

Health

New Zealanders deserve a health service that is modern, high quality, evidence based and available to all, regardless of who you are or where you live.

National's health policy will deliver better care, sooner and closer to home

Services have become harder to access under the current Government's watch. After years of continuous improvement under National, waiting times are increasing and the number of elective surgeries being carried out has decreased. Every single health target is worse now than when we left office. Deficits have ballooned and the sector is struggling clinically and financially as Kiwis miss out on the care they need.

National will restore the focus in health to what it should be: providing quality health services to you and your family, enabling you to get treatment better, sooner and closer to home so you can focus on living rather than waiting to be treated. This will restore confidence in New Zealand's public health system and deliver care for you, your children and whānau.

National believes that everyone should have the opportunity to live well and access world class healthcare regardless of our income, background or postcode.

National will ensure that New Zealand has a working health system, where illnesses are prevented as much as possible and care is easily accessible.

National will ensure that mental health is treated just as importantly as physical health, and that your ability to get a hip replacement doesn't depend on whether you live in Kaitaia, Bluff or anywhere in between. We will deliver care closer to home.

Highlights:

Cancer

 Cancer diagnosis sooner with the previously delayed bowel cancer screening

- program rolled out to the remaining 10 DHBs in our first year.
- Better cancer care with improved targets so cancer is treated sooner and \$50M of more access to more medicines to treat cancer.
- A pilot for low dose CT scanning for lung cancer with particular benefits to Māori.

Surgery

- Faster elective surgery, so that if you are promised treatment in the standard 4 months then you will be operated on within 4 months.
- Equitable access to elective surgery by replacing the post code lottery with standard treatment levels across the country.

Medicines

 A larger year on year increase in PHARMAC funding than any time in the past decade with \$50 million per annum for cancer drugs, regular increases in the combined pharmaceutical budget per year at the same level as vote health and \$5 million per annum for rare disorders.

Primary Care

- Start a request for proposal process to establish a third graduate entry medical school focused on retention of General Practitioners in rural areas.
- Fund a primary care social worker type navigator for every General Practice location in New Zealand to project care even further into the community and closer to home.

Covid-19

No pandemic in living memory has brought about as much global disruption as Covid-19.



Kiwis have sacrificed much through the restrictions of lockdown and we can all be proud that our collective effort has, so far, worked well.

Because of the actions of all New Zealanders, our health system has held up to Covid-19 better than many around the world. However, cracks in Labour's response are starting to show.

There are only four actions New Zealand has to stop the spread of Covid-19:

- Testing at the border and in the community
- Contact Tracing
- Use appropriate PPE (Personal Protective Equipment), such as masks
- Physical Distancing

Labour could have done better to adequately protect New Zealand using these tools. Staff at the border weren't being tested and even today Day 3 testing is still not compulsory. The case definition has changed so many times that on Sunday July 19 only 8 people were tested in the community across the whole country.

Contact tracing for Auckland came online barely 10 days before the August Auckland outbreak and there is still no Bluetooth offering for contact tracing.

The Office of the Auditor General made 10 recommendations around gaps in PPE when, at the same time, we were being told that doctors, nurses and aged care staff had enough PPE. The current arrangements are ad-hoc and have been assembled in haste.

The August Auckland outbreak could have been better with a disorderly and confused response, miscommunication and insufficient testing. With multi-agency meddling and no clear leadership.

New Zealanders have sacrificed a lot to give us the best chance of beating this virus and they deserve a government with a plan to protect this sacrifice. National will actually secure the border as promised to keep New Zealanders safe.

Border Protection Agency

National will establish a unified Crown Agency to manage the Government response and secure the border, the first and best line of defence New Zealand has against Covid-19.

New Zealand needs a coordinated and professional response for the years to come, with a well trained workforce within a structured and compliance focused border control agency.

The Agency will report to a Minister responsible, who will have clear oversight to ensure operational excellence is a priority.

