

Strengthening our Te Waipounamu Integrated Health Care System - our 'South Star'

January 2025

Foreword

Our cover image features the constellation of the Southern Cross.



Historically the Southern Cross | Te Pae Māhutonga has played a key role in navigation because of its two bright stars, Acrux | Toiora and Gacrux | Mauriora, point in the direction of the southern celestial pole. In the southern hemisphere, the Southern Cross has great cultural significance and appears in various forms on the national flags of New Zealand, Western Samoa, Papua New Guinea, and Australia.

Te Pae Mahutonga is a Māori name for the Southern Cross constellation. [Te Pae Mahutonga](#) has been used by Tā Mason Durie to show a model for understanding the elements of Māori health promotion.

My aspiration for Te Waipounamu Integrated Health Care System – our South Star, is to help navigate our way to a new future state.

He waka eke noa

“We are all in this together – a shared vision for better health achieved through collective impact”

Executive Summary

This document aims to contextualise Health New Zealand's ways of working for our Te Waipounamu region. To provide guidance on our direction of travel for an even more fully integrated health care and health promoting system of care, which is genuinely value-based.

This will require us to increasingly move from relying too heavily on traditional care delivery which focuses on diagnosis, treatment, recovery and rehabilitation through our hospitals, to systems which look upstream that enable disease prevention and downstream, in partnership with key care partners, to provide more coordinated care for patients with chronic disease, preventing disease progression.

We will be establishing a new regional leadership team, governance and committee structure, along with making some revisions to existing district committees.

The document also aims to clarify and simplify Te Waipounamu key priorities and actions to progressively bring our new future state to life. These include:

- 1: Establishing a Te Waipounamu Senior Leadership Team
- 2: Establishing Regional and refining District, Hospital and our broader community health care system committees to ensure appropriate Governance is in place with greater alignment, consistency, reporting and monitoring
- 3: Developing a Te Waipounamu Strategic Plan
- 4: Developing a Te Waipounamu Workforce Strategy
- 5: Providing excellence in timely care
- 6: Living within our means

I look forward to working alongside all of you. Together, we have a unique opportunity to do something very special for our Te Waipounamu community.

I welcome feedback at DCETeWaipounamu@tewhatauora.govt.nz

Yours Sincerely,



Martin Keogh

*Deputy Chief Executive - Te Waipounamu
Health New Zealand | Te Whatu Ora*

Purpose

The purpose of this document is to provide guidance on the required direction of travel to *transform to a new regional future state* for an even more fully integrated Te Waipounamu Health Care and health promoting system of care, which is genuinely value-based, as part of resetting Health New Zealand.

Background

In July 2024, Health Minister Reti, newly appointed Commissioner Lester Levy and Health New Zealand Chief Executive Margie Apa announced the need for a reset of Health New Zealand.

Commissioner Levy described three key goals of the reset, those being:

1. To ensure New Zealanders do not wait as long as they do now to get the healthcare they need and deserve - the shortest wait is the safest wait for patients. This has to be our highest and most urgent priority;
2. To make sure every single contact New Zealanders have with our services is compassionate and caring;
3. To enable the delivery of much more healthcare for more patients within the resources we have – especially for those with high needs

It was acknowledged while the establishment of Health New Zealand over the prior two years had made progress, the job was not yet done. Amalgamation had not yet achieved the integration or joined up care that is needed.

There was also a recognition of a need for greater local leadership and accountabilities between the Health New Zealand Board, National Executive Leadership and patients. A need to better empower local managers and clinical leaders to make decisions as close to the patient as possible.

This led to the [announcement of four new Deputy Chief Executive positions](#) being established at the end of July 2024. These new roles have delegated responsibilities for services provided and funded by Health New Zealand within each of the four designated regions.

I am very honored to be the inaugural Te Waipounamu Deputy Chief Executive, having started in the role on 16th September 2024.

