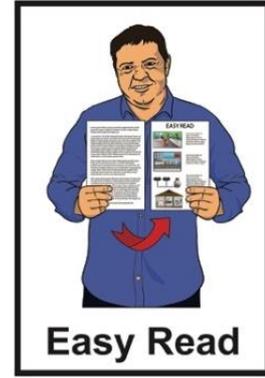




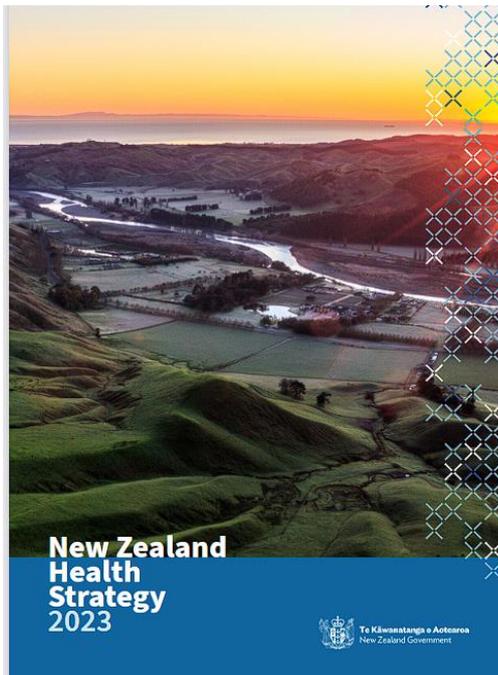
Te Kāwanatanga o Aotearoa
New Zealand Government



MINISTRY OF HEALTH



Summary of the New Zealand Health Strategy 2023



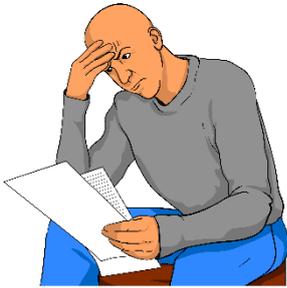
Published: January 2024

Before you start



This is a long document.

It can be hard for some people to read a document this long.



Some things you can do to make it easier are:



- read it a few pages at a time
- set aside some quiet time to look at it
- have someone read it with you to support you to understand it.



What you will find in this document

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About this document



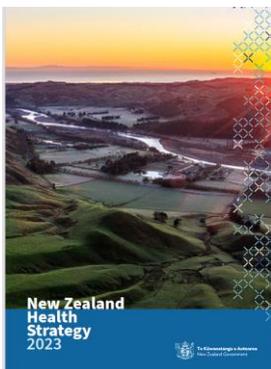
This Easy Read document is a **summary** of a document written by Manatū Hauora – Ministry of Health.

We / our in this document means Manatū Hauora – Ministry of Health.

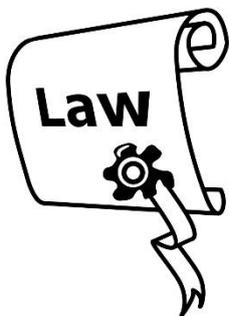


A **summary** is:

- shorter than the full report
- tells you the main ideas.



This is a summary of the **New Zealand Health Strategy 2023**.



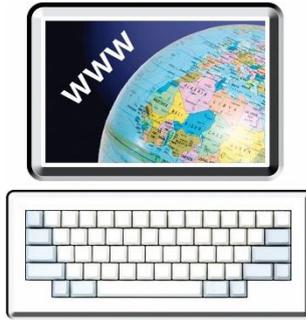
The **New Zealand Health Strategy 2023** says how the Government will work over the next 10 years to make the:

- health of New Zealanders better
- **wellbeing** of New Zealanders better.

Wellbeing means how well someone:

- feels
- lives.

The New Zealand Health Strategy 2023 is part of a group of documents written under the Pae Ora (Healthy Futures) Act.



You can find out more about the Pae Ora (Healthy Futures) Act on the Ministry of Health website at:

<https://bit.ly/3TdfnY0>

The full strategy can be found on the Ministry of Health website at:

<https://bit.ly/4arqB1A>



These websites are not in Easy Read.

Our vision



Our **vision** for **the future** is to make sure all New Zealanders have **pae ora / healthy futures**.

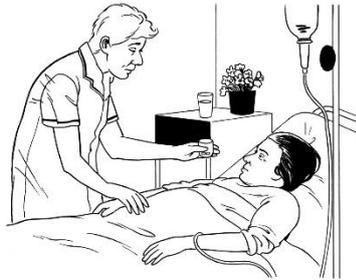


A **vision** is like a **goal** for what we want the future to look like.

Goals are things we want to do.



The future means any time after right now.



Pae ora / healthy futures is a future where all New Zealanders live lives:

- that are long
- where they do not get sick very often.

We need to look at all the things to do with the health of New Zealanders like how:

- services the Government pays for like hospitals work
- to get better health for people.
- to support whānau / families
- whānau / families can support good health and wellbeing

We also need to look at how health and wellbeing changes because of where people:



- live
- work
- do things they enjoy.



For our vision to work we need to work on 2 of our biggest goals.