The Border Protection Agency will develop and implement long term policies and plans for safe and efficient international travel. In the shorter term, the agency will administer policy and procedures for:

- Approving operations and develop protocols for managed isolation and quarantine facilities and provide security.
- Ensure effective training and safety protocols for all staff involved in border control, managed isolation and quarantine.
- Managing protocols for port movements, freight and testing procedures at ports.
- Conducting medical testing for Covid-19.
- Receiving returning Kiwis and visitors at the border and ensuring pre-border checks including pre-flight negative Covid test for people coming into New Zealand.
- Transferring people to managed isolation facilities.
- Acting as a centre of expertise on pandemic containment and best practice.
- Working with businesses to ensure safe practices. Specifically tailoring plans for small business, retailers and manufacturers.
- Considering expansion of entry qualifications and timing.



Coronavirus Summit

National will convene an immediate Public Health Summit that would bring all aspects of our community together, from public health specialists, primary care teams, lwi leadership, Business New Zealand, manufacturing and the unions, so we can all agree on what's best practice for the country.

The summit will review lockdown levels and discuss other public health measures to minimise future lockdowns. We are committed to the elimination approach, the summit's review of the alert levels will give us the best chance of recovering the jobs lost and preventing further losses.

It is clear that Covid-19 is going to be with us for some time. We need to find the best ways of ensuring that we continue to eliminate this disease, and allow our economy to flourish.

Preparing for Future Pandemics

The Influenza Pandemic Action Plan prepared by the previous National Government has been integral in New Zealand's response to Covid-19. However, this must be updated to reflect lessons learnt from the Covid-19 pandemic.

Changes may include, centralising PPE logistics and contact tracing functions, regular inventory of national stocks, equipment and facilities such as negative pressure rooms, ventilators and community surveillance programs.

National will:

- Review and update the long term pandemic plan to reflect lessons learnt from the Covid-19 pandemic.
- Increase the workforce development of public health specialists to prepare for the future.

Better Care, Sooner and Closer to Home

Elective Surgery Commitment

National will enact an elective surgery commitment to provide better healthcare, sooner.

We will reinstate the commitment introduced by the previous National Government to increase the number of elective surgeries by a minimum of 4,000 a year.

Under our plan every Kiwi that needs elective surgery will receive surgery within the promise made to them of four months from the decision to treat. If their local DHB cannot do it, they will be required to source an alternative provider.

An elective surgery is planned in advance rather than done in an emergency situation. It includes vitally important operations like hip replacements and cataract surgery.

Too many Kiwis are left languishing on long waiting list for months despite having a commitment for surgery and the Covid-19 lockdown has made these waiting lists even longer.

National will have clear elective surgery targets for each DHB to meet and these will be funded. When setting targets, we'll take into account the relative complexity of the surgeries being carried out as well as the number of procedures. We'll also ensure this is publicly reported on so that Kiwis can hold their DHBs to account.

We will also get rid of the postcode lottery to qualify for surgery so that the score required for surgery is the same all over the country no matter where you live

- Commit to elective surgery sooner, so that if you are promised treatment in the standard four months then you will be operated on within four months.
- Ensure equal and fair access to elective surgery by replacing the post code lottery



with standard treatment levels across the country.

Better Funding for Medicines

National remains committed to the PHARMAC model. We will ensure that it receives the funding it needs to fulfil its mandate and that Kiwis have the best possible access to the medicines they need. In return we will have expectations of PHARMAC around timeliness and transparency of decision making and overall effectiveness compared to international benchmarks.

When in Government, National increased medicine funding by an average of \$24 million per year. The consistent increases in funding meant that 800,000 more Kiwis benefited from access to medicine. We will ensure that Pharmac receives the funding it requires.

National will:

- Maintain PHARMAC funding increases at the same rate as Health budget increases.
- Introduce timeliness targets for decisions on funding medicines.
- Ensure there is more transparency in the decision-making process.
- Commit \$20 million toward a funding pool for rare disorders over 4 years.
- Commit \$50 million toward a dedicated cancer drug fund per year.

World Class Cancer Care

The sad reality is that most New Zealand families will be affected by cancer. Cancer doesn't discriminate when it chooses its victims and people shouldn't have reduced access to treatment depending on their postcode.

New Zealanders shouldn't have to pack up their lives and go to other countries for cancer treatment. New Zealanders shouldn't have to mortgage their houses, set up a Givealittle page or take out massive loans to be able to afford medicines which are funded in other countries We will create a National Cancer Agency that would be independent of the Ministry of Health and will focus on greater accountability and consistency of access across New Zealand, ensuring all New Zealanders get better care, closer to home.