Expectations of Regional Deputy Chief Executives:

- be accountable for the delivery of National Health Target performance for their region, working collaboratively with their regional and national counterparts to ensure consistency of access including improving access and health outcomes for high need patient groups and their whānau;
- be accountable for delegated budgets and staff for the delivery of the Government's priorities in the NZ Health Plan and meet minimum service coverage requirements for their region;
- regionally lead out national priorities, ensure integration of planning, prioritisation and performance delivery meet the needs and impact on health outcomes within regions;

- lead work for whole of system to ensure all stakeholders are involved in how health services are delivered in regions;
- work with current enabling leads to ensure the regions are serviced by enabling functions e.g. Data & Digital, Infrastructure & Investment, Finance, P&C;
- be accountable for improvement in regional and local performance against national performance targets

Since my appointment, I have been progressively gaining a greater understanding of the New Zealand health care system, our organisation, our people and what is seen as our immediate and longer-term priorities.

Along the way, I have been sharing my observations and current thinking with all of you at our newly established Regional Hui and other forums, seeking your input and feedback.

Reflecting on my short time here, I can honestly say that the welcome I have received has been heart-warming and the engagement by our people has been exceptional. Can I thank all those who have taken the time to either speak with me directly, or who have written to me. Your feedback, suggestions and knowledge have been invaluable in being to outline this plan.

Who I am and how I think

In my first video message to you all on 4 November 2024 I shared with you a bit about who I am, what drives my thinking and my work within the public health care sector. For those who have not had a chance to watch the video [DCEMartinKeogh31102024 on Vimeo](#) here's a quick recap.

I have been fortunate to have worked in public health my entire professional career, initially as a registered nurse then moving into operational management.

Based on the complexities and challenges we face in public health care, I have found trying to keep things simple, being guided by principles, listening to our people and remaining focused on a few key annual priorities helps guide my work efforts and decision making.

My priorities are and will always be:

1. The quality of care we provide to our patients and families

This is the why – why we are all here.

Every day there are extraordinary examples of the great care you and our primary and community partners provide for our community. We need to make sure we celebrate this fact. Sometimes, your great work can get lost in the “noise” that can be created around the current pressures on our system.

Equally, we need to make sure we have robust systems and processes in place to ensure we are monitoring and evaluating the care we are providing, that we adapt our care to the ever-changing needs of our community, to advances in medicine and technology and that we learn from our mistakes, when things do not go as planned.

My early observations are that we have opportunity to improve in this space. We need to strengthen our daily, weekly and monthly operating rhythm to ensure consistency and

effectiveness across all our services to monitor the care we are providing and how we are performing against our quality indicators and targets.

2. Supporting and engaging with our people

Equally important is to engage with all of you; and to listen.

I truly believe we can only provide great care if we have great people, who look after one another. You are Health New Zealand's greatest asset.

I am working to establish more consistent and regular communication with you across multiple platforms. I hope our Regional all-staff Hui, increasingly becomes an important platform for all of you hear from me and our leadership team, to ask questions and to provide feedback. All questions are welcomed if they are asked in a respectful and professional way.

We are also supporting and engaging with our primary and community partners to ensure well connected health and social care services delivery.

I believe you have to love what you do. We spend a lot of time at work, and working in public health can be hard work at times.

If you are someone who is currently not enjoying their work, then I set you a challenge as we embark on a new year. I encourage you to think about why you are feeling this way and think about how we can go about changing this. This doesn't mean I want you to leave the organisation but reflect on how you are "showing up" for work each day. Think about what makes your day a great one, and what is getting in the way of this right now – what can be done to reserve this for you. For example, there may be opportunities to move to a different role within our organisation or you might have lost connections with others – how can we get more meaningful connections back for you? Your happiness is important and essential for you to be at your best, so look after it.

3. Living within our means

My final priority area is to ensure that we live within our means and that the budget entrusted to us is utilised effectively on behalf of our community and all taxpayers.

At times this can be challenging as there will never be enough money in the system to do all of things we'd like to do, as quickly as we'd like to do them.

This is where the value of a team comes into its own. We must take a whole of system approach and work together to review how we are delivering our services, changing, evolving and innovating. This will assist us greatly in being able to prioritise where we spend our budget and improve our effectiveness within our communities.

This also allows us to invest in new initiatives and services and builds confidence with our funders that we are a trusted team to invest in.

