

July 2026

*Kia ora*

Thank you for your registration of interest in the role of Community Innovation Worker with Ngahere Korowai based in Cannons Creek.

This pack includes a job description and outlines the key tasks and expected outcomes of the position.

The pack also includes a Pre-employment Disclosure Statement, and a copy of Te Ara Wēteriana / The Wesley Way. Te Ara Wēteri is our quality assurance practice framework which guides how all staff are expected to interact with each other and with those we work alongside. Please read this carefully to ensure there is alignment between your beliefs and Te Ara Wēteri / The Wesley Way.

To apply for this position please send us:

- a covering letter
- your CV
- the completed Pre-employment Disclosure Statement.

This role is pivotal to maintaining and further developing the Ngahere Korowai Collective. We are looking for a highly self-motivated, skilled professional who has a genuine passion for community led changemaking.

We look forward to receiving your application and please do not hesitate to contact us if you have any questions.

**Please send your application to: Makerita Makapelu [mmakapelu@wesleyca.org.nz](mailto:mmakapelu@wesleyca.org.nz)**

**PO Box 9932**

**Te Aro, Wellington 6141**

**04 8050875**

Nga mihi



Kena Duignan

**Community Innovation Lead**

*Position Description***Community Innovation Worker – Ngahere Korowai project**

*This position coordinates the Ngahere Korowai project, providing planning, coordination, connections and communication to assist the community to realise their audacious vision – To grow the leadership of our Porirua East community to take care of our ngahere, our water, our harbour. In 50 years, everyone in our community will be living in connection with te taiao – able to gather our kai, our rongoā, and leaving a legacy of kaitiakitanga for our mokopuna to continue, ake, ake, ake!*

*The role involves growing the community leadership and voice in this project, facilitating the Ngahere Korowai Collective through building and maintaining relationships with a wide range of organisations who have an interest and role to play. Working closely with Ngāti Toa Rangatira and providing opportunities for local resident involvement are key elements of the role.*

*The role will work within a team that has a collaborative approach and so will support, and draw support from, all of the community innovation initiatives that are part of Te Hiko at Wesley Community Action. They will play a role in supporting the reflection and evaluation processes of Te Hiko at Wesley, including for Ngahere Korowai.*

*Working from Wesley House in Cannons Creek, this person will bring ideas, passion, relationships and organisation to the project. They will work closely with the Cannons Creek Team Manager, and the Community Innovation Lead to turn the interest in this project into effective action.*

*The role is grounded on the appreciation of the unique approach and position of Wesley Community Action. They will value a strong collaborative approach and will model the ‘Wesley Way’ of working and value being open to challenge, change and growth.*

|                                |                                                                                                                                                                                                                                                                                                                                                           |
|--------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Responsible to:</b>         | Cannons Creek Team Manager and Innovation Practice Leader                                                                                                                                                                                                                                                                                                 |
| <b>Important relationships</b> | <ul style="list-style-type: none"> <li>• Other Wesley House and Te Hiko team members</li> <li>• Members of the Ngahere Korowai Collective</li> <li>• Aotearoa Pasifika Menz Group</li> <li>• Ngāti Toa Rangatira</li> <li>• Community organisations and groups</li> <li>• Individual volunteers / time-bank members</li> <li>• Local residents</li> </ul> |
| <b>Responsible for</b>         | Community members involved in run initiatives                                                                                                                                                                                                                                                                                                             |

|                  |                                                       |
|------------------|-------------------------------------------------------|
| <b>Hours:</b>    | 40 hours per week (negotiable)                        |
| <b>Location:</b> | Wesley House, 206 Mungavin Ave, Cannons Creek.        |
| <b>Salary:</b>   | \$55,900 - \$68,160 (skills and experience dependent) |

The person who will thrive in this role is someone who:

**Loves working with community and has experience working with communities to create positive change:**

- Has a positive view of community and what communities can achieve
- Is experienced in building community connections and knowing when and who to gain further advice from
- Has experience facilitating and assisting group processes
- Allows the community to lead, knowing when to provide support
- Has wide networks across the Porirua East communities that span individuals, business and community groups.

**Is excited about the possibility of community-led initiatives for te taiao:**

- Has a passion and interest in restoring te taiao
- Makes connections between economic, social, cultural and environmental wellbeing
- Welcomes Mātauranga Māori and the expertise of Ngati Toa Rangatira
- Can communicate the vision of restoring the community relationship with the ngahere

**Gets things done:**

- Is strategic and creative to get the best results with the resources available
- Is self-motivated and can set a direction in consultation with others
- Can mobilise and work with a team of people to achieve the desired results
- Has good research, written and IT skills to support the project well
- Is organized, and experienced at chunking down big ideas into actionable steps
- Develops frameworks to communicate progress.