We will establish a \$50 million per year fund within PHARMAC to buy cancer drugs to ensure all New Zealanders have access to better cancer medicine, sooner.

National will focus on prevention, early detection and prompt treatment. Cancer is New Zealand's biggest killer, with almost 10,000 Kiwis dying of cancer every year. Under National, New Zealand made good progress in improving cancer survival, where the death rate per 100,000 fell ten per cent between 2008 and 2017. Understanding what stage patients are at when diagnosed will help to improve treatment and ensure earlier diagnoses.

- Create a National Cancer Agency for the management of cancer data and policies nationwide.
- Increase the target from 90 per cent to 95 per cent of patients at high risk of cancer and needing to be seen within two weeks and treatment started within 62 days.
- Accelerate the rollout of the previously delayed Bowel Cancer Screening project.
- Introduce a gynaecological cancer program.
- Commit to a transition from cervical pap smears to more effective HPV testing.
- Start building for the three radiotherapy machines promised for Hawkes Bay, Northland, and Taranaki in our first year in Government.
- Provide more funding per year to PHARMAC for cancer medicines than almost the whole PHARMAC budget increase for all medicines last year.



Expanding Primary Care People

Primary care is the gateway to secondary care and a key stakeholder in delivering care closer to home. More and more is being asked of primary care as a tsunami of mental health and high needs patients make their way towards General Practitioners.

National recognises this increase demand coupled with the benefits of care closer to home and so we will fundamentally alter the nature of the primary care team by funding a new addition.

We will add a primary care navigator to every General Practice location. The primary care navigator will have a range of skills from a social worker to a lived experience practitioner with appropriate qualifications.

Primary care navigators will provide counselling, interface with government agencies, follow up appointments and referrals, do home visits and implement primary care health plans collaborated with each general practice.

Navigators will have a sound knowledge of local services and providers and understand how to access and sign post to services. They are aware of current locality initiatives, including prevention initiatives and able to offer this information to patients/service users. The primary care navigator is an expert facilitator and co-ordinator.

National will:

 Provide funding so that every General Practice location has a government funded primary care navigator.

Expanding Primary Care Scope

National is committed to improving the quality of our primary care services to ensure every New Zealander has access to the best care, when they need it. Primary care is the health care we receive in our community. A strong primary health system is key to improving the health of all New Zealanders.

Many people in primary care, for example, pharmacists have skills that they are ready

and willing to use that will unburden busy hospitals and GP surgeries

National will support increases in scope for primary care practitioners.

National will:

- Support further development of primary care practitioners with special interests to allow for better care in low socioeconomic areas.
- Support expanding the pharmacy scope of services offered by pharmacies.
- Explore establishing an unused medicines return depository to help low income and vulnerable people access cancer medicines.

Maternity Care

The arrival of a new baby is one of the most joyous event for new parents, families and whānau. National will ensure that the necessary support is in place to protect the health of Mum and baby, and to ensure that every child gets the best start in life.

In the first few days after giving birth, mums can experience the baby blues, have difficulty breastfeeding, be exhausted and sometimes just need a bit of extra help to build up confidence. Mothers in rural New Zealand have been especially poorly served by maternity services. National will reverse this trend and ensure all new mums are supported.

National will:

- Guaranteed three days post-natal stay for mothers and their babies.
- Re-establish the birthing unit at Lumsden.
- Establish a birthing unit at Wanaka.

Eyes and Ears

Cochlear implants can be life changing for people with hearing loss. Despite this, Labour cruelly reversed the previous National Government's commitment to increase the number of adult cochlear implants to help people with profound hearing loss, hear again.



Around 200 people are currently on the waiting list for adult cochlear implants. If the number of implants is not increased the waiting list could grow to 500 in as little as five years.

New Zealand needs to plan and strategize to meet the demands created by its ageing population. National will undertake the first ever nationwide eye health survey to make sure we have the resources to provide highquality eye care for all Kiwis.

National will:

- Increase funding for the number of adult cochlear implants from 40 to 100 per year.
- Undertake the first ever national eye health survey.

