Nurse Practitioner, Blenheim.

#### 35 years

Rose Stewart, Nurse, Wellington.

Mimi Tanaka, Doctor, Panmure.

#### **30 years Sandie Halligan**, Nurse Practitioner, Christchurch.

#### **25 years Julia Drury**, Senior Health Promoter, Hamilton.

#### 20 years

Angeline Hii, Doctor, Newmarket.

Joy Pitcaithly, Nurse, Hamilton.

Liz Davenport, Nurse, Tauranga.

Sandra Hamilton, Nurse, Christchurch.

#### 15 years

Liz Hickey, Medical Receptionist, New Plymouth. Sheryl Potatau, Medical Receptionist, Henderson. Kevin Maennchen, Senior Systems Administrator, Wellington. Steph Duffy, Nurse, Lower Hutt.



#### **10 years**

\*Jocelyn Jackson, Medical Receptionist, Henderson.
Tui Maxwell, Nurse, Wellington
Saroj Singh, Medical Receptionist, Manukau
Karen Johnsen, Medical Receptionist, Invercargill.
Ciara Doherty, Nurse, New Plymouth.
Rachell Webb, Nurse, Blenheim.
Pam Robertson, Medical Receptionist, Dunedin.

\*After a long period of ill-health, Jocelyn passed away on 8 November. Jocelyn had been with us for nearly 11 years and was very much seen as a mother figure to the Henderson Clinic staff and was a much-loved and valued member of the team. Our thoughts are with Jocelyn's magafoa and her Family Planning colleagues at this sad time.

A function was held this year to acknowledge the retirement of Dr Pam Stone who worked for us from November 1999 until August 2021. Dr Stone's retirement occurred during COVID when a function wasn't possible. She worked at clinics across Wellington and Auckland during her Family Planning career.

We were saddened at the tragic death of aid worker Andrew Bagshaw in the Ukraine in January 2023. Andrew is the son of Dame Sue Bagshaw (a former Family Planning doctor and current Honorary Life Member) and Professor Phil Bagshaw. On behalf of Family Planning staff, Council and members we extend our deepest sympathies to Andrew's family.

#### Family Planning Council Te Kaunihera

President, Te Pou Whakarae, Dr Jacky Percy

Vice President, Te Pou Whakarae Tuarua, Dr Elizabeth McLean

#### Council, Te Kaunihera

Dr Waimarama Matena

Jackie Curtis

Manihera Te Hei

Dr Nina Bevin

Ian Olan

Steph Townsend

Immediate Past President, Te Pou Whakarae o MuaTonu Nei,

Andreas Prager



#### Senior Leadership Team Te Tira Whakahaere Matu

Chief Executive, Mana Whakahaere, Jackie Edmond, MNZM

Director Clinical Services, Hautū Ratonga Haumanu, Kirsty Walsh

Medical Director, Hautū Hauora, Dr Beth Messenger

Director of Nursing, Hautū Tapuhi, Julie Avery

- Director Health Promotion, Tumuaki Whakatairanga Hauora, Fiona McNamara
- Head of People and Capability, Pou Tangata, Āheitanga hoki, Hayley Hachey
- Director Corporate Services, Tumuaki, Ratonga Rangatōpū, Elizabeth Lowndes
- Director Hauora Māori and Equity, Tumuaki, Hauora Māori, Mana Turite Dr Tania Huria
- Communication Manager, Kaitohutohu Tauwhitiwhiti, Sue Reid

# Members

## Kaitautoko

We would like to acknowledge the new Honorary Vice President and the five Honorary Life Members announced at the 2022 Annual General Meeting.

Honorary Vice President: Hon Ruth Dyson

Honorary Life Members:

Dr Barbara Adkins, Joy Brown Douglas, Jan Gilby, Mani Mitchell, Dr Carol Shand, Dr Tammy Steeves.

## **Honorary Vice Presidents**

Dame Silvia Cartwright PCNZM, DBE, QSO, Dr Margaret Catley-Carlson, Rt Hon Helen Clark, Margaret Dagg, Hon Lianne Dalziel, Hon Ruth Dyson (from AGM 2022), Hon Christine Fletcher QSO, Dame Jenny Gibbs DNZM, Professor John Hutton, Dame Areta Koopu DNZM, CBE, Professor Malcolm Potts, Dean Reynolds, Rt Hon Dame Jenny Shipley DNZM, Dame Margaret Sparrow DNZM, MBE, Hon Judith Tizard, Dame Marilyn Waring CNZM, Dame Fran Wilde DNZM, QSO.

#### Honorary Life Members

Dr Barbara Adkins (from AGM 2022), Dame Sue Bagshaw DNZM, Daphne Bell MNZM, Jan Brown, Joy Brown Douglas (from AGM 2022), Hon Steve Chadwick QSO, Candis Craven ONZM, Margaret Dagg, Helen Eskett MNZM, Sue Farrant, Dame Jenny Gibbs DNZM, Jan Gilby (from AGM 2022), Dr Maxine Gray, Dr Gill Greer MNZM, Naomi Haynes, Peggy Kelly, Dr Win Kennedy, Dr Elspeth Kjestrup QSO, Jean Lawrie (Deceased 1 October, 2023), Gill Lough, Jan Lockyer, Mani Mitchell (from AGM 2022), Linda Penno ONZM, Dean Reynolds, Dr Helen Roberts, Dr Carol Shand (from AGM 2022), Dame Margaret Sparrow DNZM, MBE, Sheila Stancombe, Dr Tammy Steeves (from AGM 2022), Dawn Wardle, Glenys Wood MNZM, Valda Woods, Simon Woolf.



