

People Pānui

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Health system reform news and updates for the health workforce.

Update from Minister of Health, Hon Andrew Little



Kia ora koutou katoa,

The goal of the health reform is to build a health system that offers better access and better equity for all New Zealanders. We're determined to fix the health system so it works for everyone.

I'm confident this will make a big difference for the people working in our health system.

It will enable health workers right across the board to work more collaboratively, be supported to be more innovative, and most of all, it will enable the workforce to be more effective at helping more New Zealanders to live longer, in good health, with the best possible quality of life.

I know our health workforce is the turanga – the foundation – of our system. Thank you for all the work that you do for people in Aotearoa New Zealand.

We're making great progress setting up the new organisations that will be a key part of the health reform – Health New Zealand and the Māori Health Authority.

At the moment the new bodies are interim. Shortly we will introduce legislation to make them permanent, and by the first of July next year the new system will be fully in place.

So what will this mean for you?

For staff currently working for DHBs, the Public Health Units and the shared service agencies, you can expect to transfer to the new entities and can continue to focus on doing the great work you do now, in the new system.

I want to assure everyone in the health system – whether you're administrators, cleaners, nurses, doctors or orderlies – we are not cutting the workforce. We will need more – not fewer – people like you working in the future health system.

We will also continue to need leadership at all levels of the health system, including in our hospitals.

To get to the point we're at now there has been a lot of engagement with the sector. Many of you have participated in this so far, and it's been great to see, so keep your ideas coming.

You will see a lot more engagement in your workplace in the months ahead because there will be presentations and information about what is going on as we head towards July the first next year.

I look forward to speaking with the health workforce more as the reform gathers pace.

Kia ora tātou

People working in the Transition Unit

– Lucy Hickman



Tell us a little about yourself?

I am on secondment from Te Hiringa Hauora / Health Promotion Agency where I was General Manager Corporate Services. I have over 20 years' experience as a chartered accountant working in a range of different roles and environments in New Zealand, Australia and the UK.

Within the health sector I've held leadership roles at Physiotherapy NZ and governance roles at Whānau Āwhina Plunket and the New Zealand College of Midwives.

What's your role as part of the health reform?

I am leading the transition of corporate functions from entities that will be disestablished and incorporated into Health New Zealand. Our focus is on preparing for stand-up on Day 1, which will be 1 July 2022.

There are different workstreams within the team, each with a different lead that has expert insight into the area. This includes Rosalie Percival leading the finance workstream, Shayne Tong leading on corporate ICT and Mel Dooney leading on Human Resources. My role within this team is to ensure a coordinated plan for Day 1.

What are you working on at the moment?

As a first step, we have been working on a current state analysis of the corporate functions to understand what is currently happening in the system – this is an important part of the process to inform our planning for Day 1.

To do this we're working closely with the health sector including regular fortnightly meetings with the Lead DHB CE group and our networks with the health sector through the workstream leads.

While we are not expecting much to change for Day 1, we need to get a good understanding of what is happening across the agencies to ensure that Day 1 will work smoothly with no interruption to service delivery. For example, we need to ensure that our people, suppliers and contractors continue to get paid.

We are mapping our user journeys to be clear where a process has or hasn't changed and identify any areas that are causing issues, and how we might be able to address those issues to be ready for Day 1.

What happens next?

We are expecting to work with the sector over the next five months to develop our Day 1 approach.

We'll present recommendations to the Board of interim Health New Zealand by March 2022. We will then be able to communicate to the sector what the approach will be for Day 1, including any changes and how we might plan for those changes – we know it is top of mind for those in the sector.

What is your advice to the sector?

Keep doing what you are doing. Your roles are all important through these reforms and we need you to continue doing the great work you do.

Health sector roadshows

The Transition Unit is about to kick off a series of information roadshows for the sector – beginning with an initial series of events in the South Island from 18-29 October. The roadshow sessions are an opportunity to hear directly from key people involved in the reforms, gain an overview of the key components of the reform work programme, and ask any questions you might have.

