



## Minister of Health

### Confirming the Government Policy Statement on Health for 2024-2027

10 July 2024

These documents have been proactively released by the Ministry of Health on behalf of the Minister of Health Hon Dr Shane Reti.

#### **Title of Cabinet paper:**

- Confirming the Government Policy Statement on Health for 2024-2027

#### **Title of minutes:**

- CAB-24-MIN-0179 Minute of Decision: Report of the Cabinet Social Outcomes Committee: Period Ended 24 May 2024
- SOU-24-MIN-0042 Minute of Decision: Confirming the Government Policy Statement on Health for 2024-2027

Some parts of this information release would not be appropriate to release and, if requested, would be withheld under the Official Information Act 1982 (the Act). Where this is the case, the relevant sections of the Act that would apply have been identified. Where information has been withheld, no public interest has been identified that would outweigh the reasons for withholding it.

#### **Key to redaction code/s:**

- S 9(2)(f)(iv) to maintain the constitutional conventions that protect the confidentiality of advice tendered by Ministers and officials.
- Out of scope of this proactive release.



# Cabinet

## Minute of Decision

*This document contains information for the New Zealand Cabinet. It must be treated in confidence and handled in accordance with any security classification, or other endorsement. The information can only be released, including under the Official Information Act 1982, by persons with the appropriate authority.*

### Report of the Cabinet Social Outcomes Committee: Period Ended 24 May 2024

On 27 May 2024, Cabinet made the following decisions on the work of the Cabinet Social Outcomes Committee for the period ended 24 May 2024:

Out of scope

SOU-24-MIN-0042

**Confirming the Government Policy Statement on Health for 2024-2027**  
Portfolio: Health

CONFIRMED

Out of scope

Diana Hawker  
for Secretary of the Cabinet



# Cabinet Social Outcomes Committee

## Minute of Decision

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### Confirming the Government Policy Statement on Health for 2024-2027

Portfolio                      Health

On 22 May 2024, the Cabinet Social Outcomes Committee:

- 1        **noted** that the Pae Ora (Healthy Futures) Act 2022 requires the Minister of Health to issue a Government Policy Statement on Health (GPS) to set priorities for improving health outcomes for all New Zealanders;
- 2        **noted** that the purpose of the GPS is to provide expectations for how health entities and the broader system must meet those priorities and objectives;
- 3        **noted** that the expectations in the GPS are aligned with the health targets;
- 4        **agreed** to the GPS attached to the submission under SOU-24-SUB-0042, including the following five priority areas and objectives:
  - 4.1      access: ensuring every person regardless of where they live in New Zealand, has equitable access to the health care and services they need;
  - 4.2      timeliness: ensuring New Zealanders can access the health care and services they need, when they need it, in a prompt and efficient way;
  - 4.3      quality: ensuring the health care and services delivered in New Zealand are safe, easy to navigate, understandable and welcoming to users, and continuously improving;
  - 4.4      workforce: having a skilled and culturally capable workforce who are accessible, responsive, and supported to deliver safe and effective health care;
  - 4.5      infrastructure: ensuring the health system has the digital and physical infrastructure it needs to meet people's needs now and into the future;
- 5        **noted** that the Minister for Mental Health and the Minister of Health are developing annual performance milestone measures for each of the Government's health targets and the mental health and addiction health system targets, and that these will be added to the GPS, pending further work to ensure they set a strong trajectory towards achieving the targets, while also being affordable;
- 6        **noted** that the Minister of Health will be receiving the New Zealand Health Plan 2024–2027 once it has been finalised and audited by Audit New Zealand;

- 7 **authorised** the Minister of Health to approve the final design for publication, final technical appendices including measures, and any further minor and technical changes and additions to the GPS prior to its publication.

Jenny Vickers  
Committee Secretary

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**Present:**

Rt Hon Christopher Luxon  
Rt Hon Winston Peters  
Hon David Seymour  
Hon Dr Shane Reti  
Hon Paul Goldsmith  
Hon Louise Upston (Chair)  
Hon Mark Mitchell  
Hon Tama Potaka  
Hon Nicole McKee  
Hon Casey Costello  
Hon Penny Simmonds  
Hon Karen Chhour

**Officials present from:**

Office of the Prime Minister  
Officials Committee for SOU  
Office of the Minister of Health  
Ministry of Health

PROACTIVELY RELEASED

**In Confidence**

Office of the Minister of Health

Cabinet Social Outcomes Committee

**Confirming the Government Policy Statement on Health for 2024–2027**

**Proposal**

- 1 This paper seeks Cabinet’s agreement to the attached Government Policy Statement on Health (GPS), which sets out priorities for improving health and mental health outcomes for 2024–2027.