Just like we all do with our home budgets, this requires discipline and at times some trade-offs around what we will prioritise this year, as opposed to last. This is difficult to do in health, as everything can be considered important. However, great people do great things, and this is who we are.

We will have to reprioritise what we spend some of our funding on, we will have to review how we deliver our services to ensure that we are contemporary in our practice, but we will do this together, as a team. I have every faith that with good engagement, teamwork and communication, we will continue to build on all that is good about Health New Zealand – Te Waipounamu and together, we will continue to pursue excellence in everything we do.

The start of the New Year

Over the holiday season I read *Rising from the Rubble – A health system's extraordinary response to the Canterbury earthquakes* written by Michael Ardagh & Joanne Deely.

For those who haven't read it, the book tells the story in deeply personal ways, about how the Canterbury and the broader Te Waipounamu health care system and community responded and recovered following the tragedy of the 22 February 2011 earthquakes. Of course, I do not raise it here to trigger any trauma for those affected, but to commend the response (congratulations to everybody involved) and to consider many of the key learnings described in the book around the importance of collaboration, collegial relationships and well-connected health and social care services as an essential foundation for an effective integrated health care system.

There are other examples of such impressive whole of system collaboration such as through the Covid pandemic, the Southern floods and the New Years Eve tragic incident in Nelson.

As I was reading *Rising from the Rubble* and the described key learnings, thought but these others examples and what I have seen and heard from all of you, I couldn't help but reflect on some of the challenges we are experiencing today as we progressively make the transition to a new Health New Zealand system of care delivery.

At our Regional Hui' on [14 November](#) and [12 December](#) I discussed my observations and current thoughts around what I believe needs to be prioritised and actioned across Te Waipounamu to continue the evolution in meeting the goals of the Health New Zealand reset.

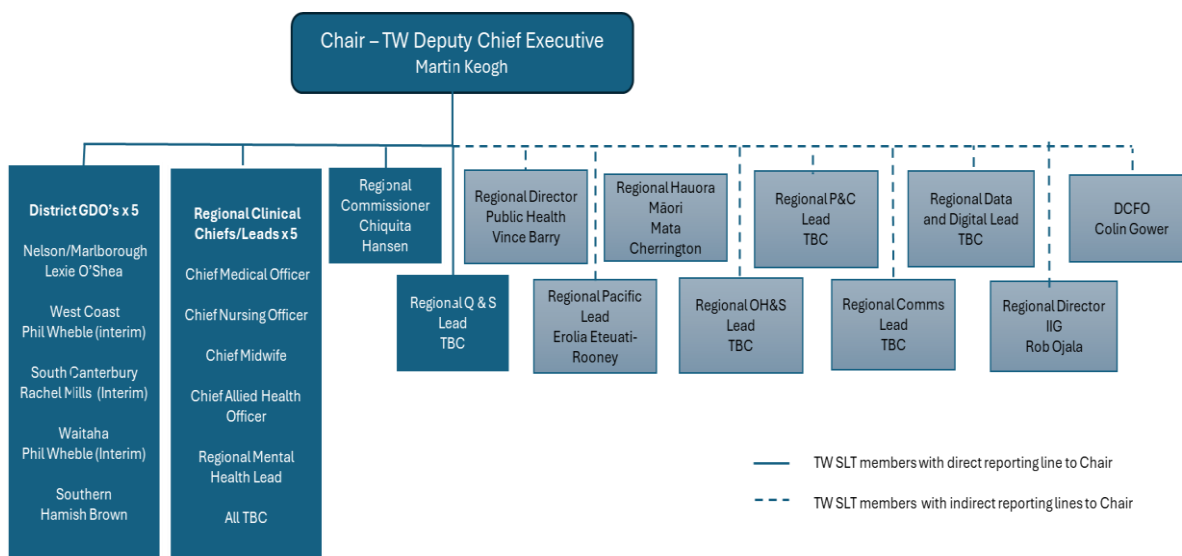
I have also used the holiday season to reflect on my first few months in this role and clarify my thoughts on what I believe is required to *transform to our new future state* and what our 2025 priorities need to be. The feedback I have received from many of you has guided my thinking.

