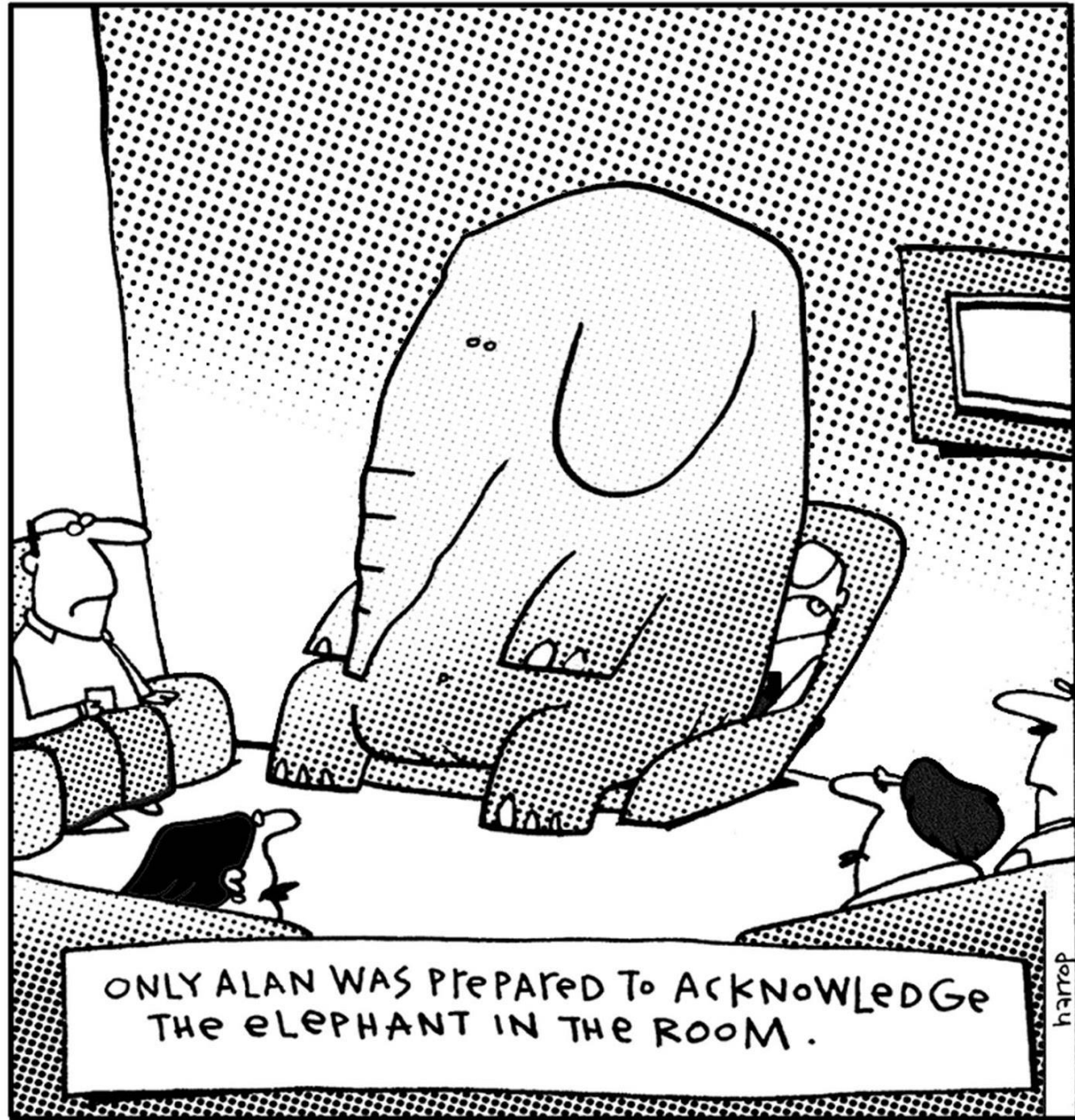


# Equitable Care: A call to collective action

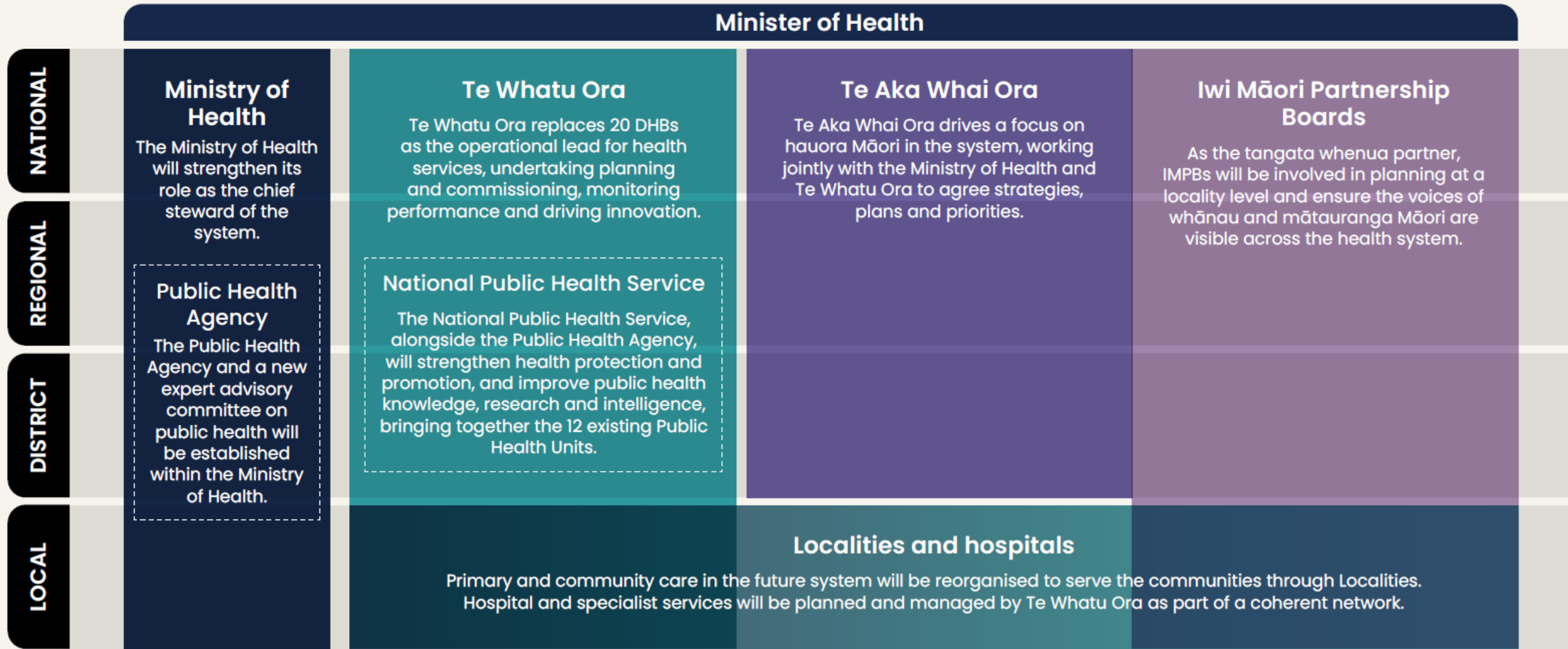
**Nadine Gray: Chief Nursing Officer Te Aka Whai Ora**  
**Emma Hickson: Chief Nursing Officer Te Whatu Ora**



ONLY ALAN WAS PREPARED TO ACKNOWLEDGE  
THE ELEPHANT IN THE ROOM.