**Relation to government priorities**

- 2 This proposal supports the coalition Government’s commitment to driving improvement in health outcomes.

**Executive Summary**

- 3 The GPS is a direction-setting mechanism required by the Pae Ora (Healthy Futures) Act 2022 (the Act) enabling the Government to specify its priorities and expectations for the publicly funded health sector over a three-year period. In particular, the GPS sets direction, and provides accountability, for the New Zealand Health Plan, developed by Health New Zealand for the same three-year period. My intent is to use the GPS to communicate my expectations, measure successes, and provide support for the health sector in delivering outcomes.
- 4 I have set out the following five priority areas in the GPS that underpin my vision for timely access to quality health care. Each priority area sets expectations for improvements to health services with a focus on prevention and early intervention, and bringing care closer to home:
  - 4.1 **Access:** ensuring every person regardless of where they live in New Zealand, has equitable access to the health care and services they need.
  - 4.2 **Timeliness:** ensuring New Zealanders can access the health care and services they need, when they need it in a prompt and efficient way.
  - 4.3 **Quality:** ensuring the health care and services delivered in New Zealand are safe, easy to navigate, understandable and welcoming to users, and continuously improving.
  - 4.4 **Workforce:** having a skilled and culturally capable workforce who are accessible, responsive, and supported to deliver safe and effective health care.
  - 4.5 **Infrastructure:** ensuring the health system has the digital and physical infrastructure it needs to meet New Zealanders’ needs now and into the future.

- 5 Across all priority areas, a key underpinning enabler will be working towards a financially sustainable and resilient health system to get best value for money from existing resources and from new investments, and to ensure the best use of resources over time.
- 6 The GPS provided for your confirmation builds on the strong outcome focus this Government has set for improving publicly funded services and a focus on prevention to reduce avoidable health costs.
- 7 I ask Cabinet to agree to the attached GPS that sets out priorities and expectations reflecting the Government's commitments to delivering a health service that is timely, high quality, evidence-based, and available to all New Zealanders.

**Addressing health system challenges with clear expectations, targets, and performance monitoring**

- 8 As the Government, we have agreed to prioritise the delivery of better health outcomes for all New Zealanders. To achieve this, we have introduced targets for health that will focus the system on the concrete outcomes that it needs to deliver for the people of New Zealand [CAB-24-MIN-0056], including faster cancer treatment, improved immunisation rates, and shorter wait times for first specialist assessments and elective treatments.
- 9 The objectives and expectations in the GPS build on the health targets to support the successful delivery of these targets. They also reflect my intent to address five non-communicable diseases of cancer, diabetes, respiratory disease, cardiovascular disease, and poor mental health, which together account for around 80% of deaths from non-communicable diseases in New Zealand and considerable health loss experienced by New Zealanders.
- 10 The GPS also reflects the Minister for Mental Health's priorities for mental health, addiction and suicide prevention and includes five associated mental health and addiction targets as key measures to set clear performance expectations within the health system.

**Priority areas for action and expectations for each priority set out in the GPS 2024–2027**

- 11 Over the next three years, the focus for the health system will be to deliver our vision of timely access to quality health care. Health services must improve their accessibility, choice of services, timeliness, and quality, to better meet people's immediate health needs. This focus is also reflected in the five health targets and five mental health targets.
- 12 I note that the health system faces challenges and that the next few years will be a period of building resilience and maturing for the system. With this in mind, the expectations and measures set in the GPS are intended to strike a balance between feasibility and the Government's ambitions for health.
- 13 The five priorities have been identified as key drivers of improvement in health outcomes and experiences for New Zealanders. They are distinct but interconnected

and reinforcing. **Table 1** below summarises the changes I expect to see for each priority area and expectations for health entities to deliver on.

