

MEMORANDUM FOR BOARD MEETING 30 JULY 2021

To: Pharmac Directors
From: Chief Executive

Date: July 2021

Pacific Responsiveness Strategy Stage Two update

Recommendations

It is recommended that you:

note progress and achievements made since October 2020

note the actions and outputs planned for 2021/22 year.

Purpose

This paper provides the Board with an update on Pharmac's Pacific Responsiveness Strategy, and an overview of work planned for 2021/22 year. The last update was provided to the Board in October 2020.

Strategic Direction

Pharmac's Pacific strategic direction supports the organisation purpose to deliver the best health outcomes from New Zealand's investment in medicines and medical devices.

The Pacific Responsiveness Strategy 2017 – 2026 (the Strategy) is Pharmac's ten-year framework for supporting Pacific people in New Zealand to live healthy lives through improved and timely access to, and use of, medicines and medical devices.

The Strategy intersects with all Pharmac's strategic priorities areas and organisational strategies, particularly equitable access and use, people and capability, relationships and partnerships, and enhance key functions.

The Strategy also aligns with Ministerial expectations for equity and with Government priorities set out in Ola Manuia - the Pacific Health and Wellbeing Action Plan 2020-2025.

Background

The Pacific Responsiveness Strategy (the Strategy) has been in place since 2017.

In 2015 and 2016 we worked with Pacific stakeholders to host Pacific community fono across Aotearoa New Zealand to gather insights about the opportunities, challenges and barriers Pacific people experienced in relation to medicines and medical devices. These insights shaped and informed the development of the Strategy.

The Strategy's purpose is to support Pacific people in New Zealand to live healthy lives through improved and timely access to, and use of, medicines and medical devices. Its mission is that every Pacific person in New Zealand has access to, and understands the use of, the funded medicines or medical devices they need.

The Strategy is focused on influencing health outcomes of Pacific peoples:

- 1. through connecting with Pacific communities directly
- 2. by embedding Pacific perspectives into Pharmac as an organisation
- 3. by influencing change elsewhere in the health system.

Our approach in stage one saw us undertaking a very broad suite of actions. Although these were largely achieved, we recognised that we need to be selective about the areas of focus, and leverage opportunities within and outside the agency to maximise the return on our efforts.

Our last update to the Board indicated the next stage of the Strategy, **supporting growth**, would build on the foundation laid in stage one, with a smaller range of actions aimed at the community, organisation, and system levels of influence. The priorities and desired outcomes remained relevant and applicable.

Progress since our last update to the Board

Since our last update on the Strategy in October 2020, we have re-focused our approach and deliverables, due to changes in the environment and priorities for our key Pacific health stakeholders and communities as part of the COVID-19 response and recovery.

Our 2021/22 action plan has pivoted from the proposed strong communications and media focus to actions that will create readiness for a more sustainable change and impact of our influence within the three levels. This is described in more detail later in the paper.

Across Pharmac several key pieces of work support our Pacific responsiveness:

- The inclusion of Pacific ethnicity in the special authority criteria for two newly funded medicines for type 2 diabetes listed on 1 February 2021. We engaged with key Pacific stakeholders to ensure the wording used in the special authority criteria framed the health need of Pacific peoples in a positive, non-deficit, way.
- The policy on inclusion of ethnicity in special authority criteria is now in the final sign off process. As this is applied more widely, during 2021/22, we will ensure there is a strong focus on the needs of Pacific people, and on addressing the inequities they experience.
- We are in the process of developing an overarching Equity policy, which will identify Pacific peoples as a priority population.
- The new members of the Consumer Advisory Committee (CAC) include Dr Sione Vaka (PhD), a Nurse lead at Counties Manukau DHB. We are now recruiting another CAC member who can bring a focus on Pacific and youth health issues from a New Zealand born perspective. We used our local DHB Pacific network to invite Dr Avataeao Junior Ulu (Director Pacific People's Health, Hutt Valley and Capital & Coast DHB) to be part of the selection panel.
- The new members of the Responsible Use of Pharmaceuticals in Primary Care Expert Advisory Group include Pacific members Dr Maryann Health and Sheenal Kumar.

- We supported the Pacific Pharmacists Association (PPA) with their strategic planning
 and to promote pharmacy as a profession and reach out to communities at the
 Auckland Pasifika Festival. We are currently working with PPA to host a Pacific health
 symposium focused on building pharmacists' Pacific health and cultural
 responsiveness informed by our data insights on medicine access for Pacific peoples.
- In October 2020 we advised the Board that we intended to engage with other
 potential Pacific health partners, including the Pan Pacific Nursing Association, GP
 Pasifika Network, and ANIVA Postgraduate programme for Pacific nurses. We will
 follow these up in 2021/22 once the focus on COVID-19 vaccinations for Pacific
 communities is reduced.
- We are engaging with the Ministry of Health Pacific Health team to ensure our actions are aligned with Ola Manuia: Pacific Health and Wellbeing Action Plan 2020–2025 and will continue to work with them particularly on using our data insights to generate system level impacts.
- We have had initial engagement with the Ministry for Pacific Peoples to explore
 whether we can work with them to support all of Government Pacific Wellbeing
 Strategy; Pacific Aotearoa Lalanga Fou that highlights Health and Wellbeing as a
 priority goal, and will seek to engage further on this.

We are now completing data insights for medicine access need and uptake for Pacific people for our five priority long term conditions: gout, cardiovascular disease, type 2 diabetes, asthma, and chronic obstructive pulmonary disease. The insights are currently in a review process which includes working with clinicians and Pacific health professionals to ensure this work supports Pacific data sovereignty principles and identify opportunities to influence systems and practice.

By partnering with key Pacific professionals and leaders we will be able to disseminate the data insights in a way that supports Pacific health outcomes and ways of working. Much of this work will be given effect through our equitable use and access work plan.

Action plan for 2021/2022

Our action plan for 2021/22 is based around opportunities for the needs and views of Pacific people to be factored into work across Pharmac's strategic work programme.

We have made some changes to our previous focus for our Pacific responsiveness work and have identified actions to better support and sustain our commitment to medicine access and use for Pacific peoples.

Our focus will be on embedding how we will consider impact on Pacific peoples in key policies/strategies; specifically, we will focus on the implementation tools for our inclusion of special authority criteria and health equity organisation policies.

At the community level of influence, we will focus on:

- building strong relationships that create trust and confidence and demonstrate an ongoing commitment to Pacific communities
- developing and using effective communication channels to improve Pacific peoples' access to information about medicines and their use.

One of the ways we will assess the success of our efforts to build strong relationships will be through the annual Stakeholder Relationship Survey.

We will review our communication channels with Pacific people and look to ensure we can communicate effectively with Pacific consumers and stakeholders. The results of this will be used in our communications and, particularly, in the implementation of brand changes.

At the organisation level of influence, we will focus on:

- Embedding Pacific health perspectives and capability across our work programmes, including:
 - work under Enhance Key Functions strategic priority to streamline and improve core parts of our end-to-end medicine funding processes
 - the learning and capability strategy to support us to identify how staff can
 establish and develop the awareness and capabilities they need to engage
 with and incorporate Pacific views into their work.

We will integrate reporting on impacts for Pacific people into our ongoing organisation reporting frameworks to enable better visibility of our Pacific responsiveness across the business plan.

At the system level influence, our focus is to:

 Ensure that the medicine access data insights for Pacific peoples are influencing and bringing about system change for medicines access. Much of this work will be given effect through our equitable use and access work plan and the long term impacts will be measured through the access equity measures of changes in persistence, adherence and access to medicines for the population group.

An overview of our draft action plan for 2021/22 is provided in Appendix One, outlining further details of the actions we will take.

Desired outcomes for the 2021/22 action plan

Community level of influence

At the community level of influence our desired outcomes are:

- meaningful and ongoing relationships with key Pacific organisations and Pacific communities. In 2021/22, we will develop a Pacific stakeholder engagement plan as part of our organisational stakeholder engagement under the Relationships and Partnerships strategy priority. This will be informed by responses to/from our Pacific stakeholders to our annual stakeholder survey.
- that Pacific people are receiving the right information to improve their understanding and use of funded medicines and medical devices. In 2021/22 we will review Pharmac's channels for communicating with Pacific communities. We will look at the information Pacific communities currently receive from Pharmac and ensure we are able to communicate effectively with Pacific communities in relation to brand changes.

Organisation level of influence

At the organisation level our desired outcomes are that:

- our understanding of Pacific health inequities and Pacific cultures is improved. In 2021/22, we will identify organisational requirements for Pacific capability development as part of Pharmac's capability work programme.
- Pacific responsiveness is integrated across Pharmac's strategic priorities and plans. In 2021/22 we will integrate reporting on impacts for Pacific people into our ongoing organisation reporting frameworks. This will make visible the range of work across our work programme to factor in and respond to Pacific health inequities, as it is currently difficult to see the whole picture of the impacts we have for Pacific people. In 2021/22, we will apply a Pacific lens when considering equity in our core processes through the enhancing key functions strategic priority.
- our organisational policies and processes require impacts for Pacific peoples to be considered. In 2021/22, we will consider impact on Pacific peoples in key policies/strategies; specifically, we will focus on the implementation tools for our inclusion of special authority criteria and health equity organisation policies. Part of this work will also include a review of bias in our systems and processes. This will support us to identify and address biases embedded in our work that impact how we deliver for Pacific peoples and other groups, as well as Māori.

Our external advice incorporates Pacific perspectives and expertise. In the October 2020 update to the Board, we proposed establishing Aiga Potopoto, an external Pacific advisory group. Rather than establish a standing committee, we will develop a network of Pacific advisors (with representatives from key Pacific health organisations) who can engage with us on specific pieces of work.

System level of influence

At the system level, we will continue to seek to extend our reach and influence by working closely with system partners.

Our desired outcomes at the system level of influence are:

- to ensure that barriers faced by Pacific peoples, in access and use of medicines are being addressed by Pharmac in collaboration with others in the health system. In 2021/22, as part of our gout action plan (agenda item 8.4), we will explore the feasibility of an awareness raising campaign focused to improve equitable access and use of preventative gout medication and support particularly for Māori and Pacific young men.
- we will also work with Ministry of Health staff on Ministerial advice (described in the gout action plan agenda item 9.4), about how the impact of affordability on medicine access, including for Pacific peoples, could be addressed.
- that more data (quantitative and qualitative) and information is available and being used in the health system to address medicine and medical device access and use by Pacific populations. In 2021/22, we will be publishing and engaging with the sector and system partners with our data insights for all our priority long term conditions, to influence action and positive change. As we implement and disseminate the data insights, we will engage with Pacific professionals and leaders to disseminate the data insights in a way that supports Pacific health outcomes and ways of working. Much of this work will be given effect through our equitable use and access work plan.

Consultation and Consumer Engagement

We plan to establish a network of Pacific advisors who can work with us on specific pieces of work, (with representatives from key Pacific health organisations). We will also seek advice and input as needed from the CAC.

Equity Implications

This work is part of and contributes to Pharmac's Equitable Access and Use strategic priority.

Financial Implications

Budget provision has been made for all but two of the actions in the 2021/22 plan. Specific actions not budgeted will be scoped and considered in the light of other organisational priorities.

Appendices

Appendix One: Pacific Responsiveness Strategy, Stage Two, Supporting Growth,

Workplan 2021 – 2022.