# How the ~~new~~ system is set-up.....





# Whakamaua Māori Health Action Plan

2020–2025

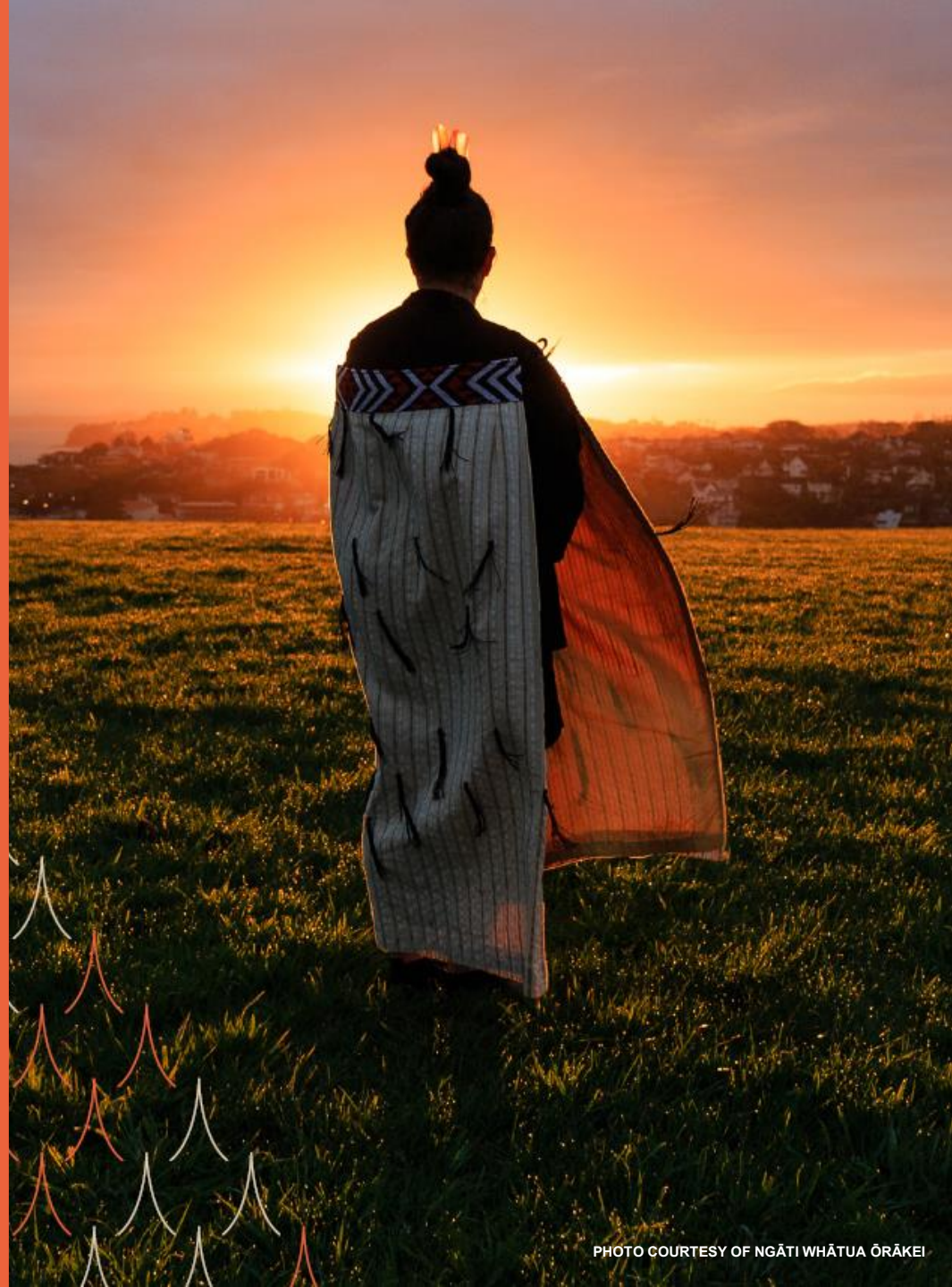


PHOTO COURTESY OF NGĀTI WHĀTUA ŌRĀKEI

# Whakamaua: Māori Health Action Plan 2020-2025

Shared responsibility for Māori health and wellbeing

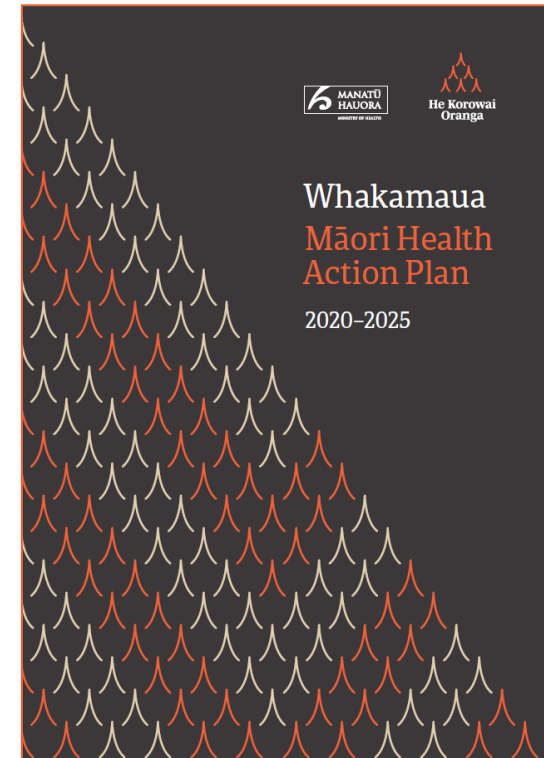
Whakamaua is a whole-of-system action plan to give effect to He Korowai Oranga.