As we commence a new year, I would like to outline my proposed next steps for Te Waipounamu to realise the Health New Zealand reset vision.

Our 2025 priorities & key actions

Action 1: Establishing a Te Waipounamu Senior Leadership Team

Health New Zealand has been in a process of continuous organisational change since its formation. Constant change can make it challenging for people to understand where accountability and decision-making lies. A key objective of devolved regional accountability is to address this, enabling decision-making as close as possible to the frontline, through strengthened regional leadership. Figure 1 below illustrates Te Waipounamu Senior Leadership team Org Chart.



The membership is deliberately designed with collaboration in mind, balancing leadership roles across Clinical, Hospital & Specialist Services, Commissioning, Hauora Māori, Pacific, Public Health and all Enabling functions.

The newly created Te Waipounamu Senior Leadership Team (SLT) will be underpinned by a strengthened governance framework ensuring there are single points of accountability and decision making within key portfolios and enabling functions.

As you can see, some Te Waipounamu SLT members have a direct reporting line to me, while others will be indirect reports. As the national review around devolution continues, some reporting lines may change in the future. However, in operating as a highly effective team, with shared goals and priorities reporting lines become less important.

For roles where there is an incumbent, these individuals will automatically become SLT members. For roles where there is not an incumbent, an EOI process will occur.

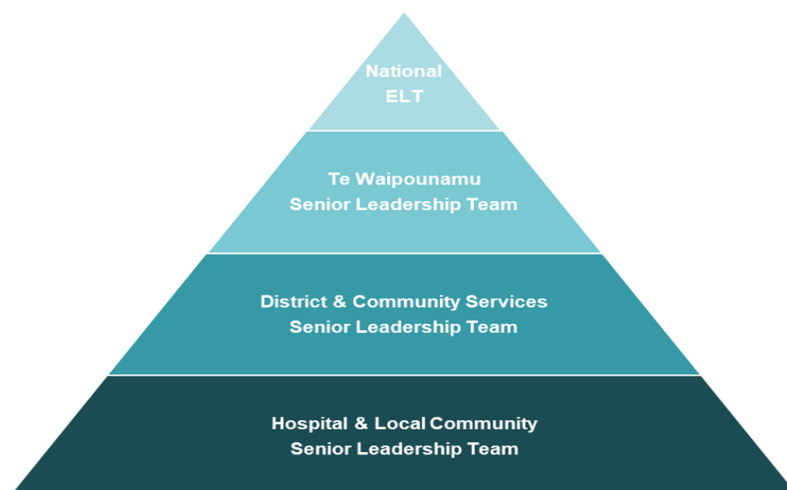
Now that the Clinical Leadership model across Health New Zealand is finalised, a key objective of the Te Waipounamu SLT membership will be to build and strengthen clinical leadership and management at all levels of the organisation, acknowledging the pivotal role clinicians play in both shaping strategy at the top levels of the organisation and supporting greater engagement and empowerment of all clinicians in designing delivery of care to our patients across the care continuum.

The Te Waipounamu SLT will meet for two hours each fortnight initially (a fortnight apart).

- Meeting 1 – Formal performance meeting for the region. Detailed review and analysis of the balanced score card will be undertaken with outcomes/actions allocated within a prescribed timeframe. This will be the region’s most senior decision-making forum with appropriate agendas, minutes and papers submitted for discussion/approval. Terms of Reference to follow.
- Meeting 2 – Strategy meeting. Initially each portfolio lead will present a current state overview of their portfolio outlining strengths, weaknesses, risks and opportunities. Amongst other things, this process will include establishing a risk register for each portfolio, using consistent methodology. This will then feed into a regional risk register which Te Waipounamu SLT will be responsible for reviewing, monitoring and managing. Terms of Reference to follow.
- Each Quarter, meeting 1 will expand attendees to key partners such as Iwi Māori Partnership Boards, PHOs, Hato Hone St John, Police and other key stakeholders, replacing the current Te Waipounamu Regional Integration Committee. Terms of Reference to follow.