PACIFIC RESPONSIVESS STRATEGY STAGE TWO ACTION PLAN 2021/22

The table below sets out the proposed deliverables and actions for Stage Two of the Pacific Responsiveness Strategy (PRS) derived from the assessment of actions of Stage One Planting the seed (2017-2019) document that was presented to the Pharmac Board in July 2020, discussions with Pharmac's strategic priority leaders and an analysis of the work programme in Pharmac's 2021/22 business plan.

Level of Influence	Priorities for Supporting Growth (from Board paper Jul 2020)	Desired outcomes by 2023 (from Board paper Jul 2020)	Deliverables in 2021/22	Linkages with other projects	Q1 (Jul – Sep)	Q2 (Oct – Dec)	Q3 (Jan -Mar)	Q4 (Apr-Jun)
	Building strong relationships that create trust and confidence and demonstrate an ongoing commitment to	Pharmac will have meaningful and ongoing relationships with key Pacific organisations and Pacific	Strengthen and monitor the impact of our relationships with key Pacific stakeholders (health organisations and communities) through our Relationships and Partnerships strategic priority initiatives.	Stakeholder engagement strategy initiative.	Develop engagement action plan for our Pacific stakeholders.	Provide Pacific advice into development of Pharmac's stakeholder engagement strategy.		
	Pacific communities.	communities.			Assess feedback from Pacific stakeholders and address in engagement plan.	Promote the stakeholder engagement survey to Pacific stakeholders.		Use Pacific stakeholder survey response to inform 2022/23 PRS business planning.
Community					Review whether the survey captures the information needed from Pacific stakeholders.			
	Developing and using effective communication channels to improve Pacific peoples' access to information about medicines and their	Pacific peoples are receiving the right information to improve their understanding and use of funded medicines and medical devices.	Review channels for Pharmac to communicate effectively to Pacific communities.		Update the key Pacific stakeholders list.	Audit what information Pacific communities currently receive, the channels used, and consumer feedback for brand changes.		Develop guidance for communicating brand changes and new medicines to Pacific communities.
	use.			Website redesign initiative.		ce to support website t review.	Ongoing.	'

Level of Influence	Priorities for Supporting Growth (from Board paper Jul 2020)	Desired outcomes by 2023 (from Board paper Jul 2020)	Deliverables in 2021/22	Linkages with other projects	Q1 (Jul – Sep)	Q2 (Oct – Dec)	Q3 (Jan -Ma	ır) Q4 (Apr-Jun)	
	Deepening our awareness, capability, and knowledge of Pacific peoples.	Pharmac's understanding of Pacific health inequities and Pacific cultures are	Identify organisational requirements for Pacific capability development.	Organisational capability initiative.	Scope the project.	Consult internally on organisational capability requirements.		Develop proposal for how Pacific capability development needs are addressed.	
		improved.	Link development of Pacific capability within Pharmac's Learning and Development programme.	Pacific capability development as part of Pharmac's capability work programme.	1		development needs are addressed. each quarter supporting wider organisational scious bias, and cultural intelligence.		
Organisation	and implications for Pacific people into all our work.	Pacific responsiveness is integrated across Pharmac's strategic priorities, organisational strategies, and business plans.	Integrate reporting on impacts for Pacific people into our ongoing organisation reporting frameworks.	Business process.	Embed and enhance PRS into our current ongoing organisation reporting process starting with 2021/22 Action Plan deliverables.	Ongoing.			
		The impact on Pacific communities is assessed and considered in Pharmac's funding decisions.	Apply a Pacific lens to our core processes.	Business process review of end-to-end funding application assessment and decision-making process.	Ensure immediate pro improvements factor ineeds and views of Papeople.	n the development	of options for a		
		policies and consideration of ir processes require impacts for Pacific	Develop tools that promote the consideration of impact on Pacific peoples in key policies/strategies.	Health Equity Policy.			Support the implementation the health equity policy.		
		peoples to be considered.		Inclusion of ethnicity in Special Authority policy.	Support the implementation of the policy.				

Level of Influence	Priorities for Supporting Growth (from Board paper Jul 2020)	Desired outcomes by 2023 (from Board paper Jul 2020)	Deliverables in 2021/22	Linkages with other projects	Q1 (Jul – Sep)	Q2 (Oct – Dec)	Q3 (Jan -Mar)	Q4 (Apr-Jun)
		Pharmac's external advice incorporates and takes into account Pacific perspectives.	Develop approach and processes for obtaining Pacific advice to inform key aspects of our work.			Develop a network of Pacific advisors who can work with us on specific pieces of work, (with representatives from key Pacific health organisations) and co-design the approach for us to obtain Pacific advice on key aspects of our work.	Develop process guidance.	Implement.
System	Working actively with others to reduce barriers to medicines and medical devices access and use.	Barriers being faced by Pacific peoples in the health system, in relation to access and use of medicines are being addressed by Pharmac in collaboration with others in the health system.	Undertake a specific initiative to improve medicines access equity for Pacific people in relation to gout.	Equitable access and use gout action plan initiative – deliver an awareness raising campaign. (One option is to focus on young Māori and Pacific men in Counties Manukau DHB, working with Counties Manukau DHB and local rugby union or league club(s).	Engage with Counties Manukau DHB and rugby union/league clubs to test and scope model. Scope project and options and identify funding sources (Pharmac/other).	Develop campaign proposal and seek agreement.	Engage providers as needed.	Initiate campaign.
(Health)	Using our influence within the health system to support change that would lead to improved access to medicines and medical devices for Pacific peoples.	More data (quantitative and qualitative) and information is available and being used by others in the health system to address medicine and medical device access and use by Pacific populations.	Use the medicine access equity data insights to work with key pacific health professional groups to raise awareness on medicine access insights for priority conditions for Pacific people.	Equitable access and use - medicine access monitoring and outcomes framework data insights initiative.	insights to key Pacific linkages with the Paci cardiovascular diseas disease to engage with	health professionals gr fic Data Sovereignty Ne e, type 2 diabetes, asth th the insights and explo	ommunication of medicinoups. Key aspects inclued work, inviting Pacific editions, and chronic obstructions opportunities to predict through our equitable	de establishing xperts in gout, ctive pulmonary esent the insights for



MEMORANDUM FOR SENIOR LEADERSHIP TEAM MEETING 22 MAY 2023

To: Pharmac Senior Leadership Team

CC: Jannel Fisher, Acting Director of Engagement and Implementation

From: Alexa Masina, Principal Advisor Pacific Health

Update on Pacific Responsiveness Strategy (PRS) Stage Two Action Plan 2021-2022 and the future direction of the PRS

Purpose

The purpose of this paper is to provide an overview to the Senior Leadership Team (SLT) on the Pacific Responsiveness Strategy stage two action plan, the lessons learned so far, and the intended focus for 2023/24 and beyond.

Recommendations

It is recommended that SLT:

note the 2022/23 business plan deliverables update and the PRS Stage Two Action Plan 2021-2022 status update

agree that we shift to an approach where Pacific Responsiveness Strategy activities are woven through the organisation from 2023/24 to create shared responsibility

agree that future Pacific Responsiveness activities support the wider sector strategies and work programmes including the soon to be published Pacific Health strategy and the All-Of-Government Pacific Wellbeing Strategy.

Strategic Direction

The <u>Pacific Responsiveness Strategy</u> (PRS) is Te Pātaka Whaioranga Pharmac's strategic intent for improving Pacific peoples' health outcomes in Aotearoa New Zealand. The purpose is "to support Pacific people to live healthy lives through improved and timely access to, and use of, medicines and medical devices".

In addition to the PRS and our Review response commitments, Pharmac as a Crown and health entity have obligations and responsibilities outlined in the government's high-level objectives and priority areas of focus for Pacific peoples in Aotearoa. These include but are not limited to:

- Pae Ora (Healthy Futures) Act 2022
- Te Pae Tata Interim New Zealand Health Plan 2022
- The Interim Government Policy Statement on Health 2022-2024
- The All-of-Government Pacific Wellbeing Strategy

Further information about these responsibilities is outlined in the internal document <u>Te</u>
Pātaka Whaioranga – Advice for Activities and Decision Making that Impact Pacific Peoples.

Background

In <u>July 2021 the Board approved</u> the <u>PRS Stage Two Action Plan</u>. This programme of work contributed to our Statement of Performance Expectations (SPE), where Pharmac committed to promoting equitable access to medicines and medical devices for Pacific peoples through the delivery and evaluation of the PRS stage two action plan.

Attached as Appendix One is a Snapshot of the Stage Two Action Plan of the Pacific Responsiveness Strategy showing the complete and incomplete activities and the activities we intend on carrying over to 2023/24.

The delivery of the action plan has varied. Incomplete actions relied on the completion of other organisational actions to inform planning and the direction of travel for PRS, including for example the Pharmac Engagement strategy, the end-to-end process improvement project, Blue Skies, and the Equity policy.

Other PRS actions were paused or deferred as part of SLT prioritisation of activities, including the Pacific capability and leadership uplift, and the establishment of the Pacific advisory group. Further activities such as the community gout initiative were scoped out but halted due to the impact of COVID-19.

Attached as Appendix Two is detailed information on each of the action items in the Stage Two PRS Action Plan.

Focus for Pacific health was re-orientated to support other areas of the business including:

- developing Pacific health tools and advice and socialising these across the business
- establishing working partnerships with Pacific health stakeholders
- strengthening equity assessments and how we factor Pacific peoples in our work
- supporting Pacific health equity focus mahi such as the Pacific people's health data insights work and equity wananga for prioritisation.

Lessons learned and limitations

Organisational ownership of the PRS: In the Pharmac Review report it noted that
Pharmac had not been able to deliver on the actions in the PRS and that responsibility
for implementing the strategy fell largely on the shoulders of one staff member. This is
both a performance and reputational risk.

The PRS currently sits in the business plan under the Engagement and Implementation Directorate and is assigned to the Principal Advisor – Pacific Health. Activities need to be dispersed through the business plan and assigned to the relevant teams to create shared responsibilities for Pacific health.

- Giving effect to Pae Ora: We need to invest in strengthening how we consistently factor
 Pacific health into our work in meaningful ways. We need to be able to evidence how
 Pacific peoples are contributing at all levels of our decision-making.
- **Sustainability:** There are 24 action items in the Stage Two Action Plan. Future action plans need to be realistic and adequately resourced.

Our Pacific capability and capacity gaps hinder our success

Our workforce is the most important enabler for achieving genuine change that improves health outcomes for New Zealanders, including achieving health equity and addressing racism and discrimination of all forms. However, Pacific people are not currently represented in our advisory groups and committees, workforce and leadership. There are also capability and Pacific intelligence gaps.

Kaimahi are wanting to strengthen their application of Pacific responsiveness to ensure Pacific people's health is being considered. However, this has resulted in persistent demand for Pacific expertise and advice across the business; from high-level strategic planning and contributing to submissions, through to advice on Pacific health equity assessments and Pacific health coaching.

We have developed a Pacific capability and leadership programme of work including supporting documents. The use of these varies across the organisation, as does the quality of commissioning the Principal Advisor - Pacific Health to support work.

