

Notice of Meeting:

I hereby give notice that an ordinary meeting of Hamilton City Council will be held on:

Date: Wednesday 4 May 2016
Time: 9:30am
Meeting Room: Anglican Action Conference Room
Venue: Te Ara Hou, 100 Morrinsville Road, Hillcrest, Hamilton

Richard Briggs
Chief Executive

Community Forum Subcommittee OPEN AGENDA

Membership

Chairperson Cr M Gallagher
Deputy Chair Cr P Yeung
Members Cr K Green
Cr D Macpherson
Cr L Tooman

Quorum: Three Members

Meeting Frequency: Quarterly

Wendy Verschaeren
Democratic Process Coordinator

26 April 2016
Telephone: 07 838 6983
Wendy.Verschaeren@hcc.govt.nz
www.hamilton.govt.nz

Terms of Reference:

- To provide a forum for discussion on issues affecting our community.
- Make recommendations to the Strategy and Policy Committee on community related matters.
- Receive reports from Government agencies and social services organisations working in our communities about their priorities and work in Hamilton to ensure elected members are kept up to date on social and community issues and policies.
- The Strategy and Policy Committee may ask this sub-committee to consider and report on specific social and community issues.
- This sub-committee may recommend Council involvement and/or advocacy on social issues.

Power to recommend:

- The sub-committee must make recommendations to the Strategy and Policy Committee.

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1 Apologies

2 Confirmation of Agenda

The Committee to confirm the agenda.

3 Declaration of Interest

Members are reminded of the need to be vigilant to stand aside from decision making when a conflict arises between their role as an elected representative and any private or other external interest they might have.

4 Public Forum

Not required.

Committee: Community Forum
Subcommittee

Date: 04 May 2016

Report Name: Chairperson's Report

Author: Wendy Verschaeren

Status	<i>Open</i>
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The Chair will give a verbal Report.

Recommendation

That the Report be received.

1. Attachments

- There are no attachments for this report.

Committee: Community Forum
Subcommittee

Date: 04 May 2016

Report Name: Community Forum
Subcommittee Minutes 17
February 2016

Author: Brendan Stringer

Status	<i>Open</i>
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Recommendation

That the Subcommittee confirm and adopt as a true and correct record the Minutes of the Community Forum Subcommittee Meeting of 17 February 2016.

1. Attachments

2. Attachment 1 - Community Forum Subcommittee Open Minutes - 17 February 2016

Community Forum Subcommittee

OPEN MINUTES

Minutes of a meeting of the Community Forum Subcommittee held in Committee Room 1, Municipal Building, Garden Place, Hamilton on Wednesday 17 February 2016 at 9:30AM.

PRESENT

Chairperson	Cr M Gallagher
Deputy Chair	Cr P Yeung
Members	Cr K Green
	Cr L Tooman

In Attendance	Her Worship the Mayor Hardaker
	Cr G Chesterman

Lance Vervoort – General Manager Community
Sean Hickey – General Manager Strategy & Communications
Deanne McManus-Emery – Community Development & Leisure Manager
Andy Mannering – Social Development Manager
Nick Chester – Social Development Policy Advisor
Judy Small – Disability Advisor
Jeff Neems – Communications Advisor

Mr Beat Huser – Principal Strategic Advisor, Waikato Regional Council

Committee Advisor	Mr B Stringer
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1. Apologies

Resolved: (Crs Gallagher/Green)

That the apologies from Councillor Macpherson and Her Worship the Mayor (lateness) be received and accepted.

2. Confirmation of Agenda

The Chairperson noted that the Subcommittee would enter a workshop during Item 10 (*Social Wellbeing Indicator Report*) to discuss a staff update on the Quality of Life Survey.

Resolved: (Crs Gallagher/Yeung)

The Committee to confirm the agenda, subject to Item 11 (*Community Forum Subcommittee Action List*) being taken after Item 6 (*Community Forum Subcommittee Minutes 24 November 2015*).

3. Declarations of Interest

No members of the Committee declared a Conflict of Interest.

4. Public Forum

There was no Public Forum.

5. Chairperson's Report

An updated version of the *Subcommittee's Work Programme – 2016* was tabled, to which staff gave an overview. It was agreed that staff would provide a progress report on significant community developments at the 4 May 2016 Subcommittee Meeting. This would include a high-level summary of the Enderley Project that was reported to the Subcommittee at its Meeting on 3 June 2015.

Resolved: (Crs Gallagher/Yeung)

That the *Community Forum Subcommittee Work Programme - 2016* be received, subject to the noted addition in relation to a Community Developments Update.

6. Community Forum Subcommittee Minutes 24 November 2015

Resolved: (Crs Gallagher/Yeung)

That the Subcommittee confirm and adopt as a true and correct record the Minutes of the Community Forum Subcommittee Meeting of 24 November 2015, subject to changing the reference to 'Leaupepe Karalus' under Item 9 in the Minutes to read 'Leaupepe Elisapeta Karalus'.

Item 11 was taken after Item 6 as resolved by the Subcommittee.

11. Community Forum Subcommittee Action List

The Community Development & Leisure Manager ('the Community Manager') provided updates, and responded to questions, on the following matters:

- **Fairfield Feasibility Study**

Community groups were working through the information provided by Council in relation to the Fairfield Hall, following the review undertaken on community facilities.

- Richmond Park**
 A head tenant had been contracted for the site, and community access would still be available. While the action could be closed, staff would continue to monitor the use and access of the hall and greenspace, and report to the Subcommittee as and when required.
- K'aute Pasifica Trust**
 The action was completed – staff met with representatives of the Trust and provided further information in relation to their development proposals.
- Partner Schools – Swimming Pools**
 The General Manager Community ('GM Community') confirmed Hamilton Boys' High School ('HBHS') was a partner school during the summer period. HBHS had requested Council funding towards development of a community sports facility, though there were significant infrastructure and traffic issues involved. Staff highlighted the proposal was not a high priority for Council at present; further information would be provided to Elected Members in due course.

A swimming pool for the north-east suburbs was contemplated in Council's 30-year Infrastructure Plan, which would be advanced through Annual Plan or 10-Year Plan meetings.

Resolved: (Crs Yeung/Tooman)

That the Report be received, with the noted changes.

7. Disability Action Plan

The Community Manager, supported by the Disability Advisor, stated that staff had reviewed the recent updates to the National Disability Action Plan and how they aligned with Council's Disability Action Plan ('the Action Plan') and Disability Policy. Staff noted, and responded to questions, on the following points:

- National Disability Strategy**
 Professor Peggy Koopman-Boyden and Robbie Francis were Hamilton-based representatives appointed to the review of the national strategy. Staff were asked to confirm whether Professor Koopman-Boyden and Mr Francis would be available to attend the Subcommittee's August meeting to provide an update on the National Disability Strategy project.
- Plan Review**
 Staff would present their draft findings on the Action Plan to the Subcommittee at its next meeting, prior to the final recommendations being reported to the Strategy and Policy Committee in June 2016. It was intended to align the Action Plan more closely with the national approach and Council's Disability Policy.
- Companion Card**
 Further investigation was required on the feasibility of a discounted rate for support persons who accompanied disabled individuals to Council facilities.
- Be.Accessible**
 Staff were exploring the possibility of comprehensive assessments on disability access to Council properties through the organisation Be.Accessible. Staff had investigated whether local organisations could undertake such audits, and concluded it would be best to utilise the expertise of a national organisation. It was observed such assessments would have budgetary implications and involve a significant amount of work.

- **Employment Opportunities**

The Mainstream Programme, established by central government, continued to facilitate employment opportunities for disabled individuals. Staff would explore avenues to promote and increase awareness in the business community of the Programme in Hamilton.

The Chairperson noted that he, together with the Deputy Chair and Disability Advisor, would meet with members of the disabled community and update the Subcommittee in due course.

Resolved: (Crs Gallagher/Green)

That the report be received.

8. **Ethnic Forum Report**

The Community Manager and Social Development Policy Manager updated the Subcommittee on various actions undertaken by staff in response to the issues raised at the Subcommittee's meeting in November 2015. The following was noted in response to questions:

- **Interpretation Services**

Staff would further explore, with the District Health Board, the difficulties encountered in relation to access and availability of quality interpretation services in Hamilton; the Chairperson would also progress that matter.

- **Think Tank**

As part of a Waikato University's School of Tourism programme, it was acknowledged wider forums on social sector issues were required. It was envisaged a 'think tank' would be held in November 2016 to address issues encountered by migrant and refugee communities. Staff would attend the event.

- **Education and Employment Opportunities**

A significant barrier for refugee and migrant communities to education and employment were perception issues; it was necessary to provide connections between funders and opportunities.

- **Waikato Refugees Forum**

Staff would provide an update on the Waikato Refugees Forum to the Subcommittee; particularly in relation to its funding.

- **Faith-based Groups**

There were some interactions between Council and faith-based ethnic groups; some of which were more autonomous than others.

- **Community Isolation**

An overview of the refugee induction programme was discussed, including the difficulties encountered by the refugee community:

- i. once the support from the Red Cross ceased; and
- ii. following placement by Housing New Zealand in the community.

Resolved: (Crs Gallagher/Tooman)

That the report be received.

9. Community Development Activity Report

The Community Manager, supported by the Social Development Policy Advisor, provided an update, and responded to questions, on the following matters:

- **Older Persons Plan**

The proposal to change the reporting on the Older Persons Plan, to be presented to Strategy and Policy Committee on an annual basis, was consistent with other Council plans and enabled staff to identify trends and achievements, more accurately. The Chair of the Older Persons Advisory Panel had confirmed to staff she was comfortable with that approach.

Immediate issues in relation to youth and older persons would continue to be reported to the Subcommittee as and when required through the Community Development Activity Report.

- **Single Year Grant**

Five new community members of the Single Year Grant Allocation Committee would be appointed under the GM Community's delegation. Councillor Yeung would continue his role on that committee.

Minute note: It was noted that Councillor Gallagher would also remain Member of that Committee.

- **Accessible Properties Reporting**

The reporting required under the contract for the sale and purchase of the Council's former pensioner housing portfolio would be presented to the Finance Committee. Staff would explore the scope of such reports as to whether non-financial, socially significant information would be captured.

The Chairperson advised the Subcommittee of his planned meetings with the Chair of the Strategy and Policy Committee to progress recommendations made by the Subcommittee.