These goals are to have:



- better **health outcomes** for all New Zealanders
- **health equity** for groups who often have worse health outcomes.



Some of the groups who often have worse health outcomes are

- Māori people
- Pacific people
- disabled people.



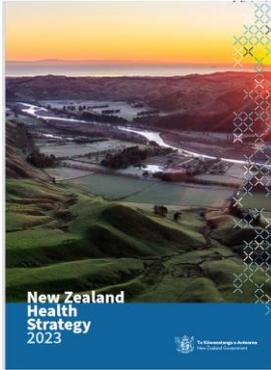
Health outcomes are the things that happen because of how our health is taken care of by:

- ourselves
- others
- the health system.



Health equity means that everyone has the same chance to have good health.

What makes up the New Zealand Health Strategy?



The New Zealand Health Strategy has 4 parts.

Part 1 is the vision for the future of health in Aotearoa New Zealand that says what the:

- hard things to do are
- chances to do good things are.



Part 2 tells us how things are right now for:

- the health of New Zealanders
- New Zealand health services.

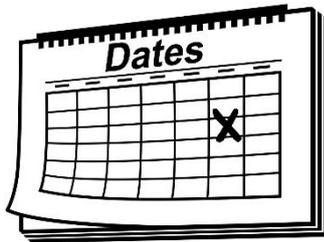




Part 2 uses what we have found out to tell us what we need to do next.



Part 3 tells us where change is needed the most so that we can do those things first.



Part 3 tells us what things need to change over the next 10 years.



Part 4 tells us what the next things we need to do to make these changes are.

What people have told us



We have been told by New Zealanders what we need to do as part of the Health Strategy.



We have been told that:

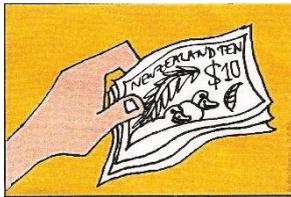
- listening to people is important in finding out how to change the health system
- we need to do things that look at making the health and wellbeing of New Zealanders better
- changing how people think is an important part of changing health outcomes
- **barriers** to services need to be taken away.





Barriers are things that stop people:

- getting health care
- using health care services.



Barriers can be things like not having:

- enough money to go to the doctor
- information in a way you can understand it
- health care close to where you live.

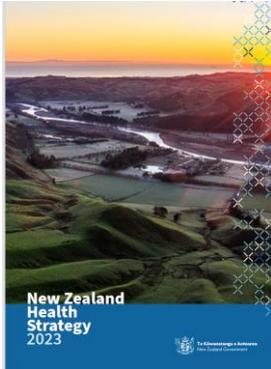


We have also been told that we need to quickly find new ways:

- to provide services
- for our staff to work.



Priority areas



There are 6 **priority areas** as part of the New Zealand Health Strategy.

A **priority area** is an important thing we need to focus on first.



Priority 1: Voice at the heart of the system



More control will be given to:

- people
- whānau / families
- communities.





This control will be about:

- choices about health
- how their health services work.



Priority 1 means more things will be done to:

- make **co-design** better
- work together with people on ways to stop bad health outcomes before they happen.



Co-design is when people from different groups work together with the Government to make a service better.



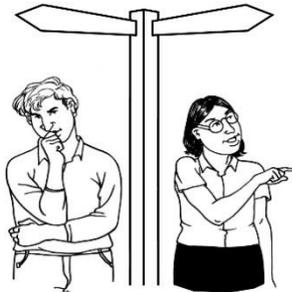
More things will be done to make health better for people:

- now
- in the future.



Priority 1 has 2 big goals for the next 10 years.

These 2 goals are:



- Goal 1: people having more choice and control
- Goal 2: people having great experiences when using:
 - o the health system
 - o health services.





Priority 2: Flexible, appropriate care



Flexible means that health care services can change to work in the ways that people need.



Appropriate means that health care services will work in ways that are good for people.



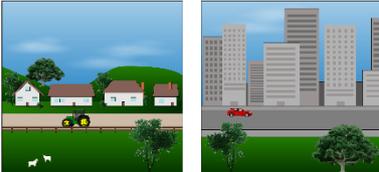
We need to make services that are designed to fit what people:

- need to care for their health
- think should happen.



Services need to:

- focus on stopping people from getting sick
- be closer to where people live
- support people who need extra support to:
 - o get to services
 - o use services.



Services should look closely at things like:

- the health of very young children
- creating services that work for everyone
- making services work in ways that can be used by disabled people.





We need to have more **responsive**:

- community services like district nurses who visit people at home
- primary services like family doctors.

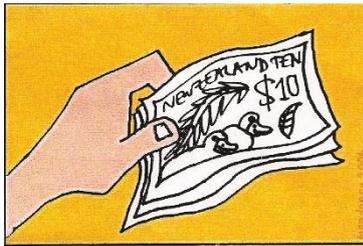


Responsive means that services will work to meet the needs of people who need support quickly.



Priority 2 has 4 big goals for the next 10 years.