Obesity

Obesity and its complications are a growing problem in much of the developed world and New Zealand is no exception. Around a third of adults over age 15 were recorded as obese in last year's New Zealand Health Survey. Obesity increases the risk of serious health problems like heart disease, high blood pressure and Type 2 diabetes, as well as affecting Kiwis' quality of life.

Obesity, particularly in children, is one of the most pressing health challenges we face and National isn't afraid to tackle it. In 2015, the National Government released a Childhood Obesity Plan which has helped to slow the rise in childhood obesity. However, the number of children suffering from obesity remains high. National will update this strategy and widen it to include people of all ages.

National will:

- Replace the 2015 Childhood Obesity Plan with a new national strategy covering all age groups.
- Expand the "Daily Mile" programme to more New Zealand schools.

Gynaecological Health

Surgical mesh implants have been used since the late 1990s for gynaecological surgery where other treatments are unsuitable or have failed.

Surgical mesh is often recommended by specialists. However, we now know that some patients experience complications immediately after their operation, while others develop those years later. Complications may range from mild to debilitating and can severely affect an individual's quality of life.

Every year in New Zealand, over 1,000 women are diagnosed with, and over 475 die from, one of the five gynaecological cancers (cervical, ovarian, uterine, vaginal and vulva).

While we do screen for cervical cancer, rates have been dropping and there are significant disparities in coverage among different subpopulations (ethnicity, socio-economic status, geographies).

National will provide targeted funding of \$20 million over four years to reduce mortality rates of gynaecological cancer through greater awareness, clinical guidelines, increased testing and greater access to clinical trials. This aligns with the NZ Cancer Action Plan to ensure lower cancer rates and increased survival.

National will:

- Establish a surgical mesh register to allow for the full scope of the problem to be revealed, and to allow for proactive action to be taken to work with patients who may be affected.
- Establish a gynaecological cancer program including education, testing and clinical trials.
- Commit to a transition from pap cervical smears to more effective HPV testing.

Health Targets

National believes Kiwis deserve world class healthcare. To reach this goal we are committed to re-establishing National Health



targets. So that Kiwis can have confidence in the services being provided to them. Targets require healthcare providers to focus on the outcomes that are important to Kiwis.

Every health target is worse now than when we left office in 2017. It's clear this Government doesn't want you to know how your DHB is doing. It no longer has high expectations for performance, and doesn't publish data.

One example that underscores the importance of effective targets is emergency department waiting times. According to University of Waikato research, National's waiting time targets saved 700 lives every year.

National will:

- Restore and update National Health Targets.
- Require quarterly performance reporting against those targets to be made public.

Address Inequalities

National is committed to addressing inequalities in our health systems. Multiple reports including from the Waitangi Tribunal have stated that these inequalities must be addressed. These inequities disproportionately affect Māori and Pasifika. We can see this in poorer health outcomes. For example, average life expectancy for Māori is more than seven years lower than New Zealand Europeans.

National will:

- Pass all health legislation through an inequality filter.
- Require the annual Māori Health strategy to identify inequality measures, recommend interventions and monitor effectiveness against inequality targets.
- Pilot low dose CT scanning for lung cancer recommended by the Māori Affairs Health Select Committee inquiry into Māori health inequalities.
- Develop education and promotion frameworks for inequality.
- Require inequality measures be identified within new and existing policy settings.

Rural Health

National will provide rural healthcare providers with the resources and attention they require. Everyone in rural New Zealand accepts they'll be a little further from a hospital. But they still need access to services like screenings, clinics and midwives.

National understands the specific and unique health needs and hurdles in rural environments. National will request proposals for a third medical school which is focussed on the training and retention or GPs in rural areas.

A third medical school will not only train doctors for rural areas but will also help to improve and inform rural health provision. This will occur through the development and advocacy of rural policies, data and informatics, workforce development and primary care in a rural context.

National will:

- Start a request for proposal process to establish a third graduate entry medical school focused on retention of General Practitioners in rural areas.
- Progress digital technology solutions for rural areas.
- Require rural data capture and tagging at health system interfaces.
- Specifically address rural mental health issues.

Māori Health

Inequities in New Zealand's health system disproportionately affect Māori.

We can see this in poorer health outcomes and lower life expectancy: average life expectancy for Māori is more than seven years lower than Pākehā.

