

Commissioning Operating Model

CONTENTS

- SECTION 1: [Foreword](#)
 - SECTION 2: [Our Operating Model](#)
 - SECTION 3: [National Regional & Local Functions](#)
 - SECTION 4: [National Commissioning Team](#)
 - SECTION 5: [Regional Commissioning Team](#)
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SECTION 1 : Foreword



Abbe Anderson
*National Director,
Commissioning*

The operating model is a significant milestone in our journey toward Pae Ora embracing the opportunity to build a health system that provides appropriate, equitable and accessible health and wellbeing services for all New Zealanders.

The Pae Ora legislation guides us on how to transform the health system to give effect to Te Tiriti, to integrate and improve decision-making, long-term planning and investments for all New Zealanders.

It means achieving:

- Real authority for Māori
- Making room for the voices of whānau and communities through localities.
- Listening and responding to diverse voices so we can create consistency across the motu, while delivering care in a way that is responsive to local communities.
- Enabling a culture of partnership to drive change side-by-side with Te Aka Whai Ora and Iwi Māori Partnership Boards.

SECTION 2 : Our Operating Model

The purpose of commissioning is to design, plan, fund and monitor community-based health services across the system to improve the well-being of whānau and communities and address persistent inequities in access and outcomes.

The Commissioning team ensures contractual obligations are met, but more importantly, that outcomes are achieved that fulfil Te Tiriti commitments, Pae Ora reform intentions, aspirations of communities and whānau and original system design intent.

Commissioning relies on strong engagement with and leadership from sector experts, service providers, people with lived experience, diverse voices, care partners, communities and whānau.

Commissioning seeks to promote behaviour as a single health system, removing fragmentation, streamlining care paths and using technology to connect providers and enhance patient experience and outcomes.

Understanding the evolving expectations and aspirations of society is critical to this mahi as is nurturing a robust and fit-for-purpose workforce. Te Aka Whai Ora, Manatū Hauora, Te Aho o Te Kahu, Whaikaha and many other agencies are key partners in this mahi.



A vision for how we commission

People in Commissioning are already shifting how they work, with a much more relational approach, grounded in partnerships, understanding patient, community and Whānau aspirations, simplified and reflective of the bigger system picture. We are looking to build on this and how we do our mahi, and this table signals how we want to connect with our partners across the system and build on the shifts already occurring.

Agree health & wellbeing plans

Te Whatu Ora is divided into four regions: Northern, Te Manawa Taki, Central and Te Waipounamu.

Each region is led by a Regional Integration Team (RIT) that oversees integrated planning across hospital and community care. RITs work closely with a wide range of partners to develop plans including locality plans as set out in the Pae Ora (Healthy Futures) Act 2022.

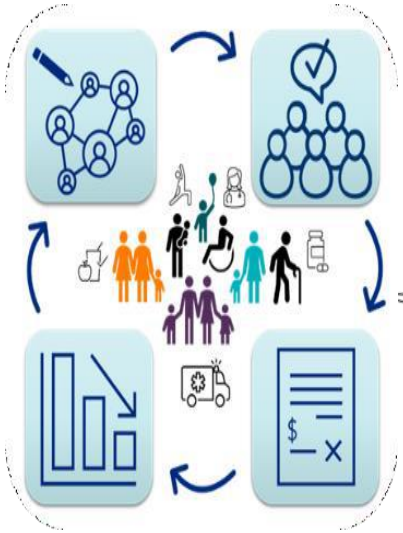
The Commissioning team operates as a team of teams under a servant leadership model in which national teams serve regional teams who serve local teams who, in turn, directly serve communities and whānau.

The Commissioning team is responsible for delivering on many of the reforms outlined in the Pae Ora (Healthy Futures) Act 2022, including the roll out of localities by 2024 and the development of locality plans by 2025.

The Commissioning team is also responsible for a large share of actions in Te Pae Tata (Interim New Zealand Health Plan 2022) and for the continued implementation of numerous government initiatives from previous Vote Health budgets.

The Commissioning team's mahi is guided by the health system principles, contributes to the five system shifts and upholds the four Pou of Te Mauri o Rongo (the New Zealand Health Charter).

People at the heart of Commissioning



Communities & whānau

The key goal of Commissioning is to ensure the population has appropriate, equitable and accessible health services that meet their diverse needs. Best practice commissioning listens closely to communities to understand evolving expectations and recognises the role whānau play in supporting wellbeing. The localities approach ensures influence is in the hands of communities and whānau.

