Karakia

Tūria, tūria te mata hau nō Rangi Tūria, tūria te mata hau nō Papa Paiheretia te tangata ki te kawa tupua, ki te kawa tawhito He kawa ora! He kawa ora! He kawa ora ki te tangata He kawa ora ki te whānau He kawa or ki te iti, ki te rahi He kawa tātaki ki au mau ai Tūturu o whiti, whakamaua kia tīna Hui e! Tāiki e!

Te Whatu Ora Health New Zealand

Te Aka Whai Ora Māori Health Authority

Shifting the System

- Riana Manuel, Chief Executive Te Aka Whai Ora
- Margie Apa, Chief Executive Te Whatu Ora
- Jane O'Hallahan, Clinical Director of Screening Te Whatu Ora
- Selah Hart, Deputy Chief Executive, Public & Population Health Te Aka Whai Ora
- Dr Richard Sullivan, Interim Chief Clinical Officer
- Dr Sarah Clarke, National Clinical Director Primary & Community Care
- Matthew Gifford (MC)

4 October 2023

Te Whatu Ora Health New Zealand

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Te Aka Whai Ora Māori Health Authority

The health system will reinforce Te Tiriti principles and obligations

All people will be able to access a comprehensive range of support in their local communities to help them stay well

Winter Measures

Screening

Everyone will have equal access to high quality emergency and specialist care when they need it 3

Health and care workers will be valued and welltrained for the future health system

5 I

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Digital services will provide more people the care they need in their homes and communities



Cervical cancer in Aotearoa

In 2019, the age-standardised* cervical cancer incidence rate for Māori women was 7.8 per 100,000, for Pacific women 10.9 per 100,000, for Asian women 4.8 per 100,000 and for Other women 7.1 per 100,000.

Many wāhine are not being screened for cultural, personal, or economic reasons.

Almost all cervical cancer is preventable.

*age-standardised using the WHO standard population

[We are] having great response with opportunistic (testing), whether it is for new patients, overdue or previous non responders

> Primary Care Screen-Taker Auckland

Be ready for upcoming changes to the National Cervical Screening programme.

Click for more information

Te Whatu Ora Health New Zealand Māori Health Authority



Placing whānau at the heart of the health system



Critical role of screening support services to achieve this

2021 Parliamentary Review Committee (PRC) report into the NCSP recommends an integrated, community-based model of cervical screening

Te Whatu Ora Health New Zealand Te Aka Whai Ora Māori Health Authority

HPV primary screening campaign

Putting whānau voice at the centre

By Māori, for Māori

Kua tatū mai te whakamātau whaiaro hōu. Kua rere kē te ao!



Tirohia rānei TimeToCervicalScreen.nz, waea rānei ki 0800 729 729, korero rānei ki tō nēhi, ki tō tākuta, haere rānei ki tō whare hauora.

Te Whatu Ora Te Aka Whai Ora

Time to screen

Te Whatu Ora Te A Health New Zealand

Te Aka Whai Ora Māori Health Authority

Ko tā te whakamātau whaiaro he huna i ngā wāhanga muna.



Kua tatū mai te whakamātau whaiaro hōu. Kua rere kē te ao! Tirohia rānei TimeToCervicalScreen.nz, waea rānei ki 0800 729 729, korero rānei ki tō nēhi, ki tō tākuta, haere rānei ki tō whare hauora.

Te Whatu Ora Health New Zealand Máori Health Authority

The cervical screening self-test is here. It's a game-changer!

