

Better access to timely, quality healthcare

Primary Care Initiatives – March 2025

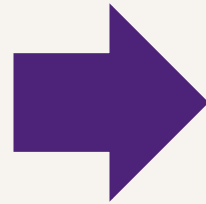
Discussion points

- Overview – recent announcements
 - Enhanced capitation
 - 24/7 Digital
 - Shared Digital Health Record
 - Workforce
 - Health Target
- Enhanced Capitation & HCH/Modern GP models

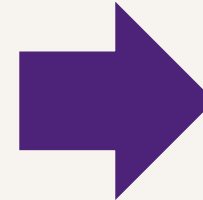
Too many New Zealanders are finding it hard to get an appointment with their General Practice team

Key challenges:

Primary care workforce
Primary care funding
Cost barriers



Approx 34% of GPs have closed books
50,000 people didn't use a GP for cost reasons (2023)
1M people didn't use a GP for long wait reasons (2023)



Poorer health outcomes
Lower immunisation rates
Higher use of secondary care

Making it easier for people to access primary care

March announcements

More Drs and nurses with more access to training

Enhanced funding
- \$285m over three years

24/7 subsidised digital online consultation access

Access to a health professional when you can't get a GP appointment

100 clinical placements for overseas trained Drs

Primary care graduate Dr pathway – 50 placements

25 more doctor training places

More funding to support primary care to deliver greater access

120 more NP training places

Advanced tertiary education for 120 more primary care registered nurses

Incentivised primary care placements - 400 graduate RNs

Enhanced funding - \$95m per year

- ❑ Extra funding of \$95 million per year available from July 2025
- ❑ Focus - access to primary care services, provide more specialist treatment to patients, and increase delivery against a set of key health targets
- ❑ In addition to the capitation funding increase that general practice receives annually
- ❑ More details on funding criteria and process will be announced in coming months
- ❑ Includes funding for extended care

24/7 subsidised digital online consultation access

- ❑ Access to video consultations with New Zealand-registered clinicians, such as GPs and Nurse Practitioners, for urgent problems 24 hours a day, seven days a week
- ❑ Aimed at episodic care, people who are not currently enrolled with a primary care provider, can't get a timely appointment, or need to speak to a doctor after-hours
- ❑ Subsidies for some patients
- ❑ Full roll-out supported by a public awareness campaign beginning July
- ❑ Service will be required to be delivered by NZ registered health professionals, as well as have robust clinical governance, audit and quality processes in place to ensure the service is delivering high quality care
- ❑ There will be some conditions and care needs that are not best managed online and will need to be managed through a face to face service
- ❑ Requirement to ensure continuity of care - information flows with general practice to support continuity of care. Access to and the use of the Shared Digital Health Record will be a key enabler for this.

Shared Digital Health Record

- ❑ Goals to improve safety and quality of care for patients, save time for patients, and make best use of limited health resources.
- ❑ Our approach is to deliver:
 - a trusted digital health record data service
 - will deliver data into existing products, this means providers can continue to use the systems to which they already have access but, in the future, will have national coverage of core health information.
- ❑ Digital health record will be subject to the Health Privacy Code and assessed against it, with the ability for patients and providers to opt-out.
- ❑ One of the uses for the data is the 24/7 online medical service that is being established, but there are many others including urgent care centres, emergency departments, and hospital inpatients and outpatients

Workforce initiatives

100 clinical placements for overseas trained Drs

25 more doctor training places

Primary care graduate Dr pathway – 50 placements

Incentivised primary care placements - 400 graduate RNs

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Advanced tertiary education for 120 more primary care registered nurses

- ❑ Expansion of existing HNZ two-year training programme to give internationally trained doctors the opportunity to gain full registration through a primary care pathway.
- ❑ Training 25 more doctors each year across the medical schools in Otago and Auckland, beginning in 2026.
- ❑ 50 full-year placements in primary care a year for New Zealand-trained medical graduates
- ❑ Funding for primary care employers to recruit and support up to 400 graduate registered nurses a year.
- ❑ 120 nurses will be funded to train as nurse practitioners specialising in primary care
- ❑ Funding to primary care nurses and their employers to encourage more primary care nurses to upskill and pursue advanced education, including nurse prescriber training

Objectives of enhanced capitation

The objectives of enhanced capitation and performance-based funding are to:

- improve timely access to routine general practice;
- improve proactive care for people with long term conditions such as diabetes;
- improve childhood immunisation rates; and
- enable a greater primary care contribution to planned care targets, faster cancer treatment, and shorter stays in ED.

Proposed criteria

Disclaimer: Not Government Policy

- same day triage and appointments for patients with urgent care needs
- patients are able to make a routine appointment within 5 business days 90% of the time.
- the practice is open for at least 2 hours outside usual business hours to support convenience for patients
- online access for patients through patient portals including bookings, access to notes and results, secure messaging, and repeat scripts
- meets minimum standard re being open for new enrolments (noting that enrolments may need to be curtailed for temporary periods if staffing falls below a minimum level, but that newborns, family members and those new to the area should always have a place to enrol)
- use of an approved modern secure Patient Management System (to keep data safe and support interoperability)
- provision of data to HNZ for the shared care record and data repository, and to monitor performance and agreement to public reporting of outcomes

Proposed Framework

- Proposing 3 areas for compulsory measures which will have improvement targets set based on current baseline of practice.
- Practices will also select two improvement measures of their choice from a defined list
- Practices will need to meet the improvement targets for the compulsory measures and demonstrate improvement against baseline for the improvement measures to access the performance funding.