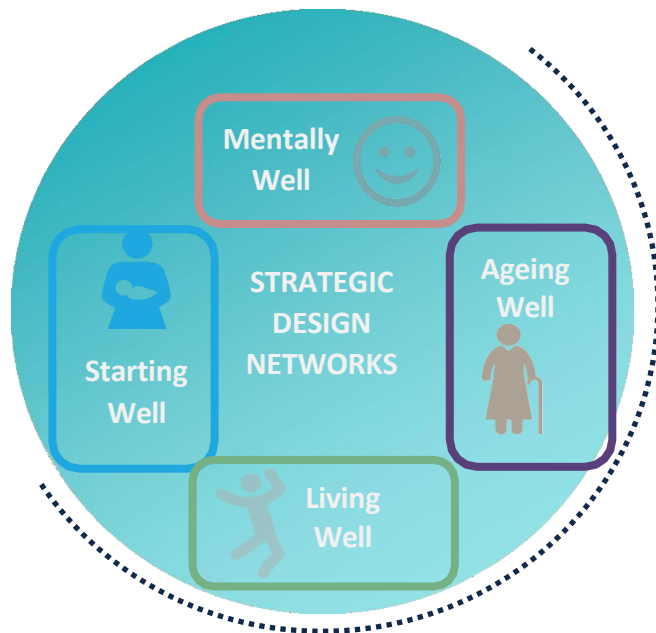
Providers of care

The majority of care in Aotearoa is provided outside of hospital, in the community and in people's homes. Commissioning funds, supports and coordinates these providers and partners with them to identify the most effective, efficient and sustainable workforces and models of care to meet the country's growing care needs. Commissioning recognises the critical role of whānau, carers and care partners as well as emerging workforces such as kaiāwhina roles.

Partner networks

Commissioning works closely with a number of partner networks in the community such as Iwi Māori Partnership Boards (IMPBs), Locality Partnership Groups and Primary Health Organisations (PHOs), each of whom participates in planning, organising and, in some cases, funding primary and community health services. These partner networks are in addition to many other critical relationships with industry peak bodies, colleges, provider collectives and NGOs.

SECTION 3 : National Function



National functions

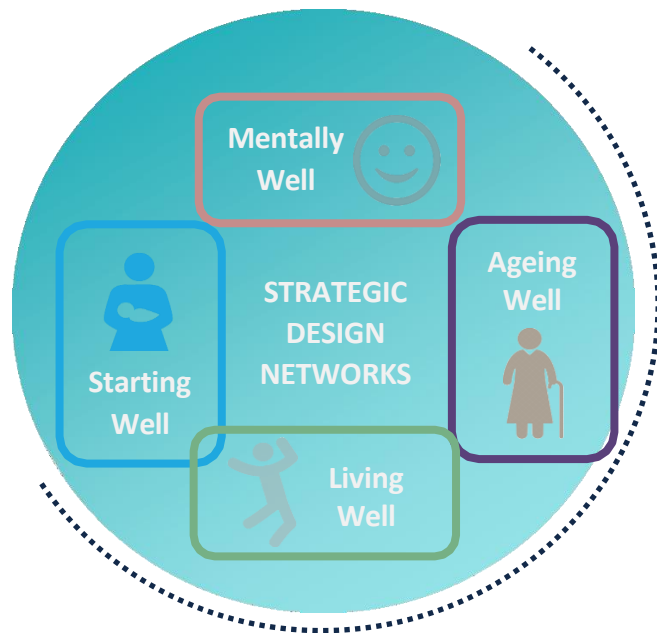
At the national level, Commissioning’s clinical leadership, equity leadership and system design teams partner with sector leaders, providers, people with lived experience, diverse voices and community members and their whānau to design systems of care.

National functions are those that should be done once, to avoid duplication and increase consistency, and that enable more streamlined engagement and contract management for larger care providers with nationwide service delivery footprints.

National functions serve regional teams and provide key connection points for a range of cross-organisational “business partners” (e.g. Finance, Communications).

Commissioning’s system design teams are organised according to the life course: starting well, living well, mentally well and ageing well.

SECTION 3 : Regional Function



Regional functions

The Commissioning team's regional structure is the critical connection between national planning work and the tailoring of service delivery to meet the priorities identified by communities and whānau through the localities planning process.

Regional teams hold key provider and wider social sector relationships and support procurement of a wide range of community health services.

Each Te Whatu Ora region has Regional Integration Teams (RITs) co-led by commissioning's Regional Wayfinders and Te Aka Whai Ora's Regional Directors. RITs bring together leadership from Hospital and Specialist Services, Pacific Health, National Public Health Service and System Improvement and Innovation to work with partner networks such as Iwi Māori Partnership Boards (IMPBs) and Locality Provider Networks to plan delivery of services in alignment with the priorities identified in Regional Health & Wellbeing and locality plans.