Lessons learned and limitations

- Clinical expertise: It is critical to note that much of the health equity assessment work needs Pacific clinical and technical expertise. The current Principal Advisor - Pacific Health does not possess this skill. We need to establish working partnerships with Pacific clinicians and technical experts for this advice and feedback.
- Workforce: Pharmac has responsibilities to grow its Pacific kaimahi. This would not only fast-track our Pacific capability and intelligence but would demonstrate a genuine commitment to growing our Pacific workforce across the organisation.
- Strategic support: As noted above, we are exploring a more sustainable way of
 integrating the PRS in our current programme of work, supported by our business
 planning, reporting and monitoring mechanisms. This approach will develop a shared
 responsibility and sustainable approach to delivering and achieving the PRS.

Reciprocity and collaborative relationships with Pacific peoples

Pae Ora sets new expectations for health entities to become more responsive to the voices of the people the system serves. We have an opportunity to explore what 'good' looks like and understand where Pacific voices and influence are currently missing.

Strengthening this focus will begin with strengthening relationships and partnerships with key Pacific health stakeholder organisations and groups. We need to understand how we can best contribute to the sector Pacific health strategies, including the soon to be published Pacific Health Strategy led by Manatū Hauora and the All-of-Government Pacific Wellbeing Strategy led by the Ministry for Pacific Peoples.

As part of the organisational engagement strategy work, we will develop a Pacific engagement plan identifying our key Pacific health stakeholders and collaborative opportunities. Some of these stakeholders include:

- Manatū Hauora Pacific Health Team
- Te Whatu Ora Pacific Health Team
- Whaikaha Pacific Team
- Ministry for Pacific Peoples

- HQSC Pacific Team
- Pacific Pharmacists Association
- Moana Connect
- Pasifika Medical Association
- Pasifika General Practitioners Network
- Pacific Nurses Association
- Pan-Pacific Nurses Association
- The Royal New Zealand College of General Practitioners Pasifika Chapter

Lessons learned and limitations

- Relationships: Managing and nurturing external Pacific stakeholder relationships is
 critical to our work including decision-making, engagement, and implementation.
 However, relationship management needs to occur at all levels in the organisation and
 needs to be resourced.
- **Promoting reciprocity:** We need a more strategic commitment to establishing relationships and partnerships that promote reciprocity. We need clarity and coordination with how we engage with our Pacific stakeholders meaningfully.
- Contributing to the wider health system activities: We need to connect with our health sector and Pacific partners to understand how we can support the sector strategies and activities rather than doing things in isolation. a

There are three business plan deliverables for 2022/23

The below table outlines the three business plan deliverables related to the PRS for 2022/23 and progress towards achieving these over the past two quarters:

Business Plan Deliverables - Pacific Responsiveness Strategy 2022-2023		Progress Q2 Sep – Dec 2022	Progress Q3 Jan – Mar 2023
4.8	The Leo – Moana- nui-a-kiwa Pacific Aotearoa: Pacific Advice, Voice's and	Meetings with senior Pacific health officials to discuss opportunities for partnering and collaboration.	Talanoa with Pasifika General Practitioners Network, Manatū Hauora Pacific Team.
Pacific Leadership project		Established a working partnership with Ministry for Pacific Peoples to promote recruitment for advisory groups and committees.	
6.2.5	Malae Te Manaaki Pacific Traversing	Planning with Moana Connect for capability and leadership training.	Updating internal Pacific health guidance to support staff.
	Pacific Health Kaitiakitanga Project	Planning with MPP about internal training on the Kapasa	Planning with Moana Connect for capability and leadership training.
	,	Framework and Yavu Tool workshops.	Finalising the Kapasa Framework and Yavu Tool workshops happening in May.

Business Plan Deliverables - Pacific Responsiveness Strategy 2022-2023		Progress Q2 Sep – Dec 2022	Progress Q3 Jan – Mar 2023
6.1.4	Review Pacific Responsiveness Strategy (Stage Two) and Planning for (Stage Three)	Audit of the delivery PRS stage two activities.	Discussion with CAC around the PRS implementation approach. Exploring ways the PRS activities can be integrated into business planning, monitoring and reporting.

Our focus for quarter four

For the final quarter of 2022/23 we are focused on:

- Supporting the development of the organisational engagement strategy
- Finalising the Pacific capability workshops to be delivered by Moana Research these
 workshops will explore Pacific worldviews and social theories that impact Pacific peoples
 as well as how to navigate the digital Vā and data sovereignty
- Supporting business planning for 2023/24 to ensure Pacific people's health is being considered and that there is shared responsibility for delivering the PRS.

Future focus for Pacific Responsiveness Activities

The Pacific Health Strategy will be published by Manatū Hauora in mid-July 2023. The work programme for the implementation of the strategy, including measures, will be developed between July – October 2023. This is an opportune time to realign our Pacific responsiveness activities with this strategy and to support and contribute to the development of the Pacific Health Strategy work programme.

This will ensure we are working in collaboration with our sector partners, that our Pacific responsiveness activities are impactful, and our approach is sustainable.

Appendices

Appendix One: Snapshot of the Stage Two Action Plan of the PRS

Appendix Two: Detailed information on the Stage Two PRS Action Plan

Appendix One: Snapshot of the Stage Two Action Plan of the PRS

The table below provides a snapshot of the delivery of the Stage Two Action Plan of the Pacific Responsiveness Strategy activities. There are several items that are incomplete. Some of these activities will remain incomplete as business priorities and needs have changed.

Items that are flagged to be carried forward will be included in our Pacific Responsiveness Strategy Stage Three work programme.

Note: The activities that are indicated as 'incomplete' but do not feature in the 'to carry forward' column, will remain as incomplete due to business priority and needs changing.

	Activity	Complete	Not complete	To carry forward
1.	Develop an engagement action plan for our Pacific stakeholders.		Х	Х
2.	Provide Pacific advice into the development of Pharmac's stakeholder engagement strategy.		Х	Х
3.	Promote the stakeholder engagement survey to Pacific stakeholders.	Х		
4.	Use Pacific stakeholder survey response to inform 2022/23 PRS business planning.		Х	
5.	Update the key Pacific stakeholders list.	X		
6.	Audit what information Pacific communities currently receive, the channels used, and consumer feedback for brand changes.		Х	
7.	Develop guidance for communicating brand changes and new medicines to Pacific communities.		Х	X
8.	Website redesign initiative.	Х		
9.	Provide Pacific advice to support website content review.	х		
10.	Identify organisational requirements for Pacific capability development: Scope the project.	х		
11.	Consult internally on organisational capability requirements.	х		
12.	Develop proposal for how Pacific capability development needs are addressed.	Х		
13.	Introduce lived experience speaker/activity each quarter, supporting wider organisational programmes of diversity & inclusion, unconscious bias, and cultural intelligence.	х		
14.	Embed and enhance PRS into our current ongoing organisation reporting process starting with 2021/22 Action Plan deliverables.		Х	Х
15.	Ensure immediate process improvements factor in the needs and views of Pacific people.	х		
16.	Provide input into the development of options for a "future model."		Х	

	Activity	Complete	Not complete	To carry forward
17.	Inclusion of ethnicity in Special Authority policy.	X		
18.	Support the implementation of the health equity policy.		X	X
19.	Develop a network of Pacific advisors who can work with us on specific pieces of work (with representatives from key Pacific health organisations), and co-design the approach for us to obtain Pacific advice on key aspects of our work.		Х	Х
20.	Develop process guidance.	х		
21.	Engage with Counties Manukau DHB and rugby union/league clubs to test and scope model. Scope project and options and identify funding sources (Pharmac/other).		x	
22.	Develop campaign proposal and seek agreement.		Х	
23.	Engage providers as needed.		Х	
24.	Support and facilitate the engagement and communication of medicine access equity data insights to key Pacific health professionals groups.		Х	

Appendix Two: Detailed information on the Stage two PRS Action Plan

	Action	Update	Other work carried out in 2022/23 that contributes to the desired outcome:
1.	Develop an engagement action plan for our Pacific stakeholders	Not complete Action deferred by SLT. The engagement principles and strategy are expected to be completed mid-2023. This action will be carried over into 2023/24 as part of the engagement strategy implementation.	Guidance developed for seeking external Pacific health advice or expertise. Building partnership with MMP. Continuing to support Pacific Pharmacists Association through our MOA. Providing feedback on All-of-Government Pacific Wellbeing Strategy. Pacific Data Sovereignty Network established.
2	Provide Pacific advice into development of Pharmac's stakeholder engagement strategy.	Not complete Refer to item 1.	
3	Promote the stakeholder engagement survey to Pacific stakeholders.	Complete There was a targeted approach to disseminate the 2021/22 survey to Pacific stakeholders.	
4	Use Pacific stakeholder survey response to inform 2022/23 PRS business planning.	Not complete Limited insights from the 2021/22 survey results were specific to Pacific stakeholders or about Pacific health	
5	Update the key Pacific stakeholders list.	Complete A Pacific stakeholder master database has been created.	
6	Audit what information Pacific communities currently receive, the channels used, and consumer feedback for brand changes.	Not complete Work has commenced on creating an implementation toolkit, however it has not progressed to community-level information	Research carried out by HQSC (partially funded by Pharmac) around the information consumers want about medicines and brand changes.
7	Develop guidance for communicating brand changes and new medicines to Pacific communities.	Not complete Refer to item 6.	

	Action	Update	Other work carried out in 2022/23 that contributes to the desired outcome:
8	Website redesign initiative.	Complete Provided Pacific advice to support the website redesign.	
9	Provide Pacific advice to support website content review.	Complete Provided Pacific advice to support for website content review including the following content: Pātaka - Pacific peoples	
10	Identify organisational requirements for Pacific capability development: Scope the project.	Complete Capability requirements were identified based on feedback gathered from staff across various mahi and insights from requests for advice to the Principal Advisor - Pacific Health.	
11.	Consult internally on organisational capability requirements.	Complete Refer to item 10.	
12	Develop a proposal for how Pacific capability development needs are addressed.	Complete We have established working partnerships with Ministry for Pacific peoples and Moana Connect to support the implementation of our Pacific capability and leadership work programme. Our approach includes alignment to Pae Ora responsibilities.	
13	Introduce lived experience speaker/activity each quarter, supporting wider organisational programmes of diversity & inclusion, unconscious bias, and cultural intelligence.	Complete We established Malae Te Manaaki Pacific Series - Traversing Pacific Health Kaitiakitanga. Through this platform, we delivered a series of external and internal speakers. This is ongoing and will remain the vehicle that delivers our Pacific capability and leadership mahi.	

	Action	Update	Other work carried out in 2022/23 that contributes to the desired outcome:
14	Embed and enhance PRS into our current ongoing organisation reporting process starting with 2021/22 Action Plan deliverables.	Not complete We have been exploring ways the PRS activities can be integrated into business planning, monitoring and reporting.	
15	Ensure immediate process improvements factor in the needs and views of Pacific people.	Pacific advice has been shared across a number of process improvement mahi, however the process improvement work has not progressed as planned.	Developing guidance for activities and decision-making that impact Pacific peoples.
16	Provide input into the development of options for a "future model."	Complete Refer to item 15.	Did not proceed as planned.
17	Inclusion of ethnicity in Special Authority policy.	Not complete Special Authority guidance is planned to be updated once the Equity Policy is finalised.	Note legal advice "ethnicity framework requires updating to better acknowledge and give effect to Pae Ora". General Counsel.
18	Support the implementation of the health equity policy.	Not complete Advice has been shared, including written and verbal feedback in workshops. Health Equity Policy delayed and is expected to be completed in June 2023.	
19	Develop a network of Pacific advisors who can work with us on specific pieces of work, (with representatives from key Pacific health organisations) and co-design the approach for us to obtain Pacific advice on key aspects of our work.	Not complete This work was deferred until the engagement strategy was developed. Refer to item 1.	
20	Develop process guidance.	Complete A range of guidance documents and resources developed to support staff.	