Māori also have higher demand for health services. For example, Māori form approximately 16 per cent of New Zealand's population, yet account for 26 per cent of all mental health service users.



Any group of New Zealanders having poorer health outcomes is simply unacceptable.

National will institute targeted interventions which will advance and promote Māori health and lead to positive outcomes. We believe that health targets will focus resources and accountability on the areas of the health sector that need the most improvement. Through targets, we'll once again seek to address the discrepancies which exist in the health system.

National will:

- Require DHBs to annually construct and report against a Māori health strategy at the board level.
- Add primary care navigators for care closer to the home.
- Add health inequalities targets, interventions and monitoring, to drive improvements in Māori health.
- Pilot low dose CT lung cancer screening for current and past smokers as recommended by the Māori Affairs select committee.

Digitally Enabled Service Delivery

Virtually every aspect of modern life has been, and will continue to be, radically reshaped by innovation and technology. Healthcare is no exception.

National is committed to providing the best digital health technologies to New Zealand. Digital health technologies offer ways to self-manage health, with a focus on preventing illness rather than simply treating them. Potentially allowing people to be treated not just closer to home, but in their own home.

Digital health offers the possibility of a winwin-win.

It will reduce the administrative burden on healthcare workers, freeing them up to treat patients.

It will allow patients to take a more active role in their own care.

It will be cheaper to deliver, allowing the health budget to provide more services to more people.

National will:

- Support software integration with DHBs, ACC and community providers such as laboratories, pharmacists and radiology clinics
- Provide support for care through video consultations and other technology.
- Progress closed loop prescribing to remove administrative burden on doctors and pharmacists and reduce prescription errors.

Health Information Technology (HIT) Governance

Despite many years and considerable investment in electronic medical records, the ability to access patient information within the health sector remains fragmented and poor. We will do better.

National will ensure that New Zealand's Health Information Technology (HIT) is world class. This is essential as world class HIT services can free up health staff to get on with what they do best – treating patients, not navigating archaic and complex IT systems.

National will:

- Explore DHB ring fencing of maintenance funding for Health Information Technology (HIT).
- Institute quarterly DHB reporting of cybersecurity preparedness.
- Build up the Ministry of Health's HIT capacity.
- Ensure procurement of technology solutions across all DHBs achieves commonality and better value for money.

DHBs that are Financially Viable

A functional health system relies on a firm financial footing. The health sector is one of the largest and most important parts of the



economy. The public health system accounts for \$20 billion in annual government spending and the health sector accounts for around 8 per cent of GDP.

Given the amount of money involved and the high stakes this is something that National will get right.

In February, before Covid-19, the 20 DHBs were forecasting an annual deficit of over \$500 million. However, Covid-19 will make the financial pressure on our health system even worse.

National will address this by working with DHBs and the health sector to address their deficits and put them on a sustainable financial footing.

National will:

- Set clear expectations for DHBs to live within their means by way of accountability agreements with Board Chairs.
- Introduce clearer expectations for DHBs to focus on care that reduces demand, including cancer screening, immunisations, and early intervention in non-communicable diseases.
- Benchmark DHBs on key clinical cost drivers including staff levels, length of stay, adverse events, hospital acquired infections etc.
- Develop a DHB asset management roadmap to support rebuilds and the construction of new facilities and explore ring fenced DHB repairs and maintenance budgets.
- Fund the cost drivers of health.

Primary Care Funding

Primary care providers include most of the medical professionals we interact with on a day-to-day basis. Much like DHBs, many primary care providers are struggling to find a sustainable financial footing.

National will reduce funding pressures in the primary care sector so that our GPs, Nurses

and other healthcare workers can get back to taking care of New Zealanders.

National will:

- · Address primary care funding by:
 - Exploring better targeting for Very Low Cost Access funding.
 - Reviewing utilisation rated funding cycles.
 - Exploring co-payment mechanisms for people based on their ability to pay.
- Explore primary care governance of investigations such as radiology and other DHB directed community workflows such as district nursing and dieticians.
- Identify costs shifted from secondary to primary care and tag the funding to follow where the work is actually done.
- Review the funding system for pharmaceuticals, including reviewing copay options.