We have sent registration details out by email in the last few days – if you haven't seen any of this information, please email us on enquiries.tu@dpmc.govt.nz to let us know and we'll forward the details to you.

We're focusing on the South Island regions initially while we confirm options for the North Island as we monitor alert level requirements and restrictions. We'll keep you updated as further details are confirmed. These events are planned to be a mix of face-to-face and digital engagements, but we are acutely aware of the ongoing challenges the sector is facing given the current outbreak, and the potential for alert level changes, and this may mean a change of approach. On the basis everything proceeds, we look forward to connecting directly with many of you soon.

Health workforce reform questions and answers

Why is the health system being reformed?

New Zealand has a good publicly funded health system and a highly skilled, dedicated and professional health workforce. And while the public health system does well in many areas, the system does not serve everyone equally, so not all people get the same access to, and quality, of health care.

A transformed health system will support all New Zealanders to live longer and have the best possible quality of life. It will be achieved by making sure:

- people are empowered to stay well and get the help they need closer to home
- the health system caters for a range of complex needs
- there is greater access and better experiences for those who have traditionally not been well served, including Māori, Pacific and disabled people
- the most is made of technology and innovative ways of working are developed
- the system reinforces Te Tiriti principles and ensures a partnership approach better addresses Māori health needs and leads to better health outcomes
- the health sector workforce is supported, equipped and enabled to keep people healthy and well.

What will this mean for New Zealanders?

Here are just a few examples of the changes expected from the reform:

- There will be a greater range of care and support available for people in their local communities, with more care provided outside of hospitals.
- Services such as general practice, well-child teams, pharmacists, district nurses, dietitians, physiotherapists and hauora Māori providers will work more closely together to respond to, and meet the needs, of people in their local communities.
- There will be more options for whānau to access kaupapa Māori and other appropriate services.
- Those with high or complex health needs will be able to get the services they require to help them get well sooner.
- There will be access to consistent and high-quality emergency and specialist healthcare, available to everyone in Aotearoa New Zealand, no matter where they live.

- More virtual and digital services will be available to support the system, such as phone and video consultation, offering people a wider range of personalised support in their homes and local communities.
- People will be encouraged to get involved in designing health and wellbeing services that work for them, and have real influence over the services they receive, through participation in local planning and the opportunity to engage in national consumer forums.

Is Health NZ and Māori Health Authority just going to be the amalgamation of DHB and Ministry of Health operational roles? How will things work differently for the benefit of NZ as a whole?

The reform is more than just a change in structure. It is about a fundamental transformation of some of the core components of our health system. It starts with giving effect to Te Tiriti and gearing the whole system towards improving equity. It will involve a shift to primary and community services, with tailored locality planning and increased access to integrated models of care.

The New Zealand Health Plan will set out the services people can expect, including those for Māori, Pacific and rural communities and for disabled people, and the system will be held to account in those priority areas.

How will the Māori Health Authority work?

The new Māori Health Authority will give Māori a strong voice in a system focused on improving disproportionate health outcomes.

It will provide an additional opportunity for Māori influence in how the health system needs to perform. Addressing health equity for Māori does not sit solely with the Māori Health Authority – it is the responsibility of all players in the system.

The Māori Health Authority will work with the Ministry of Health on national strategies and policy advice related to hauora Māori. It will work alongside Health New Zealand with a joint role and in a range of ways, like co-commissioning community health services, and kaupapa Māori services.

Meanwhile, it will work with Iwi-Māori Partnership Boards to ensure the voice of whānau and local Māori communities influence locality priorities and services.

What is a locality and what does it mean for the workforce?

A key part of the reform is looking at how health services can be provided and work better at a local level, through the development of a 'locality approach'. A locality is a geographic community, identified for the purposes of planning and delivering integrated health and wellbeing services. Localities will vary in size, typically covering populations ranging from 20,000 to 100,000 people, and will be set in ways that make sense for the communities they serve. Where appropriate, this may mean localities are aligned with council boundaries, iwi rohe, concentrations of particular population groups, or natural borders.

Localities create an opportunity to drive integration of care models and service delivery around local people. They also offer a platform to strengthen the focus on population health to address the wider lifestyle, environmental and socioeconomic factors that impact on people's health and wellbeing.