The map over the next page shows the four regions in which the regional teams operate:

- Northern
- Te Manawa Taki
- Central
- Te Waipounamu

Making way for localities

Localities are a key new feature of Aotearoa's reformed health care system. Localities aim to help achieve better, more equitable wellbeing outcomes for all people in that area, based on what is important to their communities and whānau.

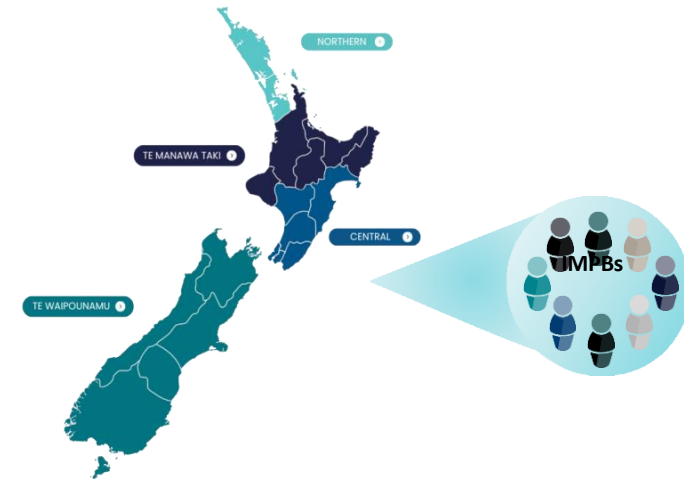
The objective of localities is to enable local communities and whānau to influence the design, funding, and delivery of their local health care services. This will be done by creating a locality plan that determines hauora priorities for those communities and which influences how health dollars are spent in that area.

Te Whatu Ora and Te Aka Whai Ora are leading the implementation of the localities framework and will support communities by:

- Partnering with Iwi Māori Partnership Boards and engaging local authorities to determine geographic areas for localities by mid-2024;
- Working with Iwi and Māori, communities, consumers, whānau and other stakeholders to establish Locality Partnership Groups in each geographic region. The groups will be responsible for oversight of locality planning processes, including identifying local priorities through deep engagement with providers, communities and whānau within each locality;
- Collaborating with Hauora Māori service providers, local healthcare, and Pacific service providers to enhance the coordination, accessibility, and responsiveness of services, while also expanding the options available for service delivery to all members of the local community;

Localities will create a collective local voice that influences health service planning to improve hauora and wellbeing for everyone in their area.

In each locality, people will come together to determine local priorities, elevate the involvement of Māori, work with provider networks, shape local services and influence how health dollars are spent in that area, all with the aim of making a real difference in the health of people and their whānau.



Iwi-Māori Partnership Boards

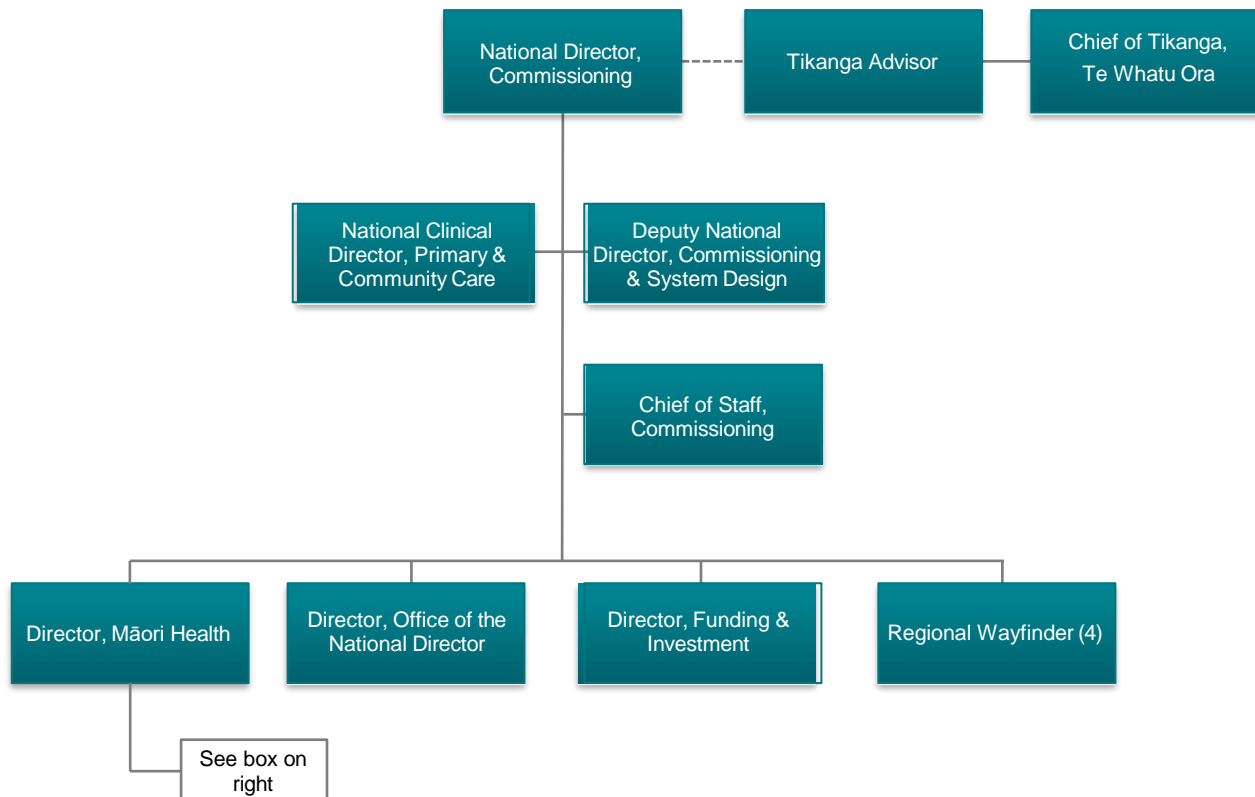
The establishment of Iwi-Māori Partnership Boards (IMPBs) is part of the health and disability reform's commitment to recognising Te Tiriti o Waitangi and delivering better health outcomes for Māori.