Resolved: (Crs Yeung/Tooman)

Recommendation to Strategy and Policy Committee

That:

- a) the report be received;
- b) the Community Forum Subcommittee recommend to the Strategy and Policy Committee that the Older Person Plan is reported annually to the Strategy and Policy Committee to ensure consistency with reporting requirements of other Council Plans.

Her Worship the Mayor arrived at the conclusion of Item 9 (11:07am) and did not take part in the voting.

The Meeting adjourned from 11:08am to 11:20am

10. Social Wellbeing Indicator Report

The Community Manager provided a brief overview of the report and noted that the purpose was to obtain further feedback from Elected Members on the Social Wellbeing Indicator Report.

The Subcommittee agreed to receive and discuss the staff briefing in relation to the Quality of Life Survey by way of a workshop.

The Meeting moved into a Workshop Session from 11:25am to 12:15pm

Her Worship the Mayor retired from the Meeting (11:58am) during the Workshop for Item 10.

At the conclusion of the Workshop, the Meeting reconvened and the Chairperson summarised the key actions addressed in the Workshop:

- Staff to confirm that the surveys Council led or participated in were complementary and not duplicating information obtained (for example, where Regional Council and Hamilton City Council are undertaking the same or similar surveys).
- Staff to complete benchmarking vis-à-vis Christchurch, Tauranga, Nelson, Palmerston North, New Plymouth and Rotorua on:
 - a. what their respective views were on the Quality of Life Survey ('QoL'); and
 - b. how they respectively used the information obtained from the QoL.

The Subcommittee requested that a short summary in relation to the above points was completed.

- Staff to check and confirm that the deliverables under the Hamilton Plan were covered under a survey for which data was received by Council.
- Staff to consider the best timing to undertake the Hamilton Residents Survey, and to confirm which source was used to provide the selected sample group for that survey.

It was noted that the data from the 2016 version of the QoL was expected to be reported back to Council in November 2016.

Social Wellbeing Indicator Report

It was suggested that information should be captured about individuals:

- a. living outside Hamilton boundaries who commute into Hamilton for work; or
- b. who have moved from other parts of New Zealand to Hamilton because of affordability issues,

to give Elected Members a more holistic understanding of how and why Hamilton was attractive as a destination.

Resolved: (Crs Gallagher/Tooman)

That:

- a) the report be received;
- b) the draft Social Wellbeing Indicator Report be amended to reflect Elected Members' feedback prior to being reported to the Strategy and Policy Committee on 3 May 2016 for approval; and
- c) non-members of the Subcommittee be thanked for their attendance at the Workshop.

The Meeting was declared Closed at 12:25pm

Committee: Community Forum
Subcommittee

Date: 04 May 2016

Report Name: HCC Context - Social
Wellbeing/Poverty

Author: Deanne McManus-Emery

Report Status	<i>Open</i>
Strategy, Policy or Plan context	<i>Hamilton Plan Social Wellbeing Indicator Report</i>
Financial status	<i>There is budget allocated</i>
Assessment of significance	<i>Having regard to the decision making provisions in the LGA 2002 and Councils Significance Policy, a decision in accordance with the recommendations is not considered to have a high degree of significance</i>

1. Purpose of the Report

- The purpose of this report is to provide Community Forum Subcommittee members with some context prior to the presentations from Salvation Army and Poverty Action Waikato

3. Executive Summary

- The issues identified in both reports are complex and provide a detailed examination on social issues in New Zealand. The Salvation Army report is from a National perspective, whilst Poverty Action Waikato provides a local level perspective supplemented by statistics and experiences of local social service providers in Hamilton.
- Hamilton City Council is involved in many aspects of the work outlined.
 - The Community Development team provides information and support to build capacity in the community, of both individuals and groups throughout the city.
 - Council provides a democratic voice to older people and youth in the city, this is supported by the Older Persons and Youth Action Plans, which enable targeted approaches to better, respond to the needs of these groups.
 - Council distributes \$1,260,000 in Community Grants to organisations that benefit the social, cultural, arts and environmental wellbeing of communities in Hamilton each year.
 - Data is collected and reported that provides impetus to Council to engage and lead strategic, targeted discussions with a range of key stakeholders on emerging social wellbeing issues for the city.
 - The People's Project was established in partnership with Hamilton City Council in 2014 and is delivering excellent outcomes in addressing issues for the city's homeless population.
 - Council leads local level interagency teams that exist to specifically address safety, wellbeing and quality of life issues for local neighbourhoods and citizens.

6. It is recognised a large degree of the social issues explored in both reports are outside the direct control of Council, but should consider how leveraging council leadership can be utilised to address some of the social issues identified in the report.

Recommendation from Management

That the report be received.

7. Attachments

8. There are no attachments for this report.

9. Key Issues

10. Background

11. Hamilton is an ethnically diverse region, with more than 160 different ethnicities, and 24% of Hamiltonians were not born in New Zealand. In the 2013 Census, the largest proportion of Hamilton's population (69.5%) identified themselves as New Zealand European. This is lower than for New Zealand as a whole (74%).
12. Our Māori culture and heritage are unique. In 2013, 21.3% of people who lived in Hamilton (28,605) identified themselves as Māori. Hamilton's Māori population is predominantly young, with an average age of 22.4.
13. Approximately 30,000 people in Hamilton identify with a culture or ethnicity that is not NZ European or Māori. New migrants bring with them their own cultural traditions, customs, arts and music, enriching our culture and lifestyle. They also bring connections from their home countries that enhance Hamilton's global relationships.
14. Hamilton's population is currently relatively young, with a median age of 32 compared to 36 nationally. However, the number of older people in Hamilton will also rise dramatically. In 2013 the percentage of Hamiltonians aged 65 years and older was 11.4%. By 2031, this percentage will increase to approximately 16%. Many will be fit and active long past the current 'retirement' age of 65 years. We need to recognise the evolving nature of being 'older', and value the contribution of our older residents.
15. One in four Hamiltonian's has a disability, and this figure will increase with an ageing population. There is unrealised potential for people with disabilities to contribute socially and economically. Barriers that prevent this, such as attitudes and physical access, must be addressed.
16. People are at the heart of a City. The well-being of all Hamiltonians is critical to creating a better future for Hamilton and New Zealand. Prioritising and constantly improving residents' health, education and safety will support Councils goal for Hamilton
17. Children and young people are a leading priority. As guardians, there is a responsibility to ensure that every child can reach his/her full potential. All children are entitled to the basic needs of love, shelter, food and safety, as well as education and skill development, to instill confidence and pride. Strong, healthy communities are required to achieve this. Council's work emphasises that families, whanau and the wider community share these responsibilities.
18. Hamilton's diverse communities should be valued and celebrated to ensure Hamilton is recognised as a city of prosperity and opportunity, that is inclusive, tolerant and a safe city, that promotes equality that will continue to attract and retain people to the city.

19. Many Hamiltonians are doing well and should be celebrated; however, there are significant pockets of disadvantage in some parts of Hamilton, with the majority of deprivation concentrated in Enderley, Bader, Frankton and Crawshaw. These communities have higher concentrations of Māori and Pacific peoples. They are often characterised by a strong sense of family and cultural identity, but are more likely than other communities to have:
- low levels of participation in early learning services
 - low educational achievement
 - high levels of unemployment
 - overcrowded, poor-quality housing
 - poor health, lower life expectancy and higher rates of preventable diseases.
20. Community-led development features strongly in council work programmes, and is backed by international research that supports this approach to achieve better social, economic, cultural and environmental outcomes for Hamilton.
21. Strategic alignment
- Council provides these activities to support building a strong, resilient and connected community, which contributes to the achievement of all of our Hamilton Plan priorities.

Signatory

Authoriser	Lance Vervoort, General Manager Community
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Committee: Community Forum
Subcommittee

Date: 04 May 2016

Report Name: Salvation Army Social Statistics **Author:** Deanne McManus-Emery

Report Status	<i>Open</i>
Strategy, Policy or Plan context	<i>Social Wellbeing Indicator Report</i>
Financial status	<i>There is not budget allocated</i>
Assessment of significance	<i>Having regard to the decision making provisions in the LGA 2002 and Councils Significance Policy, a decision in accordance with the recommendations is not considered to have a high degree of significance</i>

1. Purpose of the Report

- The purpose of the report is to provide an overview of the work undertaken by the Social Policy and Parliamentary Unit (SPPU) of the Salvation Army. The social statistics will be of particular interest in the development of the Social Wellbeing Indicator Report.

3. Executive Summary

- The Social Policy and Parliamentary Unit of the Salvation Army produce a range of social policy and statistical information appropriate to New Zealand. This information provides an up to date picture of social issues in New Zealand. Some of the research is more localised, providing better regional context of the issues faced locally.
- The report will be presented by Alan Johnson, Salvation Army Social Policy Analyst

Recommendation from Management

That the report be received

6. Attachments

- There are no attachments for this report.

8. Key Issues

9. Background

- The Social Policy and Parliamentary Unit (SPPU) of the Salvation Army produce a range of documents canvassing social statistics and policy in New Zealand.
- The flagship document is the annual State of the Nation Report. The most recent iteration was released on 17 February 2016.

- The State of the Nation report tracks New Zealand’s progress in five key areas: Our Children, Crime and Punishment, Work and Incomes, Social Hazards and Housing.
- The 2016 Report is the ninth annual version the Salvation Army has produced.
- The SPPU also produce a number of other reports. In 2015, “Mixed Fortunes” examined the social outcomes of those living in regional areas compared to larger metropolitan areas.
- The work of the SPPU provides context and relevancy for collecting and monitoring social statistics, which is of interest to council through the Social Wellbeing Indicator Report.

10. Strategic alignment

- The work of the SPPU will support and inform the development of the Social Wellbeing Indicator Report through indicators and context for why these indicators matter.

Signatory

Authoriser	Lance Vervoort, General Manager Community
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Committee: Community Forum
Subcommittee

Date: 04 May 2016

Report Name: Poverty Action Waikato
Windows on Poverty Report

Author: Deanne McManus-Emery

Report Status	<i>Open</i>
Strategy, Policy or Plan context	<i>Social Wellbeing Indicator Report</i>
Financial status	<i>There is not budget allocated</i>
Assessment of significance	<i>Having regard to the decision making provisions in the LGA 2002 and Councils Significance Policy, a decision in accordance with the recommendations is not considered to have a high degree of significance</i>

1. Purpose of the Report

- The purpose of this report is to present Poverty Action Waikato's 'Windows on Waikato Poverty' Report for 2015/16.