	Action	Update	Other work carried out in 2022/23 that contributes to the desired outcome:
21	Engage with Counties Manukau DHB and rugby union/league clubs to test and scope model. Scope project and options and identify funding sources (Pharmac/other).	Not complete Deferred due to the impact of COVID-19.	
22	Develop a public awareness campaign proposal and seek agreement.	Not complete Deferred due to the impact of COVID-19.	
23	Engage providers as needed to inform the public awareness campaign.	Not complete Refer to item 22.	
24	Support and facilitate the engagement and communication of medicine access equity data insights to key Pacific health professional groups.	Not complete The data insights work was put on hold by SLT.	Pacific Peoples Health - Gout Data Insights Report published and disseminated to key Pacific health stakeholders. Gout Data Insights report shared at several health conferences.



SLT Monthly Strategy Planning Meeting Agenda

Group	Senior Leadership Team (SLT)
Date	Tuesday 9 May 2023, 11am-12.30pm
Room	TEAMS, Level 9 Tait
Attendees	Sarah Fitt, David Hughes, Kathryn McInteer, Trevor Simpson, Michael Johnson, Lisa Williams, Jannel Fisher, Arohia Dunn, Trish Elise
Other Attendees	Brent McPherson
Apologies	

Items for Discussion

Timing	Item	Discussion Item	Lead
11.00am	1.	Introduction Minutes of 4 April Meeting Minutes of 2 March Meeting	Sarah Fitt
11.05am	2.	<u>Draft Business Plan and Three-Year Roadmap</u> <u>Appendix One – Draft Business Plan</u> <u>Appendix Two – Three Year Roadmap</u>	Brent McPherson
11.35am	3.	SLT session with Maxine Walker 27 April 2023 – timeline	All
12.30pm	4.	General Business	All

SLT Beliefs

- Robust dialogue
- Open and transparent
- Support and empower each other and Pharmac people
- Assume good intention
- Lead the whole organisation

Pharmac Values

- Whakarongo | Listen
- Tuhono | Connect
- Wānanga | Learn Together
- Māiā | Courageous
- Kaitiakitanga | Preserve, protect and shelter



MEMORANDUM FOR SENIOR LEADERSHIP TEAM MEETING 22 MAY 2023

To: Pharmac Senior Leadership Team

CC: Jannel Fisher, Acting Director of Engagement and Implementation

From: Alexa Masina, Principal Advisor Pacific Health

Update on Pacific Responsiveness Strategy (PRS) Stage Two Action Plan 2021-2022 and the future direction of the PRS

Purpose

The purpose of this paper is to provide an overview to the Senior Leadership Team (SLT) on the Pacific Responsiveness Strategy stage two action plan, the lessons learned so far, and the intended focus for 2023/24 and beyond.

Recommendations

It is recommended that SLT:

note the 2022/23 business plan deliverables update and the PRS Stage Two Action Plan 2021-2022 status update

agree that we shift to an approach where Pacific Responsiveness Strategy activities are woven through the organisation from 2023/24 to create shared responsibility

agree that future Pacific Responsiveness activities support the wider sector strategies and work programmes including the soon to be published Pacific Health strategy and the All-Of-Government Pacific Wellbeing Strategy.

Strategic Direction

The <u>Pacific Responsiveness Strategy</u> (PRS) is Te Pātaka Whaioranga Pharmac's strategic intent for improving Pacific peoples' health outcomes in Aotearoa New Zealand. The purpose is "to support Pacific people to live healthy lives through improved and timely access to, and use of, medicines and medical devices".

In addition to the PRS and our Review response commitments, Pharmac as a Crown and health entity have obligations and responsibilities outlined in the government's high-level objectives and priority areas of focus for Pacific peoples in Aotearoa. These include but are not limited to:

- Pae Ora (Healthy Futures) Act 2022
- Te Pae Tata Interim New Zealand Health Plan 2022
- The Interim Government Policy Statement on Health 2022-2024
- The All-of-Government Pacific Wellbeing Strategy

Further information about these responsibilities is outlined in the internal document <u>Te</u>
Pātaka Whaioranga – Advice for Activities and Decision Making that Impact Pacific Peoples.

Background

In <u>July 2021 the Board approved</u> the <u>PRS Stage Two Action Plan</u>. This programme of work contributed to our Statement of Performance Expectations (SPE), where Pharmac committed to promoting equitable access to medicines and medical devices for Pacific peoples through the delivery and evaluation of the PRS stage two action plan.

Attached as Appendix One is a Snapshot of the Stage Two Action Plan of the Pacific Responsiveness Strategy showing the complete and incomplete activities and the activities we intend on carrying over to 2023/24.

The delivery of the action plan has varied. Incomplete actions relied on the completion of other organisational actions to inform planning and the direction of travel for PRS, including for example the Pharmac Engagement strategy, the end-to-end process improvement project, Blue Skies, and the Equity policy.

Other PRS actions were paused or deferred as part of SLT prioritisation of activities, including the Pacific capability and leadership uplift, and the establishment of the Pacific advisory group. Further activities such as the community gout initiative were scoped out but halted due to the impact of COVID-19.

Attached as Appendix Two is detailed information on each of the action items in the Stage Two PRS Action Plan.

Focus for Pacific health was re-orientated to support other areas of the business including:

- developing Pacific health tools and advice and socialising these across the business
- establishing working partnerships with Pacific health stakeholders
- strengthening equity assessments and how we factor Pacific peoples in our work
- supporting Pacific health equity focus mahi such as the Pacific people's health data insights work and equity wananga for prioritisation.

Lessons learned and limitations

Organisational ownership of the PRS: In the Pharmac Review report it noted that
Pharmac had not been able to deliver on the actions in the PRS and that responsibility
for implementing the strategy fell largely on the shoulders of one staff member. This is
both a performance and reputational risk.

The PRS currently sits in the business plan under the Engagement and Implementation Directorate and is assigned to the Principal Advisor – Pacific Health. Activities need to be dispersed through the business plan and assigned to the relevant teams to create shared responsibilities for Pacific health.

- Giving effect to Pae Ora: We need to invest in strengthening how we consistently factor
 Pacific health into our work in meaningful ways. We need to be able to evidence how
 Pacific peoples are contributing at all levels of our decision-making.
- **Sustainability:** There are 24 action items in the Stage Two Action Plan. Future action plans need to be realistic and adequately resourced.

Our Pacific capability and capacity gaps hinder our success

Our workforce is the most important enabler for achieving genuine change that improves health outcomes for New Zealanders, including achieving health equity and addressing racism and discrimination of all forms. However, Pacific people are not currently represented in our advisory groups and committees, workforce and leadership. There are also capability and Pacific intelligence gaps.

Kaimahi are wanting to strengthen their application of Pacific responsiveness to ensure Pacific people's health is being considered. However, this has resulted in persistent demand for Pacific expertise and advice across the business; from high-level strategic planning and contributing to submissions, through to advice on Pacific health equity assessments and Pacific health coaching.

We have developed a Pacific capability and leadership programme of work including supporting documents. The use of these varies across the organisation, as does the quality of commissioning the Principal Advisor - Pacific Health to support work.

Lessons learned and limitations

- Clinical expertise: It is critical to note that much of the health equity assessment work needs Pacific clinical and technical expertise. The current Principal Advisor - Pacific Health does not possess this skill. We need to establish working partnerships with Pacific clinicians and technical experts for this advice and feedback.
- Workforce: Pharmac has responsibilities to grow its Pacific kaimahi. This would not only fast-track our Pacific capability and intelligence but would demonstrate a genuine commitment to growing our Pacific workforce across the organisation.
- Strategic support: As noted above, we are exploring a more sustainable way of
 integrating the PRS in our current programme of work, supported by our business
 planning, reporting and monitoring mechanisms. This approach will develop a shared
 responsibility and sustainable approach to delivering and achieving the PRS.

Reciprocity and collaborative relationships with Pacific peoples

Pae Ora sets new expectations for health entities to become more responsive to the voices of the people the system serves. We have an opportunity to explore what 'good' looks like and understand where Pacific voices and influence are currently missing.

Strengthening this focus will begin with strengthening relationships and partnerships with key Pacific health stakeholder organisations and groups. We need to understand how we can best contribute to the sector Pacific health strategies, including the soon to be published Pacific Health Strategy led by Manatū Hauora and the All-of-Government Pacific Wellbeing Strategy led by the Ministry for Pacific Peoples.

As part of the organisational engagement strategy work, we will develop a Pacific engagement plan identifying our key Pacific health stakeholders and collaborative opportunities. Some of these stakeholders include:

- Manatū Hauora Pacific Health Team
- Te Whatu Ora Pacific Health Team
- Whaikaha Pacific Team
- Ministry for Pacific Peoples

- HQSC Pacific Team
- Pacific Pharmacists Association
- Moana Connect
- Pasifika Medical Association
- Pasifika General Practitioners Network
- Pacific Nurses Association
- Pan-Pacific Nurses Association
- The Royal New Zealand College of General Practitioners Pasifika Chapter

Lessons learned and limitations

- Relationships: Managing and nurturing external Pacific stakeholder relationships is
 critical to our work including decision-making, engagement, and implementation.
 However, relationship management needs to occur at all levels in the organisation and
 needs to be resourced.
- **Promoting reciprocity:** We need a more strategic commitment to establishing relationships and partnerships that promote reciprocity. We need clarity and coordination with how we engage with our Pacific stakeholders meaningfully.
- Contributing to the wider health system activities: We need to connect with our health sector and Pacific partners to understand how we can support the sector strategies and activities rather than doing things in isolation. a

There are three business plan deliverables for 2022/23

The below table outlines the three business plan deliverables related to the PRS for 2022/23 and progress towards achieving these over the past two quarters:

Business Plan Deliverables - Pacific Responsiveness Strategy 2022-2023		Progress Q2 Sep – Dec 2022	Progress Q3 Jan – Mar 2023	
4.8	The Leo – Moana- nui-a-kiwa Pacific Aotearoa: Pacific Advice, Voice's and	Meetings with senior Pacific health officials to discuss opportunities for partnering and collaboration.	Talanoa with Pasifika General Practitioners Network, Manatū Hauora Pacific Team.	
	Pacific Leadership project	Established a working partnership with Ministry for Pacific Peoples to promote recruitment for advisory groups and committees.		
6.2.5 Malae Te Manaaki Pacific Traversing		Planning with Moana Connect for capability and leadership training.	Updating internal Pacific health guidance to support staff.	
	Pacific Health Kaitiakitanga Project	Planning with MPP about internal training on the Kapasa Framework and Yavu Tool workshops.	Planning with Moana Connect for capability and leadership training.	
			Finalising the Kapasa Framework and Yavu Tool workshops happening in May.	