IMPBs are the primary source of whānau voice in the system and influence regional strategies that enable iwi, hapū and whānau to exercise rangatiratanga in their rohe and ensure tāngata whenua voices are heard and local health services reflect those who need and use them

SECTION 4 : National Commissioning Team

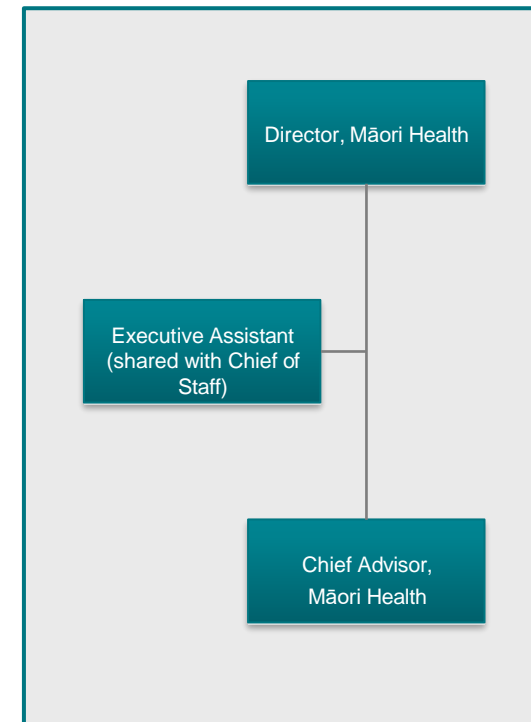
The members of the Commissioning Leadership team work collaboratively both **across** their teams (region to region and regional to national) and across other Te Whatu Ora service delivery partners (Hospital & Specialist Services, National Public Health Service, Service Improvement & Innovation and Pacific Commissioning) and enabling partners (People & Communications, Data & Digital, infrastructure & Investment and Finance) to ensure Commissioning takes a partnership approach to delivering on the expectations of Pae Ora.

The Tikanga Advisor is a dotted line to the National Director, and a full reporting line to Chief of Tikanga, Te Whatu Ora.



Director, Māori Health

An Executive Assistant to support the Chief of Staff and the Director Māori Health in the Senior Leadership Team has also been established.