**Is relationship focused:**

- Understands that relationships matter – across all levels of the job
- Enjoys meeting and mixing with a wide cross-section of people
- Can communicate across a range of different people and sectors, using a range of communication tools
- Ability to stay open and curious, self-reflect, and learn

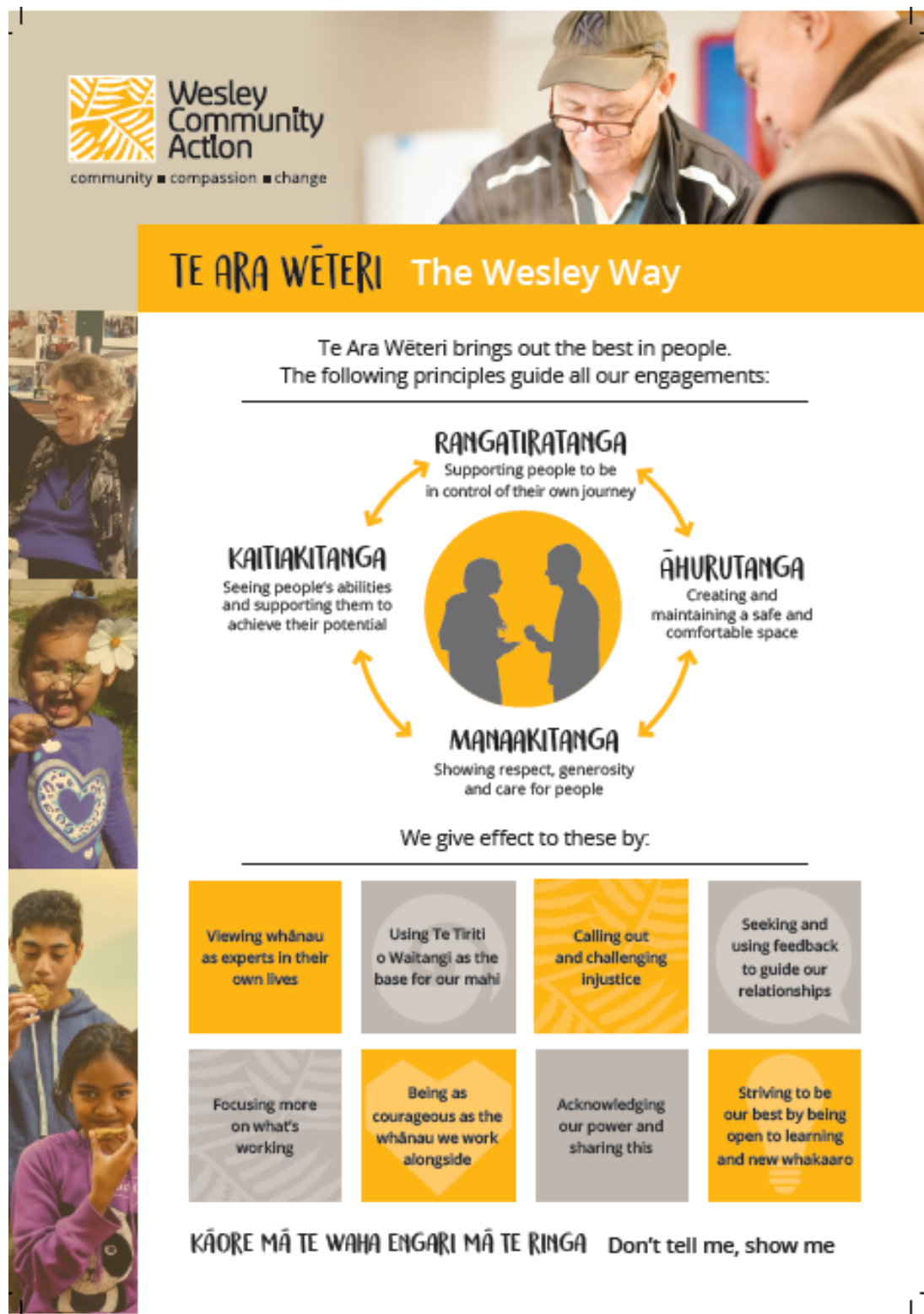
## Key tasks and expected outcomes

| Key Tasks                                                   | Expected Outcomes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|-------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Coordinate Ngahere Korowai processes to progress the vision | <ul style="list-style-type: none"> <li>• <b>Mens Group:</b> Coordinate the Mens Group supporting their leadership and providing opportunities for engagement and learning.</li> <li>• <b>Successful events are held:</b> We have hosted successful collective hui, public events and working bees that people feel welcomed at and have valued.</li> <li>• <b>Good engagement on social media:</b> the Community are engaging online with Ngahere Korowai, and the social media channels are active, exciting and positive.</li> <li>• <b>Grow leadership:</b> Local people are in helping to make decisions about the regeneration of forest on the hills and have opportunities to grow their capacity and capability.</li> </ul> |
| Provide opportunities for community engagement              | <ul style="list-style-type: none"> <li>• <b>Restoration Partners:</b> Work with Greater Wellington Regional Council, Ngati Toa, Porirua City Council, Enviroschools and others, proving practical support to ensure a planting cycle is in place and accessed by community.</li> <li>• <b>Learning:</b> Work with collective members and community to promote and share environmental learning</li> <li>• <b>Connection with Te Taiao:</b> Porirua East Community have more opportunities to connect with te taiao in their local place.</li> </ul>                                                                                                                                                                                 |
| Grow project impact                                         | <ul style="list-style-type: none"> <li>• Provide support for the water monitoring project at Cannons Creek Lakes</li> <li>• Work with Ngati Toa and GWRC to support the Belmont nursery project</li> <li>• Identify and grow opportunities for activities that contribute to Ngahere Korowai</li> <li>• Work across the collective to connect initiatives that contribute to the vision of Ngahere Korowai</li> </ul>                                                                                                                                                                                                                                                                                                               |
