



**National Council of  
Women of New Zealand**

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Wahine O Aotearoa

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## **Submission to the Ministry of Health on the Update of the NZ Health Strategy**

The National Council of Women of New Zealand, Te Kaunihera Wahine o Aotearoa (NCWNZ) is an umbrella group representing 288 organisations affiliated at either the national level or to one of our 20 branches. In addition to our organisational membership, about 260 women are individual members of branches. NCWNZ's function is to represent and promote the interests of New Zealand women through research, discussion and action. This submission has been prepared by the NCWNZ Health Standing Committee and its contributing members across the country

NCWNZ welcomes the opportunity to participate in this consultation process regarding updating of the New Zealand Health Strategy. In 2000, NCWNZ also made a submission to the Ministry of Health's New Zealand Health Strategy Document.

### **Challenges and opportunities**

- 1. Are there any additional or different challenges or opportunities that should be part of the background for the Strategy?**
  - 1.1. Providing health services to rural / isolated communities in provincial New Zealand is a challenge which should have a greater emphasis in the background for the Health Strategy. Currently there are some population groups receiving unequal access to health services they need.
  - 1.2. Technological changes have been rapid in recent years. There must be regular training of staff at all levels to ensure technology is used efficiently and effectively and most importantly SAFELY. The system is only fully efficient when operated properly, when information retrieved is accurate and when information is delivered when and where it is needed. For example: In Accident and Emergency departments where people are presenting with high needs.
  - 1.3. Spreading the strategy wider than merely for the health industry will be challenging and yet vital if the health of New Zealanders is to improve. Expecting individuals to take responsibility for and to improve their own health is a worthy ideal but expecting people to eat healthily through education alone is flawed. Education will not be enough. It is too simplistic to make assumptions that citizens will do what is good for them. They will only do what they can afford. People need to have sufficient income to ensure they are able to feed, accommodate and clothe themselves adequately. It may be

that government regulation has to be considered. (for example: allow only healthy foods available in schools, fluoridation of water) The downstream adverse health effects from obesity are too serious to simply leave the solution over to people to make “healthy choices”. Expecting companies to regulate sugar and fat laden foods and reduce sugar and salt in processed foods on a voluntary basis may not be enough and regulatory steps might also be necessary.

## The future we want

*So that all New Zealanders live well, stay well, get well, we will be people-powered, providing services closer to home, designed for value and high performance, and working as one team in a smart system.*

### 2. Does this statement capture what you want from New Zealand’s health system? What would you change or suggest instead?

- 2.1. Whilst our members consider the statement is a well-crafted statement, we are concerned that some of the very good concepts in this document are diminished by insincere sounding jargon. A much simpler statement such as “**All New Zealanders will have fair access to services for their health and well-being**” would be preferred. Health is not a commodity, yet terms used such as: ‘smart system’; ‘people powered’ and ‘high performance’ sound rather like commercial advertisements for ‘things’ or consumer goods.
- 2.2. What is needed is a medical service that delivers when and where it is needed, without long delays, cancelled appointments, wrong records tabled at appointments and with the opportunity to discuss treatments and patient future needs and requirements.

#### *Refreshed guiding principles for the system*

1. *The best health and wellbeing possible for all New Zealanders throughout their lives*
2. *An improvement in health status of those currently disadvantaged*
3. *Collaborative health promotion and disease and injury prevention by all sectors*
4. *Acknowledging the special relationship between Māori and the Crown under the Treaty of Waitangi*
5. *Timely and equitable access for all New Zealanders to a comprehensive range of health and disability services, regardless of ability to pay*
6. *A high-performing system in which people have confidence*
7. *Active partnership with people and communities at all levels*
8. *Thinking beyond narrow definitions of health and collaborating with others to achieve wellbeing*

### 3. Do you think that these are the right principles for the New Zealand health system? Will these be helpful to guide us to implement the Strategy?

- 3.1. These principles will be helpful as a guide for the New Zealand health system and they will be helpful as a guide for the implementation of the health strategy. The challenge for the Ministry of Health will now be the expectation of all New Zealanders that the health services do deliver on this strategy. As

long as these principles are acted upon and underpin the implementation of this strategy, there should be good outcomes.

### Five strategic themes

1. *People powered*
2. *Closer to Home*
3. *Value and high performance*
4. *One team*
5. *Smart system*

#### 4. Do these five themes provide the right focus for action? Do the sections ‘What great might look like in 10 years’ provide enough clarity and stretch to guide us?

- 4.1. The present system for health delivery certainly needs to be refocused.
- 4.2. While the five strategies are worthwhile, our members dislike the use of the word “theme”, which in our opinion is rather weak and infers a story or fairy-tale – not an image you would wish to project. Because we believe there is urgency in implementing aspects of the strategy, our suggestion is to replace “theme” with **“focus for action”**.
- 4.3. Our preference is for a **“people centred approach”** rather than a “people powered approach”. While not disagreeing with the general concept and appreciating that technology tools such as mobile devices, smartphones and wearable devices will be options into the future, personal attention from well trained and knowledgeable health professionals will continue to be the preferred choice for most people.
- 4.4. We agree with the direction outlined in the ten year vision that will encourage people to be more in control of their health through better access to relevant information when they need it and by making informed choices.