Business Plan Deliverables - Pacific Responsiveness Strategy 2022-2023		Progress Q2 Sep – Dec 2022	Progress Q3 Jan – Mar 2023
6.1.4	Review Pacific Responsiveness Strategy (Stage Two) and Planning for (Stage Three)	Audit of the delivery PRS stage two activities.	Discussion with CAC around the PRS implementation approach. Exploring ways the PRS activities can be integrated into business planning, monitoring and reporting.

Our focus for quarter four

For the final quarter of 2022/23 we are focused on:

- Supporting the development of the organisational engagement strategy
- Finalising the Pacific capability workshops to be delivered by Moana Research these
 workshops will explore Pacific worldviews and social theories that impact Pacific peoples
 as well as how to navigate the digital Vā and data sovereignty
- Supporting business planning for 2023/24 to ensure Pacific people's health is being considered and that there is shared responsibility for delivering the PRS.

Future focus for Pacific Responsiveness Activities

The Pacific Health Strategy will be published by Manatū Hauora in mid-July 2023. The work programme for the implementation of the strategy, including measures, will be developed between July – October 2023. This is an opportune time to realign our Pacific responsiveness activities with this strategy and to support and contribute to the development of the Pacific Health Strategy work programme.

This will ensure we are working in collaboration with our sector partners, that our Pacific responsiveness activities are impactful, and our approach is sustainable.

Appendices

Appendix One: Snapshot of the Stage Two Action Plan of the PRS

Appendix Two: Detailed information on the Stage Two PRS Action Plan

Appendix One: Snapshot of the Stage Two Action Plan of the PRS

The table below provides a snapshot of the delivery of the Stage Two Action Plan of the Pacific Responsiveness Strategy activities. There are several items that are incomplete. Some of these activities will remain incomplete as business priorities and needs have changed.

Items that are flagged to be carried forward will be included in our Pacific Responsiveness Strategy Stage Three work programme.

Note: The activities that are indicated as 'incomplete' but do not feature in the 'to carry forward' column, will remain as incomplete due to business priority and needs changing.

	Activity	Complete	Not complete	To carry forward
1.	Develop an engagement action plan for our Pacific stakeholders.		Х	Х
2.	Provide Pacific advice into the development of Pharmac's stakeholder engagement strategy.		Х	Х
3.	Promote the stakeholder engagement survey to Pacific stakeholders.	Х		
4.	Use Pacific stakeholder survey response to inform 2022/23 PRS business planning.		Х	
5.	Update the key Pacific stakeholders list.	X		
6.	Audit what information Pacific communities currently receive, the channels used, and consumer feedback for brand changes.		Х	
7.	Develop guidance for communicating brand changes and new medicines to Pacific communities.		Х	Х
8.	Website redesign initiative.	Х		
9.	Provide Pacific advice to support website content review.	х		
10.	Identify organisational requirements for Pacific capability development: Scope the project.	х		
11.	Consult internally on organisational capability requirements.	х		
12.	Develop proposal for how Pacific capability development needs are addressed.	Х		
13.	Introduce lived experience speaker/activity each quarter, supporting wider organisational programmes of diversity & inclusion, unconscious bias, and cultural intelligence.	х		
14.	Embed and enhance PRS into our current ongoing organisation reporting process starting with 2021/22 Action Plan deliverables.		Х	Х
15.	Ensure immediate process improvements factor in the needs and views of Pacific people.	х		
16.	Provide input into the development of options for a "future model."		Х	

	Activity	Complete	Not complete	To carry forward
17.	Inclusion of ethnicity in Special Authority policy.	X		
18.	Support the implementation of the health equity policy.		X	X
19.	Develop a network of Pacific advisors who can work with us on specific pieces of work (with representatives from key Pacific health organisations), and co-design the approach for us to obtain Pacific advice on key aspects of our work.		Х	Х
20.	Develop process guidance.	х		
21.	Engage with Counties Manukau DHB and rugby union/league clubs to test and scope model. Scope project and options and identify funding sources (Pharmac/other).		x	
22.	Develop campaign proposal and seek agreement.		Х	
23.	Engage providers as needed.		Х	
24.	Support and facilitate the engagement and communication of medicine access equity data insights to key Pacific health professionals groups.		Х	

Appendix Two: Detailed information on the Stage two PRS Action Plan

	Action	Update	Other work carried out in 2022/23 that contributes to the desired outcome:
1.	Develop an engagement action plan for our Pacific stakeholders	Not complete Action deferred by SLT. The engagement principles and strategy are expected to be completed mid-2023. This action will be carried over into 2023/24 as part of the engagement strategy implementation.	Guidance developed for seeking external Pacific health advice or expertise. Building partnership with MMP. Continuing to support Pacific Pharmacists Association through our MOA. Providing feedback on All-of-Government Pacific Wellbeing Strategy. Pacific Data Sovereignty Network established.
2	Provide Pacific advice into development of Pharmac's stakeholder engagement strategy.	Not complete Refer to item 1.	
3	Promote the stakeholder engagement survey to Pacific stakeholders.	Complete There was a targeted approach to disseminate the 2021/22 survey to Pacific stakeholders.	
4	Use Pacific stakeholder survey response to inform 2022/23 PRS business planning.	Not complete Limited insights from the 2021/22 survey results were specific to Pacific stakeholders or about Pacific health	
5	Update the key Pacific stakeholders list.	Complete A Pacific stakeholder master database has been created.	
6	Audit what information Pacific communities currently receive, the channels used, and consumer feedback for brand changes.	Not complete Work has commenced on creating an implementation toolkit, however it has not progressed to community-level information	Research carried out by HQSC (partially funded by Pharmac) around the information consumers want about medicines and brand changes.
7	Develop guidance for communicating brand changes and new medicines to Pacific communities.	Not complete Refer to item 6.	

	Action	Update	Other work carried out in 2022/23 that contributes to the desired outcome:
8	Website redesign initiative.	Complete Provided Pacific advice to support the website redesign.	
9	Provide Pacific advice to support website content review.	Complete Provided Pacific advice to support for website content review including the following content: Pātaka - Pacific peoples	
10	Identify organisational requirements for Pacific capability development: Scope the project.	Complete Capability requirements were identified based on feedback gathered from staff across various mahi and insights from requests for advice to the Principal Advisor - Pacific Health.	
11.	Consult internally on organisational capability requirements.	Complete Refer to item 10.	
12	Develop a proposal for how Pacific capability development needs are addressed.	Complete We have established working partnerships with Ministry for Pacific peoples and Moana Connect to support the implementation of our Pacific capability and leadership work programme. Our approach includes alignment to Pae Ora responsibilities.	
13	Introduce lived experience speaker/activity each quarter, supporting wider organisational programmes of diversity & inclusion, unconscious bias, and cultural intelligence.	Complete We established Malae Te Manaaki Pacific Series - Traversing Pacific Health Kaitiakitanga. Through this platform, we delivered a series of external and internal speakers. This is ongoing and will remain the vehicle that delivers our Pacific capability and leadership mahi.	

	Action	Update	Other work carried out in 2022/23 that contributes to the desired outcome:
14	Embed and enhance PRS into our current ongoing organisation reporting process starting with 2021/22 Action Plan deliverables.	Not complete We have been exploring ways the PRS activities can be integrated into business planning, monitoring and reporting.	
15	Ensure immediate process improvements factor in the needs and views of Pacific people.	Pacific advice has been shared across a number of process improvement mahi, however the process improvement work has not progressed as planned.	Developing guidance for activities and decision-making that impact Pacific peoples.
16	Provide input into the development of options for a "future model."	Complete Refer to item 15.	Did not proceed as planned.
17	Inclusion of ethnicity in Special Authority policy.	Not complete Special Authority guidance is planned to be updated once the Equity Policy is finalised.	Note legal advice "ethnicity framework requires updating to better acknowledge and give effect to Pae Ora". General Counsel.
18	Support the implementation of the health equity policy.	Not complete Advice has been shared, including written and verbal feedback in workshops. Health Equity Policy delayed and is expected to be completed in June 2023.	
19	Develop a network of Pacific advisors who can work with us on specific pieces of work, (with representatives from key Pacific health organisations) and co-design the approach for us to obtain Pacific advice on key aspects of our work.	Not complete This work was deferred until the engagement strategy was developed. Refer to item 1.	
20	Develop process guidance.	Complete A range of guidance documents and resources developed to support staff.	

	Action	Update	Other work carried out in 2022/23 that contributes to the desired outcome:
21	Engage with Counties Manukau DHB and rugby union/league clubs to test and scope model. Scope project and options and identify funding sources (Pharmac/other).	Not complete Deferred due to the impact of COVID-19.	
22	Develop a public awareness campaign proposal and seek agreement.	Not complete Deferred due to the impact of COVID-19.	
23	Engage providers as needed to inform the public awareness campaign.	Not complete Refer to item 22.	
24	Support and facilitate the engagement and communication of medicine access equity data insights to key Pacific health professional groups.	Not complete The data insights work was put on hold by SLT.	Pacific Peoples Health - Gout Data Insights Report published and disseminated to key Pacific health stakeholders. Gout Data Insights report shared at several health conferences.



MEMORANDUM FOR BOARD MEETING 30 JUNE 2023

To: Pharmac Directors
From: Chief Executive

Date: June 2023

Item: 9.1

Pacific Responsiveness Strategy update and future direction

Recommendations

It is recommended that you:

note the Pacific Responsiveness Strategy Stage Two Action Plan status update including lessons learned and opportunities.

note that future Pacific responsiveness activities will support the wider sector strategies and work programmes including Manatū Hauora's Pacific Health Strategy and the All-Of-Government Pacific Wellbeing Strategy.

Purpose

The purpose of this paper is to provide an update on the Pacific Responsiveness Strategy Stage Two Action Plan, the lessons learned, and the future approach.

Strategic Direction

The <u>Pacific Responsiveness Strategy</u> (PRS) is Pharmac's strategic intent for improving Pacific peoples' health outcomes in Aotearoa. The PRS is a ten-year framework "to support Pacific people to live healthy lives through improved and timely access to, and use of, medicines and medical devices".

Pharmac as a Crown and health entity also has obligations and responsibilities outlined in the government's high-level objectives and priority areas of focus for Pacific peoples in Aotearoa. These include but are not limited to:

- Pae Ora (Healthy Futures) Act 2022
- Pacific Health Strategy Te Mana Ola 2023
- Te Pae Tata Interim New Zealand Health Plan 2022
- The Interim Government Policy Statement on Health 2022-2024
- The All-of-Government Pacific Wellbeing Strategy.

Executive Summary

The PRS is a framework for Pharmac to meet its Pacific Health responsibilities. The delivery of the Stage Two Action Plan has varied. We have made some progress in key areas however there are opportunities to reset and realign our approach with Pae Ora and the work happening across the health sector to create a bigger impact.

Background

The PRS has been in place since 2017 and is focused on influencing the health outcomes of Pacific peoples:

- through connecting with Pacific communities directly
- by embedding Pacific perspectives into Pharmac as an organisation
- by influencing change elsewhere in the health system.