| Maintain relationships with the collective members          | <ul style="list-style-type: none"> <li>• Everyone in the collective feels clear about how the project is progressing, what their role is and how to contribute.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| Manage / oversee any staff or                               | <ul style="list-style-type: none"> <li>• People who help have clear knowledge of their role and expectation of them.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

|                                                                                     |                                                                                                                                                                                                                                                                                                                                                                              |
|-------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| volunteers who support activities                                                   | <ul style="list-style-type: none"> <li>• Policies and protocols are in place.</li> <li>• Employment and volunteer practices are consistent with legislative and best practice requirements in relation to EEO and Health and Safety.</li> </ul>                                                                                                                              |
| Report on impact and activity                                                       | <ul style="list-style-type: none"> <li>• Robust systems will be developed to collected data and stories on activity related to the Ngahere Korowai project</li> <li>• The rest of the Te Hiko team will work with the Community Innovation Worker on making sense of this data and using it to tell our story.</li> <li>• All reporting requirements will be met.</li> </ul> |
| Participate in relevant Wesley Community Action staff forums                        | <ul style="list-style-type: none"> <li>• The kaimahi shares learning with and learn from others working in Wesley Community Action</li> </ul>                                                                                                                                                                                                                                |
| Any other duties that may be required from time to time by the Director or manager. |                                                                                                                                                                                                                                                                                                                                                                              |

## How we work: Te Ara Wēteri / The Wesley Way

Te Ara Wēteriana / The Wesley Way is the heart of our work. It's based on the belief that people are the experts in their own lives. We support them to identify their strengths and skills and the changes they believe will allow them to have a better life.



**PRE-EMPLOYMENT DISCLOSURE:**

As part of our employment/volunteer process, we require you to answer to the fullest, the following questions.

This information is treated with the strictest of confidentiality.