Subject to finalising initial membership, the intention is to commence the first SLT meetings by February 2025.

Figure 2 below describes the alignment of the proposed Leadership arrangements between the National, Regional, District and Hospital/Community services.



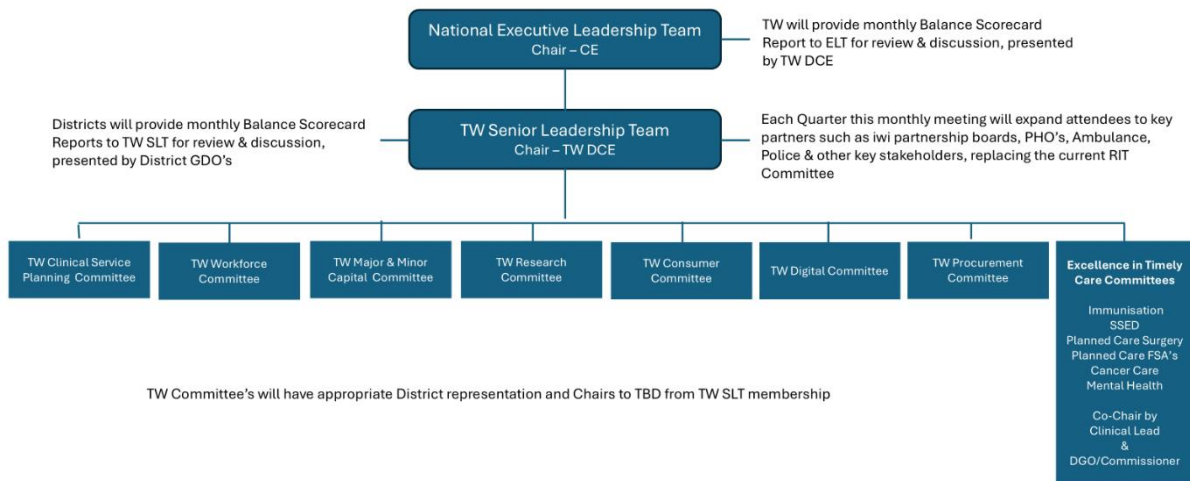
Regional, District, Hospital & Community and service level Balanced Scorecard reporting will enable monitoring of performance against key priorities and targets, increasing accountability and decision making at all levels of the organisation.

Action 2: Establishing Regional and refining District, Hospital and our broader community health care system committees to ensure appropriate Governance is in place with greater alignment, consistency, reporting and monitoring

I am very mindful not to duplicate unnecessarily or detract from the importance of national alignment and of district, hospital site and community service accountabilities for delivery of services to their local communities.

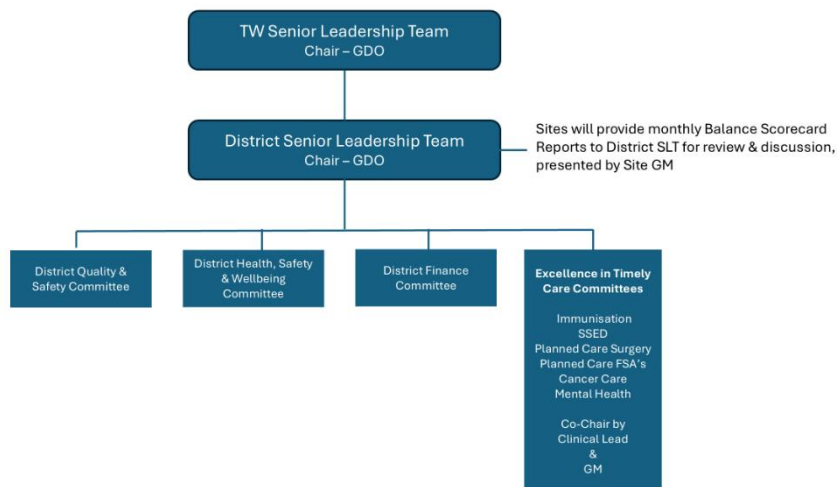
My belief is some committees will be better co-ordinated at a regional level, while others at a district level. To support us in a whole of system approach several of the committees will include membership from our primary and community partners. My proposed committees are as follows:

Te Waipounamu Regional Committee Structure



Health New Zealand
Te Whaitu Ora 5

Te Waipounamu District Committee Structure



District Committee's will have appropriate District site representation and Chairs to TBD from District SLT membership

Health New Zealand
Te Whaitu Ora 6

Finalising our committee structure is a critical component to the strengthened Operational Governance Framework for Te Waipounamu and as such will be a priority for our newly formed SLT once established.