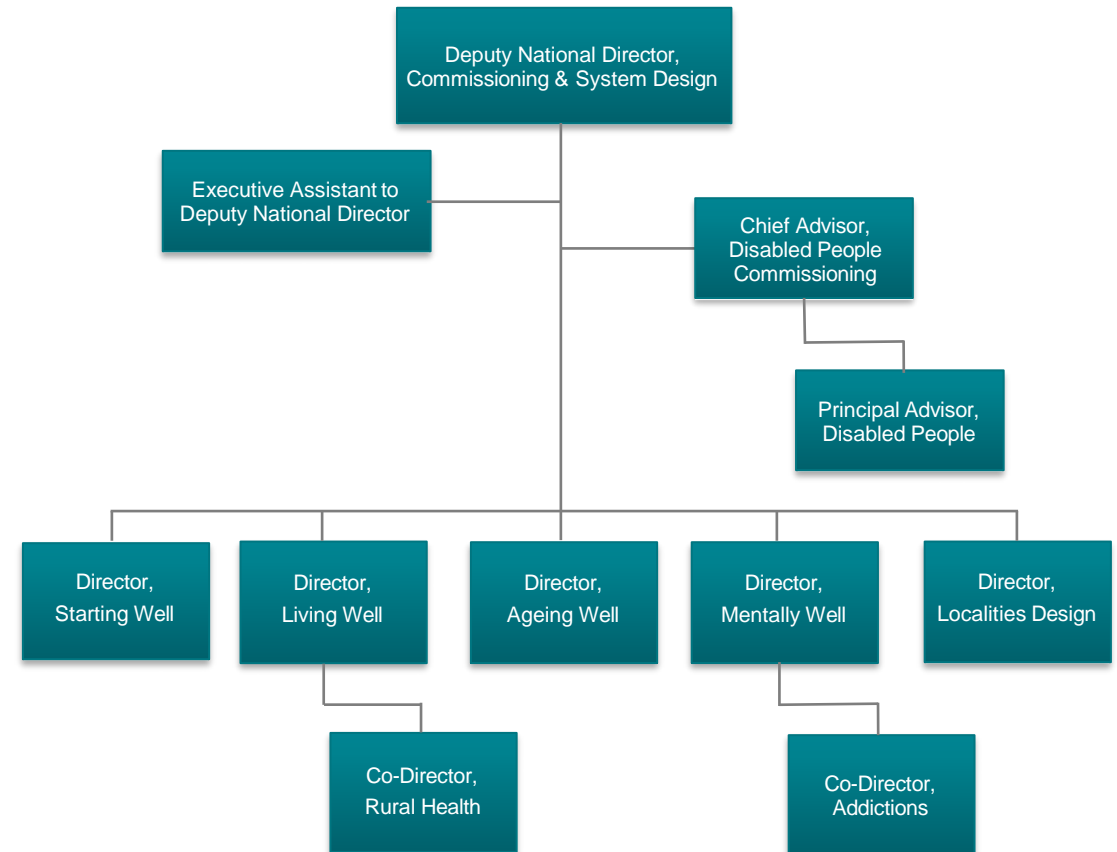
National System Design Team

The System Design team is led by the Deputy National Director, Commissioning & System Design. The teams are responsible for leading the work to ensure that nationally contracted health services are robust, efficient and responsive to the wellbeing aspirations of communities and whānau.

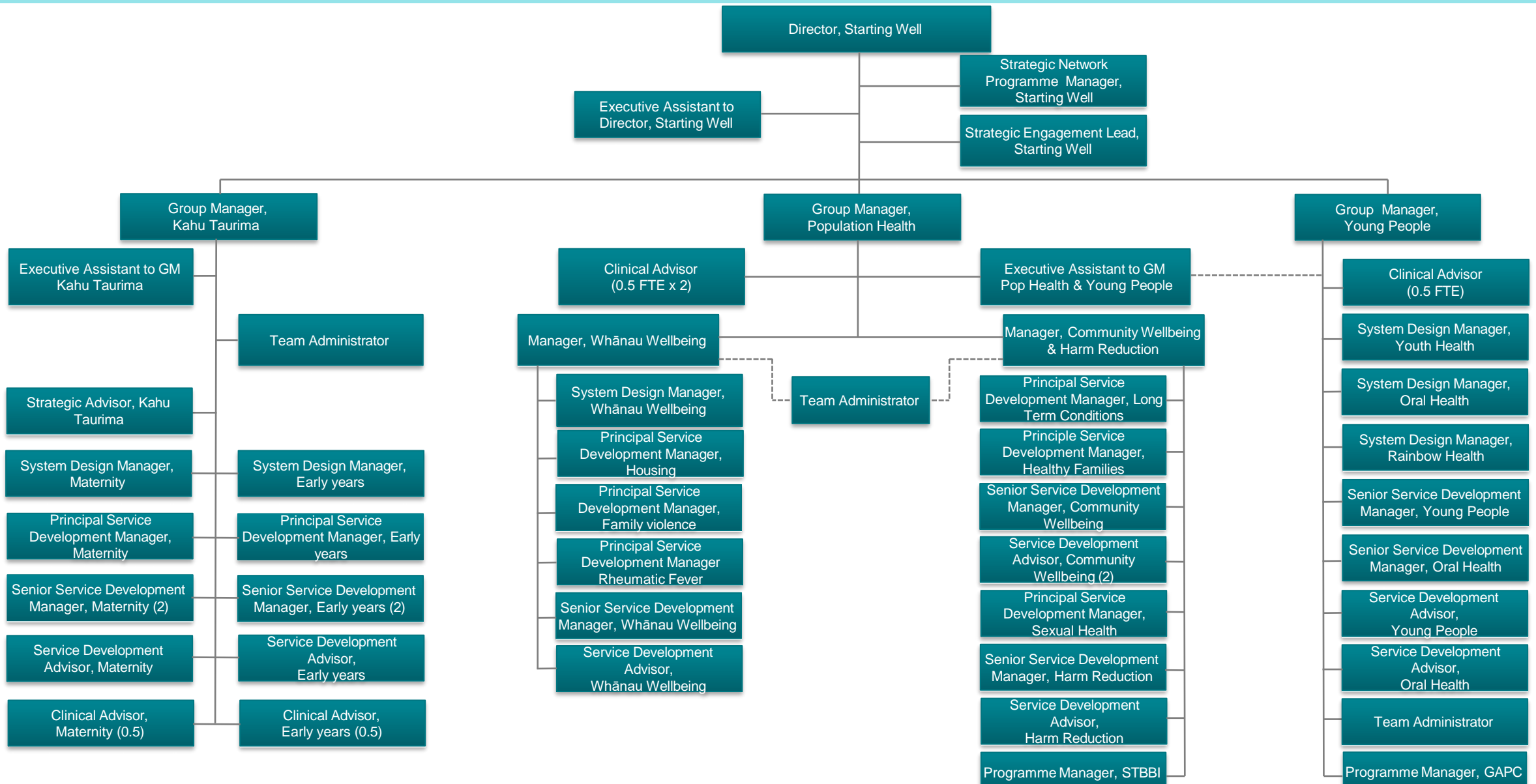
These are critical planning functions enabled by a strong partnership with Te Aka Whai Ora, as well as the other Delivery teams within Te Whatu Ora. These are nationally based functions that serve the regions and localities with a range of content experts that design nationally consistent systems of care across key life course areas.