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                     |                                                                 |                                                                                                                                                            |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>FULL LEGAL NAME:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                     |                                                                 |                                                                                                                                                            |
| <b>PREFEERED NAME (email signatures/business cards):</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                     |                                                                 |                                                                                                                                                            |
| <b>HAVE YOU PROVIDED REFEREE FROM YOUR LAST EMPLOYER AND EMPLOYERS IN RELATED FIELD TO THIS ROLE?</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                     |                                                                 |                                                                                                                                                            |
| <b>RELEVANT QUALIFICATIONS PROVIDED:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                     |                                                                 |                                                                                                                                                            |
| <b>PREFERRED IDENTIFICATIONS:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                     |                                                                 |                                                                                                                                                            |
| 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Do you have a preferred pronoun that you would like on a work email signature?                                                                                                                                                      | She/Her, He/Him, Them/they or N/A, if you would like no pronoun |                                                                                                                                                            |
| 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Do you identify with any iwi affiliation/s that you would like us to know about?                                                                                                                                                    |                                                                 |                                                                                                                                                            |
| 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Do you identify any Pasifika affiliation/s that you would like us to know about?                                                                                                                                                    |                                                                 |                                                                                                                                                            |
| <b>CONVICTION/DISCIPLINARY ACTION DISCLOSURES:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                     |                                                                 |                                                                                                                                                            |
| 4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Have you ever been convicted of a criminal or diving offense?                                                                                                                                                                       | YES OR NO                                                       | If YES, please provide full details on other sheet attached.                                                                                               |
| 5                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Are there any criminal charges currently pending against you?                                                                                                                                                                       | YES OR NO                                                       | If YES, please provide full details on other sheet attached.                                                                                               |
| 6                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Have you been the subject of any performance/employment/disciplinary process with any previous employer or been dismissed from any role?                                                                                            | YES OR NO                                                       | If YES, please provide full details on other sheet attached.                                                                                               |
| 7                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Have you been the subject of any censure or suspension to your professional practice/certifications of any type for any reason?                                                                                                     | YES OR NO                                                       | If YES, please provide full details on other sheet attached.                                                                                               |
| 8                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Have you had any circumstance where you have had engagement with the police for any matter (including traffic matters)?                                                                                                             | YES OR NO                                                       | If YES, please provide full details on other sheet attached.                                                                                               |
| <b>MEDICA:/GENERAL WELLBING DISCLOSURES:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                     |                                                                 |                                                                                                                                                            |
| 9                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Do you have any current medical/health or psychological conditions that we should be aware of that may interfere with your ability to carry out your duties as a member of Wesley Community Action? If in doubt, please answer yes. | YES OR NO                                                       | If YES, please provide full details on other sheet attached.                                                                                               |
| 10                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Do you have any history of an event/s, traumatic or otherwise, that could impact on your ability to carry out your duties objectively, professionally, and non-judgementally.                                                       | YES OR NO                                                       | If YES, please provide full details on other sheet attached.                                                                                               |
| 11                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Do you have any pre-existing medical/health or psychological conditions?                                                                                                                                                            | YES OR NO                                                       | If YES, please provide full details on other sheet attached.                                                                                               |
| 12                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Do any of the above conditions impact on your ability to fulfil your role in anyway?                                                                                                                                                | YES OR NO                                                       | If YES, please provide appropriate medical clearance from your health professional confirming you as fit for the purpose of the role you are applying for. |
| <b>WCA is an approved Essential Service. Vaccination is a critical part of Aotearoa-NZ's public health response to the Covid-19 pandemic. As kaimahi/staff in an approved Essential Service under Covid lockdowns, we can help protect ourselves, each other, the people we support, and the wider community by getting our Covid-19 vaccination. <u>You are not obliged to disclose your vaccination status.</u> However, certain aspects of our work cannot be done by an unvaccinated worker, so it is important we understand as much as possible the health needs of our kaimahi/staff. We appreciate your cooperation on this.</b> |                                                                                                                                                                                                                                     |                                                                 |                                                                                                                                                            |
| 13                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Have you received your Covid vaccinations and are up to date with your booster shots?                                                                                                                                               | YES OR NO                                                       | If NO, please provide details on another sheet attached.                                                                                                   |

|                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                      |           |                                                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|-----------|----------------------------------------------------------|
|                                                                                                                                                                                                                                                                                                                                                                                                                          | I would prefer not to disclose this information.                     |           | Please tick if appropriate.                              |
| DECLARATION                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                      |           |                                                          |
| 14                                                                                                                                                                                                                                                                                                                                                                                                                       | I am legally entitled to work/volunteer in Aotearoa New Zealand.     | YES OR NO | If NO, please provide details on another sheet attached. |
| 15                                                                                                                                                                                                                                                                                                                                                                                                                       | I give permission for my referees to be contacted.                   | YES OR NO | If NO, please provide details on another sheet attached. |
| 16                                                                                                                                                                                                                                                                                                                                                                                                                       | I give permission for my medical records to be accessed if requested | YES OR NO |                                                          |
| 17                                                                                                                                                                                                                                                                                                                                                                                                                       | I have a full and clear driver license I can produce for sighting.   | YES OR NO | If NO, please provide details on another sheet attached. |
| 18                                                                                                                                                                                                                                                                                                                                                                                                                       | The information given in this application is factual and truthful.   | YES OR NO | If NO, please provide details on another sheet attached. |
| SIGNATURE:                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                      |           |                                                          |
| DATED:                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                      |           |                                                          |
| <p><b>IMPORTANT – PLEASE NOTE:</b> We rely on the accuracy of the information given to us. If it is later discovered that you have not fully disclosed all matters requested or have failed to disclose significant information, then Wesley Community Action is entitled to treat such non-disclosure or misrepresentation as misconduct or serious misconduct and disciplinary proceedings may follow. V. Oct 2024</p> |                                                                      |           |                                                          |

**ADDITIONAL INFORMATION: add lines as needed.**

|                                 |                  |
|---------------------------------|------------------|
| Question number being answered: | Answer provided: |
|                                 |                  |
|                                 |                  |
|                                 |                  |
|                                 |                  |
|                                 |                  |

|  |  |
|--|--|
|  |  |
|  |  |