A responsibility of each SLT member will be to establish their own Governance Framework that aligns with that of Te Waipounamu and will include portfolio management/committee arrangements.

Terms of reference for both Regional and District Committees to follow.

Action 3: Developing a Te Waipounamu Strategic Plan

I have heard consistently from many of you, that we do not currently have a shared understanding of what we need to prioritise as a team, which you can all get behind to deliver on. I share this view and we are going to change this.

Health New Zealand, like all health systems across the world, is facing some real challenges as we continue to emerge from the legacy of the covid pandemic, respond to an ageing population, manage global workforce pressures, rising costs of living and the subsequent budget pressures this creates for our society. Health services worldwide are transforming and needing to develop their own version of Health New Zealand's Reset.

Our Government and Commissioner have provided us with very clear direction around what our priorities need to be, through the establishment of health targets, along with a need to become more regionally coordinated and efficient in the way we work.

Together, we will establish our Te Waipounamu strategic direction and intent – our South Star. This will enable us to be aligned on where we are heading and what we collectively need to do to get there.

As alluded to earlier, I find guiding principles create a framework for us all to work to. They define the behaviors we expect to see in each other and guide our decisions.

I shared some of thoughts on what such a list of guiding principles could be for Te Waipounamu, at the Regional Hui on 14 November (see below).

The Relentless Pursuit of Excellence

Guiding Principles

1. We consistently provide safe, high quality and timely care
2. We provide experiences that exceed expectations
3. We work with humility, respect, kindness and compassion in high performing teams of teams
4. We integrate teaching, research and innovation to continuously learn and improve
5. We orientate care towards our community to optimise access, independence and wellbeing
6. We manage our resources wisely and sustainably to provide value for our community

Te Kāwanatanga o Aotearoa
New Zealand Government

Health New Zealand
Te Whatu Ora

I also outlined a possible Te Waipounamu strategic intent – The Relentless Pursuit of Excellence. This resonates with me, due to its simplicity, but also because it recognises that

it does not matter where we are at in our journey, we need to always be striving to do better for our community.

Any strategic intent and guiding principles we develop will of course need to be aligned with Health New Zealand's (work underway and outlined by Commissioner Levy in his New Year message) and Te Mauri o Rongo – The New Zealand Health Charter. [Te Mauri o Rongo - NZ Health Charter](#)

I ask you all to take some time to reflect on these thoughts in preparation for broader engagement and feedback which will occur during the first quarter of 2025.

An organisational strategy is a long-term plan (usually between 2-5 years) that works like a roadmap to guide an organisation in achieving its vision and goals.

It provides a sense of direction – our 'South Star' and alignment for everyone, ensuring better decision making and helps the organisation achieve its aspirations, through setting progressive annual quality and business improvement plans and milestones.

Again, any Te Waipounamu strategy needs to align with Health New Zealand's strategy, such as the soon to be released New Zealand Health Plan and Charter, however it will bring a focus on key regional priorities for our community and people.

Our Strategy will describe:

- Why we are doing what we have planned
- What we plan to do, by when; and
- How we plan to do it.



I have provided the diagram above as an example of what such a strategic plan may look like. This is a strategy I developed with colleagues Monash Health, Melbourne Australia.

I will use the first quarter of this year to work with Te Waipounamu SLT, all of you, key partners and our community to establish our inaugural Te Waipounamu Strategic Plan, ready for implementation from 1 July 2025.

Action 4: Developing a Te Waipounamu Workforce Strategy

Health New Zealand, like all countries, is dealing with the challenges of global health care workforce shortages. A key pillar of our Strategic Plan will be a Te Waipounamu Workforce Strategy.

