

Health NZ / Hauora Aotearoa

District Health Boards (DHBs) have served New Zealand well for many years, but over time the system has become too complex and fragmented. Health New Zealand (Health NZ) will be a new organisation established to run the health system across New Zealand, with functions delivered at local, district, regional and national levels.



An interim Health NZ organisation was established in September 2021 to help drive the development of the permanent entity and its role within a newly transformed system.

Visit the interim Health NZ website here: [Home | Health New Zealand \(hnz.govt.nz\)](https://hnz.govt.nz) [↗](#)

What's changing? / He aha ngā panonitanga?

The reforms will disestablish the 20 existing DHBs and merge their functions into Health NZ, which will lead the day-to-day running of the system for the whole country. Health NZ will also take over the operational functions of the Ministry of Health, such as managing national contracts.

Health NZ will manage all health services, including hospital and specialist services, and primary and community care. Hospital and specialist services will be planned nationally and delivered more consistently across the country. Primary health, wellbeing and community-based services will be planned and then purchased through four new regional divisions of Health NZ. Each region will work with their district offices, located closer to local communities, to develop and implement plans based on local needs to improve the health and wellbeing of communities.

Health NZ will be responsible for improving services and outcomes across the health system. Working in partnership with the [Māori Health Authority](#), Health NZ will develop a New Zealand Health Plan – a blueprint for what the health system will deliver over years to come.

The transition will be planned, staged, and managed to minimise disruption to services. DHB employees will transfer to Health NZ with existing terms and conditions. The formal date to transfer to the new structure is likely to be around 1 July 2022, after legislation is passed.

Why? / He aha ai?

Who you are or where you live should not determine the range and quality of services you receive. The reforms will give people access to consistent quality care when they need it, to help people live longer in good health and have the best quality of life.

DHBs were set up 20 years ago to give communities a greater say in decision-making, but they have also created some barriers between areas. Over time, this has led to a focus on individual districts and not on what is best for New Zealand as a whole – creating variation and inequity between areas and populations. It has also led to complexity and duplication, with DHBs replicating functions such as procurement, IT systems and asset management that could be done more efficiently either nationally or regionally.

Our health system has become too complicated for a small nation. Decisions which impact everyone, like where we invest in new hospitals or services, are not made nationally. Too much time is spent enforcing boundaries between districts and professions, and not enough emphasis on how we can collectively work for the benefit of five million New Zealanders.

While there is excellent practice within our system, it is hard to find and spread innovation across so many organisations. Opportunities to improve are missed. Although DHBs were intended to bring care closer to communities, people still have little involvement or voice in key decisions.

What will it look like in future? / Ka pēhea ā raurangi?

For those working in health services in DHBs, not too much will change in the short-term. Health NZ's regional divisions and district offices will ensure continuity of services in the health system. As Health NZ establishes its new role and functions, the way services are planned and commissioned will change. There will be a focus on consistency and quality, and strengthening national and regional networks.

Primary and community care will be better tailored to the needs of communities, and people will have more opportunities for their voice to be heard on services and how they're delivered. Over time, this will lead to more innovative services which better reflect community priorities and needs, including more accessible digital and virtual care.

Hospital and specialist services will be far more consistent, with more equity of access across New Zealand. People will have access to the right care at the right time no matter of where they live. Shifting the emphasis towards primary and community care will also allow more people to be cared for close to home, and take a greater role in their own care. Patients and employees will be able to move between areas to access care and work where needed.

What's next? / He aha e whai ake nei?

The detailed design work over coming months will include engagement with the health sector and with people, whānau, and communities.

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