



**Pae Ora  
(Healthy Futures) Bill)**

**Pae Ora Legislation  
Committee**

**9 December 2021**

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## **Introduction**

1. Nelson Marlborough Health (Nelson Marlborough District Health Board) (NMH) is a key organisation involved in the health and wellbeing of the people within Te Tau Ihu. NMH appreciates the opportunity to comment from a public health perspective on the Inquiry into health inequities for Māori.
2. NMH makes this submission in recognition of its responsibilities to improve, promote and protect the health of people and communities under the New Zealand Public Health and Disability Act 2000 and the Health Act 1956.
3. This submission sets out particular matters of interest and concern to the Public Health Service, NMH. Please note that due to our public health workforce being involved in COVID response work, we haven't been able to dedicate time to responding to this consultation. NMH has read the submissions from Canterbury District Health Board (CDHB) and Public Health, Regional Public Health (RPH) and the Public Health Unit of Southern DHB and we have endorsed key components of those submissions below.

## **General Comments**

4. NMH commends the overall purpose and intent of the Bill in addressing inequities in health and seeking to protect, promote, and improve the health of all New Zealanders. NMH welcomes the presence of a Public Health Agency, the important role that the Director of Public Health will play and the establishing of an expert advisory committee for Public Health issues.
5. NMH supports a whole of Government approach to health which is essential for the equitable health outcomes that this Bill is seeking to achieve. Health needs to be a domain in all relevant legislation. As noted in the Health and Disability System Review: Interim Report, addressing health inequities requires working across sectors, and understand the factors that shape health outcomes at a national and local level. Equally, as noted in the Health and Disability System Review, improving health outcomes requires a health system that works collaboratively and in partnership. NMH recommends a Health in All Policies approach, to ensure that well-being and health outcomes are actively considered in all planning and policy decisions.
6. NMH endorses RPH's recommendation that the Public Health Agency has clear responsibilities and expertise for wellbeing outcomes. As part of that, the Director General of Health should be required to publicly report on key public health indicators, goals and outcomes for Aotearoa, beyond infectious diseases to include social determinants of health such as housing and climate change.

7. NMH agrees with the CDHB that the Health Act 1956 should also be reformed and updated in order to ensure that the scope and mechanisms of public health legislation are better matched to current key population health issues and concerns.
8. NMH endorses CDHB's recommendation that the definition of Public Health Services is expanded to include the five core functions of public health. The five-core functions of public health are: health assessment and surveillance, public health capacity development, health promotion, health protection, and preventative interventions. These functions were highlighted in the Health and Disability Review and are important to include to ensure that the planning and implementation of the new health system reflects a comprehensive understanding of public health.
9. NMH would like to see further detail within the Bill about structures and leadership at a regional level. This is important as there are many key regional collaborations and partnerships already in place such as the South Island Public Health Partnership which is focused on improving the health and well-being of the South Island population, particularly focussing on improving Māori health outcomes. The Partnership also supports the relationships and connections between the South Island Public Health Units and other parts of the health system, as well as support for more effective regional and local delivery of services. The Partnership also facilitates a number of regional sub-groups and communities of practice, which have developed and collaborated on specific areas of work including: alcohol harm reduction, smokefree, healthy eating and active lifestyles, and environmental sustainability. The Partnership continues to facilitate regional dialogue, peer support, and shared learning throughout the pandemic.
10. Climate change and the health impacts of climate change are not mentioned in the Bill, despite environmental health being critical to the health and well-being of all New Zealanders. Additionally, the health sector's own environmental impact and emissions need to be addressed. The National Health Service (NHS) in the UK has recently set a goal for a net zero health service. Prioritising and including environmental sustainability within our new health system ensures that we are planning a health system for the future.

### **Specific Comments**

11. *Part 1, Clause 7, Section 1b & c Health system principles:* NMH supports the inclusion of the Health Principles of ensuring equity, active protection, self-determination, the provision of options and the principle of participation. NMH recommends that the wording of the Health Principles be strengthened to closer reflect the recommendation of the Waitangi Tribunal (2019) to provide for tino rangatiratanga, Māori self-determination and mana motuhake.  
*(b) the health system should ~~engage with~~ provide for Māori self-determination and mana motuhake in the design, delivery and monitoring of health services and programmes, and engage with other population groups, and other people to develop and deliver services and programmes that reflect their needs and aspirations, for example, by engaging with Māori to*

