Our health and disability system
Stewardship

'Stewardship' means ensuring that all the parts of the health and disability system are working well together to deliver quality care to all New Zealanders in a sustainable way. It is one of the main ways that the system accounts for what it is achieving.

What's changing?

The Ministry of Health is currently the chief steward for the system, and this won't change. However, we are making some changes to strengthen this role and to ensure that the whole system delivers for our communities.

In future, a new organisation – Health New Zealand – will be primarily responsible for delivering care and managing services, including those currently led by District Health Boards (DHBs) and the Ministry of Health. Health NZ will oversee the performance of those services, drive improvement and innovation, and take steps to change services where necessary. It will work in partnership with the Māori Health Authority to ensure services are performing for Māori.

The Ministry of Health's role will be refocused on strategy, policy, regulation and monitoring the outcomes which are achieved by system as a whole. This will allow the Ministry to advise the Minister of Health to hold organisations to account, and support actions where expectations are not being met.

The Māori Health Authority will also work in partnership with the Ministry as a steward for hauora Māori – ensuring that our health system is performing for Māori, and tracking performance against goals for Māori health and equity.

Why?

The delivery of health services is currently split across 20 DHBs, creating unnecessary complication and duplication. It can be difficult for the Ministry of Health to monitor and manage performance across the whole health system. Being steward of the health system is also made more difficult for the Ministry of Health because it directly commissions and manages a range of services, which further fragments the system.

By unifying operational delivery in Health NZ, whole-of-system stewardship is made much more practical. This will enable the Ministry of Health to monitor one organisation rather than 20, and support the Ministry of Health to develop and deliver national policy direction and health strategies.

At the same time, giving the Māori Health Authority a distinct stewardship role responds to the long-running failure of our health system to achieve equity for Māori, and ensures an enduring focus on hauora Māori.

What will it look like in future?

The Ministry of Health will monitor and report on the outcomes achieved by the system as a whole, together with the Māori Health Authority. Health NZ and the Māori Health Authority will design, commission and deliver health services to meet New Zealanders' needs, will account for their performance, and will innovate and improve those services over time.

Health NZ, with support from the Ministry of Health, the Māori Health Authority and other health agencies such as the Health Quality and Safety Commission, will help providers to continuously strengthen services and will respond to emerging risks or issues.

When things aren't working well, such as care outcomes not being achieved, Health NZ will be able to quickly identify problems through its regional and district offices and provide assistance and advice to get care back on track. If problems persist, the Ministry of Health will identify these through its monitoring and support actions to tackle them.

What's next?

Interim agencies will be set up later in 2021 to support the establishment of Health NZ and the Māori Health Authority. Together with the Ministry of Health, these agencies will begin to develop frameworks for how they will collaborate to deliver quality care to New Zealanders, and for how Health NZ will be accountable to Ministers and our communities for health services.

Want to know more?

Further information about the work and progress of the health reforms is available on the DPMC website under the work of the Transition Unit:

www.dpmc.govt.nz/our-business-units/transition-unit