3. Executive Summary

- The 2015/16 Window on Waikato Poverty report has been developed by Poverty Action Waikato with support from Hamilton City Council and will focus on the five key themes: Barriers and Conditions, The Neglectful State, Debt and the Dominance of Market Structure, Community Serving Community and Common Good Culture.
- The findings of the report may also provide some guidance on Council's role in addressing these issues.
- The "Windows on Poverty" report will be presented by Dr Rose Black and Dr Anna Casey- Cox.

Recommendation from Management

That the report be received.

7. Attachments

- Attachment 1 - Poverty Action Waikato - Window on Waikato Poverty - Issue 6 Executive Summary Neglect and Nurture

9. Key Issues

10. Background
11. Poverty Action Waikato is a regional advocacy and research project that aims to research and advocate for action to meet both immediate social needs to bring about necessary structural change.
12. Over the past 5 years, Poverty Action Waikato (PAW) has produced six reports detailing different aspects of poverty and inequality experienced in the Waikato community.
13. The 2015/16 Window on Waikato Poverty, report is organised into the following identified themes:
 - **Barriers and conditions:** This theme provides stories that highlight the local reality of people in need who struggle to navigate the increasing conditions of state welfare services.
 - **The neglectful State:** This theme identifies ways in which the state welfare services and contracted services do not always meet the needs of the most vulnerable are highlighted.
 - **Debt and the dominance of market structures:** This theme addresses the challenges that vulnerable people face in a market based society.
 - **Community serving community:** This theme identifies the way in which the community of Hamilton is responds to increased poverty.
 - **Common good culture:** This theme identifies the ways in which society needs to develop to ensure that all people are able to live interconnected to reach their potential.

Signatory

Authoriser	Lance Vervoort, General Manager Community
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• Poverty • Action • Waikato •
Te Whakatika Mahi Pohara i Waikato

"Like slavery and apartheid, poverty is not natural. Poverty is human-made and it can be overcome and eradicated by the actions of human beings" (Nelson Mandela).

Writing back to the Hamilton community about...

Neglect and Nurture

Dr Anna Casey-Cox and Dr Rose Black

Window on Waikato Poverty – Issue 6 - April 2016

POVERTY ACTION WAIKATO, Anglican Action, Te Ara Hou Village, PO Box 13117, Hamilton 3251
rose@anglicanaction.org.nz +64 27 4402 796 or anna@anglicanaction.org.nz +64 22 354 6550
www.povertyactionwaikato.org

Executive Summary

The experiences of neglect and nurture in the community exist in tension with one another just as they do in each of our lives. For some of us, experiences of neglect are more painful and more frequent and are felt in all sorts of ways. People with complex needs and limited resources face many challenges in their day to day life. The ability for individuals, community and social services to provide nurture, although squeezed and somewhat compromised at times, is alive and well.

In this report, we write back to the community and social service sector about the stories they have shared with us, and we invite the wider community into the conversation. The stories from people providing social and community services are organised under the following themes: Barriers and Conditions, The Neglectful State, Debt and the Dominance of Market Structures, Community Serving Community, and Common Good Culture. As researchers we are concerned that these stories paint a picture of a society that has become increasingly punitive. However, we know that there are many people who are as concerned as we are and who are rising up to ensure that all people in Hamilton, and throughout Aotearoa New Zealand, are able to live their best lives.

It is hard work living on a marginal income and with limited resources. Catching buses, walking, biking, accessing phone or internet services, completing a Work and Income New Zealand (WINZ) form, gathering evidence or proof of hardship, scraping together some money to pay a fine, applying for a food grant – these are all the realities of living on the breadline in Hamilton. The administrative processes, criteria and expectations of government welfare and housing services, now provided by the Ministry of Social Development, are significant.

People on low or marginal incomes at times need additional help to make ends meet. Many people are not aware of the entitlements when receiving a benefit or on a low income and support from WINZ can be difficult to access. While attending a budgeting service is often a requirement when making an application to WINZ for assistance, budgeting services are often booked out and there can be waiting lists of 2-3 weeks. The stringent conditions of WINZ services create levels of desperation and people may turn to instant finance companies as an immediate solution to meet their needs. Managing debt and struggling to make loan repayments is a daily reality for many people on low incomes.

Easy and expensive offers of credit also exacerbate levels of debt. For example, the mobile retail trucks prey on the lower income communities of Hamilton with expensive goods and the offer of easy credit with very high interest rates and penalties for non-payment. People in wealthier neighbourhoods don't know about 'the trucks'. People with debt are often excluded from support and excluded from housing. There are increasing numbers of people with insecure tenancy, sleeping on couches and in garages, caravans and cars. While people might have a roof over their heads, crowded housing conditions are not sustainable and are creating tensions in family relationships.

The barriers and conditions of State welfare services are preventing people from getting the care and housing that they need. People with limited resources struggle to compete in the private rental market and the pool of available State houses has diminished. There is a lack of affordable, accessible and adequate rental accommodation in Hamilton. Families and individuals are presenting to The People's Project with significant housing need that does not appear to be reflected in the Ministry of Development's housing waiting lists. Families are sleeping in cars and people are sleeping on the street. Often the rental accommodation that is available is of poor quality and this has a negative impact on the health of our community. There is an urgent need for emergency accommodation and a readily accessible pool of affordable, quality housing in Hamilton that will meet the needs of people with limited resources and complex needs.

The increasing conditions of, and barriers to accessing, State welfare and housing services has necessitated the development of a new level of service, described as navigation or advocacy. Frontline health and social service organisations are providing advocacy and navigation services, so that people get access to the support they need. Many people and services are doing this work on top of and in addition to their contracted services. The People's Project, for example, is helping people navigate State welfare services and the private rental market to get the housing that they need. There is a requirement for increased levels of advocacy services in our community so that people get the assistance they need.

People with limited resources are often coping with increasingly complex situations and pressures in their lives. Vulnerabilities may have been created by being put into foster care as a child and living in multiple homes, engaging in behaviours that have led to a prison sentence, experiencing poor mental health or addictions to alcohol, drugs or gambling, arriving in New Zealand as a new migrant with little knowledge of English or local cultural practices, to name a few.

There is a need for increased support for people living with mental health problems in our community. Many people are working very hard to provide nurture for people and care is provided by a range of services. However, for many people experiencing mental health problems the care they require is not provided in cohesive and connected ways that adequately meet their needs. People discharged from hospital mental health services do not always have adequate accommodation and care and therefore struggle to remain well in the community. The Government safety net for people with mental health problems has many holes and greater collaboration and connections between services is required. Our communities are awash with drugs and alcohol and many people suffer from addictions. People with addictions require more support.

The values of competition and collaboration exist in tension with one another. Contestable funding and the contracting of services has intensified the experience of competition in the social service sector. The shift to outcomes reporting is concerning because achieving specified outcomes for the most vulnerable is challenging. The social service sector is impacted by the contractual demands of Government. When under pressure the sector has

the propensity to turn in on itself, blaming the various spokes of operation for the struggles they are experiencing, thereby creating cracks in its own fabric. The restoration of the social service sector united by its core values is vital for the wellbeing of the most vulnerable of us.

Communities are rising up and are finding ways to nurture in between the cracks created by inadequate service provision and the impacts of consumer society. Yet the pool of available resources for community based services is small. Some people have the energy and desire to do more for and with their communities but they lack the resources.

Central and Local Government organisations need to focus on the rebuilding of common good communities with values that emphasise caring, manaakitanga, collaboration, unconditional love and interdependence. The current value placed on competition and economic development is failing to support the health and well-being of all members of society. The consumer society, where one person is pitched against another, is failing all of us. The community of the common good and collective provision is ours to be restored. The community of Hamilton is crying out for a greater commitment to rebuilding the relationships between people with all their diversities.

Hamilton City Council can support the rebuilding of the society of the common good in the following ways:

- * Invest in community houses and centres as places of connection and support. Eliminate contestable funding. Reinstate a solid and generous funding base for each community house and centre.
- * Support advocacy services for people with limited resources so that they are able to navigate State welfare services and access all the income and service benefits they require.
- * Work with the Regional Council to ensure that public transport is affordable, or free, for people with limited resources.
- * Limit the number of alcohol and gambling outlets in Hamilton and support people with addictions.
- * Create a by-law to ban mobile retail trucks.
- * Support access to budgeting services and debt elimination and reduction services.
- * Create a local warrant of fitness (WOF) for all houses or dwelling that people live in throughout Hamilton. Support an initiative to retrofit all rental accommodation in Hamilton so that it meets a WOF standard.
- * Ensure affordable rental accommodation is available.
- * Support consistent and ongoing local (suburb level) community events so that relationships can be restored and developed within local communities.
- * Provide temporary emergency accommodation facilities.
- * Lead collaboration opportunities between central /local government, health, and social service sectors so that agencies work collaboratively with our most vulnerable people.

- * Support the community and Community Mental Health to identify suitable accommodation options for people with mental illness so that they can be supported to live well in our community.
- * Work with the New Zealand Transport Agency to ensure that licensing programmes are accessible and available to all people (including young people) with limited resources living in Hamilton.
- * Support the development of a Pasifika Peoples Resource Centre in Hamilton. People migrating from the Pacific Islands require more support to be able to make their way in Aotearoa New Zealand.
- * Extend supports and enable opportunities for community connections for people with refugee backgrounds, particularly after their 3 month period with Red Cross.
- * Provide and ensure opportunities for participation for people with criminal records.



Committee: Community Forum
Subcommittee

Date: 04 May 2016

Report Name: Disability Policy Review

Author: Deanne McManus-Emery

Report Status	<i>Open</i>
Strategy, Policy or Plan context	<i>Disability Policy</i>
Financial status	<i>There is budget allocated</i>
Assessment of significance	<i>Having regard to the decision making provisions in the LGA 2002 and Councils Significance Policy, a decision in accordance with the recommendations is not considered to have a high degree of significance</i>

1. Purpose of the Report

2. The purpose of this report is to present the draft review of the Disability Policy and the Disability Action Plan 2016/17.