Procurement and contracting of health services will primarily sit with regional and local Wayfinders except where national agreements are required, with the System Design Teams developing the new service and funding arrangements for national agreements, as well as providing guidance such as nationally consistent service requirements and funding approaches where these are required.

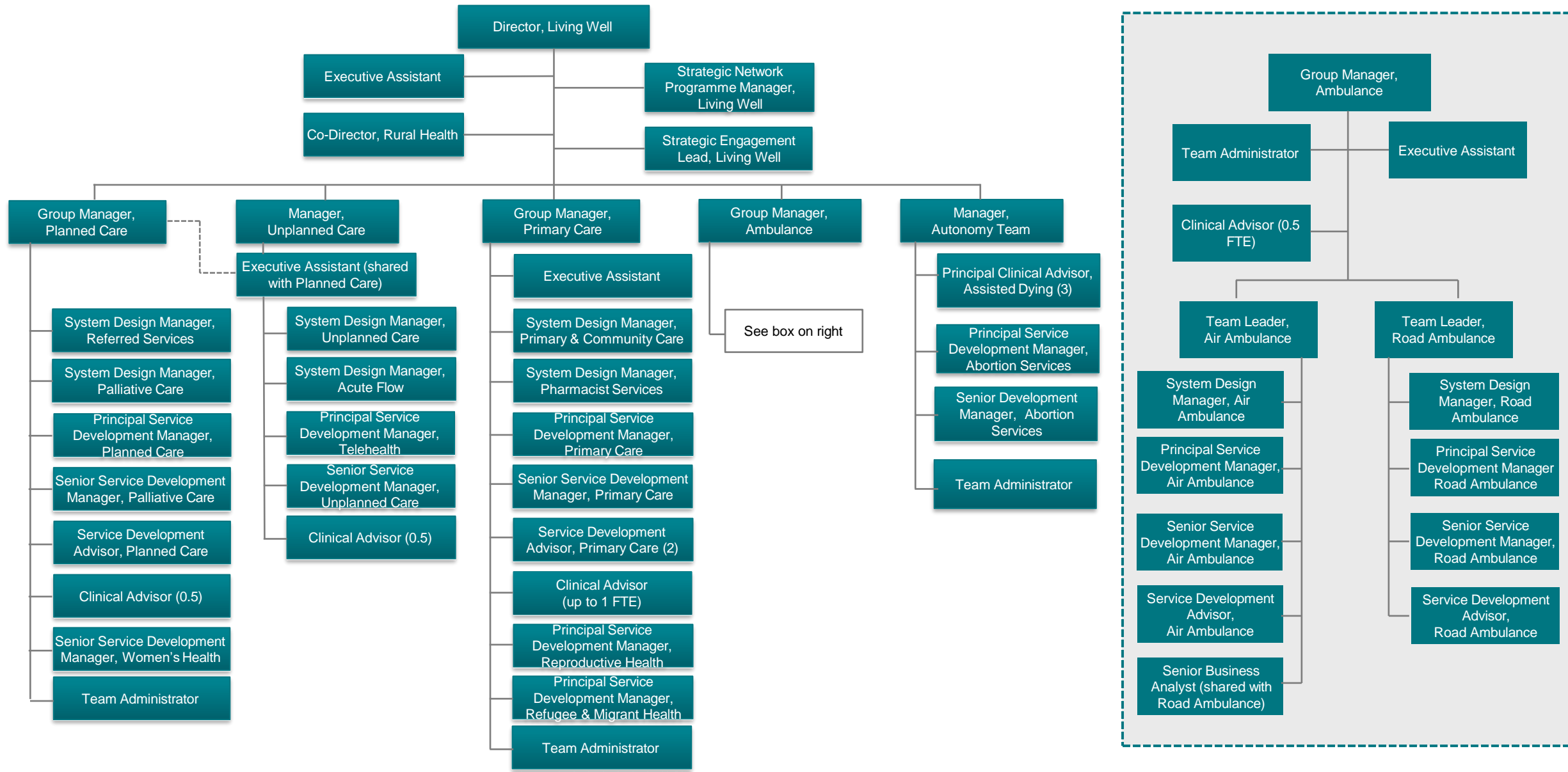
The System Design Team comprises five teams who oversee the system design function across the life course (Starting Well, Living Well including Rural Health, Mentally Well & Addictions and Ageing Well) along with Localities Design.