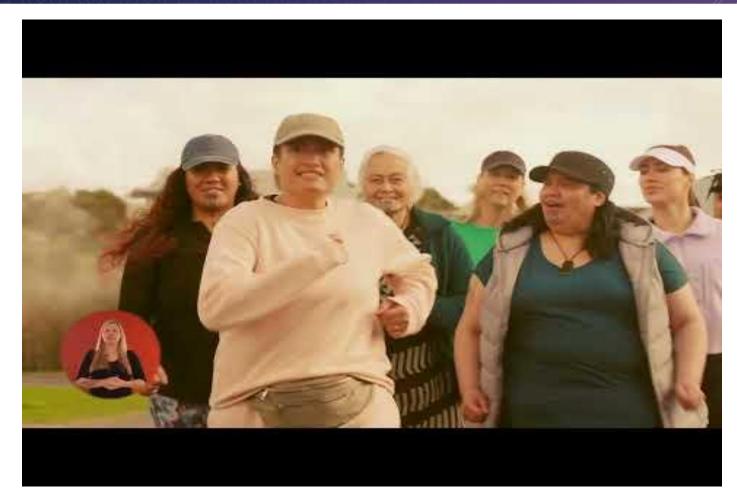


Cervical screening is for eligible wähine, and people with a cervix aged 25 to 69. Visit TimeToCervicalScreen.nz, call 0800 729 729 or talk to your nurse, doctor or hauora clinic.

Te Whatu Ora Health New Zealand Maori Health Authority

Screening Programme

Empowering choices



Te Whatu OraTe Aka Whai OraHealth New ZealandMāori Health Authority

Supporting community care

Clinical telehealth

- Rural, Māori and Pacific general practices, and general Practices serving high deprivation populations (as of 25 Sept)
 - 26,657 calls made
 - 5,986 required medical consultations

Minor health conditions service

- Minor health conditions in pharmacies not continuing
- 772 participating pharmacies
- 98,824 consultations

Eligibility	%
Person under 14 years	70%
Pacific person	15%
Māori person	13%
Community Service Card holder	9%
Whānau of person under 14	6%

. I used the minor ailments service at Kilbirnie Unichem today, and it was fantastic! My 8 month old baby had a nasty rash, and the pharmacist explained what it was likely to be, gave me creams for treatment, and told me the symptoms that would mean I needed go to the GP. The rash has already improved... Getting to the DR in the city is tricky with a baby and toddler, and I used to feel reluctant to ask the pharmacist for advice without buying something. It's so reassuring to know I can go there for help, the staff at the [pharmacy name] are great.

Keeping people well

Immunisation

- 660,854 COVID-19 Boosters administered (Between 1 April – 29 September 2023)
- 1,253,286 Influenza vaccinations administered (Between 1 April – 29 September 2023)
- 487,787 Childhood Immunisations administered (Between 1 January – 17 September 2023)

Communication

 Communications focusing on winter and encouraging people to stay home when they are sick - across television, radio, mailouts and social media.

Carer Support Subsidy

 Nationwide changes to the Carer Support Subsidy – increased rate and flexibility – to support more people to be cared at home.



Supporting community care

Ageing well

 Supporting timely discharge from hospital to Aged Related Residential Care (ARRC) by providing nationwide flexible funding centred around patient needs, for example:



Funding a wound care nurse specialist role to

- improve access to community specialist services in
- ARRC and prevent the need for elderly patients to be admitted to hospital for wound care.

Primary Options for Acute Care

 Expanded across all priority areas to help minimise unnecessary demand on hospitals by supporting patients in the community, for example:



Extended winter consults with General Practices resulting in extra acute appointments provided outside normal working hours (Te Tai Tokerau)



Reducing hospital demand

- Ambulance frontline Paramedics were supported with clinical telehealth, which reduced referrals to Emergency Departments:
 - 2,895 referrals nationally
 - 2,010 patients (69%) didn't need transfer to Emergency Departments
- Every hospital implemented and refined **escalation plans** to manage periods of surge and these were linked to a national surveillance programme.
- All hospitals worked on minimising the impact of acute demand on **planned care**, and there was a strong focus on maintaining planned services in the winter months.
- **Hospital in the home** was well utilised in some districts, reducing demand on inpatient beds.



Evaluation is coming..