3. Executive Summary

4. The Disability Policy and the Disability Action Plan has been reviewed to reflect the national approach whilst retaining the key principles of: Culture and Communication, Participation and Inclusion, Removing Barriers and Increasing Access.
5. The Disability Policy will continue to be supported by the Disability Action Plan to ensure the policy is implemented effectively.
6. The delivery of the Disability Action plan will continue to be supported by council staff and overseen by representatives from the disability community.

Recommendations from Management – Recommendation to Strategy and Policy Committee

- a) That the report be received; and
- b) That the reviewed draft Disability Policy and reviewed Disability Action Plan 2016/17 is recommended to the 2 June 2016 Strategy and Policy Committee for approval.

7. **Attachments**

8. Attachment 1 - Draft Disability Policy - 2016 Review
9. Attachment 2 - Disability Policy 2016 Review with track changes
10. Attachment 3 - Disability Policy - DRAFT Action plan for 2016-2017

11. **Key Issues**

12. Background

13. At the 17 February 2016 Community Forum Subcommittee, staff presented a report on the National Disability Action Plan and the United Nations Convention on the Rights of Persons with Disabilities. The Community Forum Subcommittee agreed that staff review the Council Disability Policy and Action Plan to ensure both the policy and action plan align with the approach of the National Disability Action Plan.
14. The 2013 Disability Survey conducted by Statistics New Zealand reveals that 24% of the New Zealand population (1.1 million) and 26% of the Māori population (176,000 people) are living with a disability.
15. Council adopted the Disability Policy in November 2012 and is supported by the Disability Action Plan.
16. The HCC Policy has not been reviewed since 2012; and aspects of the policy have now been successfully embedded within council core business. The national policy environment has changed since 2012, which has sparked the changes to the National Disability Action Plan.
17. The National Disability Action Plan was updated in 2014, with further refinement made in September 2015. The Plan focuses on the top priorities identified by disabled people that include: increase employment and economic opportunities, ensure personal safety, transform the disability support system, and promote access in the community. These priorities require a greater focus on working together with disabled peoples and organisations, to improve communication and increase the public's understanding of the plan.
18. The HCC Disability Policy and Action Plan have been reviewed to reflect these changes, whilst retaining the key principles of: Culture and Communication, Participation and Inclusion, Removing Barriers and Increasing Access.
19. The HCC Policy will provide high level guidance for the organisation and continue to be supported by an annual Action Plan to ensure the policy is implemented effectively and resources are targeted according to current priorities. Additional information and background will also be provided online with the policy to provide greater context.

20. Consultation

21. Key stakeholders in the disability community have been notified of the policy review and have provided feedback on the proposed changes. Councils Access Advisory Group has also provided feedback on the Action Plan.

22. Implementation

23. The Policy will be implemented through a revised Disability Action Plan that will be reviewed annually to ensure it remains relevant.
24. A cross Council accessibility group that also includes representatives from the disability community will continue to meet bi-monthly to support the implementation of the Disability Action Plan.

- 25. **Risk**
- 26. Nil

Signatory

Authoriser	Lance Vervoort, General Manager Community
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DISABILITY POLICY

The purpose of this policy is to outline high level guidelines for Council to ensure disabled people have equity of access enabling them to participate fully in and contribute to community and civic life in Hamilton City.

CONTENTS

1. Definitions
2. Scope
3. Principles
4. Background
5. Policy
6. Monitoring

1. DEFINITIONS

Access	Ability to engage with, use, participate in, and belong to something.
Disability	Physical, sensory, neurological, psychiatric, intellectual or other impairments. Disability is the process which happens when one group of people create barriers by designing a world only for their way of living, taking no account of the impairments other people have. <i>NZ Disability Strategy (2001)</i>

First adopted:	November 2012
Revision dates/version:	June 2016 / version 3
Next review date:	June 2019
Consultation Requirement:	
Document number:	D-2069287
Associated documents:	n/a
Sponsor/Group:	General Manager Community

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2. SCOPE

2.1 Council has a regulatory function to ensure that quality standards and safety are maintained and barriers to access are removed.

2.3 This policy applies to:

- a) All Council owned and/or managed facilities
- b) Public places including parks, reserves and walkways
- c) The roading network including footpaths
- d) Council services, processes and projects
- e) Council run events

3. PRINCIPLES

3.1 In its efforts to provide all people with equity of opportunity and access, Hamilton City Council will ensure the following:

- a) Council services, activities and facilities will be responsive to the diverse needs of disabled people.
- b) Council recognises the diverse needs of disabled people and acknowledges that disabled people are experts in their own experience.
- c) Council will reinforce a culture that respects the diversity of all people who live in Hamilton, and continue to strengthen partnerships with disabled people built on this respect.
- d) Council will support disabled people to fully participate in their communities.
- e) Council recognises the need to improve disabled people's access to facilities, programmes, services and information provision.

4. BACKGROUND

4.1 The policy considers the following:

- a) New Zealand Disability Strategy 2001
- b) The United Nations Convention on the Rights of Persons with Disabilities (ratified 2007)
- c) National Disability Action Plan 2014-2018
- d) Ten Year Plan 2015-25
- e) Hamilton Plan
- f) Older Persons Plan
- g) Traffic Bylaw 2015.

5. POLICY

5.1 Council will ensure the following in order to meet the guiding principles outlined above:

5.2 Culture and Communication

- a) Council is committed to ensuring that both elected members and staff have awareness and understanding of the issues that affect the disability community.
- b) Council Information is appropriate and provided in accessible formats.

5.3 Participation and Inclusion

- a) Council Plans and Strategies will provide opportunities for participation and contribution to community life for disabled people.
- b) Council will work in partnership with Government and other organisations on behalf of disabled people to improve equity of access.

5.4 Removing Barriers and Increasing Access

- a) Council facilities and infrastructure will be accessible and meet best practice standards where geographically and financially practicable.
- b) Council will provide appropriate parking for disabled people to enable permit holders to park close to their destination.
- c) Public transport infrastructure managed by Council will meet the needs of disabled people.

6. MONITORING

- 6.1 The implementation of the policy will also be monitored by Council's Disability Advisor, supported by a cross Council accessibility group that includes representatives from the disability community.
- 6.2 Performance against agreed actions and targets in the Disability Action Plan will be monitored and reported annually to the Strategy and Policy Committee.

DISABILITY POLICY

This policy provides high level guidelines for Council to ensure people with disabilities have equity of access enabling them to participate fully in the life of Hamilton City.

Replaced by the following

The purpose of this policy is to outline high level guidelines for Council to ensure disabled people have equity of access enabling them to participate fully in and contribute to community and civic life in Hamilton City.

CONTENTS

- Policy Objectives and Scope
- Strategic Alignment
- Definitions
- Principles of Policy
- Policy Guidelines
- Monitoring and Implementation
- References

Replaced by the following

1. Definitions
2. Scope
3. Principles
4. Background
5. Policy
6. Monitoring

First adopted:	November 2012
Revision dates/version:	June 2016 / version 3
Next review date:	June 2019
Level of Engagement:	
Document number:	D-2069287
Associated documents:	n/a
Sponsor/Group:	General Manager Community



POLICY OBJECTIVES AND SCOPE

This policy provides high level guidelines for Council to ensure people with disabilities have equity and access enabling them to participate fully in the life of Hamilton City.

Council is committed to equity and access for people with disabilities so that they can participate in and contribute to community and civic life. The development of the New Zealand Disability Strategy (2001) and the passing of the Building Act 2004 have provided a clear focus to the role of Council and the development of this policy.

The policy outlines Council's commitment to recognising and meeting the diverse needs of people with disabilities.

Council's commitment to the disability community is reflected in the priorities of the Social Wellbeing, Active Communities and Access Hamilton Strategies. Work to turn the policy into practice across the organisation will be progressed through a supporting Disability Action Plan.

The policy covers:

1. All Council owned and/or managed facilities
2. Public places including parks and reserves
3. The roading network including footpaths
4. Council services, processes and projects
5. Council run events

This policy is aligned to the NZ Disability Strategy.

Replaced by the following,

2. SCOPE

2.1 Council has a regulatory function to ensure that quality standards and safety are maintained and barriers to access are removed.

2.3 This policy applies to:

- a) All Council owned and/or managed facilities
- b) Public places including parks, reserves and walkways
- c) The roading network including footpaths
- d) Council services, processes and projects
- e) Council run events



STRATEGIC ALIGNMENT

This policy assists in the delivery of Council’s outcomes and goals as follows:

PROSPEROUS AND INNOVATIVE	OUTSTANDING CITY LEADERSHIP	PEOPLE LOVE LIVING HERE
<ul style="list-style-type: none"> ▪ Hamilton has a strong, productive economy and we build on our economic strengths. ▪ We have a thriving CBD. ▪ It’s easy to do business here. ▪ Our city grows and prospers in a sustainable way. 	<ul style="list-style-type: none"> ▪ The city is led by effective, open and responsive governance. ▪ Council’s finances are sustainable for the long term. ▪ We operate efficiently and provide exceptional service. ▪ The city takes a leadership role regionally and nationally. 	<ul style="list-style-type: none"> ▪ Hamilton embraces the Waikato River and it is the focal point of our city. ▪ We value, preserve and protect Hamilton’s natural, green environment. ▪ Our city is attractive, well-designed and compact with outstanding architecture and distinctive public spaces. ▪ Our city is a fun place to live with a vibrant Arts scene. Hamilton is a safe city. It’s easy to get around. ▪ We celebrate our people and many cultures.

DEFINITIONS

Disability Disability is not something individuals have. What individuals have are impairments. They may be physical, sensory, neurological, psychiatric, intellectual or other impairments. Disability is the process which happens when one group of people create barriers by designing a world only for their way of living, taking no account of the impairments other people have.
NZ Disability Strategy (2001)

Replaced by the following,

Access	Ability to engage with, use, participate in, and belong to something.
Disability	Physical, sensory, neurological, psychiatric, intellectual or other impairments. Disability is the process which happens when one group of people create barriers by designing a world only for their way of living, taking no account of the impairments other people have. <i>NZ Disability Strategy (2001)</i>

PRINCIPLES OF POLICY

The guiding principles for the policy are as follows:

- 2.2 Council recognises the diverse needs of people with disabilities and acknowledges that people with disabilities are experts in their own experience.
- 2.3 Council recognises the need to provide all people with equity of opportunity and access
- 2.4 Council has a regulatory function to ensure that quality standards and safety are maintained and barriers to access are removed.
- 2.5 Council will act with integrity to maintain an on-going partnership with people with disabilities built on mutual trust and respect.
- 2.6 Council will actively involve people with disabilities in decisions that directly impact their living in the city.