We cannot provide great care if we do not have great people.

We will become an employer of choice across Te Waipounamu, with a culture and environment that encourages and enables growth and development, so we retain our great people.

There is already a National Workforce Plan in place, which focuses on national initiatives and over-arching organisational requirements. Our focus will be on meeting the specific needs of our region. Our Te Waipounamu team needs to focus on what's relevant to frontline teams, with a focus on maintaining and improving workplace health and safety.

Work has already begun in this area, initially focusing on two key priority groups, being our Medical and Nursing workforces.

Our Te Waipounamu Workforce Strategy will be complemented by systems and processes to ensure we are providing a safe working environment for all our people and patients.

Action 5: Providing excellence in timely care

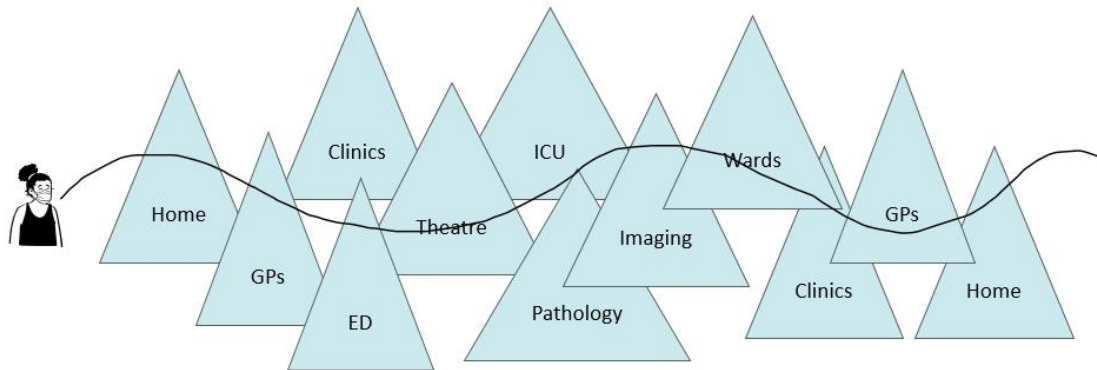
In our pursuit of excellence, it's essential that we work together as a team to ensure we provide quality, culturally safe and timely care to our community.

Across the developed world, health systems struggle, and patients and clinicians can become frustrated with delays in being able to provide timely care, despite the high quality of care provided when access is achieved.

The challenge mainly lies in getting patients from one stage of their patient journey to the next - easily and without delay, along with an over reliance on our hospital-based system, which ultimately creates waiting lists.

As our health system has evolved, it has done so "vertically" where each speciality area strives to provide excellent care in its relatively narrow area of practice.

Our patients however, travel through our health system "horizontally". How well we organise our services and work together across the care continuum has a real impact on our patients and staff experiences and the timeliness of care we provide.



The nature of our community's health needs is rapidly evolving, as are the expectations of the people who access our care. Everything we do needs to be focused through the eyes of our patients and consumers.

We will need to continue to develop well-coordinated systems of care with a greater orientation to home based care and population health needs of our communities. This will enable us to manage the ever-increasing demands on our services. New contemporary approaches such as Value-Based Health Care, where the emphasis is on accountability for outcomes, with incentives for improving outcomes at lower costs. These are new and promising opportunities for Te Waipounamu to increasingly embrace.

This will require us to increasingly move from relying too heavily on traditional care delivery which focuses on diagnosis, treatment, recovery and rehabilitation through our hospitals, to systems which look upstream to include interventions that enable disease prevention and downstream, in partnership with key care partners, to provide more coordinated long-term monitoring and management of patients with chronic disease, preventing disease progression.

Our recently established *Regional Consumer Council*, together with revisions to our Regional Integration Team as part of establishing our new Te Waipounamu SLT and meeting structure will be key vehicles to advance these opportunities.

Important work is also underway to develop a *National Clinical Capability Framework* to help guide which clinical services can be safely provided from our existing facilities which will then guide resource requirements and allocations. We can then use this framework to review geographic and population health needs of our districts/communities, followed by thorough clinical service planning which will result in an aligned capital development programme to meet the future needs of our communities.