Approach

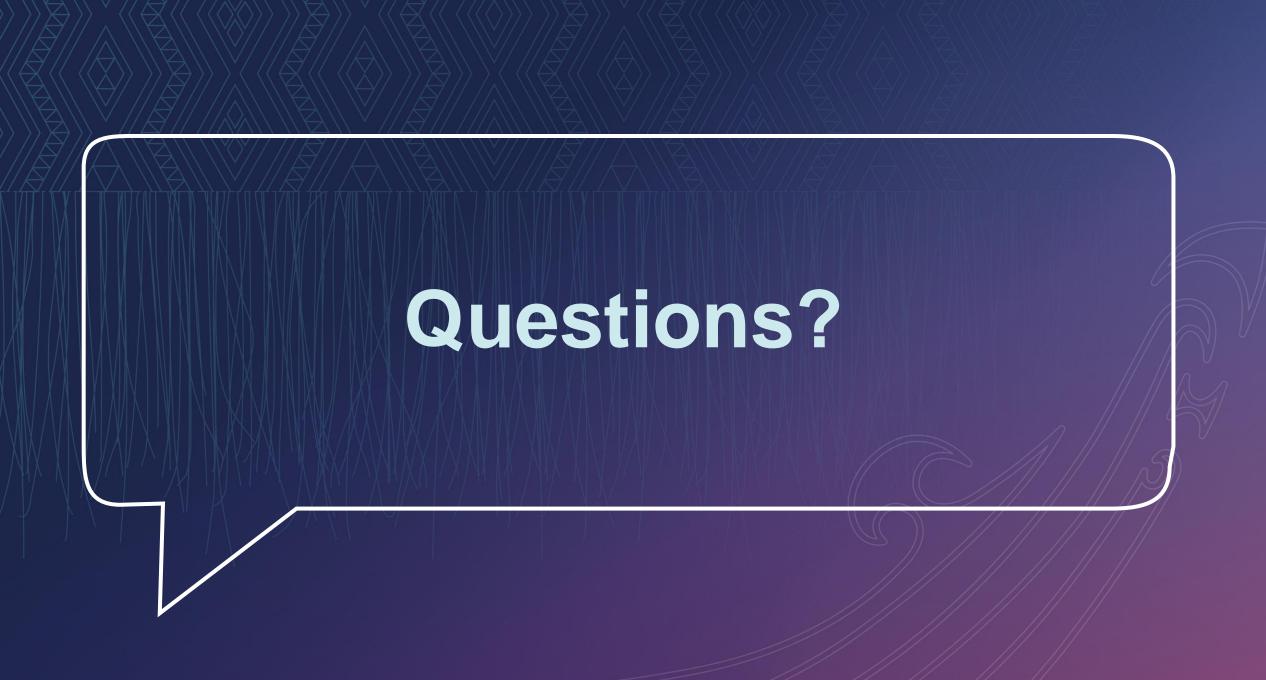
 In-house with external peer review

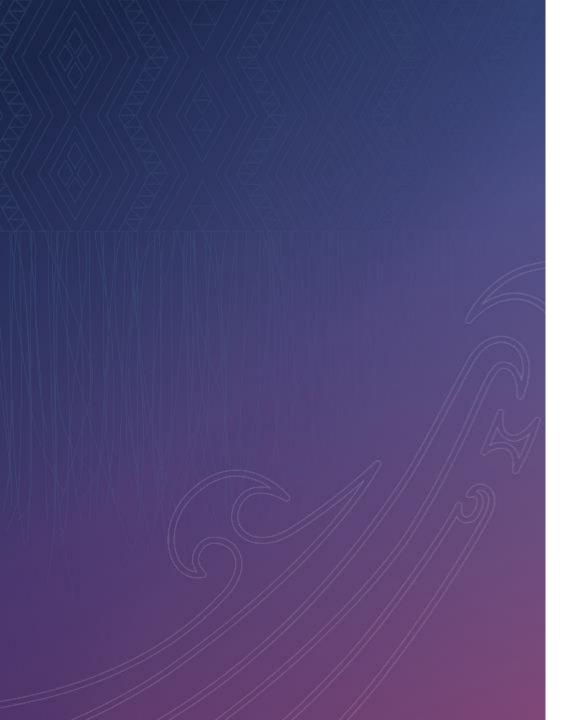
In scope

- The 24 winter
 preparedness initiatives
- Additional actions
 added over winter

Indicative Timeframe

Draft by 30 November 2023





Karakia