Replaced by the following,

3. PRINCIPLES

3.1 In its efforts to provide all people with equity of opportunity and access, Hamilton City Council will ensure the following:

- a) Council recognises the diverse needs of disabled people and acknowledges that disabled people are experts in their own experience.
- b) Council will reinforce a culture that respects the diversity of all people who live in Hamilton, and continue to strengthen partnerships with disabled people built on this respect.
- c) Council will support disabled people to fully participate in their communities.
- d) Council recognises the need to improve disabled people's access to facilities, programmes, services and information provision.

The following added,

4. BACKGROUND

4.1 The policy considers the following:

- a) New Zealand Disability Strategy 2001
- b) The United Nations Convention on the Rights of Persons with Disabilities (ratified 2007)
- c) National Disability Action Plan 2014-2018
- d) Ten Year Plan 2015-25
- e) Hamilton Plan
- f) Older Persons Plan
- g) Traffic Bylaw 2015.

POLICY GUIDELINES

In its efforts to provide all people with equity of opportunity and access, Council will ensure the following

Education, Understanding and Communication

- a) Council is committed to ensuring that both elected members and staff have awareness and understanding of the issues that affect the disability community. This relates particularly to planning, building and the built environment.
- b) Communication with people with disabilities allows and encourages full access to Council information, events, services and facilities. Information is appropriate and provided in accessible formats.

Advocacy and Cultural Change

- a) The Social Wellbeing, Active Communities and Access Hamilton Strategies will provide opportunities to remove barriers to participation and contribution to community life for people with disabilities.
- b) Council will advocate for access and equity to Government and other organisations in partnership with and on behalf of people with disabilities where this is appropriate.
- c) Council will encourage other organisations in the city to provide an accessible environment for people with disabilities by modelling and publicising best practice.

Advocacy and Cultural Change

- a) Council infrastructure will be accessible and meet best practice standards where geographically and financially practicable.
- b) Council, in its service delivery, will endeavour to remove barriers to access for people with disabilities.
- c) Council will provide appropriate parking for people with disabilities to enable permit holders to park close to their destination.

Replaced by the following,

5. POLICY

5.1 Council will ensure the following in order to meet the guiding principles outlined above:

5.2 Culture and Communication

- c) Council is committed to ensuring that both elected members and staff have awareness and understanding of the issues that affect the disability community.
- d) Council Information is appropriate and provided in accessible formats.

5.3 Participation and Inclusion

- d) Council Plans and Strategies will provide opportunities for participation and contribution to community life for disabled people.



e) Council will work in partnership with Government and other organisations on behalf of disabled people to improve equity of access.

5.4 Removing Barriers and Increasing Access

d) Council facilities and infrastructure will be accessible and meet best practice standards where geographically and financially practicable.

e) Council will provide appropriate parking for disabled people to enable permit holders to park close to their destination.

f) Public transport infrastructure managed by Council will meet the needs of disabled people.

MONITORING AND IMPLEMENTATION

The General Manager, Community will monitor the implementation of this policy.

Performance against agreed actions and targets in the Disability Action Plan will be monitored and reported annually to the Strategy and Policy Committee.

Replaced by the following,

6. MONITORING

6.1 The implementation of the policy will also be monitored by Council's Disability Advisor, supported by a cross Council accessibility group that includes representatives from the disability community.

6.2 Performance against agreed actions and targets in the Disability Action Plan will be monitored and reported annually to the Strategy and Policy Committee.

DRAFT DISABILITY ACTION PLAN FOR 2016-2017

New Projects

1. Community Development and Leisure Unit will investigate how a companion card programme has been used by other City Councils and use this knowledge to implement a trial at the Swimming Facilities and expanding the programme to other community facilities if feasible.

Link to Disability Policy:

- a. Participation and Inclusion
- b. Removing Barriers and increasing Access

Responsible Business Unit: Community Development and Leisure

2. Council will investigate the feasibility of be. Accessible undertaking comprehensive assessments and providing recommendations on facility usage, maintenance and development. Regularity of assessments and the number of facilities needs to be included.

Link to Disability Policy:

- a. Removing Barriers and increasing Access

Responsible Business Unit: Community Development and Leisure

3. Communications Unit will ensure that candidates' and voting hard copy and online materials in the 2016 Local Body Elections are accessible. Focus groups of disabled people will occur around how to make the election process more accessible and use findings from these discussions to increase the HCC elections accessibility.

Link to Disability Policy:

- a. Culture and Communication
- b. Participation and Inclusion
- c. Removing Barriers and Increasing Access

Responsible Business Units: Community Development and Leisure, Democracy, Communication

Long Term Projects

4. Hamilton Gardens and City Transportation will work with Waikato Regional Council around upgrades to physical and public transport access to the Hamilton Gardens will continue to be reviewed and progress reported on annually in relation to the Ten Year Plan.

Link to Disability Policy:

- a. Participation and Inclusion
- b. Removing Barriers and Increasing Access

Responsible Business Units: Hamilton Gardens, City Transportation

Ongoing Projects

5. Library staff will continue their partnership with the Blind Foundation to promote Booklink to the public who have a reading impairment. They will investigate ways to promote Booklink, train volunteers to teach Booklink to users and increase the number of people using Booklink.

Link to Disability Policy:

- a. Participation and Inclusion
- b. Removing Barriers and Increasing Access

Responsible Business Units: Hamilton Libraries

6. Results from the survey/research conducted in 2016, on the travel habits of Families with disabled members around Hamilton will be promoted and shared to regional transport providers by September 2016.

Link to Disability Policy:

- a. Participation and Inclusion
- b. Removing Barriers and Increasing Access

Responsible Business Units: Community Development and Leisure

7. Develop a section on the Council website highlighting good practices and practitioners around access. Report on its development by May 2017.

Link to Disability Policy:

- a. Participation and Inclusion
- b. Removing Barriers and Increasing Access

Responsible Business Units: Building Control, Communications

The things we do and report on annually

Culture and Communication

1. All new staff will have disability training in their induction and frontline staff will have regular disability training. Disability training sessions will be offered to all staff and a current list of disability trainers will be updated annually on the intranet.
2. Council's recruiting processes and feedback from the Employment Tool Kit on the Intranet will be reviewed annually.
3. All Hamilton City Council emergency and evacuation processes at all its facilities are accessible. After each evacuation they will be reported on and any identified issues will be addressed.
4. Hamilton City Council will work with Waikato Regional Council and the Waikato District Health Board to ensure its processes in an emergency are accessible.
5. Disabled people will be informed about what to do in an emergency and where to find relevant information for managing an emergency.
6. City Safe education programmes include people with disabilities.
7. The Council's websites and all hardcopy information are reviewed for its accessibility and improved based on feedback.
8. Council's A to Z Services will be reviewed and updated regularly with disability information.

Participation and Inclusion

9. Disabled people will continue to provide comments on newly identified plans and existing plans such as the CCTP, the River Plan and any planning around the Founders Theatre.

Removing barriers and increasing access

10. Swimming Facilities, Hamilton Cemetery, Hamilton Zoo and Hamilton Gardens will continue to review access possibilities and provide guides for visitors with disabilities by appointment.
11. New playgrounds that include elements of accessible play and have inclusive playgrounds and equipment are built.
12. Street access, entry to buildings and mobility car parks issues will be recorded and considered in future reports.
13. The Hamilton City Council will work to monitor access to public transport by considering local research informed by disabled public transport user in Hamilton.

Monitoring and implementing the policy and action plan

14. The Access Advisory group will meet regularly to provide staff with feedback on projects and update staff on what is happening in the disability community. Its Terms of Reference will be reviewed annually.
15. The Action plan will continue to be reported on annually to Council.
16. The Disability Policy will be reviewed by June 2019.

Committee: Community Forum
Subcommittee

Date: 04 May 2016

Report Name: Community Development
Activity Report

Author: Deanne McManus-Emery

Report Status	<i>Open</i>
Strategy, Policy or Plan context	<i>Hamilton Plan</i>
Financial status	<i>There is no budget allocated</i>
Assessment of significance	<i>Having regard to the decision making provisions in the LGA 2002 and Councils Significance Policy, a decision in accordance with the recommendations is not considered to have a high degree of significance</i>

1. Purpose of the Report

- The purpose of the report is to update the Subcommittee on current community trends and activity as identified through the work of the HCC Community Development and Leisure Unit.

3. Executive Summary

- Community Advisors have facilitated 12 Community Network and 6 interagency meetings across the city since January 2016.
- The meetings provided attendees the opportunity to network and share relevant information. The local level interagency teams exist to specifically address safety, wellbeing and quality of life issues for local neighborhoods and citizens.
- Key themes and concerns highlighted by participants include:
 - Concerns from organisations around the increased requests for emergency accommodation and food assistance.
 - Increased conversations regarding the mental health needs within the community.

Recommendation from Management

That the report be received;

7. Attachments

- Attachment 1 - Hamilton City Health Profile (DHB) - April 2015.

9. Key Issues

10. Hamilton City Health Profile 2015

11. The Waikato District Health Board has released a 2015 Health Profile. The Health Profile presents a range of statistics gathered from Hospital admissions and the 2013 Census.

12. Inside Waikato

13. Statistics NZ released in March 2016 an [Inside Waikato Infographic](#). This was the fourth release in the series that includes Auckland, Wellington and Christchurch.

14. The Inside Waikato infographic uses information from a range of Statistics NZ data sources to look at the region's population, social support networks, housing, income, and labour market.

15. Neighbours Day Aotearoa 2016

16. Neighbours Day Aotearoa is a collaborative campaign organised and supported by Lifewise, Inspiring Communities, The Mental Health Foundation, Neighbourhood Support NZ, Christchurch Methodist Mission and Public Libraries of NZ. Thousands of neighbours, organisations, local government and local businesses have been involved, bringing neighbours together over the last weekend in March each year.

17. Initially launched by Lifewise in Auckland in 2009, Neighbours Day Aotearoa became a nationwide initiative and campaign in 2011.

18. Neighbours Day continues to be a catalyst for thousands of Kiwis to connect with their neighbours and turn their streets into neighbourhoods, ata whaingia te pa harakeke. Atawhaingia te pa harakeke – this whakatauki or proverb speaks to the essence of what Neighbours Day is looking to achieve, nurture familial bonds in the solidarity and unity of community. Atawhaingia is to nurture, protect, cultivate and love. The Pa Harakeke is the Harakeke (flax) grove of the village, used as a metaphor for an intertwined community.