These goals are:



- Goal 1: change how we spend money on the health system so that we can:

- stop people getting sick
- look closely at the health of very young children



- Goal 2: make health services meet:

- the needs of everyone
- **cultural expectations.**





Cultural expectations are the things that are normal for different groups of people.

Different groups will have different cultural expectations like:

- who makes choices for the family
- what things are ok and not ok.

The other goals for Priority 2 for the next 10 years are:

- Goal 3: people can get care when they need it
- Goal 4: health services will care for both:
 - o **physical health**
 - o **mental health.**



Physical health is health to do with your body like taking care of your body by exercising.



Mental health is health to do with your mind like learning how to feel calm if you feel upset.

Priority 3: Valuing our workforce



We need to see our health care staff like nurses as important people.



We also need to support making a **health workforce** that:

- can be used for many years in the future
- has lots of people from different backgrounds
- has people that are well trained to do their jobs
- has people that feel like they can do many things.





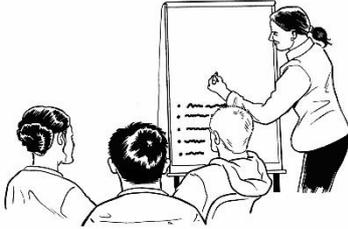
A **health workforce** means all the people who work as part of the health system like:

- doctors
- nurses
- pharmacists who get people their medicines
- physios that help people who got hurt to get moving again using special exercises.



Priority 3 looks closely at things like:

- seeing when people have the skills to do important things
- supporting people to learn how to do important things
- understanding how important our health workforce is
- creating a plan to hire more people with the right skills to work in our health workforce.



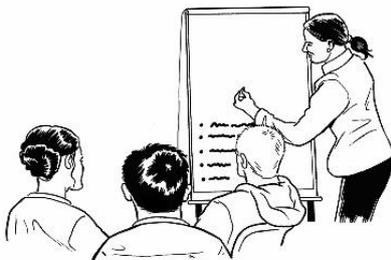
Priority 3 has 3 big goals for the next 10 years.



These goals are:



- Goal 1: the workforce will have lots of people from different backgrounds



- Goal 2: there will be more room for different:

- o ways to learn

- o ways to work



- Goal 3: the workforce will feel:

- o important

- o supported

- o happy in their work.



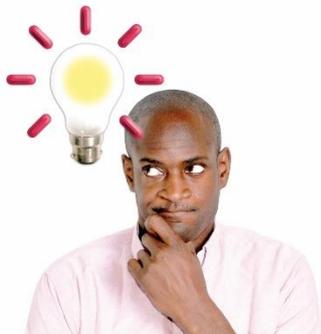


Priority 4: A learning culture

Priority 4 is about creating a health system that thinks it is important:



- to learn new things
- for people to get better at their jobs
- to check that we are doing the right things
- to come up with new ideas
- to learn what **research** tells us.



Research is when people like scientists ask lots of questions to find out more about something.



Priority 4 has 3 big goals for the next 10 years.

These goals are:



- Goal 1: the health system will care for people very well in ways that make sure services keep getting better



- Goal 2: new plans will help all parts of the health system to use:

- o new ideas

- o new technology

- o things we find out from research





- Goal 3: the health system will work through the whole of Aotearoa New Zealand to:
 - make sure good changes happen all the time
 - support creating new ways of doing things
 - support using new technology like:
 - devices like tablets for staff
 - different machines to keep people well.

Priority 5: A resilient and sustainable system



Resilient means being able to keep going even when things get hard.



Sustainable means doing things that make sure health services can keep going long into the future.



Priority 5 will make sure that our health system is ready to be used in the future too.



We will make the best use of what we:

- have now
- will get for the health system in the future.





We will focus on making sure:

- the health system is useful for the future
- the health system can do lots of things very well
- money spent on the health system is used well
- we can care for New Zealanders when they become old.





Priority 5 has 2 big goals for the next 10 years.

These goals are:



- Goal 1: the health system will be able to get through anything hard in the future



- Goal 2: the health system will make good choices on how to spend money so it can do lots of things very well.

Priority 6: Partnerships for health and wellbeing



Partnerships means the Government working together with other groups to do something.



Priority 6 is about building a health system that:

- is worked on by the whole Government
- is worked on by lots of different parts of the health system.



We need to work together to make sure New Zealanders have good:

- health
- wellbeing.





New Zealand Government



Priority 6 makes sure lots of people are working together like:

- communities
- Government
- the health system.

Priority 6 has 2 big goals for the next 10 years.

These goals are:

- Goal 1: the health system will lead changes that will give New Zealanders better health and wellbeing
- Goal 2: **Health entities** will work together with other parts of the health system to find the best ways to support the health and wellbeing of New Zealanders.



A **health entity** is an organisation that makes up part of the health system like Te Whatu Ora – Health New Zealand.



This information has been written by Manatū Hauora – Ministry of Health.

It has been translated into Easy Read by the Make it Easy Kia Māmā Mai service of People First New Zealand Ngā Tāngata Tuatahi.



The ideas in this document are not the ideas of People First New Zealand Ngā Tāngata Tuatahi.



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