

Public Health Advisory Committee

Minutes of Meeting

Meeting: 16 April 2026, 9:00am to 1.00pm

Location/platform: Online

Attendees

PHAC Members: Dr Caroline McElroy (Chair), Peter Crampton (Deputy Chair), Paula Lorgelly and Kaaren Mathias

Secretariat: Clair Mills, Althea Acuin

Guests: Andrew Forsyth

Apologies: Matire Harwood

Opening of meeting

- Opening karakia by Dr Caroline McElroy.
- No new conflicts of interest to register.
- Welcomed Althea to PHAC and brief introductions.
- Members approved the previous March (5/3/26 & 19/3/26) meeting minutes.
 - General feedback that previous minutes have been the right balance of detail and summary.

Actions:

Nil

Session One – “Shaping Primary Care” Report

PHAC discussed feedback from external reviewers and the major issues identified.

- Overall, largely positive feedback from external reviewers on many aspects of the report.
- Key points that were acknowledged and need to be addressed include:
 - Concerns about disproportionate representation in stakeholders consulted and in the process of report development (N.B. List incomplete

and further discussions with NPs and allied health planned, and Pacific providers).

- Lack of specific Pacific models of care or perspectives within the report, despite large health inequities for Pacific peoples and disproportionate impacts.
- Scepticism around the capacity of the proposed primary care system changes to deliver equity for Māori, and continued inequities in care and outcomes.
- General support for the goal of free for all at the point of use, with mixed responses from GPs. Members agreed to retain this goal, but signal that 'free for all at the point of use' can be delivered incrementally; funded programmes should be adequately resourced and free at point of care.
- Refer to Rand report to address concerns re uncontrolled demand.
- Discussion on whether specific age groups or services/programmes should be prioritised to achieve the above goal over time. Any recommendations around this will need to be evidence-based.

Actions:

- Secretariat to revise this section as discussed.

PHA update from Andrew Forsyth

- Recommends the final primary care report is sent to the Minister by mid-June. Note the start of pre-election period of restraint is 7 August 2026.
- No feedback from Minister around the 2026/27 work programme, new PHAC member appointment and PH spend reports.
- Matire Harwood's term with HMAc (linked with her role in PHAC) is expiring but a temporary arrangement may be put in place to extend her term.
- Update on the internal restructures in the PHA/MoH:
 - New Group name (previously Directorate) for PHA is Public Health Agency and Mental Health (PHAMH) Group. The PHAC secretariat now sits within the new Strategy and Policy Group.
 - No group manager has been appointed yet.

Actions:

PHAC to finalise Primary Care report for Minister before online meeting 23 June.

Session Two – “Shaping Primary Care” report continued

PHAC continued discussion on feedback from reviewers and the proposed changes according to proposed actions, including:

- Report stresses Te Tiriti principles and pro-equity approaches but should be strengthened by having greater focus on this in introduction; explicitly linking Te Tiriti principles to each of the actions; referencing Pacific Health equity frameworks or models of care etc.
- Position the report and primary care definition within the frame of the WHO Primary Health Care approach.

Actions:

PHAC Secretariat to:

- Revise executive summary and introduction to include explicit mention of equity, Te Tiriti and reframe primary care definition within WHO Primary Health Care approach.
- Weave Te Tiriti principles into each of the actions.
- Reference specific Pacific primary care models
- Change wording in Action 1 to reaffirm the current strategy and clearly explain that PHAC recommends an action plan.
- **Send revised version to PHAC by 22 April for feedback before editing.**

Session Three – “Shaping Primary Care” report continued

Continued discussion on feedback and proposed changes according to each action, including:

- *Action 2 System Refresh*: make the key differences between the PHOs and proposed PCHNs clearer
 - Discussion around the preferred organisational option of primary care. PHAC recommends that option 1 should be implemented with caveats recognising the value of local-based commissioning.

- The table with the analysis of all three options to be kept, explicitly recommend option 1 in executive summary and make statement in option 1 of the Crown's Te Tiriti obligations in its commissioning function.
- *Action 3 Invest in prevention:* To address feedback re GP's capacity for increased prevention role.
- *Action 4 Resource adequately:* Discussion on capitation, pay equity, working conditions and funding options for multimorbidity management and prevention, including programme funding and salaried staff.
 - To frame recommendations to emphasise that care should be free at the point of use, and that preventive services should remain free for users. At the same time, primary care providers must be appropriately remunerated and adequately resourced.
 - Proper funding enables primary care to expand preventive initiatives, which will be easier to implement when it is supported by sustainable income. To reference the paper by Bradford et al., *The seen and unseen work of general practice: a national diary study of New Zealand General Practitioners*. Could also look at the benefits of incentivising continuity of care (e.g., UK's neighbourhood health framework).
- *Action 5 Ownership:*
 - Broad agreement from reviewers
 - Address feedback around clinician for-profit ownership.
- *Action 6 Local planning:* Strong support for local planning and focusing on building local provided and community capacity so that communities can actively participate rather than rely on PHCNs.
- *Action 7 Infrastructure:* To clarify infrastructure loans would not be available to corporates; strengthen digital and data section.
- *Action 8 Workforce:* Discussion on the need to explicitly specify equity targets within the workforce plan – need for a workforce that reflects the community that it is serving.

Actions:

- PHAC Secretariat to make changes to the report as detailed above and send report for PHAC members' review.
- PHAC members to:
 - Review changes to report **by 30 April** before it is sent for editing.

Draft CCA report, exploratory workforce modelling & timeframes

- The draft report of the cost-consequence analysis (CCA) on diabetes prevention has been received and feedback given by the Secretariat to NZIER.
- Paula will review and provide any additional comments.
- Althea to send final CCA report to PHAC for review once received (expected 30 April). This will be a standalone appendix to the primary care report.
- Exploratory workforce modeling with Sapere/Collaborative Aotearoa: the time and motion studies data has been collated by the Secretariat and a basic analysis done and sent back to collaborating practices for review and comment. Along with demographic and workforce data it is also being used for some exploratory modelling for future primary care by Sapere. This is expected to be finished at the end of May and key findings will be incorporated as relevant into the workforce section of the report by beginning of June.

Primary care report timeframes and actions:

- Clair to make changes to the report as detailed above before 22 April.
- PHAC members will need to review changes and if agree, Althea to send to MoH publication staff for editing (if required).
- Althea to follow up infographics and potential images for the report.
- Early June – formatting and images to be finalised.
- Print out a physical copy for the Minister by 18 June.

Any other business

- A possible exercise for the PHAC members to do in a future meeting is to review the key values of the Committee (noting statements on equity and Te Tiriti established in 2023).
- Items for 18 June agenda: consider a brief assessment of the value of externally contracted reports (to invite Catriona Murray for this).
- The secretariat's work on the report was acknowledged.

Closing karakia by Dr Caroline McElnay.

Next meetings: **4th June 2026, 10am–12noon online**

18th June 2026, 9am–4pm, face to face in Wellington

23 June 2026, 4–4.30pm, online meeting with Minister