19. There were 60 unique events across Hamilton, that registered online to support the celebrations this year.

20. Enderley Housing Project

21. Council requested an update on the Enderley Housing Project being developed by Te Runanga o Kirikiriroa.

22. Ngaa Rau Taatangi Board of Directors have announced that Gibson Construction Ltd has been confirmed to undertake the completion of existing homes, the contract will be signed off by Gibson Construction and work will commence immediately. Gibson Construction has committed to completing all five units and closing in (weather/water tight) the sixth unit by end of June.

23. The Civil works being undertaken by Civil Construction Ltd, including storm water, drainage and foot paths are currently 75% completed.

24. The show home will be finished first, a special opening will be held where we will profile the project with positive publicity. Once this date is known information will be distributed accordingly.

25. Stage one of the project includes a further 20 homes. Ngaa Rau Taatangi intends to carry out a further tender process for this work to ensure no further delays occur and continuity of the build is maintained.

26. Enderley Community Centre
27. Enderley Community Centre was damaged in an arson attack at the beginning of March. The South end of the building remains closed while repair work is undertaken. This is anticipated to take a few months.
28. Waikato Digital Youth have relocated from the South end to the mezzanine floor at the North end of the facility. The gym, courts area and dining room are again being utilized by the community.
29. The local community has responded with a series of hui in partnership with Council to both address concerns over vandalism and investigate potential positive activity that could occur at the Centre.
30. Waikato Refugee Forum
31. At the 17 February 2016 Subcommittee meeting staff were asked to update elected members on the Waikato Refugee Forum.
32. The Waikato Refugee Forum is still very active within Hamilton City. The communities include: Somali, Congolese, Afar, Colombian, Afghan, and Burmese.
33. The current president is Mohammad Khalif with Christian Damba as Vice President.
34. The Waikato Refugee Forum supports refugee groups in the region. Alongside Red Cross they help welcome new refugees arriving into Hamilton City.
35. The Waikato Refugee Forum looks at the wellbeing of refugee communities by providing networking opportunities, facilitating and advocating for the needs of its members and raising issues and concerns to the national forum and the National Refugee Resettlement Group.
36. DHB Interpretation Services
37. At the 17 February 2016 Subcommittee meeting staff were directed to liaise with DHB representatives in terms of difficulties encountered by migrant and refugee communities in relation to access and availability of quality interpretation services.
38. Staff have been working with Decypher who met with Martin Gallagher, Crystal Beavis (both DHB Board members) and senior staff of the WDHB re interpreting issues.
39. Midlands Health interpreting funds have run out so interpreters are not available at Midland's clinics until the start of a new contract on 1 July 2016.
40. Refugee families are now accessing Tui Medical Centres and using Language Line.
41. This issue was raised via the Community Health Network who are escalating it within the WDHB.
42. Encouraged relevant organisations to provide feedback on the Draft WDHB Strategy particularly around refugees and access to services.
43. Older Person's Advisory Panel
44. The Older Person's Advisory Panel wanted to enhance the interaction between themselves and the wider older person community in Hamilton. A plan of action was to host a forum where individuals and agencies could come to hear what the Panel has been discussing and provide feedback to the Panel around issues currently affecting other older people.
45. The forum was held on 4 April 2016 with 65 people attending.

- 46. Information received from the Forum was discussed as an agenda item at the subsequent Older Person’s Advisory Panel meeting on 15 April 2016. Recommendations from the Panel will be reported to Council as per agreed process.
- 47. Single Year Community Grant
- 48. The [Community Assistance Funding Policy](#) was adopted by the Strategy and Policy Committee on 8 April 2015.
- 49. In accordance with the Policy, \$868,000 was allocated per annum through the Multi-Year Community Grant to 27 Community organisations for the funding years of 2015/16, 2016/17 and 2017/18.
- 50. Therefore there is \$292,000 to be allocated via the Single-Year Community Grant for the funding years of 2015/16, 2016/17 and 2017/18.
- 51. The Single-Year Community Grant was open to receive applications between 1 March and 31 March 2016 for the 2015/16 funding year. 152 applications were received with a total funding request of \$703,583.17.
- 52. Decisions will be made and communicated within 6 weeks of the grant closing.

Signatory

Authoriser	Lance Vervoort, General Manager Community
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HAMILTON CITY HEALTH PROFILE 2015



DID YOU KNOW?

39%
of the Waikato DHB population live in Hamilton

4TH
largest city in New Zealand

141,612
people live in Hamilton City



BIRTHS IN 2014

150
births to women 19 years and under

408
births to women 35 years and over

2376
Total number of births in 2014

POPULATION (2013 Census)

11%
of the population is 65 years and over

21%
of the population is under 15 years old

7%
of the population is under 5 years of age

TRANSPORT

9%
of households have no access to a motor vehicle



Males live to around **79** years

Females live to around **83** years

22% of households are single parent

12% of the population live in crowded housing

30% (0-14 years) of the population live in the most deprived areas (3 and 10 NZ Dep)

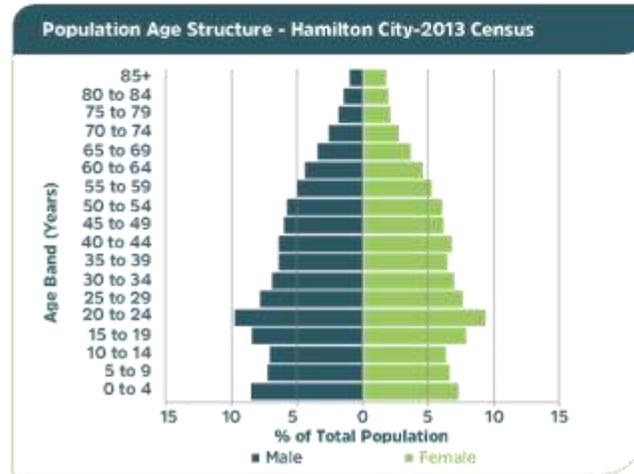
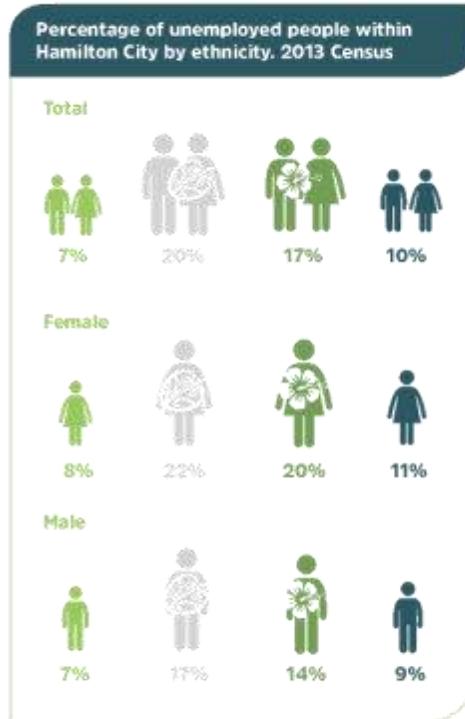
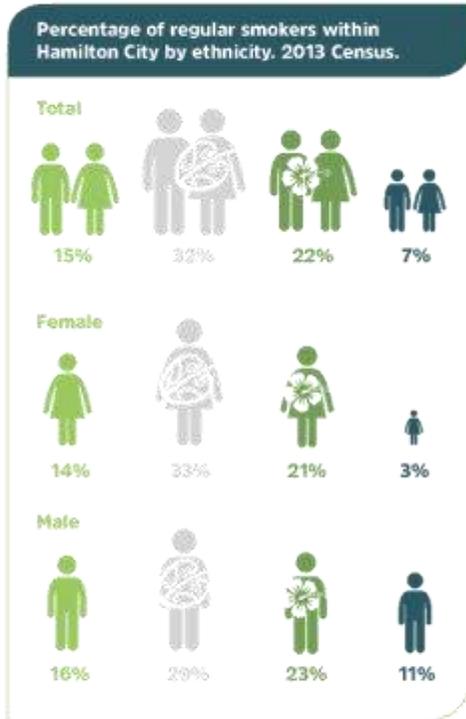
SMOKING

21%
2006
Regular smokers 15 years and over

14%
2013
Regular smokers 15 years and over



HAMILTON CITY HEALTH PROFILE 2015



*Definition: People aged 15 years and over are defined as employed if they worked for one hour or more for pay or profit, or without pay in a family farm, business or professional practice, or if they had a job but were not at work for some reason.

HAMILTON CITY KEY FINDINGS



HOSPITALISATIONS AND DISEASE

1 IN 4

visit the emergency department each year



Most common chronic disease admissions

65+ = IHD & HEART FAILURE



MĀORI

aged 45-64 have

3 TIMES HIGHER RATES

of type 2 diabetes and COPD hospitalisations

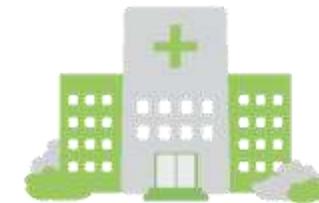
1 IN 4

is admitted to hospital each year



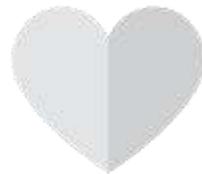
Most common among

MĀORI 65+ = COPD & TYPE 2 DIABETES



The most common **CHRONIC DISEASE**

hospitalisations are ischaemic heart disease (IHD), chronic obstructive pulmonary disease (COPD), type 2 diabetes, heart failure and stroke.



