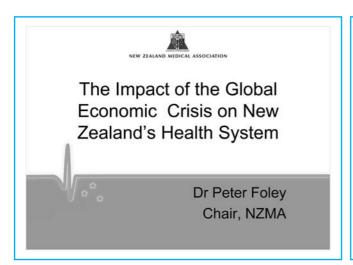
[New Zealand]

# The Impact of the Global Economic Crisis on New Zealand's Health System

Peter FOLEY\*1





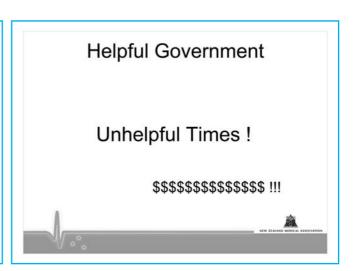
New Government Elected October 2008 making following financial promises:

Two rounds of tax cuts

Increase in the number of medical graduates by 200 by 2012

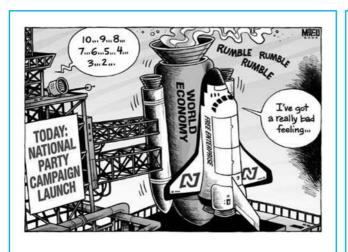
Open and staff 20 new operating theatres in New Zealand

Establish multi disciplinary integrated family healthcare centres



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This presentation was made at the Symposium themed "Impact of Global Financial Crisis to the Health System" held at the 26th Congress of the Confederation of Medical Associations in Asia and Oceania (CMAAO), Bali, Indonesia, November 7, 2009.



#### Direct Effect of the Recession

- Second set of tax cuts set for 2010 cancelled.
- No increase in regulated fees.
- All government departments asked to restrict their spending.



#### Effect of Recession or Government Policy?

- Ministerial Review Group (established by Minister of Health)
  - Established January 2009
  - TOR;
    - To assist the Minister and Ministry of Health by providing advice on further progressing the Government's priorities around clinical leadership, productivity and quality patient services,

### Ministerial Review Group TOR cont.

- To review the existing systems for infrastructure and prioritisation, and advise improvements.
- To help meet serious Vote Health financial challenges by providing a fresh examination of health sector spending, with a view to identifying low priority/poor quality spending that can be moved to improve frontline health services.



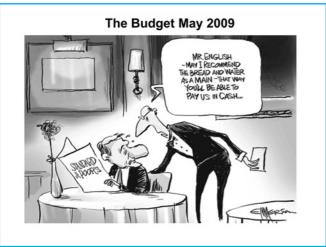
## Ministerial Review Group - Recommendations

- Establishment of a new National Health Board to oversee the planning and funding of national services and to monitor DHBs.
- A number of measures designed to influence PHO consolidation.
- Greater emphasis on policies to ensure national consistency.

# Ministerial Review Group – Recommendations cont.

- Formation of a national shared services agency to carry out backroom services currently provided by each DHB.
- Formation of an independent national quality agency.
- Consolidation of workforce planning and development.





### The Budget May 2009

- Health was well treated in the budget in comparison to other government departments getting 40% of all new spending.
- However it is likely there will be no increase in 2010 or the near future.



### New Initiatives funded

- · Voluntary "Bonding" scheme,
- Increase in medical school places by 60 this year as first step to increase by 200 within five years,
- Proposal to train 800 additional health professionals to staff 20 proposed new elective surgery "super centres."



# SMO Commission, RMO Commission and MTB Reports

- While commenced before the effects of the recession hit New Zealand they were released after.
- Although all reports recognised the medical workforce was comparatively underremunerated, the reports stopped short of recommending a remuneration increase.



### **Future Wage Rounds**

- The government has been putting pressure on the CEOs of all government departments to contain wages.
- This together with the fact that District Health Boards will not get any new funding next year mean that next year's industrial negotiations in the health sector will be difficult.



Dominion Post 24
September 2009

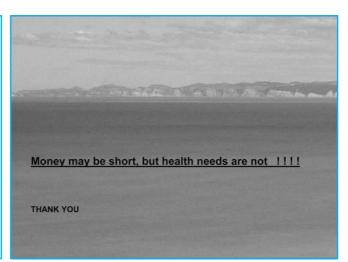
Five years'
pay freeze
warning for
state sector

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## Global Recession and Health – final comment

Overall New Zealand's health system has been relatively insulated from the impact of the global recession to date. But with our small economy, the signs are that this is likely to change in the very near future !!!





#### Glossary

DHB=District Health Board
MTB=Medical Training Board (set up to plan how better to train
our medical students, and how many to train)
PHO=Primary Health Organization

RMO=Resident Medical Officer (junior doctors—houseman or registrars—still in postgrad training)
SMO=Senior Medical Officer (senior specialists in hospital)
TOR=Terms of Reference