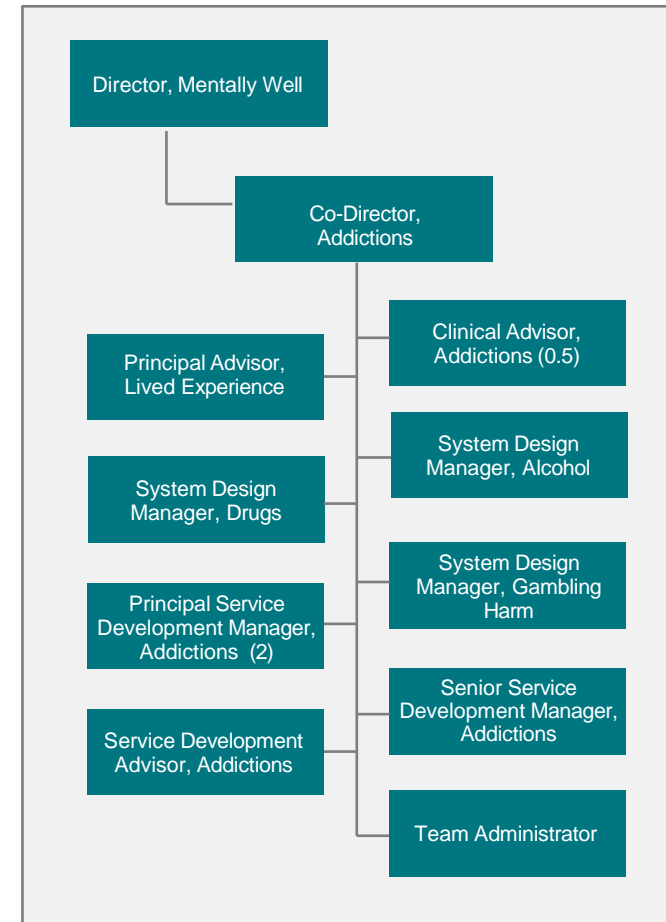
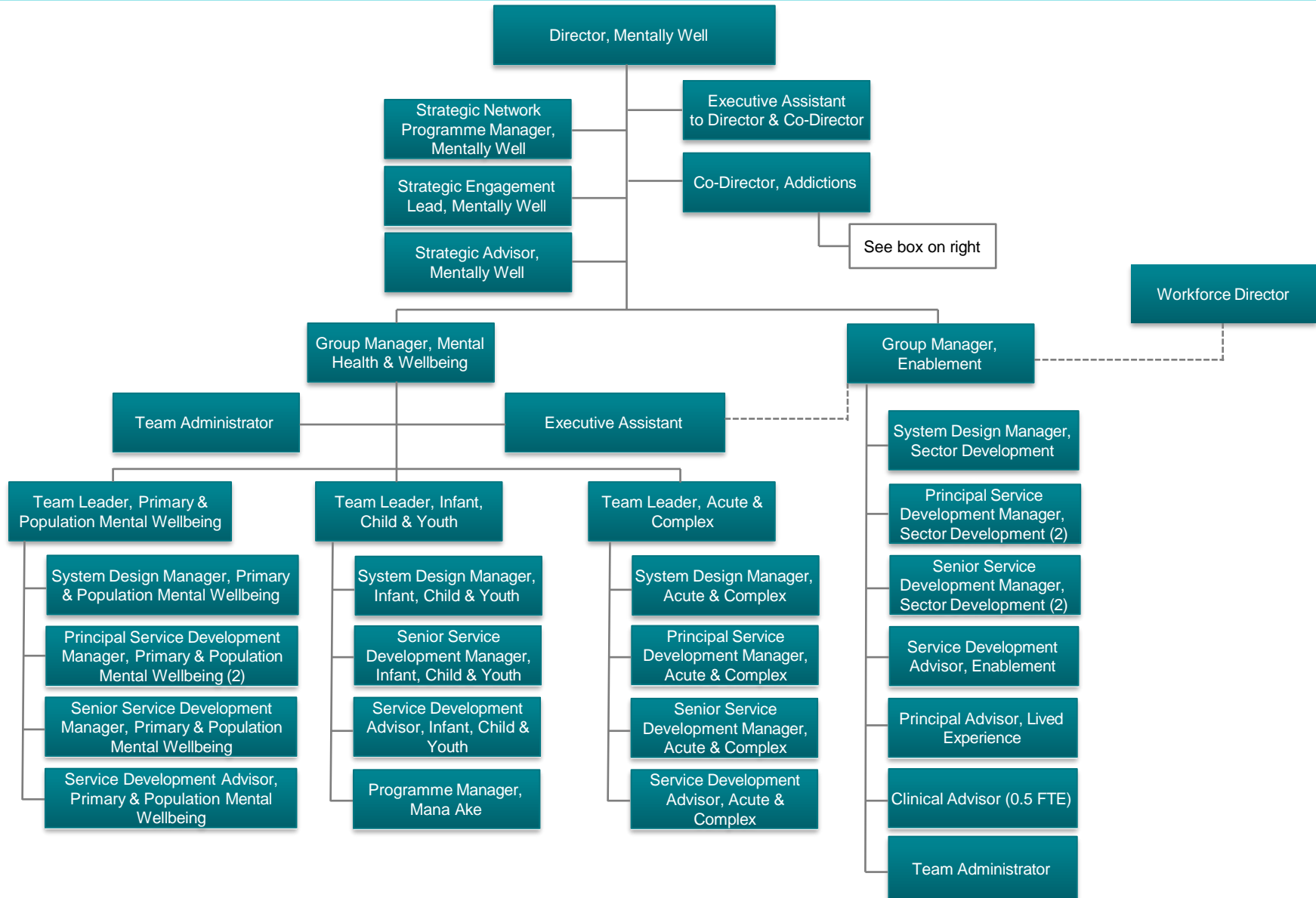
Commissioning – National Design Team, Starting Well