### Roadmap of Actions

#### 5. Are these the most important action areas to guide change in each strategic theme? Are there other actions that would be better at helping us reach our desired future?

- 5.1. The action areas covered in these documents are comprehensive. Our greatest concern is the delivery of health services to all New Zealanders. There are alarming gaps in the delivery of services which must be addressed in order to ensure all New Zealanders do have access to health services.
- 5.2. Barriers to service delivery which currently exist in rural communities and remote areas must be addressed and service upgraded and improved.
- 5.3. There is a need for more flexible hours and ease of access to health services for working parents who face difficulties in attending clinics and getting themselves and children to medical appointments within current open hours.

- 5.4. Accessing up to date digital communications might actually increase the gap between the well- off who have good digital access and those who have limited incomes. This is likely to be a particular issue for single parent families.
- 5.5. There is a gender gap with women retirees which needs to be considered. Women are living longer and because most women have had lower earning capacity during their working lives, many female retirees have access to a limited retirement fund. Their ability to access health services may be compromised because of their limited income. For example – transport and access to digital communications

## Turning Strategy into Action

### 6. What sort of approaches do you think will best support the ongoing development of the Roadmap of Actions? Do you have ideas for tracking and reporting of progress?

- 6.1. For the health strategy to succeed there must be clear understanding of the “Strategies”, “Roadmaps”, “Actions”, and “Improvements” and there must be buy-in from all sectors. The staff at every level must understand the whole concept, be willing to accept the proposed changes and be willing to work together including also with non-Government organisations and volunteer organisations. At present there are groups who prefer to work in silos, are unwilling to compromise and not willing to accept change. Everyone must **work together as a team** to safely deliver the best services possible to each and every person who presents for treatments, information, care and support.
- 6.2. Page 3 of “Future Directions” states that; “Increasingly, Government agencies are working together in coordinated and effective ways to respond to priority issues.” We support government focus on “improving the lives and well -being of all New Zealanders” and cannot emphasise strongly enough the importance of Inter-departmental communications and co-operation. It will be imperative if the Health Strategy is to succeed. Providing healthier homes is one example which demands Inter-departmental communications and co-operation and where protections, processes and regulations may have to be introduced to ensure people are not made ill because of poor living environment.

## Any other matters

### 7. Are there any other comments you want to make as part of your submission?

- 7.1. The Ministry of Health will need “buy in” from all health professionals for this strategy to succeed.
- 7.2. Our responders consider on-going staff development is essential. Well trained, fully informed, professionally supported staff, whose work and contribution are **valued**, appreciated, encouraged and appropriately remunerated, are the best tools of the health system. Whilst recognising that health professionals are mostly a credit to their various professions, we consider close supervision is essential in order to raise the standards and attitudes of some. Appropriate training, peer support, professional development, internal assessment and monitoring, external monitoring and auditing of

performance standards will all contribute to achieving and maintaining higher standards, improved service delivery and personal pride in their professions and in the health system which they work so hard for.

- 7.3. NCWNZ's function is to represent and promote the interests of New Zealand women through research, discussion and action. The right to health is an international human right for all women and children. While health outcomes for New Zealand women have continued to improve over recent decades, health disparities still exist. Health policy must recognise key issues in women's lives, risks associated with socio/economic status and barriers to accessing health care such as transportation, location and cultural appropriateness.
- 7.4. There is significant work to be done to ensure co-operation between all strata of the health system and that the provision of an outstanding health service is paramount, rather than protecting one's patch and fighting to keep their share of the health dollar
- 7.5. The strategy seems to be light on future issues of health. While obesity requires urgent consideration, it is not the only issue which should be targeted. Innovations in the ability to detect inherited cancers, inherited conditions and health research are all important and requiring consideration. There are ethical issues concerning treatment when less money is available - obesity leads to kidney failure – there are issues around transplanting of various body parts.

## Conclusion

The National Council of Women is pleased to have had the opportunity to contribute to the consultation about updating the New Zealand Health Strategy. We consider the health of all New Zealanders to be of paramount importance. The Roadmap of Actions which accompanies the Health Strategy must be regarded as a living document. The proposal to upgrade the Roadmap annually, for the Ministry of Health to lead an annual forum to share practice, develop a system overview and inform, and for the Health Strategy to provide guidance for annual planning will be a good basis for future planning and finding ways to deliver services within the resources available.

The intent of the Health Strategy is to improve the quality and safety of service delivery and improved access to health services for all New Zealanders. NCWNZ believes that the delivery of health needs of women and children are encompassed in this statement.



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