**Table 1: GPS 2024–2027 priority areas and corresponding expectations**

| Priority and objective  | Changes expected over the next three years include:   | Expectations for health entities include:  |
|---|---|--|
| <p><b>Access</b></p> <p>Regardless of where they live, New Zealanders have equitable access to the health care and services they need</p>   | <ul style="list-style-type: none"> <li>• Improved access to, and choice of primary and community care services</li> <li>• Emergence of new and expanded models of care in primary and community-based settings</li> <li>• Increased access to online health services (including telehealth), communication, information, transport, and accommodation assistance</li> </ul>       | <ul style="list-style-type: none"> <li>• Improve immunisation rates</li> <li>• Expand the choice of whānau-centred and holistic maternity and early years' services</li> <li>• Expand access to community-based supports for prevention and management of non-communicable diseases, including kaupapa Māori and Pacific-led options</li> <li>• Faster access to medicines and pharmaceuticals</li> </ul>                          |
| <p><b>Timeliness</b></p> <p>People can access care and services in a prompt and efficient way</p>   | <ul style="list-style-type: none"> <li>• A stronger focus on prevention to reduce avoidable hospitalisations</li> <li>• Reduced waiting times for appointments, operations, and emergency care</li> <li>• Faster access to primary and community health care services including mental health and addiction services</li> <li>• Improved cancer management</li> </ul>             | <ul style="list-style-type: none"> <li>• Ensure access to general practice services and mental health and addiction services within a reasonable timeframe</li> <li>• Diversify entry points into primary and community healthcare</li> <li>• Ensure timely access to cancer services through waitlist management and targets</li> </ul>   |
| <p><b>Quality</b></p> <p>Health care and services are safe, easy to navigate, welcoming to users, and are continuously improving</p>  | <ul style="list-style-type: none"> <li>• A continuous focus on improving the benchmarking of quality care and evaluation of care</li> <li>• Support for strong clinical leadership and effective partnerships across health organisations and people with lived experience, including disabled people</li> </ul>  | <ul style="list-style-type: none"> <li>• Develop system functions and settings to support the rapid adoption of new, evidence-based technologies, research findings, and innovation</li> <li>• Strengthen pathways for utilising patient voice across the system, including IMPBs playing a key role in advocating for whānau voice to inform the commissioning, design, and delivery of higher quality health services</li> </ul> |
| <p><b>Workforce</b></p> <p>Professionals are skilled and culturally capable workforce who are accessible, responsive, and supported to deliver safe and effective health care</p> | <ul style="list-style-type: none"> <li>• A focus on addressing critical health workforce shortages and gaps in cultural competency</li> <li>• Workforce are retained and incentivised to work within all communities and settings, particularly geographically isolated areas</li> <li>• Strengthened health system leadership at local, regional, and national levels</li> </ul> | <ul style="list-style-type: none"> <li>• Introduce more domestic training pathways and better recognise people with international medical qualifications</li> <li>• Improve recruitment and retention of the health workforce</li> <li>• Develop leadership programmes, including investing in aspiring Māori health leaders and rangatahi, as well as Pacific and disabled people</li> </ul>                                      |
| <p><b>Infrastructure</b></p>  | <ul style="list-style-type: none"> <li>• A greater focus on national planning</li> </ul>  | <ul style="list-style-type: none"> <li>• Have in place the structures and</li> </ul>   |

|  |  |   |
|--|--|---|
| <p>The system is resilient and has the digital and physical infrastructure it needs to meet people’s needs now and into the future</p> | <p>for asset management and infrastructure investment</p> <ul style="list-style-type: none"> <li>• Committed funding with competent delivery</li> <li>• Digital solutions to enable care closer to home</li> </ul> | <p>operating models to support investment planning and delivery</p> <ul style="list-style-type: none"> <li>• Enable flexible and adaptive decision-making on emerging technologies such as precision health, nanotechnology, and artificial intelligence</li> </ul> |
|--|--|---|

14 Across all priority areas, a key underpinning enabler will be working toward a **financially sustainable and resilient health system**. In the short term, this will involve a strong focus on fiscal responsibility, including ensuring that the health system delivers commitments within budget. This includes identifying and releasing cost savings and efficiency gains, and improvements in financial management and capability across the system. It also includes year-on-year improvements in productivity, and improved reporting on productivity over the three-year cycle.

**Focus on prevention, five modifiable risk factors, and five non-communicable diseases**

15 Prevention is a focus that needs to sit across all health service delivery. I believe that a greater focus across the system on prevention and early intervention will reduce pressure on the health system and improve patient outcomes.

16 To strengthen prevention in the health sector, the GPS expects the health sector to support improved health outcomes with a focus on groups with the highest health needs. This includes ensuring early access to preventative interventions (e.g., timely access to screening, immunisation, and early intervention) and shifting decision-making and resources in the system closer to communities.

17 New Zealand’s causes of death and disability are dominated by non-communicable conditions such as diabetes, heart disease, stroke, cancer, back pain, falls, and dementia. Mental health and addiction issues at a population level are also increasing. Many of these health conditions and their impacts are preventable.