Work is underway on the overall design of localities and will inform the establishment of a small number of prototypes, which will take shape from early 2022. The prototypes will serve as a 'first wave' and will be an important way to refine the development of the locality model.

It's too early in the design phase to know how people across the locality, and health system, will work together. In principle, it should lead to more seamless care, better integrated models of care and a stronger focus on both community and the patient.

What are some of the key things the TU is working on?

The Transition Unit is set up as part of the Department of the Prime Minister and Cabinet. It is engaging across the health sector on a number of workstreams such as:

- Policy and legislation to create the new system
- Establishment of interim Health New Zealand and interim Māori Health Authority, including supporting the transfer of Ministry of Health functions
- Development of the future Public Health Agency and integrated public health service
- Development of the role and functions of the Māori Health Authority and Iwi-Māori Partnership Boards
- Pacific health
- Supporting DHBs to transition to the new system
- Data and digital enablement and development
- Development of the interim New Zealand Health Plan
- Development of new commissioning arrangements, design work on locality networks and the national hospital network

- Development of the NZ Health Charter
- Developing and embedding the consumer voice in the new system
- Funding including budget 2022 and capital settings
- Accountability and monitoring arrangements

The Transition Unit provides updates on its work through a regular newsletter which you can subscribe to on the [Future of health website](#)

What does the new structure and operating model look like?

The interim entities of Health New Zealand and the Māori Health Authority will be responsible for developing their structures and leadership teams. This will be communicated more as it is developed.

What entities are impacted by the health reforms? What will it mean for my role?

The health reform will make structural changes to the 20 DHBs, the seven shared service agencies (Health Alliance, Health Source, Health Share, Central TAS, Northern Region Alliance, South Island Alliance and Health Partnerships) and Te Hiringa Hauora/ Health Promotion Agency.

The reforms will also alter some functions of the Ministry of Health.

For staff currently working for DHBs, the Public Health Units and the shared service agencies, you can expect to transfer to the new entities and can continue to focus on doing the great work you do now, in the new system.

The new health system will need more, not fewer, people working in a variety of roles, including administrators, cleaners, nurses, doctors or orderlies.

We will also continue to need leadership at all levels of the health system, including in our hospitals.

I work in one of the shared services agencies, when will we know what is happening to my agency?

The functions provided by the shared services agencies will transfer to Health NZ, but decisions on the precise model (including whether distinct agencies or subsidiaries are maintained and how they support regional divisions) will be made by Health NZ.

I work at Te Hiringa Hauora/ Health Promotion Agency, when will we know what is happening to my agency?

The interim entities of Health New Zealand and the Māori Health Authority will be responsible for developing their structures and leadership teams. This will be communicated more as it is developed.

I work at the Ministry of Health, when will I know if I am moving to a role in Health NZ?

No decisions have been made yet but if you have any questions please contact the Ministry of Health via email: change@health.govt.nz

The health workforce is struggling in terms of retention and resilience. Will the reforms ensure the health workforce is strengthened and supported through this change process?

There is commitment to making sure the health workforce is supported through any changes. The Transition Unit is working closely with DHBs, unions and other providers and membership bodies to provide as much information as possible on progress and timelines, acknowledging there is uncertainty with change.

One of the key workstreams within the Transition Unit is the development of the NZ Health Charter, which will set out the shared values, standards, expectations and ways of working within the national health system. A key focus is on the wellbeing of staff and being safe in their work environment. There will be more on this next year beginning with a national roadshow in early 2022.

What can we expect to see from the Transition Unit over the coming months?

The Transition Unit has developed a timeline that sets out key milestones planned for the coming months. This will be kept up to date regularly – feedback is welcome on other aspects of the reform programme that you consider important to receive more information on.

Where can I find out more?

The Future of health website will be regularly updated with news and information.

You can also sign up to receive the newsletter that outlines key progress and milestones on the Transition Unit's work programme on the [Future of health website](#)

You should also expect to see information at your workplace or to receive updates via regular communication channels.