Living document expected to evolve.

Well aligned with the direction of the Health and Disability System Review.

Whakamaua means ‘to secure, to grasp, to take hold of, to wear’. It also widely associated with the whakataukī used in this plan.

*‘Ko te pae tawhiti, whāia  
kia tata. Ko te pae tata,  
whakamaua kia tīna – Seek  
out the distant horizons,  
while cherishing those  
achievements at hand.’*



# Equity lives within our Treaty framework

The Ministry's definition of equity is:

*In Aotearoa New Zealand, people have differences in health that are not only avoidable but unfair and unjust. Equity recognises different people with different levels of advantage require different approaches and resources to get equitable health outcomes.*

This definition of equity was signed-off by Director-General of Health, Dr Ashley Bloomfield, in March 2019.

**Equity is both inherent to Article 3 and an important Treaty principle.**



**Māori health inequities cost Aotearoa over \$1.034 billion per year.** The majority of this cost is borne by Māori families and society. In some areas, the health system actually saves money because Māori receive significantly less care – for example, we found Māori had 774,331 “missing” GP visits each year.

**Reducing health inequities offers significant economic benefits.** In an environment where actions to fix health inequities are sometimes viewed as beyond our financial means, we demonstrate that “the cost of doing nothing” is itself a very expensive choice.





**FIGURE 1: BARRIERS TO SEEKING HELP FOR WHĀNAU**



***“Communication is an inhibitor to effective access of services and needs addressing for patients and their whānau to receive timely and quality care...”***

## PATIENT-CENTERED CARE



# How does this impact our patients and us?

## Discouraging media landscape

The media coverage about the nursing profession continues to be overwhelmingly discouraging, and is generally delivered with a national lens, rather than regionally specific.

Key themes include:

- Countrywide shortage of nurses and therefore burnout of existing, overworked workforce
- Dissatisfaction around pay
- Unpaid clinical placements alongside full-time study with no compensation for expenses

## Local aged care facilities speak up on lack of nurses

### GPs and hospital EDs struggling to cope with patient numbers

Paddy Gower Has Issues: Why are student nurses required to work for free and is it making staff shortages worse?

### PM: 'We've been aware of the global shortage of nursing staff'

NEW ZEALAND / POLITICS

### Concerns Australian recruitment drive will deplete NZ nurses

Kiwi nurse exposes hospital  
conditions that prompted her move to  
Australia

### Higher wages luring thousands of nurses to Australia as New Zealand battles major shortage

12/11/2023



*He aha te mea nui o te ao  
He tangata, He tangata, He tangata*

**As important and helpful as structures might be  
it's what happens within them that makes the difference.**



# He Tangata

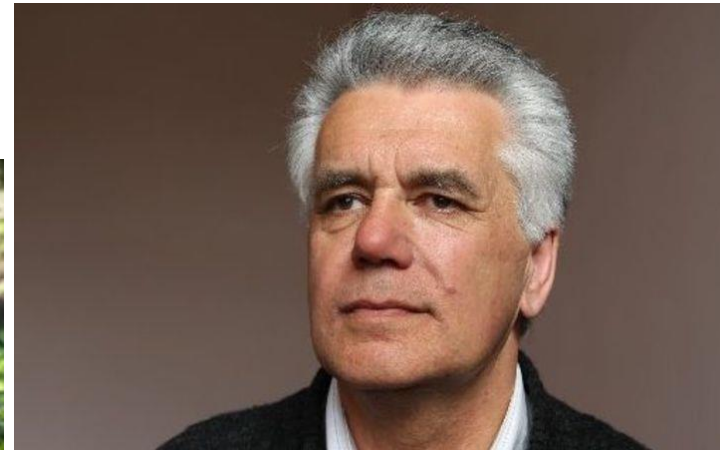




**What leadership response  
is needed to address the  
challenges?**

# Lead with Influence







**Being a leader of change means  
challenging the status quo.**

**This can be tough.**

**People have a “status quo bias”.**

**The more we are invested in  
something, the harder it is  
to abandon it.**





# Ngā mihi nui

**Te Aka Whai Ora**  
Māori Health Authority

**Te Whatu Ora**  
Health New Zealand