DHB Structure

District Health Boards (DHBs) are an essential component of New Zealand's health system. They ensure that each region gets a say in its health system. National remains committed to the DHB system but we intend to improve it and make it more efficient.

National will move some DHB's planning and funding services to a regional level, and some complex tasks to a national level. This will allow DHBs to focus on providing care to their local community and ensure they are not bogged down in endless bureaucracy.

- Ensure that DHBs continue to provide publicly funded, publicly provided secondary and tertiary health services.
- Explore planning and funding or commissioning functions at a regional level and some complex services at a national level.



 Enact a review of the governance of DHBs to ensure the system remains fit for purpose and attracts the right skills to boards.

Elevate Public Health

National will address the issues that Covid-19 has exposed and will ensure greater coordination between Public Health Units to provide the best possible care for the entire country.

Covid-19 has highlighted issues with the structure and funding of public health. Public health funding makes up just 0.5 per cent of the health budget.

The Pandemic Action Plan prepared by the previous National Government has been instrumental in New Zealand's fight against Covid-19. We will ensure that this is updated to reflect all learnings from Covid-19, so that if we are faced with another pandemic in the future we can have the best possible response.

National will:

- Address issues with the structure and funding of public health highlighted by Covid-19.
- Commit to greater coordination across
 Public Health Units.
- Review the Pandemic Action Plan in light of the Covid-19 experience.
- Develop a public health workforce responsive to future pandemics and public health generally.
- · Build public health capacity.

A 21st Century Health Workforce

National is committed to ensuring New Zealand has enough doctors, nurses and other health professionals to ensure that every Kiwi can get better care, sooner.

Health and disability services are fundamentally about people: namely those who need care, and those who devote their lives to caring for others. However, more than 40 per cent of doctors and more than 45 per cent of nurses are aged over 50.

National will make Health Workforce NZ (HWNZ) independent of the Ministry of Health and task it with ensuring that our health workforce can provide the quality and quantity of services that New Zealanders need, both now and into the future.

- Make HWNZ independent of the Ministry and fund it to provide the key information the sector needs to support workforce planning.
- Utilise HWNZ to identify the looming gaps in our workforce and engage with tertiary education providers to ensure that enough students are coming through to fill those gaps in the future.
- Institute specific goals to ensure our health workforce reflects the communities it serves.



Additional spending (\$m)

Policy Costings - Health

| National Party Policy | 2021-22 | 2022-23 | 2023-24 | 2024-25 | Four year total |
|---|---------|---------|---------|---------|--------------------|
| Operating Expenditure | | | | | |
| Surgical mesh register | 2.0 | 2.0 | 2.0 | 2.0 | 8 |
| Reinstate birthing unit at Lumsden Maternity | 0.3 | 0.3 | 0.3 | 0.3 | 1 |
| Establish birthing unit at Wanaka | 0.3 | 0.3 | 0.3 | 0.3 | 1 |
| Cancer Fund within Pharmac | 50 | 50 | 50 | 50 | 200 |
| Gynae Cancer package | 5 | 5 | 5 | 5 | 20 |
| Interim Cancer Agency Board | 1 | 3 | | | 4 |
| Pharmac Budget Boost | 35 | 35 | 35 | 35 | 140 |
| Rare Disorders | 5 | 5 | 5 | 5 | 20 |
| Child Dental Package | 30 | 30 | 30 | 30 | 120 |
| Social Worker Navigator | 21 | 43 | 64 | 64 | 192 |
| Scope Increase Pharmacy | 2.5 | 2.5 | 2.5 | 2.5 | 10 |
| Medicines Reuse | 1 | 1 | 1 | 1 | 4 |
| Pilot Low Dose CT Lung Scanning | 1.5 | 1.5 | 1.5 | 1.5 | 6 |
| Increase Cochlear Implants | 8.4 | 8.4 | 8.4 | 8.4 | 34 |
| National Eye Health Survey | 0.5 | 0.5 | 0.5 | 0.5 | 2 |
| VLCA Targeting | 5 | 5 | 5 | 5 | 20 |
| Rotorua Helicopter | 1.5 | 1.5 | 1.5 | 1.5 | 6 |
| Total new operating expenditure | 170 | 193 | 212 | 212 | 788 |