The Māori hospitalisation rate for

STROKE aged 45-64 is **3 TIMES**

higher than in non-Māori



MĀORI

aged 45-64 years have

7 TIMES HIGHER

rates for **HEART FAILURE**

than non-Māori



HAMILTON CITY KEY FINDINGS



1 IN 10
65+ year olds have
DEMENTIA



1 IN 100
CHILDREN
hospitalised for
dental caries



**MAORI | PACIFIC
RHEUMATIC FEVER**
hospitalisations are
10 TIMES
more common than non-Māori



1 IN 100 ADULTS
admitted for conditions
**RELATED TO
ALCOHOL**



Admissions for dental caries
IN CHILDREN
have increased by
**50% (SINCE
2006)**



**4 IN 100
MĀORI
CHILDREN IS**
hospitalised for respiratory
infections each year



Hospitalisations for
**MOOD
DISORDER**
are seen in
**2 OUT OF
1,000**
people



**7 OUT OF 1,000
HAMILTON
CHILDREN**
are hospitalised for
gastroenteritis each year



Admissions for
conditions caused
**BY ALCOHOL
ARE 70% HIGHER
IN MĀORI**



HAMILTON CITY PROJECTIONS | KEY FINDINGS

IN 2026



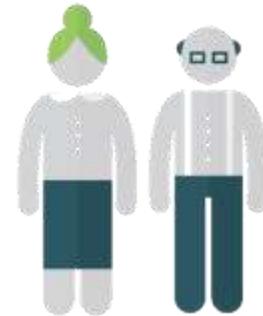
The population of
HAMILTON
will
INCREASE
BY 11%



UNDER 15s
will
INCREASE
BY 3%



OVER 65+
will
INCREASE
BY 38%



The prevalence of
DEMENTIA IN 65+
is estimated to
INCREASE BY
68%



Admissions for
CHRONIC DISEASES
IN 45+
INCREASE BY
30%



BREAST CANCER
admissions are estimated to
INCREASE BY
21%



Admissions for
MOOD DISORDER
and
SCHIZOPHRENIA
are estimated to
INCREASE BY
11%



HAMILTON CITY KEY HEALTH INDICATOR STATISTICS

Key health indicator statistics for Hamilton City (total and Māori population) compared with the overall Waikato DHB, 2014.

Health indicators	Waikato DHB	Hamilton City		Māori		Māori vs non-Māori
	Rate	Rate	Time trend since 2006	Rate	Time trend since 2006	Rate ratio
In-patient events per 1,000 population ¹	260.0	263.5*	↑ Increase	279.4	↓ Decrease	1.06
Emergency department visits per 1,000 population ²	265.4	256.3	-	350.0	-	1.50
Mortality rate per 1,000 population ³	7.2	5.8	-	3.2	-	-
Dementia, total with disease ⁴	4,348	1,699	-	142	-	-
<i>Hospital stays per 100, 000 population⁵</i>						
IHD						
45-64 years	566.0	516.5	≈ No change	591.1	≈ No Change	1.17
65+ years	1856.4	1789.3	↓ Decrease	1557.5	≈ No Change	0.86
COPD						
45-64 years	330.7	418.3	↑ Increase	1223.4	≈ No Change	4.29
65+ years	1473.7	1360.8	≈ No change	4007.6	≈ No Change	3.41
Diabetes type 2						
45-64 years	356.3	434.5	↑ Increase	1127.1	≈ No Change	3.52
65+ years	1019.2	1125.6	≈ No change	2716.0	≈ No Change	2.68
Heart failure						
45-64 years	150.4	162.0	≈ No change	627.7	≈ No Change	7.39
65+ years	1129.2	1291.5	≈ No change	2431.1	≈ No Change	2.01
Stroke						
45-64 years	190.0	201.6	≈ No change	481.1	≈ No Change	3.10
65+ years	969.6	989.4	≈ No change	1082.6	≈ No Change	1.10
Renal failure						
45-64 years	50.9	53.3	≈ No change	77.9	≈ No Change	1.58
65+ years	205.3	211.7	≈ No change	303.9	≈ No Change	1.48

Health indicators	Waikato DHB	Hamilton City		Māori		Māori vs non-Māori
	Rate	Rate	Time trend since 2006	Rate	Time trend since 2006	Rate ratio
Breast cancer, women 45+ years	292.5	260.1	≈ No change	380.8	≈ No change	1.56
Mood disorder ⁶	157.5	239.9*	≈ No change	187.4	≈ No change	1.11
Schizophrenia ⁶	130.2	178.6	≈ No change	345.5	≈ No change	3.58
Disorders due to psychoactive substance use ⁶	86.7	106.3	↑ Increase	131.7	≈ No change	1.38
Intentional self-harm ⁷	149.4	194.8*	↑ Increase	205.7	≈ No change	1.04
Alcohol related harm and conditions ⁸	717.6	787.2	-	1333.2	-	-
Respiratory infections aged 0-14 years ⁹	2033.9	2723.7*	↑ Increase	3904.7	↑ Increase	1.79
Asthma aged 0-14 years ¹⁰	431.3	543.2*	↑ Increase	748.3	↑ Increase	1.67
Gastroenteritis aged 0-14 years ¹¹	535.5	722.7	≈ No change	564.4	≈ No change	0.71
Dental caries aged 0-14 years ¹²	1041.0	994.8	↑ Increase	1233.3	↑ Increase	1.39
Rheumatic fever ¹³	5.6	5.2	≈ No change	19.1	≈ No change	10.07
<i>Community care service use per 1,000 population¹⁴</i>						
District nursing	286.4	195.9*	-	179.3	-	0.90
Public health nursing	19.2	15.2*	-	29.2	-	2.51
Physio-/occupational therapy/dietician	38.9	31.5*	-	24.6	-	0.74

Notes: 1-2 Waikato DHB hospital register Costpro, events per 1,000 population, 2014. 3 Events per 1,000 population, 2013. 4 Alzheimer's New Zealand. 5 Age- and ethnicity specific rates, annual average 2010-2014, Costpro. ICD10: ischemic heart disease (IHD) I20-25, chronic obstructive pulmonary disease (COPD) J40-44, J47, diabetes type 2 E11, heart failure I50, stroke I60-I69, renal failure N17-N19, breast cancer C50, 6 Age- and ethnicity-standardised rate per 100,000 population, Standardised to the NZ population. Mood disorder F30-F39, schizophrenia and delusional disorders F20-F29, disorders due to psychoactive substance use, F10-F19. 7 Age- and ethnicity-standardised rate per 100,000 population, ICD10 X60-X84. Standardised to the NZ population. 8 Alcohol attributable fraction weighted admissions, 9 Age- and ethnicity-specific rate per 100,000 population, ICD10 J00-J22. 10 Age- and ethnicity-specific rate per 100,000 population, ICD10 J45-46, 11 Age- and ethnicity-specific rate per 100,000 population, ICD10 A00-A09, 12 Age- and ethnicity-specific rate per 100,000 population, ICD10 K02. 13 Crude rate per 100,000 population, ICD10 I00-I02, 14 Events per 1,000 population, 2011-2014 (annual average), Costpro. Arrows show statistically significant differences over time (p<0.05) - Data not available for comparison. Rate ratios: non-Māori is held as reference category. A ratio above/below 1 means the outcome is more/less common among Māori than non-Māori. A rate ratio in bold font indicate that there is a statistically significant difference between Māori and non-Māori.

HAMILTON CITY KEY HEALTH INDICATOR STATISTICS

Key socioeconomic indicator statistics for Hamilton City (total and Māori population) compared with the overall Waikato DHB, 2013.

Indicators	Waikato DHB	Hamilton City		Māori		Māori vs non-Māori
	Rate	Rate	Time trend since 2006	Rate	Time trend since 2006	Rate ratio
Risk behaviours¹						
Regular smokers (15+)	17.2%	15.9%*	↓ Decrease	31.5%	↓ Decrease	2.72
Male	17.8%	16.2%*	↓ Decrease	29.5%	↓ Decrease	2.20
Female	16.5%	14.2%*	↓ Decrease	33.3%	↓ Decrease	3.34
Regular smokers (15 to 24)	18.1%	15.0%*	↓ Decrease	27.5%	↓ Decrease	2.57
Male	19.0%	15.7%*	↓ Decrease	25.4%	↓ Decrease	2.04
Female	17.2%	14.4%*	↓ Decrease	29.1%	↓ Decrease	3.22
Smoking in pregnancy	18.7%	16.6%*	-	37.9%	-	6.12
Births to mothers under age 19 per 1,000 births ²	66.4	63.1	-	144.0	-	6.06
Births to mothers over age 35 per 1,000 births ²	166.1	171.7	-	108.0	-	0.53
Overweight in pregnancy (BMI 25-29) ²⁻³	28.1%	27.3%	-	28.5%	-	1.07
Obese in pregnancy (BMI ≥30) ²⁻³	25.5%	25.1%	-	35.5%	-	1.77
Social and economic¹						
Rates of te reo in the home (among Māori)	25.7%	-	-	26.3%*	↓ Decrease	-
Highest qualification: diploma (level 5) and over	25.2%	31.6%*	↑ Increase	19.4%	↑ Increase	0.57
No qualification (15+)	25.0%	19.1%*	↓ Decrease	29.9%	↓ Decrease	1.78
Unemployed (percentage of population in labour force)	7.7%	9.5%*	↑ Increase	19.5%	↑ Increase	2.65
Living in crowded housing	9.7%	11.8%	-	-	-	-
Do not own usual residence	50.6%	57.4%*	↑ Increase	80.3%	↑ Increase	1.53
Rented households	37.3%	42.8%	↑ Increase	-	-	-
Households with no access to telecommunications	2.1%	1.7%	↓ Decrease	-	-	-
Households with no access to a motor vehicle	7.0%	8.7%	↑ Increase	-	-	-
Single parent households	18.8%	22.0%	= No change	-	-	-
Living in high deprivation areas ³	26.3%	27.7%	↑ Increase	-	-	-

Notes: 1 2013 Census, 2 2014 National Maternity Collection, MoH, 3 Based on maternal height and weight at first registration with LMC or DHB Primary Maternity Service, 4NZDEP13 index scores of 9 or 10, *Significantly different from Waikato DHB value. Arrows show statistically significant differences over time (p<0.05) - Data not available for comparison. Rate ratios: non-Māori is held as reference category. A ratio above/below 1 means the outcome is more/less common among Māori than non-Māori. A rate ratio in bold font indicate that there is a statistically significant difference between Māori and non-Māori.