~~develop, deliver, and monitor services and programmes designed to raise hauora Māori outcomes:~~

(c) ~~the health system should provide opportunities~~ ensure tino rangatiratanga for Māori, providing for Māori to exercise decision-making authority on matters of importance to Māori and for that purpose, have regard to both

(i) *the strength or nature of Māori interests in a matter; and*

(ii) *the interests of other health consumers and the Crown in the matter:*

12. *Part 1, Clause 7, Section 1e, Health System Principles:* NMH would like to ensure that the concept and functions of 'public health' are clearly understood, within the Bill's framing of adopting a population health approach. As already noted, expanding the definition of public health to include the five core functions of public health (health assessment and surveillance, public health capacity development, health promotion, health protection, and preventative interventions) will ensure that the new system reflects a comprehensive understanding of public health.

In addition NMH recommends that an additional sub-clause is added to recognise the way in which social determinants of health play a significant role in individual and community health and wellbeing and the existing health inequities.

iv. collaborating across government to improve health and health equity by addressing the social determinants of health, including but not limited to housing, transport and climate change.

13. *Part 2, Clause 14, Section 1(g) Functions of Health New Zealand:* NMH recommends the inclusion of an Environmental Sustainability Unit within Health New Zealand which is accountable for health sector's response and planning to climate change and is responsible for developing clear goals and strategies to reduce the health sector's emissions and environmental footprint.

14. *Part 2, Clause 14, Section 1 Functions of Health New Zealand:* In recognition that health and health equity are directly impacted by policies and practices from across government, improving health and health equity outcomes requires working across government. NMH recommends that an additional function be added to Health New Zealand. This function will allow them to request public health and health equity impact assessments from the Public Health Agency.

(1) *The functions of Health New Zealand are to—*

(r) request public health and health equity impact assessments from the Public Health Agency on proposed policy and laws from across government that impact on health including but not limited to housing, transport and climate change.

15. *Part 2, Clause 19 Functions of Māori Health Authority:* The functions of Health New Zealand include evaluating the delivery and performance of services, however this function is not

included in the functions of the Māori Health Authority. NMH recommends that evaluation of services be the responsibility of both entities. Māori engaging in and leading evaluation of services supports Māori decision making, self-determination, and ensures that Māori understandings and data are leading health service change towards equity.

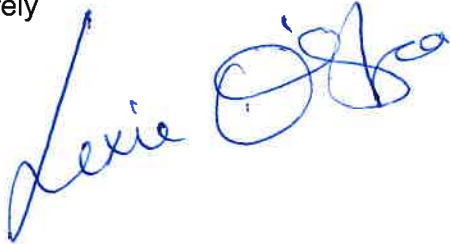
16. *Part 2, Clause 49, Section 3 In developing a locality plan for a locality:* NMH recommends that the consultation process for the development of locality plans includes a requirement that Health New Zealand must consult with a local Medical Officer of Health or local Public Health Unit in the development of locality plans. This will ensure that locality plans adequately consider the local population's health and equity needs and ensure that public health services working within localities are well aligned with other goals within the locality plan, and the other local organisations contributing to the plan.
17. *Part 3, Clause 86, Section 2 Expert advisory committee on public health:* The expert advisory committee on public health is tasked with providing independent advice to the Minister, the Public Health Agency, and Health New Zealand. NMH recommends that the advisory committee also provides advice to the Māori Health Authority on matters of public health issues, health promotion, and other matters. Ensuring that both Health New Zealand and the Māori Health Authority are advised in public health matters will support a more equitable health system, and one that reflects the incorporates the core functions of public health.
18. *Part 3, Clause 86, Section 3a Expert advisory committee on public health:* NMH recommends the membership of the Expert Advisory Committee on Public Health has members with skills and knowledge across the five core functions of public health as well as equity and  
*(3) The committee—*  
*(a) consists of such members as the Minister determines who collectively has knowledge of, and experience and expertise in relation to health assessment and surveillance, public health capacity, health promotion, health protection and prevention interventions as well as equity and Te Tiriti o Waitangi.*

## Conclusion

19. NMH thanks the Pae Ora Legislation Committee for the opportunity to comment on the Pae Ora (Healthy Futures Bill).

20. NMH does not wish to be heard

Yours sincerely

A handwritten signature in blue ink, reading "Lexie O'Shea". The signature is written in a cursive style with a large initial 'L' and 'O'.

Lexie O'Shea  
**Chief Executive**  
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