Pharmac has committed to renewing an action plan every three years to ensure enduring and lasting commitment to improving Pacific health. This is described in the PRS as three stages. These stages are:

- Stage One 2017-2019: Planting the seed. Lutu na niu ka lutu ki vuna (Fiji)
- Stage Two 2020-2022: Supporting growth. Olaga fiafia o sala to poto sa (Tuvalu)
- Stage Three 2023-2026: Flourishing change. 'Aufua 'a Tefuli (Tonga).

Our approach in stage one saw us undertaking a broad suite of actions with mixed outcomes achieved. We recognised that we needed to be selective about the areas of focus, and leverage opportunities within and outside the agency to maximise our efforts.

In our PRS update in July 2021, the Board approved the PRS Stage Two Action Plan. The delivery of the PRS Stage Two Action Plan has also been mixed. Attached as Appendix One is an overview of the PRS Stage Two Action Plan showing the complete and incomplete activities, and the activities we intend to carry over to 2023/24.

In many instances, incomplete actions relied on the completion of other organisational actions, such as the equity policy, or were deferred as part of SLT prioritisation of activities, such as the internal Pacific capability and leadership training. Further activities, such as the community gout initiative, were halted due to the impact of COVID-19.

The focus for Pacific Health was re-orientated to support other areas of the business including:

- establishing working partnerships with Pacific health stakeholders
- developing Pacific health tools and advice and socialising these across the business
- strengthening equity assessments and how we factor Pacific peoples in our work
- supporting Pacific health equity focus mahi such as the Pacific people's health data insights work.

Reflections on our current approach to the Pacific Responsiveness mahi

We have reflected on the challenges, opportunities and lessons learned from both the stage one and stage two action plans. These are summarised below:

Greater organisational ownership of the PRS will improve performance.

In the Pharmac Review final report it noted that Pharmac had not been able to deliver on the actions in the PRS. It stated that this was because responsibility for implementing the strategy fell largely on the shoulders of one staff member.

There were 24 action items in the Stage Two Action Plan. Future action plans need to be realistic and adequately resourced.

Pacific responsiveness activities will now be commissioned through our business planning process promoting a more sustainable and shared responsibility for improving health outcomes for Pacific Health.

We need to address our Pacific capability, capacity and Pacific workforce gaps.

Our workforce is the most important enabler for achieving genuine change that improves health outcomes for New Zealanders, including achieving health equity and addressing racism and discrimination of all forms. However, Pacific people are not currently represented in our advisory groups and committees and workforce.

We will be exploring opportunities to grow our Pacific workforce, including recruitment processes, scholarships, and internships. This includes the recruitment of members on our advisory groups and committees.

There are also internal capability and Pacific intelligence gaps. We have recently commenced the Malae Te Manaaki Pacific Traversing Pacific Health Kaitiakitanga Project which is focused on building Pacific capability and leadership internally.

Much of the health equity assessment work needs Pacific clinical and technical expertise. This is outside the scope of the Principal Advisor - Pacific Health role. We need to establish working partnerships with Pacific clinicians and technical experts for this advice and feedback.

Opportunities for greater reciprocity and collaborative relationships with Pacific peoples

Managing and nurturing external Pacific stakeholder relationships is critical to our work including decision-making, engagement, and implementation. We need a more strategic approach to establishing relationships and partnerships that promote reciprocity.

We also need to connect with our health sector and Pacific partners to understand how we can support the sector strategies and activities rather than doing things in isolation.

As part of the organisational engagement strategy work, we will develop a Pacific engagement plan identifying our key Pacific health stakeholders and collaborative opportunities. Some of these stakeholders include:

- Manatū Hauora Pacific Health Team
- Te Whatu Ora Pacific Health Team
- Whaikaha Pacific Team
- Ministry for Pacific Peoples
- HQSC Pacific Team
- Pacific Pharmacists Association
- Moana Connect
- Pasifika Medical Association
- Pasifika General Practitioners Network
- Pacific Nurses Association
- Pan-Pacific Nurses Association
- The Royal New Zealand College of General Practitioners Pasifika Chapter

Future focus for Pacific Responsiveness activities and alignment with Pae Ora

The Pacific Health Strategy will be published by Manatū Hauora in mid-July 2023. We have established a close working relationship with the Director of Pacific Health and the Pacific Team at Manatū Hauora and contributed feedback to the development of the strategy.

The work programme for the implementation of the strategy, including measures, will be developed between July – December 2023. This is an opportune time to realign our Pacific responsiveness activities with this strategy and to support and contribute to the development of the Pacific Health Strategy work programme.

For example, we are currently exploring arrangements to support Manatū Hauora develop the Pacific Health Strategy Outcomes Framework supporting the reporting and monitoring of the health systems performance on Pacific health.

This approach will ensure we are working in collaboration with our sector partners and Pacific Health stakeholders to help strengthen our contribution towards achieving Pacific health equity. It will also mean our Pacific responsiveness activities are more impactful, and our approach is sustainable.

Consultation and Consumer Engagement

Pharmac's Consumer Advisory Committee were provided with an update on the PRS and our intended future approach which members were supportive of.

Further engagement with the Committee as well as the Ministry for Pacific Peoples, Manatū Hauora and other Pacific stakeholders will continue to take place and inform our future work programme for Pacific Responsiveness activities.

Te Tiriti implications

We are working closely with the Māori Directorate to identify synergies in our work programmes. Through strengthening our alignment with the System's Pacific Health Strategy opportunities will also emerge with its alignment to Te Tiriti and Whakamaua.

Equity Implications

This work is focused on improving health outcomes for Pacific people and meeting our expectations under Pae Ora.

Appendices

Appendix One: Snapshot of the Stage Two Action Plan of the PRS.

Appendix One: Snapshot of Stage Two Action Plan of the PRS

The table below provides a snapshot of the delivery of the Pacific Responsiveness Strategy Stage Two Action Plan.

Items that are flagged to be carried forward will be included in our Pacific Responsiveness Strategy Stage Three work programme.

The activities that are indicated as not complete' but do not feature in the 'to carry forward' column, will remain incomplete due to business priority and needs changing.

	Activity	Complete	Not complete	To carry forward
1.	Develop an engagement action plan for our Pacific stakeholders.		X	Х
2.	Provide Pacific advice into the development of Pharmac's stakeholder engagement strategy.		Х	Х
3.	Promote the stakeholder engagement survey to Pacific stakeholders.	X		
4.	Use Pacific stakeholder survey response to inform 2022/23 PRS business planning.		Х	
5.	Update the key Pacific stakeholders list.	Х		
6.	Audit what information Pacific communities currently receive, the channels used, and consumer feedback for brand changes.		Х	
7.	Develop guidance for communicating brand changes and new medicines to Pacific communities.		Х	Х
8.	Website redesign initiative.	Х		
9.	Provide Pacific advice to support website content review.	X		
10.	Identify organisational requirements for Pacific capability development: Scope the project.	X		
11.	Consult internally on organisational capability requirements.	Х		
12.	Develop proposal for how Pacific capability development needs are addressed.	Х		

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	Activity	Complete	Not complete	To carry forward
13.	Introduce lived experience speaker/activity each quarter, supporting wider organisational programmes of diversity & inclusion, unconscious bias, and cultural intelligence.	Х		
14.	Embed and enhance PRS into our current ongoing organisation reporting process starting with 2021/22 Action Plan deliverables.		Х	Х
15.	Ensure immediate process improvements factor in the needs and views of Pacific people.	Х		
16.	Provide input into the development of options for a "future model."		Х	
17.	Inclusion of ethnicity in Special Authority policy.	X		
18.	Support the implementation of the health equity policy.		X	X
19.	Develop a network of Pacific advisors who can work with us on specific pieces of work (with representatives from key Pacific health organisations), and co-design the approach for us to obtain Pacific advice on key aspects of our work.		Х	Х
20.	Develop process guidance.	X		
21.	Engage with Counties Manukau DHB and rugby union/league clubs to test and scope model. Scope project and options and identify funding sources (Pharmac/other).		Х	
22.	Develop campaign proposal and seek agreement.		Х	
23.	Engage providers as needed.		Х	
24.	Support and facilitate the engagement and communication of medicine access equity data insights to key Pacific health professionals' groups.		Х	

A1688687



MEMORANDUM FOR PHARMAC BOARD MEETING 1 NOVEMBER 2024

To: Pharmac Board
From: Chief Executive
Date: October 2024

Item No: 6.2

A refocused approach to Pacific Health delivered through the Equity Policy

Recommendations

It is recommended that the Board:

note in December 2016 the Board approved the Pacific Responsiveness Strategy (PRS) 2017-2026 which aimed "to support Pacific people to live healthy lives through improved and timely access to, and use of, medicines and medical devices."

note that the PRS was to be delivered in three stages, and in July 2021, the Board approved the Stage Two Action Plan

note in May 2023, the Senior Leadership Team (SLT) received an update on the completion of the Stage Two Action Plan of the PRS which had mixed success in delivering on actions

note that in June 2024, following an evaluation of PRS progress and noting its origins predated the Pae Ora (Healthy Futures) Act 2022, Te Mana Ola: The Pacific Health Strategy¹, the Government Policy Statement on Health 2024-2027 and our Equity policy, SLT agreed to discontinue the PRS and refocus our work on Pacific health as part of the Equity Policy implementation

approve the conclusion of the PRS and agree to the refocused approach to Pacific health as outlined in this paper.

Purpose

To seek the Board's approval to discontinue the PRS and instead to refocus our work on improving health outcomes for Pacific peoples (as a high health need population) through the implementation of the Equity Policy.

Strategic Direction

The Pae Ora (Healthy Futures) Act 2022 (the Act) sets out the health sector principles to promote the achievement of equitable health outcomes for Māori and other population groups (s. 7 (1)(a)). Section 43 of the Act requires the Minister of Health to produce a Pacific Health Strategy. The resulting Te Mana Ola strategy provides a framework to guide health entities² (including Pharmac) in improving Pacific health outcomes.

¹ Published by the Ministry of Health on 12 July 2023

² s.4 of the Act provides a definition of health entities, which includes Pharmac.

Five priority areas are outlined which focus on the interconnection between:

- population health by working with communities to build, maintain and enable strong foundations for Pacific health and well-being.
- prioritising disease prevention, health promotion and good health and wellbeing throughout the life course
- better understanding the needs of Pacific peoples and communities and enabling them to exercise authority over their health and wellbeing.
- ensuring that timely, high-quality services are reaching Pacific peoples, wherever they live
- growing and supporting strong Pacific health leadership and a resilient health workforce that reflects the population it serves.

Background

In December 2016, the Board approved the PRS 2017-2026 which aimed "to support Pacific people to live healthy lives through improved and timely access to, and use of, medicines and medical devices."

At that time, the PRS was to be delivered in three stages:

- Stage One: understanding the health priorities for Pacific peoples,
- Stage Two increased awareness and understanding of Pacific health needs in Pharmac
- Stage Three improving Pacific data in the health system to address medicine access use by Pacific people. The Board was previously given an update in July 2021 when it approved the Stage Two Action Plan.

In May 2023, SLT received an update on the completion of the Stage Two Action Plan of the PRS which reported back having mixed success in delivering on actions. In addition, SLT approved the carry forward actions from Stage Two to support the new direction in advancing Pacific health outcomes.

In June 2024, SLT noted the mixed success of Stage Two Action Plan to date and agreed not to proceed to Stage Three of the PRS, but instead to deliver the Pacific health work through the Equity policy. It was also noted that this would be the most appropriate vehicle for the Pacific health work as the PRS was developed prior to the Act, Te Mana Ola, and our Equity policy.