Excellence in timely care committees at Regional, District and Hospital levels will be revitalised to focus on improving current unacceptable delays across Te Waipounamu, for too many patients, in accessing timely care.

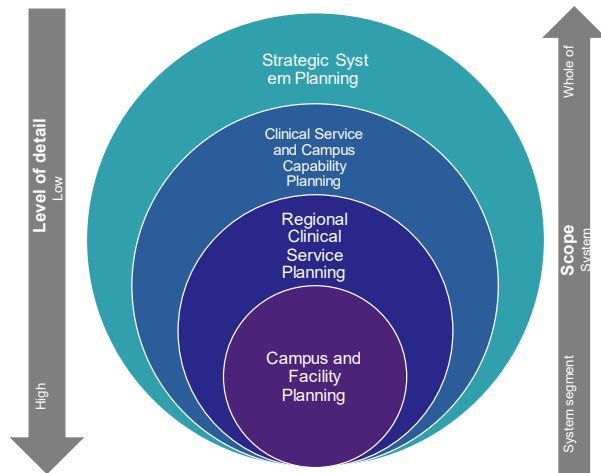
Work is underway to develop a NZ Clinical Service and Capability Plan

What is a Clinical Service and Capability Plan?

A framework or plan that describes the level of service available for each specialty (e.g. orthopaedics) and core services in facilities (e.g. operating theatres), including the role of connections across service delivery networks in Regions across New Zealand.

What level of detail will it have?

The level of detail will be built over time.
 By March 2025 it will define and designate the capability of each facility across the country.
 By November 2025 it will describe the levels of service available at each facility by specialty using generic service level descriptors.
 Over the following two years specific service descriptors will be developed with Clinical Networks as required. Examples include provision of spinal surgery at each level of facility.



NOT GOVERNMENT POLICY - WORKING DOCUMENT

Health New Zealand
Te Whaitu Ora 9

Action 6: Living within our means

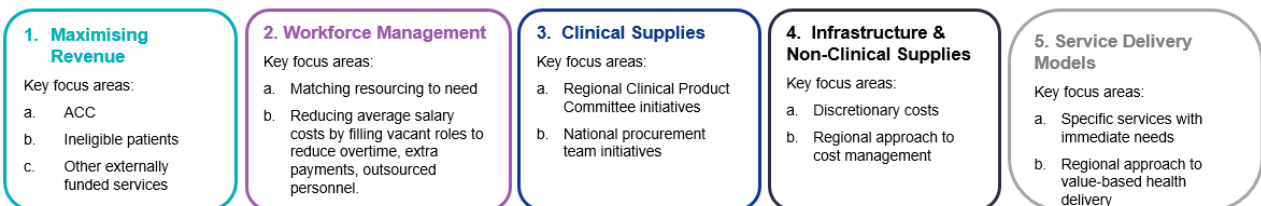
I have two adult children and will soon become a grandfather for the first time. Like all parents and grandparents, I want my family members to be the best they can be today and have a bright future for tomorrow.

We all work hard and try to spend wisely for our families. All of us who work in health care across Te Waipounamu need to be responsible in spending wisely the precious health care resources we are entrusted with in the same way.

Excellent work and good progress is being made by all of us on our 24/25 financial recovery plan. I thank you for your ongoing support and commitment to this challenge.

The fifth workstream 'Service Delivery Models' is focusing on reviewing and revising clinical service delivery opportunities to improve consistency in the quality of care provided, along with gaining greater efficiency and more cost-effective models.

Our approach, at a high level, is set out below



In closing

I aspire that the future of Health New Zealand across Te Waipounamu is a place where kindness is always a priority. Kindness to the people we care for, and kindness to each other.

Above all, it will be our ability to work together beside key partners that will determine our future success in providing world-class fully integrated health care, teaching and research.

A handwritten signature in black ink, appearing to read 'Martin Keogh', with a stylized flourish at the end.

Martin Keogh
Deputy Chief Executive
Health New Zealand - Te Waipounamu | South Island