HAMILTON CITY PROJECTIONS 2026

Current and projected population and health statistics for Hamilton City, 2016-2026

Indicator	Estimated n 2016	Estimated n 2026	Change n	2016-2026 %
Population estimates¹				
Total population	152,645	170,010	17,365	+11%
Under 15	33,025	34,085	1,060	+3%
Over 65	18,465	25,480	7,015	+38%
Hospital admissions (n)				
IHD, 45+	448	574	126	+28%
COPD, 45+	380	486	106	+28%
Diabetes type 2, 45+	315	398	83	+26%
Heart failure, 45+	258	343	84	+33%
Stroke, 45+	222	289	67	+30%
Mood disorder	309	344	35	+11%
Schizophrenia	255	284	29	+11%
Gastroenteritis, 0-14	219	226	7	+3%
Asthma, 0-14	165	170	5	+3%
Breast cancer (women, 45+)	66	80	13	+21%
Dementia ² , prevalence 65+	1,313	2,207 ³	894	+68%

Notes: Projections based on statistics NZ population projections by sex and age, 2016 (base)-2026, medium projection. Estimated admissions 2026 = current number of admissions (annual average 2010-2014) multiplied with the (age-specific) increase/decrease in population. ¹Population estimations for 2016. ²Number with dementia in 65+ (prevalence 8.1%) based on a 2012 Alzheimer's NZ report. ³2030, prevalence 8.7%.

Committee: Community Forum
Subcommittee

Date: 04 May 2016

Report Name: Community Forum
Subcommittee Action List - 4
May 2016

Author: Wendy Verschaeren

Status	<i>Open</i>
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Recommendation

That the Report be received.

1. Attachments

- Attachment 1 - Community Forum Subcommittee Action List - 4 May 2016

COMMUNITY FORUM SUBCOMMITTEE

Action List - 2015/16

OPEN

Ref.	GM Responsible	Action	DUE DATE for reporting back	Status (relative to due by date)	Notes
1	GM Community	<p>Community Occupancy Policy</p> <p>i. Staff would check on the progress with the consultation of all groups regarding the implementation of the new occupancy rates. Staff would provide regular updates to the Subcommittee as to number of applications for hardship grants and the number so granted.</p> <p>ii. 19 August 2015: GM Community to discuss process for hearing from applicants for exceptional circumstances cases at the Finance Committee, with the Chair and Deputy Chair of that Committee.</p> <p>iii. Staff to consider, with Chair of Subcommittee, issues in relation to application of the Policy vis-a-vis Melville Park.</p>	22-Mar-16	In progress	<p>Staff presented the six-monthly report at the 19 August 2015 Subcommittee meeting.</p> <p>Six-monthly update report was presented at the 22 March 2016 S&P Meeting. This outlined ongoing implementation of the policy – how many leases have been granted, how many have expired, current state of play with any others of note.</p>
2	GM Community	<p>Fairfield Feasibility Study</p> <p>Staff to update the Subcommittee in relation to the ongoing feasibility of Fairfield Hall.</p>		In progress	<p>The feasibility study of Fairfield Hall was completed, and was being progressed for public consultation. A copy of the feasibility study was circulated to Elected Members.</p> <p>A community consultation on the feasibility study was held on 15 July 2015 . General agreement was given to the recommendations of the feasibility study, with representatives from agencies involved in the consultation to separately decide on level of involvement possible going forward.</p> <p>HMS Trust and Te Whare O Te Ata are progressing actions and will present back to Council in 2016.</p> <p>8 December 2015: Strategy and Policy Committee resolved that options to devolve management of Fairfield Hall be explored with Community Organisations, with Staff to present a report to Council should a decision be required on the future use of an individual community facility.</p> <p>Community groups assessing information provided by staff.</p>
3	GM Community	<p>Richmond Park School</p> <p>Staff to update Subcommittee on progress and notify the Subcommittee if matters progress faster than expected.</p>		Completed	<p>At the 3 June 2015 Meeting, the Subcommittee resolved that staff:</p> <p>a. include the hall facilities in the Community Facilities Review;</p> <p>b. raise the issue with the MoE at the next bi-monthly meeting; and</p> <p>c. initiate a joint consultation, together with the MoE, for community groups in the Richmond Park area for the future use of the hall and area.</p> <p>19 August 2015: Staff to work with the MoE's representative in Wellington on above matters.</p> <p>24 November 2015: MoE negotiating with Te Whare Kokonga for them to be head tenant of 4 classrooms/Hall complex. Community organisations to be allowed ongoing access.</p> <p>17 February 2016: Head tenant appointed, community access to continue. Staff to monitor issues and report to the Subcommittee as and when required.</p>
4	GM Community	<p>Subcommittee and Social Wellbeing</p>		In progress	<p>Subcommittee to have an oversight role of Social Wellbeing issues (by way of monitoring and reporting) and arrange communications/updates with key external stakeholders (eg DHB) as required.</p>
6		<p>ii. Staff to present a report on the Quality of Life survey and Social Wellbeing Indicator report to the S&P Committee in May 2016.</p>		Completed	<p>An update report on the Social Wellbeing Indicator Report was presented to the Subcommittee at its February 2016 meeting; followed by a briefing on the Quality of Life Survey.</p> <p>New Actions have been recorded in the Community Forum Action List.</p> <p>The measures to be reported on in the Social Wellbeing Indicator Report incorporating elected member feedback will be presented to S&P 3 May 2016 meeting.</p>
7		<p>17 February 2016:</p> <p>iii. Staff to confirm that surveys undertaken are not duplicating information obtained.</p>	04-May-16	In progress	<p>The surveys review that is currently being undertaken will ensure the surveys will not duplicate information.</p>
8		<p>iv. Benchmarking exercise on the Quality of Life Survey to assess how other local authorities use information obtained.</p>	04-May-16	In progress	<p>Hamilton City and Waikato Region have agreed to share the data from upcoming Quality of Life surveys. This will ensure we can build a wider Waikato view and understand how Hamilton City sits within that view.</p> <p>Benchmarking of all the Quality of Life survey participants is provided as part of the standard reporting. We will request confirmation of the Quality of Life Survey participants and engage with them around how they internally use the data.</p>
9		<p>v. To confirm the Hamilton Plan deliverables are covered under a survey Council participates in.</p>	04-May-16	In progress	<p>Staff are working on the outcome reporting of the Hamilton Plan to ensure these are either addressed in the Quality of Life Survey or Residents survey.</p>
10		<p>vi. To consider best time to undertake the Hamilton Residents Survey and the source providing sample group for the survey.</p>		Not started	<p>There is a project scheduled to review the Residents Survey. This project will commence in May and an outcome of the project will be around the specific content and timing of the Residents Survey.</p>

Updated: 22/04/16 16:53

Ref.	GM Responsible	Action	DUE DATE for reporting back	Status (relative to due by date)	Notes
11	GM Community	Older Persons Advisory Panel 24 November 2015: Subcommittee referred the Older Persons Plan 6-monthly update to the S&P Committee (March 2016) for consideration.	22-Mar-16	Completed	The Chair, Cr Yeung and staff are facilitating a discussion with the Advisory Panel on key issues for Older People (including accommodation and health), at the Panel meeting of 6 November 2015. Chair of Subcommittee to meet with S&P Chair to discuss referring update reports to the S&P Committee on an annual basis. 17 February 2016: Subcommittee recommended to Strategy and Policy Committee that the Older Persons Plan update reports be received by the S&P Committee on an annual basis. Recommendation presented at the 22 March S&P Committee meeting.
12	GM Community	Enderley Social Housing Project i. Ngā Rau Tātangi to circulate a website link in relation to the Otago University research being undertaken on the Project.		In progress	i. The research being conducted by Otago University is still occurring, no documents are currently available for distribution.
13	GM Community	ii. Staff to provide a general update on community developments, including the Enderley Social Housing Project, at the Subcommittee Meeting on 4 May 2016.	04-May-16	In progress	Update report will be presented as part of the Community Development Report at the 4 May 2016 Subcommittee Meeting
14	GM Community	Ethnic Communities Forum		In progress	
16		ii. Staff to give list of Council staff who can assist with interpretation issues prominence through internal communications, and to circulate list to Elected Members.	04-May-16	Completed	List circulated to Elected Members. List is on the Intranet for staff to refer to and is regularly checked and updated to ensure accuracy.
17		iii. Staff to contact Housing New Zealand to highlight difficulties identified by the community in relation to refugees finding suitable accommodation, and report back to the Subcommittee.	04-May-16	Completed	Community Development & Leisure Manager met with Housing NZ representatives on 30 March to discuss issues on finding suitable accommodation.
18		iv. Staff to provide an update report to the Subcommittee on actions/issues arising from the November Subcommittee meeting at the February 2016 meeting.		Completed	Presented at the 17 February 2016 Subcommittee Meeting.
19		17 February 2016: v. Staff to provide an update on the Waikato Refugees Forum.	04-May-16	In progress	Update report will be presented as part of the Community Development Report at the 4 May 2016 Subcommittee Meeting.
20		vi. Staff to liaise with DHB representatives in terms of difficulties encountered by migrant and refugee communities in relation to access and availability of quality interpretation services.	04-May-16	In progress	Update report will be presented as part of the Community Development Report at the 4 May 2016 Subcommittee Meeting.
22	GM Community	Disability Action Plan		In progress	
23		24 November 2015: That the Disability Action Plan be presented at the Strategy and Policy Committee (March 2016).	07-Jun-16	In progress	Following discussions between the Subcommittee Chair and S&P Chair, this was presented to the Subcommittee meeting in February 2016 for initial consideration. Staff to present draft finding to the Subcommittee at its 4 May 2016 meeting, before a final report is presented at 7 June S&P Committee meeting.
24		17 February 2016: i. Staff to arrange for Professor Koopman-Boyden and Mr Francis to present to the Subcommittee on 2 August 2016 in relation to the National Disability Strategy.	02-Aug-16	In progress	Staff have made contact and both Professor Koopman-Boyden and Mrs Francis are scheduled to attend the Subcommittee meeting of 2 August 2016.
25		ii. Staff to assess best ways to increase awareness of the government's Mainstream Programme in the Hamilton business community.	04-May-16	In progress	Staff are working on 4 different media options to increase awareness around the Mainstream Programme within the business community of Hamilton.
26		iii. Chair to update Subcommittee following meeting with members of the disabled community.	04-May-16	In progress	Chair will be able to provide a verbal update at the 4 May Subcommittee meeting.

Committee: Community Forum
Subcommittee

Date: 04 May 2016

Report Name: Summary Discussion

Author: Deanne McManus-Emery

Status	<i>Open</i>
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The purpose of this report is to prompt a verbal summary discussion of the issues raised and resolve any recommendations that need to be advanced to either management or the Strategy and Policy Committee.

Recommendation

That the Report be received.

Signatory

Authoriser	Lance Vervoort, General Manager Community
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