In evaluating the decision not to proceed to Stage Three of the PRS, we identified valuable insights. Although Stage Three aims to influence systemic change and address barriers to achieving Pacific health outcomes, the team recognised that many of these concepts could be effectively integrated into the existing Equity implementation plan to enhance its impact and ensure a comprehensive approach to Pacific health outcomes. We undertook a review exercise in August to look at our Equity policy and its alignment to the Act, Te Mana Ola and the GPS. Our internal review found that there was appropriate alignment to these critical documents.

Integrating Pacific health initiatives within the Equity Policy Implementation Plan

The Equity policy sets out our commitments to achieve equitable health outcomes and organisational equity. To deliver on the policy, we have developed an Equity implementation plan.

Our refocused approach preserves key PRS Stage Two actions and adapts them to progress within the Equity Policy implementation plan (together with other Pacific related activities).

Given the importance of Te Mana Ola as the first-ever Pacific health strategy for New Zealand we have sought to closely align the adapted PRS equity actions with Te Mana Ola priorities. The table below illustrates these connections.

PRS Stage 2 Actions adapted and transferred to the Equity Implementation Plan	Links with Te Mana Ola Priorities
Review what information Pacific communities currently receive from Pharmac, the channels used, and any improvements to be considered. Develop guidance for communicating brand changes and new medicines to Pacific communities. Refine assessment and decision-making processes to incorporate Pacific equity considerations to ensure fairness and inclusivity.	Priority 1: Population Health The health system works with communities and government and non-government agencies to build, maintain and enable strong foundations for Pacific health and wellbeing. Priority 2: Disease prevention, health promotion and management of good health The health system prioritises disease prevention, health promotion and good health and wellbeing through the life course.
Develop Pacific advice approach to inform key aspects of our work. Share Pacific Equity policy implementation progress and insights across the health system. Engage with existing agency networks on Pacific data sovereignty work in relation to our business.	Priority 3: Autonomy and determination The health system better understands the needs and aspirations of Pacific peoples and communities and enables them to exercise authority over their health and wellbeing.
Ensure ongoing implementation improvements factor in the needs of Pacific people. Provide Pacific capability-building advice and support to directorates.	Priority 4: Access The health system ensures that timely, high-quality services are reaching Pacific peoples, wherever they live.

To support the delivery of the actions above, we intend to partner more effectively across the health system to leverage collective expertise, information, and prioritise where we can add value to other existing strategies across the health sector³.

Through cross agency collaboration, we will gain a deeper understanding of the health needs of Pacific communities and collectively drive positive change.

Impact on health outcomes for those with the highest health needs

The Pacific work programme aligns with and stands alongside our Te Tiriti policy – aiming to prioritise achieving equitable health and hauora outcomes for Māori, as tangata whenua, and all New Zealanders. The Pacific health work sets out our commitments to achieve equitable health outcomes and organisational equity.

This refocused approach enables us to deliver our Pacific health work more effectively in an impactful way for communities.

Risk Implications

This section outlines the risks and mitigations associated with this new approach.

Risk	Mitigation
Public perception that Pharmac has wasted resources and time by discontinuing the Pacific Responsiveness Strategy.	This is not a discontinuation, but a pivot to use the Equity policy which is more aligned with the legislative and authorising environment.
By discontinuing the PRS, there may be a perception that Pharmac has lost Pacific intelligence/insights to inform their work which may affect existing relationships with Pacific health professionals and communities.	While the PRS would no longer be the vehicle, the impacts sought are still largely the same - to improve Pacific peoples' health outcomes through better access to medicines and medical devices. We will proactively share progress in our Pacific engagement activities.

Next steps

Should the Board approve, we will implement the refocused approach of the PRS through the Equity Policy. We will then communicate these changes to our stakeholders and the sector.

³ These include initiatives such as improving Pacific access by ACC, the New Zealand Health Strategy, Women's Health Strategy, Rural Health Strategy, Disabled Peoples Strategy, the New Zealand Cancer Action Plan 2019-2029, the Ola Manuia Strategy 2020-2025 by the Ministry of Health, and the Pacific Wellbeing Strategy by the Ministry for Pacific Peoples.



MEMORANDUM FOR PHARMAC BOARD MEETING 27 SEPTEMBER 2024

To: Pharmac Board

From: Dr Nicola Ngawati, Director Equity and Engagement,

Salī Salī, Manager, Equity and Engagement

A refocused approach to Pacific Health delivered through the Equity Policy

Recommendations

It is recommended that you:

note in 2017 Pharmac launched its Pacific Responsiveness Strategy (PRS) 2017-2026 which aims "to support Pacific people to live healthy lives through improved and timely access to, and use of, medicines and medical devices"

note that following a recent evaluation of the progress of the PRS to date and noting its origins were pre the Pae Ora (Healthy Futures) Act 2022 (the Act), the Senior Leadership Team (SLT) agreed to refocus our work on Pacific health as part of the wider health sector strategies in particular Ministry of Health's Te Mana Ola: The Pacific Health Strategy¹ (2023).

note that in May 2023 SLT received an update on the completion of Stage Two Action Plan of the Pacific Responsiveness Strategy (2017-2026) which had mixed success in delivering on actions.

note that after an evaluation of the progress of the PRS to date and noting its origins were pre the Pae Ora (Healthy Futures) Act 2022 (the Act) and the changes this represented across health entities, we will not proceed with Stage Three (originally to be in place for the period 2023-2026). Instead, we propose incorporating aspects of the PRS work to date into the Equity Policy (2024) and align with wider health sector strategies primarily Te Mana Ola: The Pacific Health Strategy (2023).

Purpose

This memo updates you on our planned next steps to progress Pacific Health through the Equity policy and implementation plan. Our approach takes into account our limited resource and available levers to influence and seeks to add value to wider health sector partners approaches to pursue equity outcomes in Pacific health through Te Mana Ola: The Pacific Health Strategy (2023).

Strategic Direction

The Act sets out the health sector principles to promote health equity for Māori and other population groups (s. 7 (1)(a)). Section 43 of the Act requires the Minister of Health to produce a

Pacific Health Strategy. Launched in 2023, Te Mana Ola provides a framework to guide health entities² (including Pharmac) in improving Pacific health outcomes.

Background

In May 2023, you received an update on progress with the PRS to date and a summary of key aspects of Stage Two. Since then, we have had an opportunity to evaluate our approach to promoting Pacific health noting the PRS was created prior to the Act, Te Mana Ola and our Equity policy.

The Equity policy provides an opportunity to be more targeted in our approach given our limited resources and levers to influence. It also acknowledges the purpose of Te Mana Ola as the "first-ever Pacific Health Strategy for Aotearoa which sets the direction and long-term priorities to achieve equity in Pacific health and wellbeing outcomes over the next 10 years.³" This combination offers us a more effective strategy for advancing Pacific health given the Equity policy's Pharmac wide approach and Te Mana Ola's health sector scope. It also aligns with the Government's emphasis on the importance of fiscal prudence in the public sector, urging us to maximize our impact with existing resources.

In response to these developments, we propose integrating our earlier PRS efforts into the Equity policy workstream. Our revised strategy for advancing Pacific health within the framework of the Equity policy is outlined below.

In 2024, the Equity team reviewed our PRS strategy for promoting Pacific health. They noted that our current approach was developed prior to the Act, Te Mana Ola, and our Equity policy.

Reflecting the new Equity policy and our statutory responsibilities, SLT subsequently agreed to align aspects of the PRS with the Equity policy to enhance our efforts in Pacific health.

The Equity policy allows us to be more targeted in our approach to Pacific health by making better use of our available resources and influence.

By combining the broad approach of the Equity policy with the specific health sector focus of Te Mana Ola, we aim to create a more strategic, effective, and fiscally prudent plan for advancing Pacific health

Integrating Pacific Health initiatives within the Equity implementation plan

We are progressing six key actions as part of our Pacific health activities which are set out in Appendix One.

We also intend to partner more effectively across the health system to leverage collective expertise, information, and prioritise where we can add value within the health sector.

² s.4 of the Act provides a definition of health entities, which includes Pharmac.

³ https://www.health.govt.nz/publication/te-mana-ola-pacific-health-strategy

We will also look to align our Pacific health work programme with other existing strategies across the health sector⁴.

Through cross agency collaboration, we will gain a deeper understanding of the health needs of Pacific communities and drive collective positive change.

Te Tiriti & Equity implications

The Pacific work programme aligns with and stands alongside our Te Tiriti policy – aiming to prioritise achieving equitable health and hauora outcomes for Māori, as tangata whenua, and all New Zealanders. The Pacific health work sets out our commitments to achieve equitable health outcomes and organisational equity.

This new approach and work plan provides a mechanism by which we can fulfill these commitments.

Risk Implications

This section outlines the risks and mitigations associated with this new approach.

Risk	Mitigation
Public perception that Pharmac has wasted resources and time by discontinuing the Pacific Responsiveness Strategy.	This is not a discontinuation, but a pivot to use the Equity policy which is more aligned with the legislative and authorising environment.
By discontinuing the PRS, there may be a perception that Pharmac has lost Pacific intelligence/insights to inform their work which may affect existing relationships with Pacific health professionals and communities.	While the PRS would no longer be the vehicle, the impacts sought are still largely the same - to improve Pacific peoples' health outcomes through better access to medicines and medical devices. We will proactively share progress in our Pacific engagement activities.

Appendix

Appendix One: Alignment between Pharmac's Pacific health actions and Te Mana Strategy

priorities

⁴ These include initiatives such as improving Pacific access by ACC, the New Zealand Health Strategy, Women's Health Strategy, Rural Health Strategy, Disabled Peoples Strategy, the New Zealand Cancer Action Plan 2019-2029, the Ola Manuia Strategy 2020-2025 by the Ministry of Health, and the Pacific Wellbeing Strategy by the Ministry for Pacific Peoples.

Appendix One: Alignment between Pharmac's Pacific health actions and Te Mana Strategy priorities

Pharmac's Pacific Health Actions through the Equity Implementation Plan	Te Mana Ola Strategy – Priorities
Action 1: Developing guidance for effectively communicating brand changes and new medicines to Pacific communities. Action 6: Developing guidance for effectively communicating	Priority 1: Population health, by working with communities to build, maintain and enable strong foundations for Pacific health and well-being.
brand changes and new medicines to Pacific communities.	Priority 2: Prioritising disease prevention, health promotion and good health and wellbeing throughout the life course.
Action 3: Establishing a network of Pacific advisors to collaborate on specific projects and co-design approaches for obtaining Pacific input on critical aspects of our work.	Priority 3: Better understanding the needs of Pacific peoples and communities and enabling them to exercise authority over their health and wellbeing.
Action 2: Encouraging cross agency ongoing organisational reporting.	
Action 5: Refine assessment and decision-making processes to incorporate equity considerations to ensure fairness and inclusivity.	
Action 4: Provide capability-building advice and support to directorates.	Priority 4: Ensuring that timely, high-quality services are reaching Pacific peoples, wherever they live.



