

Appendices

Appendix A – Terms of reference

Purpose

The Government has established a review into the New Zealand Health and Disability System (the Review). This review will identify opportunities to improve the performance, structure, and sustainability of the system with a goal of achieving equity of outcomes, and contributing to wellness for all, particularly Māori and Pacific peoples.

Background

The New Zealand Health and Disability System has many strengths, and intersects the life of every New Zealander. It is looking after New Zealanders well, especially when we are acutely ill or injured.

Overall, New Zealanders are living longer and healthier lives. However, the way the current system is operating means that many people, particularly those on low incomes, wait until they are sick, instead of accessing the care they need to stay well. Disparities of outcomes exist across the system, especially for Māori and Pacific peoples. In reviewing the New Zealand Health and Disability System we can identify opportunities to do more, and to address these inequities.

The system is under pressure, facing significant contextual change, and will need to operate very differently if it is to continue to deliver for New Zealanders. The rapidly changing global, societal and technological context within which New Zealand's Health and Disability System operates makes a review timely.

The current devolved Health and Disability System has a complex mix of governance, ownership, business and accountability arrangements. This complexity can get in the way of ensuring public money is spent, and invested, in a manner that provides health care to the public in a coherent and smart way.

Scope of Review

All New Zealanders should be able to aspire to improving levels of health and wellbeing. The goal for the New Zealand Health and Disability System, as currently set out in legislation is that it is strong, effective and delivers equitable health outcomes for all New Zealanders. The Review will investigate where the system is not currently achieving this core equity goal, and understand the drivers of this (whether it be service delivery, or the broader social determinants of health). The Review will focus on the future needs of New Zealanders and make recommendations on changes to the Health and Disability system to ensure all New Zealander's have confidence that the system will assist them and their families to live well.

The Review will consider the overall function of the Health and Disability system to ensure the system is better balanced towards wellness, access, equity, and sustainability.

The Review will provide a report to the Government, including recommendations, on:

- ▶ A sustainable and forward-looking Health and Disability System that is well placed to respond to future needs of all New Zealanders and which:
 - Is designed to achieve better health and wellness outcomes for all New Zealanders
 - Ensures improvements in health outcomes of Māori and other population groups
 - Has reduced barriers to access to both health and disability services to achieve equitable outcomes for all parts of the population
 - Improves the quality, effectiveness and efficiency of the Health and Disability System, including institutional, funding and governance arrangements.
- ▶ How the recommendations could be implemented.

In examining the points above, the Review will consider:

- ▶ Future needs of the population and how they may differ from the issues seen today (such as the impact of population change and growth, upon service demand, workforce availability and risks that may need to be managed)
- ▶ Importance of primary health care as the foundation of a person-centred Health and Disability system
- ▶ The role of public health and prevention in supporting health and wellness
- ▶ Contribution of and the interaction between health and other social sector agencies in supporting health and wellness
- ▶ Capacity of the Health and Disability system to deliver the appropriate level of care and ensure the care is safe and high-quality
- ▶ Distribution of services, including current investment practices and future infrastructure needs
- ▶ Optimising workforce (development, scopes of practice, inter-professional collaboration, retention, cultural competency, and distribution)
- ▶ The role of data and evidence in informing policy development, investment decisions, and provision of services
- ▶ Potential opportunities and risks associated with current and emerging technologies and the implications for, including but not limited to, delivery of services, clinical tools and settings, communication and transport
- ▶ The Government's overall Fiscal Strategy.

The Government expects that the Review will work alongside other reviews, and consider their outcomes and findings as appropriate in preparation of the recommendations of the Review.

The following areas are outside the scope of the Review:

- ▶ The ACC scheme itself (although the relationship between the Health and Disability system and the ACC scheme is within scope)
- ▶ PHARMAC (although the relationship between the Health and Disability system and PHARMAC is within scope)
- ▶ Private health insurance (although its interaction with demographic drivers of health care need is within scope)
- ▶ The MidCentral Prototype (for Disability service delivery) that is currently underway (however, learnings from this work will be considered during the development of the Review's recommendations).

Reviewers

The review will be undertaken by an expert review panel (the panel), comprising of a Chair and up to six Panel members. The expert review panel (the panel) will be supported by a secretariat of officials and it will be able to seek independent advice and analysis on any matter within the scope of its Terms of Reference.

Process and Timing

The panel will be expected to engage with stakeholders including DHBs, PHOs, other health providers, health professionals, and the public in developing its recommendations. Engagement with the public will enable consumers, family and whānau to be included and heard.

The panel should have its first meeting no later than August 2018, issue an interim report to the Minister of Health no later than 30 August 2019, and a final report to the Minister of Health no later than 31 March 2020. These dates may be varied with the consent of the Minister of Health.

Appendix B – Māori Expert Advisory Group Statement on Māori aspiration

Within the next 20 years, whānau voice and rangatiratanga will drive New Zealand’s health system. Whānau, hapū and iwi will feel respected, valued, listened to and heard. Their health and wellness needs will be met by an integrated network of virtual and physical services. Māori thinking and approaches will inform these services.

- ▶ All health services will be viewed by whānau as agile, barrierless, and an easy pathway to improved health and greater wellbeing. All health stakeholders prioritise whānau needs, preferences and aspirations as core parts of system and service delivery models. Whānau cultural and health strengths, resilience and capabilities are continuously built upon. Whānau have legitimate choice of high quality and outcomes-driven providers, at all levels of the health and disability system.
- ▶ The system has strong and interconnected partnerships with others that are engaged in addressing the social determinants of health. Cultural, social, environmental and economic partners work with the health system and Māori to address root causes of ill-health not just tackle symptoms.
- ▶ New Zealand’s health workforce is envied globally for its inclusive and partnered delivery culture. New Zealand has a system that is free of racism and is dominated by culturally safe and competent delivery practices. Whānau feel confident using the system as they see themselves represented in the workforce and all staff can work with Māori in a culturally enabling way. The workforce has a common purpose of achieving a system that delivers the highest quality of services for Māori.
- ▶ Māori intelligence and leadership are nurtured and grown at every level of the system; from clinical and population health through to governance, management, mātauranga, innovation and entrepreneurship. Māori have the authority to make decisions and set the direction for whole system and service delivery performance. Māori also have multiple ways to work in partnership with and as part of the system. There is full expression of rangatiratanga and mana motuhake; which are now foundational non-negotiables of New Zealand’s health and disability system.
- ▶ As there has been a substantial shift towards investment in prevention and early intervention, Māori access acute health services based on need and not as a substitute for or as a result of inequities linked to lack of access to other services.
- ▶ Whānau are living healthy and thriving lives, as Māori and as valued citizens of New Zealand. Māori enjoy equity of access, quality of care and outcomes. This is the norm for New Zealand.
- ▶ The New Zealand health and disability system is acknowledged as a global success, in particular for how the system embeds Te Tiriti o Waitangi. The system and Māori receive multiple requests for advice, guidance and leadership about how to achieve health equity for indigenous peoples, how to improve indigenous-defined wellbeing and how this contributes to a better Aotearoa New Zealand for all citizens.