



Te Kura Maori o Nga Tapuwāe

TE WAIORA O RONA - HEALTH & WELLBEING INITIATIVE

Wednesday 3rd May 2023

Tēnā koutou e ngā Mātua,

After the past few years' lockdowns as well as the floods and cyclone earlier this year, we decided to holistically look at the Health & Wellbeing of our students. We are aware that the overall health and wellbeing of a child can greatly or adversely impact their attendance and/or focus whilst at school. It is also apparent that the health & wellbeing of their whānau can also impact on our students. As such, we have established Te Waiora o Rona which is our Health and Wellbeing Initiative. Te Waiora o Rona garnered its name from our connection to the Maramataka - hence the use of Rona. As you may know, the marama and lunar cycle influences our overall wellbeing so it is only fitting that our Kura incorporates this form of holistic wellbeing into the name of our kaupapa.

Te Waiora o Rona will focus on providing opportunities for our students to access key healthcare providers such as a Health Worker, Nurse, Social Worker and Guidance Counsellor. We will also provide access to services including basic health checks such as skin rash/infection checks, swabs to detect Strep Throat which could lead to Rheumatic Fever if left untreated, Hearing & Vision Tests, Dental checks and treatment.

I am pleased to inform you that Leanne Gardiner is our Te Waiora o Rona Coordinator and has already been in contact with a number of whānau regarding support for their children. One of Leanne's key roles is to engage with whānau as per our tri-partheid agreement to ensure that we are working collectively to raise students' health & wellbeing with an aim to reduce absenteeism to no more than 10%. Our aim is to support students by any means necessary, but we can't do this without whānau support and assistance.

In order to keep whānau well informed, we will be sending home a green Te Waiora o Rona pānui like this every fortnight. It will include an update on what the current/upcoming key health & wellbeing focus is and any trends we have been noticing that whānau should keep an eye on.

Some of the key dates for Te Waiora o Rona are as follows:

- ☞ Monday 15th May - Friday 26th May Dental Planet Van onsite to check Yr 9 - 13 students
- ☞ Monday 15th May - Friday 16th June ARDS Dental Van onsite to check Year 1 - 8 students
- ☞ Tuesday 16th May - Thursday 18th May Vision Bus Aotearoa onsite to check all students

Even though we have arranged for these services to come to school so you do not have to take your child to an appointment elsewhere there are some requirements that must be met by you as whānau.

1. You need to complete the permission form/s supplied by the provider and return it asap.
2. Your child must be at school when the services are here as they won't be returning this year

Attached to this pānui is the information and consent form for the Vision Bus. This is for all Year 1 to 13 students so could you please complete one for each of your children and send them back asap so the schedule can be organised ahead of their arrival.

If you have any queries, please do not hesitate to contact the office on Ph: 551 6161 or via info@ngatapuwaee.school.nz

Noho ora mai,


Arihia Stirling
Principal



Please read and fill out the other side, then return to the school reception

Our team recently screened your child's vision at school, and the results indicate that they would benefit from a full eye examination.

The Vision Bus will be visiting the school, and a full eye examination can be performed on the Vision Bus during school hours. If you would like your child to have an appointment, please complete this form with your consent and some background health information relevant to your child's full eye examination.

Alternatively, you can visit the University of Auckland Optometry Clinic, 85 Park Road, Grafton. (Opposite Auckland Hospital).

To make an appointment, phone: (09) 923 9909 or email graftonclinic@auckland.ac.nz. You can also make an appointment with your local optometrist.

Full eye examination on the Vision Bus - What You Need to Know

As a result of the full eye examination, we may find that your child needs glasses. A government subsidy will cover the cost if you require glasses and have a community services card (CSC). If you do not have a CSC, then the Vision Bus will provide fully funded (no cost) spectacles (through donations).

As part of the full eye examination, we may need to put eye drops into your child's eyes to stop the eyes from focusing up close so that we can measure whether your child needs glasses to see better. This is temporary and will cause your child to have blurry vision for up to 4-6 hours (especially up close); their pupils will be bigger than normal for up to 24 hours. Their eyes will also be more light-sensitive; we will provide sunglasses for them to wear afterwards. The drops sting for 10-20 seconds and most children are not bothered too much by it. A qualified first aid responder will manage this according to standard Optometry Clinics protocol in the rare event of an allergic reaction to the eye drops.

Please let us know if your child has reacted to eye drops or has a history of chronic health conditions such as heart disease, epilepsy, or neurological conditions.

Other incidental findings may also be found. These could include a lazy eye or a colour vision problem. Some of these findings may have been seen before by other health professionals. Parents will be informed of any incidental findings, and with parent consent, the child will be referred to a health professional or specialist. Please provide the required details on the next page.

PLEASE TURN OVER



Please read the reverse side, then fill it out and return it to the school reception

Parent/Caregiver details

First Name:	Last Name (Surname):
Address:	
Suburb:	Postcode:
Mobile Number:	Home Number:
Email:	
Community service card number: <i>(please provide the 11-digit number on your card)</i>	Expiry Date:

Your child's details

First Name:	Last Name (Surname):
Date of Birth:	Gender:
Year Level:	School Name:

Ethnicity (please tick one or more of the following):

- | | | | | | |
|---|--|---|---|--|--|
| <input type="checkbox"/> (11) NZ European | <input type="checkbox"/> (21) Māori | <input type="checkbox"/> (31) Samoan | <input type="checkbox"/> (32) Cook Island Māori | <input type="checkbox"/> (33) Tongan | <input type="checkbox"/> (34) Niuean |
| <input type="checkbox"/> (35) Tokelauan | <input type="checkbox"/> (36) Fijian | <input type="checkbox"/> (41) Southeast Asian | <input type="checkbox"/> (42) Chinese | <input type="checkbox"/> (43) Indian | <input type="checkbox"/> (51) Middle Eastern |
| <input type="checkbox"/> (52) Latin American/Hispanic | <input type="checkbox"/> (53) African | <input type="checkbox"/> (44) Other Asian | <input type="checkbox"/> (40) Asian not defined | <input type="checkbox"/> (37) Other Pacific Island | <input type="checkbox"/> (30) Pacific Island not further defined |
| <input type="checkbox"/> (12) Other European | <input type="checkbox"/> (10) European Not further defined | <input type="checkbox"/> (61) Other Ethnicity | <input type="checkbox"/> (94) Don't Know | | |

Eye Examination Questions

Do you consent to your child having a full eye test?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you consent to the Vision Bus providing your child with fully funded glasses if needed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you consent to use the eye drops mentioned above?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has your child had a full eye examination in the past?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has your child previously reacted to eye drops?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has your child ever worn glasses or contact lenses?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you consent for the Vision Bus Aotearoa and the School to share health information relevant to the eye exam?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you give permission for your child to be featured in photography and/or videofootage for promotional or other purposes, e.g., stories in university or school newsletters? <i>(If you select 'Yes', we will contact you with further details and an official permission form)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No

Please sign (Parent/Caregiver):

Date: _____ / _____ / 2023