MEMORANDUM FOR SENIOR LEADERSHIP TEAM STRATEGY MEETING 20 JUNE 2024

To: Pharmac Senior Leadership Team

CC: Nicola Ngawati, Director Equity and Engagement

From: Salī Salī, Manager, Equity and Engagement

A refocused approach to Pacific Health

Recommendations

It is recommended that you:

note that in May 2023 SLT received an update on the completion of Stage Two Action Plan of the Pacific Responsiveness Strategy (2017-2026) which had mixed success in delivering on actions.

note that after an evaluation of the progress of the PRS to date and noting its origins were pre the Pae Ora (Healthy Futures) Act 2022 (the Act) and the changes this represented across health entities, we will not proceed with Stage Three (originally to be in place for the period 2023-2026). Instead, we propose incorporating aspects of the PRS work to date into the Equity Policy (2024) and align with wider health sector strategies primarily Te Mana Ola: The Pacific Health Strategy (2023).

note that given current resource constraints our overall rate of progress will be limited until we are able to replace the Principal Advisor Pacific Health.

Purpose

This memo updates you on our planned next steps to progress Pacific Health through the Equity policy and implementation plan. Our approach takes into account our limited resource and available levers to influence and seeks to add value to wider health sector partners approaches to pursue equity outcomes in Pacific health i.e., through Te Mana Ola: The Pacific Health Strategy (2023).

Strategic Direction

The Act sets out the health sector principles to promote health equity for Māori and other population groups (s. 7 (1)(a) and Te Mana Ola is the required Pacific Health Strategy the Minister was required to produce (s.39(1). Te Mana Ola (2023) aims to provide a framework to guide health entities¹ in improving Pacific health outcomes in New Zealand.

Background

In May 2023, you received an update on progress with the PRS to date and a summary of key aspects of Stage Two. Since then, we have had an opportunity to evaluate our approach to promoting Pacific health noting the PRS was created prior to the Act, Te Mana Ola and our Equity policy.

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¹ s.4 of the Act provides a definition of health entities, which includes Pharmac.

The Equity policy provides an opportunity to be more targeted in our approach given our limited resources and levers to influence. It also acknowledges the purpose of Te Mana Ola as the "first-ever Pacific Health Strategy for Aotearoa which sets the direction and long-term priorities to achieve equity in Pacific health and wellbeing outcomes over the next 10 years.²" This combination offers us a more effective strategy for advancing Pacific health given the Equity policy's Pharmac wide approach and Te Mana Ola's health sector scope. It also aligns with the Government's emphasis on the importance of fiscal prudence in the public sector, urging us to maximize our impact with existing resources.

In response to these developments, we propose integrating our earlier PRS efforts into the Equity policy workstream. Our revised strategy for advancing Pacific health within the framework of the Equity policy is outlined below.

Integrating Pacific Health initiatives within the Equity Policy workstream

We are making a significant shift in our operational approach by integrating Pacific health initiatives into the implementation of the Equity policy. This new strategy aims to enhance our focus on addressing health needs-based priorities, moving away from fragmented efforts.

In the past, our efforts to advance the PRS, as outlined in the Stage Two Action Plan, faced challenges that hindered progress. These challenges were largely due to the limited resource and a fragmented approach that relied on directorates leading actions. This proved difficult to do with competing priorities and limited subject matter capability to implement effectively.

To overcome these challenges, we can streamline our efforts and prioritise our focus on Pacific health equity initiatives through the Equity policy implementation plan.

We have provided a high-level workplan at **Appendix 1** which sets out this transition.

Improving Pacific Health Outcomes through system collaboration

The shift from the PRS to the Equity policy will also provide an opportunity to partner more effectively across the health sector. As part of the Equity implementation plan, we will set up a cross-sector working group to leverage collective expertise, information, align the various related work programmes underway and raise Pharmac's profile within the health sector.

We will also look to align our Pacific health work programme with various existing strategies across the health sector. These include initiatives such as improving Pasifika access by ACC, Te Mana Ola, the New Zealand Health Strategy, Women's Health Strategy, Rural Health Strategy, Provisional Health of Disabled People Strategy, the New Zealand Cancer Action Plan 2019-2029, the Ola Manuia Strategy 2020-2025 by the Ministry of Health, and the Pacific Wellbeing Strategy by the Ministry for Pacific Peoples.

Through collaboration and alignment with these strategies, we will gain a deeper understanding of the health needs of Pacific communities, enhance healthcare access and drive positive change.

Delivering the Pacific Health work through organisational collaboration

While we propose a shift in approach, we aim to build on the key aspects of previous PRS work by integrating key actions into the equity implementation plan, i.e.:

- Developing guidance for effectively communicating brand changes and new medicines to Pacific communities.
- Encouraging cross agency ongoing organisational reporting.

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² https://www.health.govt.nz/publication/te-mana-ola-pacific-health-strategy

- Establishing a network of Pacific advisors to collaborate on specific projects and codesign approaches for obtaining Pacific input on critical aspects of our work.
- Provide capability-building advice and support to directorates.
- Refine assessment and decision-making processes to incorporate equity considerations to ensure fairness and inclusivity.

This comprehensive approach not only addresses challenges identified in the PRS, but also focuses on meeting the needs of other underserved populations.

Consultation and engagement

The engagement strategy and implementation plan aligns with and enables the Equity Policy and Pacific Health mahi.

Te Tiriti & Equity implications

The Pacific work programme aligns with and stands alongside our Te Tiriti Policy – aiming to prioritise achieving equitable health and hauora outcomes for Māori, as tangata whenua, and all New Zealanders. The Pacific health work sets out our commitments to achieve equitable health outcomes and organisational equity.

This proposed new approach and work plan provides a mechanism by which we can fulfil these commitments.

Risk Implications

This section outlines the risks and mitigations associated with this new approach.

Risk	Mitigation
Public perception that Pharmac has wasted resources and time by discontinuing the Pacific Responsiveness Strategy	This is not a discontinuation but is more a pivoting to use the Equity policy which is more aligned with the current political environment and more likely to gain traction than the PRS would. We will proactively share Pacific-related activities delivered through the equity policy to the public.
By discontinuing the PRS, there may be a perception that Pharmac has lost Pacific intelligence/insights to inform their work which may affect existing relationships with Pacific health professionals and communities.	While the PRS would no longer be the vehicle, the impacts sought are still largely the same. The objectives are still to improve Pacific peoples' health outcomes through better access to medicines and medical devices. We will proactively share progress in our Pacific engagement activities.

Next steps

- Develop a communications plan to advise the sector of this new approach.
- Seek approval from Chief Executive to recruit a Principal Advisor Pacific to support the delivery of Pacific activities within the equity policy implementation plan.

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Appendix One: 12-month workplan – transitioning Pacific Health into Equity Policy

Quarter 1: Foundation and Preparation (1-3 months)	Quarter 2: Co-Design and Alignment (4-6 months)	Quarter 3: Implementation and Engagement (7-9 months)	Quarter 4: Evaluation and Capacity Building (10-12 months)	
 Establish the cross-sector working group not only for Pacific health initiatives but also for broader health needs, ensuring representation from various health sectors. Develop guidance for communicating brand changes and new medicines to not only Pacific communities but also other communities and sectors. Continue integration of Pacific health factors into organisational reporting processes to address broader health needs and collaborations. Asses current processes to identify areas for improvement in Pacific health initiatives and how they can support collaboration with other health sectors. 	 Collaborate with representatives from other health sectors to co-design approaches for obtaining advice and input on work that has implications beyond Pacific health. Review and refine internal processes to ensure they are culturally sensitive for Pacific communities and responsive to broader health needs. Begin capability-building initiatives within Pharmac to support communication efforts and enhance equity considerations in decision-making processes across different health sectors. Provide capability-building advice and support to directorates. 	 Develop guidance for communicating with Pacific communities and sectors regarding brand changes and new medicines, emphasizing the broader health impact. Integrate broader Pacific health considerations into organisational reporting. Engage with key health organisations from different sectors to strengthen partnerships and enhance collaboration for improved health outcomes. Evaluate the effectiveness of internal processes in meeting the needs of Pacific communities. Refine assessment and decision-making processes to incorporate equity considerations to ensure fairness and inclusivity. 	 Monitor and assess the impact of the implemented initiatives on broader health outcomes and collaborations with other sectors. Deliver training sessions and workshops to enhance internal capabilities to understand and support Pacific communities. Prepare report outlining progress on achieving Pacific related equity activities. 	

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From: <u>Trish Elise</u>
To: <u>Sali Sali</u>

Subject: Pacific Health SLT minute

Date: Monday, 16 September 2024 11:42:39 am

Talofa Salī

Minutes of 2 Sept SLT meeting below as requested.

1. A refocused approach to Pacific Health delivered through the Equity Policy

Nicola Ngawati spoke to the Board paper which provides the Board with an update on the refocused approach to improving health outcomes for Pacific peoples through the Equity Policy implementation plan.

SLT:

- noted in 2017
 Pharmac launched its Pacific Responsiveness Strategy (PRS) 2017-2026 which aims "to support Pacific people to live healthy lives through improved and timely access to, and use of, medicines and medical devices"
- were recommended that following a recent evaluation of the progress of the PRS to date and noting its origins were pre the Pae Ora (Healthy Futures) Act 2022 (the Act), SLT agree to refocus Pharmac's work on Pacific health as part of the wider health sector strategies in particular Ministry of Health's Te Mana Ola: The Pacific Health Strategy (2023).

Key comments noted:

- The approach draws a line under the PRS. Actions have been moved to the Equity implementation plan and aligning with MoH strategy.
- The Board had approved the original PRS strategy which was to 2026, so it is appropriate the Board endorse the change of approach.
- Currently there is no plan to replace the Principal Advisor, Pacific as the FTE has been repurposed.
- Appendix One It was considered that the actions through the Equity implementation plan seemed more to be indicators rather than actions. It was also considered that the actions don't map well to the Te Mano Ola Strategy priorities. Actions 1 and 6 are duplicated.

Actions:

Nicola to:

- check when PRS started (which was approved by the Board) as it was due to go to through to 2026.
- review mapping of actions from the equity and engagement plans in Appendix One of the paper.
- remove duplication of actions 1 and 6.

6.2 A refocused approach to Pacific Health delivered through the Equity Policy

This paper sought the Board's approval to discontinue the PRS and instead, to refocus our work on improving health outcomes for Pacific peoples (as a high health need population) through the implementation of the Equity Policy.

The Board:

noted in December 2016, the Board approved the Pacific Responsiveness Strategy (PRS) 2017-2026 which aimed "to support Pacific people to live healthy lives through improved and timely access to, and use of, medicines and medical devices."

noted that the PRS was to be delivered in three stages and in July 2021, the Board approved the Stage Two Action Plan

noted in May 2023, the Senior Leadership Team (SLT) received an update on the completion of the Stage Two Action Plan of the PRS, which had mixed success in delivering on actions

noted that in June 2024, following an evaluation of PRS progress and noting its origins predated the Pae Ora (Healthy Futures) Act 2022, Te Mana Ola: The Pacific Health Strategy¹, the Government Policy Statement on Health 2024-2027 and our Equity policy, SLT agreed to discontinue the PRS and refocus our work on Pacific health as part of the Equity Policy implementation

approved the conclusion of the PRS and agree to the refocused approach to Pacific health as outlined in this paper.

Extract under section 16(1)(e) of the Act from document titled "2024-11-29 Nov Board Meeting pack"