18 Over the next three years, I want to see the health system increase its focus on addressing the non-communicable diseases of cancer, diabetes, respiratory disease, cardiovascular disease and poor mental health. I also want to see continuing reductions in five modifiable risk factors: smoking, alcohol consumption, poor nutrition, lack of exercise, and adverse social and environmental factors that lead to poor health outcomes.

**Focus on mental health and addiction**

19 With the establishment of a new mental health portfolio, this Government has signalled that improving mental health and addiction outcomes for New Zealanders is a priority area of focus. The Minister for Mental Health has identified the following priorities for mental health, addiction, and suicide prevention, which strongly align with my overarching priorities for the wider health system:

19.1 Increase access to mental health and addiction support.

19.2 Grow the mental health and addiction workforce.



- 19.3 Strengthen the focus on prevention and early intervention.
- 20 Specific expectations and objectives set out in the GPS for each priority are intended to support the Minister for Mental Health in achieving his vision for mental health. This includes targets as key measures within the GPS to drive improved performance within the health system. These targets focus on faster access to primary and specialist mental health and addiction services, shorter stays in emergency departments for mental health and addiction related needs, an increase in the mental health and addiction workforce, and strengthening the focus of mental health spending on prevention and early intervention.

### **Tracking progress against our expectations and targets**

- 21 We need to be able to track movement against our expectations and targets. To fulfil this, the GPS includes a health system monitoring framework, and each priority area within the GPS contains a set of performance measures to ensure accountability from agencies for delivering against the priorities and expectations in the GPS.
- 22 The inclusion of a health system monitoring framework is intended to create a shared understanding of the health system and reflect our short, medium, and longer-term objectives and outcomes. My intent is for the framework to be used with a broad range of audiences, including the public. At its highest level, it can be used to explain our objectives for improving health outcomes and how all the parts of the health system are working together. Measures for the framework are being developed in phases, starting with those included in the GPS.
- 23 I am also committed to making sure that effective processes and measures are in place to monitor progress against the five health targets announced on 8 March 2024 [CAB-24-MIN-0056] and the mental health and addiction health system targets which are set out in the Cabinet paper *Mental Health Portfolio priorities*.
- 24 The Minister for Mental Health and I have instructed the Ministry of Health to develop annual performance measures and milestones for each of these targets. These will be incorporated into the GPS and used to drive progress towards the targets. We are taking time to set these milestones, as we want to be sure that they strike the right balance in terms of setting a strong trajectory towards achieving the targets, while also being affordable.

### **Building the GPS into delivery**

- 25 The GPS is our primary mechanism for signalling the Government priorities and expectations for the health system over the next three years. HNZ are now developing the New Zealand Health Plan 2024–2027 (NZHP) as the primary vehicle to translate our vision for health outcomes into priorities and activities over the next three years.
- 26 HNZ is currently developing the NZHP, which will provide a costed plan to give effect to the GPS within agreed funding parameters. The NZHP will be audited by Audit New Zealand, and I will be receiving the finalised plan once it has been through the audit process.

**Working across government**

- 27 Acknowledging that the health system is an important contributor to outcomes in other portfolio areas, and vice versa, my focus for the next three years will be to build a health system that is operating more effectively and providing more timely care so that it can support those outcomes. There are a number of broader determinants of health, such as housing quality, employment, and income, which require action from across government and could make a substantive difference for New Zealanders with high health needs.
- 28 In line with this, implementing a number of the GPS expectations will require cross-agency partnerships with other parts of the public sector. For example, expectations that involve increasing the size and capacity of the health workforce will require cross-agency efforts between the Health and Education portfolios.
- 29 I expect the Ministry of Health and health entities to play an active role in cross agency work programmes to support the Government's wider priorities.

**Cost-of-living Implications**

- 30 This paper has no cost-of-living implications.

