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3 - NOV 2011

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Tēnā koe Lesley i nga āhuetanga o te wa

Thank you for your letter dated 10 October 2011.

In response to your questions. The Maori Party:

**-supports the continuing work of Health Workforce NZ** and will advocate to ensure that the necessary resources are provided to implement its programmes. We are supportive of initiatives to provide national leadership and co-ordination of workforce training and development across the health and disability sector.

**-acknowledges that health outcomes depend on all health professionals, including medical staff to help bring them about.** In order to address medical workforce shortages and improve the retention of doctors in the workforce, we support voluntary bonding to reduce fees for medical students, providing for increased funding for health workforce training; and professional development; and an increase to recruitment and retention programmes to attract students into the health sciences.

**-advocates to alleviate the burden of student debt for medical students** by promoting interest-free student loans and a voluntary bonding scheme.

-acknowledges that the policy on the seven year loan cap, which will potentially impact on 20-30 per cent of medical students is restrictive, but that this will help to prevent national debt levels.



**-will promote implementation of a plan to address the social determinants that impact on health inequities in this country by a commitment to the rollout of Whanau Ora.** Whanau ora calls for an integrated approach, requiring agencies to co-ordinate and collaborate, and thus it promises efficiencies in service delivery.

-will address the relatively low health status of Aotearoa's children by promoting our policy of free preventative health care to those under 6 years of age. Children and young people should not be excluded because of their whanau employment status, ability to pay or where they choose to live.

**-will commit to greater rationalisation of DHBs and support the separation of the funder provider roles of the DHBs** as long as it does not impact further on health inequalities. We have promoted a review of the duplication of corporate and administrative functions between hospitals, PHO's and DHB's, and whether there are any savings available if duplications were removed.

-will **advocate for greater regional/national coordination of services.** The Maori Party will also investigate a co-management model for Maori statutory representatives on DH's to increase their influence. There should be new DHB representatives to be appointed by the Minister responsible for Maori Health.

-the Maori Party **advocates for a high quality public health system**, which is generally free or low cost and accessible to all, and always aims to improve co-ordination to work together, especially to review the duplication of corporate and administrative functions between hospitals and private facilities. Primary healthcare must be provided at the earliest stage possible to optimise treatment, and outcome, quality of life and cost effectiveness.

-advocates that **private healthcare needs** to be regulated to ensure that it achieves standards set by the country, mainly regarding safety, value and efficiency.

-acknowledges that **general practice continues as the core of the Primary Health Care Strategy.**

**-acknowledges the provisions of 24/7 services continues to be a critical issue for primary care, particularly in rural areas.** We will investigate development pathways for the unregulated workforce (community health workers).

-will ensure equitable access to health services for all New Zealanders by the development of appropriate national policy frameworks within which services are delivered.

**-acknowledges that through more government funding, doctors should have the ability to conduct and participate in research.** The Maori Party will encourage collaboration between medical professionals to increase clinical research in Aotearoa. We seek to establish a priority investment fund for Maori research and development.

-will improve **maternity services for whanau** by ensuring that staff are highly qualified and trained, both Maori and non-Maori, in this essential health area.

-acknowledges that the provision of maternity services requires further government funding.

-acknowledges that primary maternity care is brought within the PHO environment, and will actively consult with professionals to ensure this is addressed.

-will advocate for a reduction in waiting times for many elective procedures, by ensuring that Aotearoa is able to train and retain its own specialists, or attract the best skills from overseas.

-acknowledges that Pharmac has to balance cost with clinical efficacy, when making decisions about funding medicines. It is essential that a thorough consultation process takes place with professionals and all other stakeholders for the best decision possible.

-acknowledges that the provision of additional funding to allow Pharmac to extend the range of medicines it purchases is critical for positive patient outcomes.

-will review relevant legislation and regulations with a view to changing any inflexibility in the process.

-acknowledges that the introduction of compulsory insurance and/or provision of tax relief, may assist the outcome of health in Aotearoa.

-acknowledges the introduction of subsidised premiums and/or a community rating system, to assist the outcome of health in Aotearoa. And to investigate the provision of tax relief on premiums.

In summary:

In all of these issues Te Tiriti o Waitangi and the partnership between the Crown and Maori is acknowledged in terms of positive health outcomes for both Maori and non-Maori. Health is a basic human right. We will continue to advocate for the social, cultural and economic development and wellbeing of Maori, for the benefit of all New Zealanders.

Heoi ano



Hon Tariana Turia  
Co-leader of the Maori Party

*Attached : Maori Party Health Policy*

# HEALTH / HAUORA

We want our whānau to be the best that they can be and to be supported by an equitable, sustainable health system. We want to accelerate clinical and service integration; to achieve equity in access, and to focus on targets which enable public reporting.

## We are committed to:

- prioritise oral health including instigating an annual oral health check for low income families;
- continue to address the increases in diseases of poverty such as rheumatic fever and meningitis;
- establish youth wellbeing centres in consultation with rangatahi;
- bariatric surgery for at least 1000 more people each year to address obesity, heart disease and diabetes;
- review the Health Act to ensure implementation of rongoā Māori;
- investigate a co-management model for Māori statutory representatives on DHBs to increase their influence. New DHB representatives to be appointed by Minister responsible for Māori Health.
- Establish a health workforce project for pay parity to retain Māori nurses in iwi providers
- investment in development pathways for the non-regulated workforce (community health workers);
- Refocus Māori Provider development to focus on outcomes in primary care where services need to grow.
- remove tax from prescription medicines and investigate the viability of green prescriptions
- Whānau Ora will be rolled out across government with a separate appropriation in each financial year
- universal well child services to all children under 6
- review of vision and hearing testing as universal tests
- We will monitor cultural competency in all agencies to ensure the quality of services, and equity of access and outcomes to bring out well-being. Chief executives will be required to report six monthly on how they are progressing positive outcomes for whānau. Cultural competency will be an employment standard in justice, health, education and social services
- We will promote marae-based health clinics as preferred sites of wellbeing and service delivery to support whānau
- We will support roadshows to promote educational pathways in areas in which Māori are under-represented; such as health science academies (Te Kura Pūtaiao Hauora) or science camps;
- We will introduce plain packaging and we will advance the tobacco control strategy for Aotearoa to be smokefree by 2025.