**Financial Implications**

- 31 The NZHP being developed by HNZ will provide a costed plan to give effect to the expectations in the GPS within agreed funding parameters:
  - 31.1 within forecast baseline funding, including cost pressure funding and new investments agreed through Budget 2024, and/or
  - 31.2 through reasonable reprioritisation of existing resources, and/or
  - 31.3 by increasing efficiencies and/or productivity to the extent feasible.
- 32 The costed plan will include the necessary actions to meet milestones towards targets and to give effect to the expectations in the GPS, including determining the scale and pace of change over the three-year period. As mentioned above, I will be receiving the NZHP once it has been audited by Audit New Zealand.
- 33 It is my expectation that there will be no out-of-cycle funding requests from the proposals in this paper ahead of Budget 2025. Financial sustainability is a key underpinning enabler across all priorities of the GPS, and the GPS sets clear expectations about the delivery of actions set out in the NZHP on time and within budget.
- 34 s 9(2)(f)(iv) [REDACTED]
- 35 The Government's fiscal strategy requires tight fiscal policy in the near term, and the strategy for managing expenditure includes a culture of responsible spending and

improving the efficiency and productivity of spending. s 9(2)(f)(iv)

### **Legislative Implications**

36 This paper has no legislative implications.

### **Climate Implications of Policy Assessment**

37 This paper does not require a Regulatory Impact Statement or Climate Implications of Policy Assessment (CIPA).

### **Population Implications**

38 The GPS expects the health entities to focus on improving health outcomes for all New Zealanders, especially for population groups with high needs. The focus on improving outcomes includes being responsive and ensuring that the services publicly funded fit the needs of different communities and population groups to ensure the services are effective.

39 The GPS, in line with the Act, includes the Government's priorities for engaging with, and improving health outcomes, for Māori, aligned with the five strategic priorities for Māori health as set out in the Māori Health Strategy | Pae Tū. These priorities are leadership, a whole of government commitment to Māori health, growing the workforce, enabling culturally safe preventative care, and ensuring accountability for system performance. Partnerships with IMPBs, iwi, whānau, and other Māori organisations will be strengthened to design approaches that address priority areas for Māori. This will be reinforced with a continued focus on Māori health monitoring at all levels of the system.

40 The GPS, in line with the Act, also contains the Government's priorities for improving health outcomes for Pacific peoples, disabled people, women, and people living in rural communities.

### **Human Rights**

41 This paper does not have human rights implications.

### **Use of external Resources**

42 No external resources have been used in the preparation of the proposals in this paper.

### **Consultation**

43 The following agencies were consulted on this paper: Accident Compensation Corporation (ACC), Ministry of Education, Ministry of Social Development (including the Office for Seniors), Ministry for Ethnic Communities, Oranga Tamariki – Ministry for Children, Ministry for Women, New Zealand Police, Whaikaha - Ministry of Disabled People, Ministry for Pacific Peoples, Te Puni Kōkiri,

Department of Corrections, Ministry of Justice, Tertiary Education Commission, the Treasury, Ministry of Business, Innovation and Employment, Ministry of Housing and Urban Development, Ministry for Primary Industries. The Department of the Prime Minister and Cabinet were informed.

### Communications

- 44 I plan to publish the GPS once it has been tabled in the House of Representatives, and before 1 July 2024 as required by the Act.

### Proactive Release

- 45 The Ministry of Health will proactively release this paper and its associated minutes within 30 days in line with standard practice, subject to redactions as appropriate under the Official Information Act 1982.

### Recommendations

The Minister of Health recommends that the Committee:

- 1 **note** that the Pae Ora (Healthy Futures) Act 2022 requires the Minister of Health to issue a Government Policy Statement on Health (GPS) to set priorities for improving health outcomes for all New Zealanders;
- 2 **note** that the purpose of the GPS is to provide expectations for how health entities and the broader system must meet those priorities and objectives;
- 3 **note** that the GPS expectations are aligned with the health targets;
- 4 **agree** to the proposed GPS, including the following five priority areas and objectives:
  - 4.1 **Access:** ensuring every person regardless of where they live in New Zealand, has equitable access to the health care and services they need
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  - 4.4 **Workforce:** having a skilled and culturally capable workforce who are accessible, responsive, and supported to deliver safe and effective health care
  - 4.5 **Infrastructure:** ensuring the health system has the digital and physical infrastructure it needs to meet people's needs now and into the future;
- 5 **note** that the Minister for Mental Health and I are developing annual performance milestone measures for each of the Government's health targets and the mental health and addiction health system targets, and that these will be added to the GPS pending further work to ensure they set a strong trajectory towards achieving the targets, while also being affordable;

- 6 **note** that I will be receiving the New Zealand Health Plan 2024–2027 once it has been finalised and audited by Audit New Zealand;
- 7 **authorise** the Minister of Health to approve the final design for publication, final technical appendices including measures, and any further minor and technical changes and additions to the Government Policy Statement on Health prior to its publication.

Authorised for lodgement

Hon Dr Shane Reti

Minister of Health

PROACTIVELY RELEASED