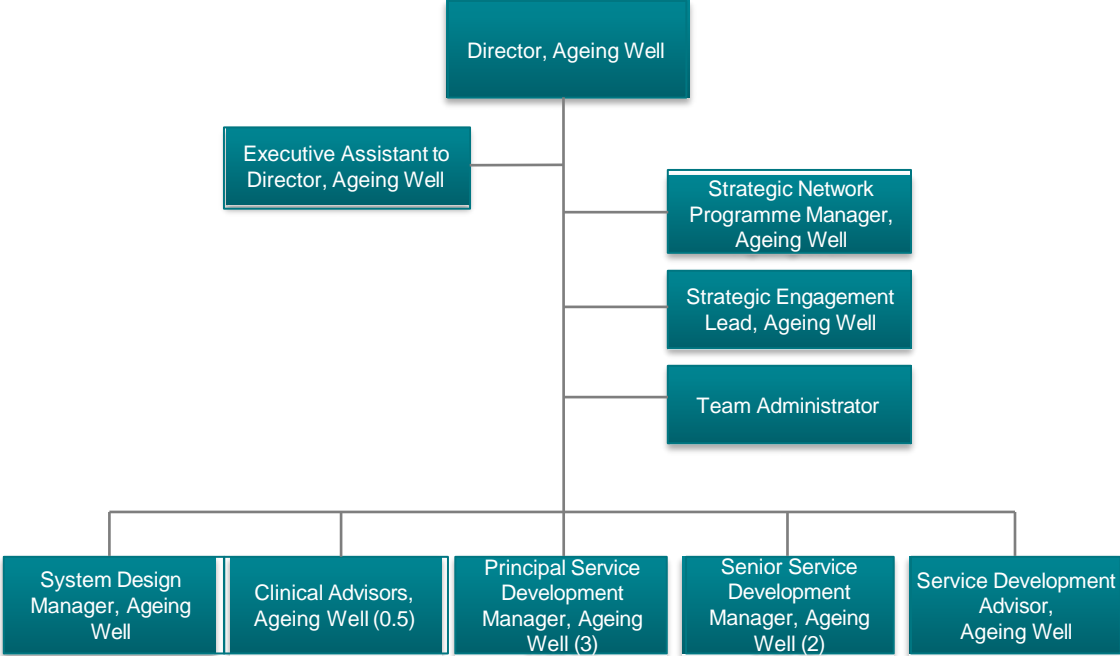
Commissioning – National Design Team, Living Well



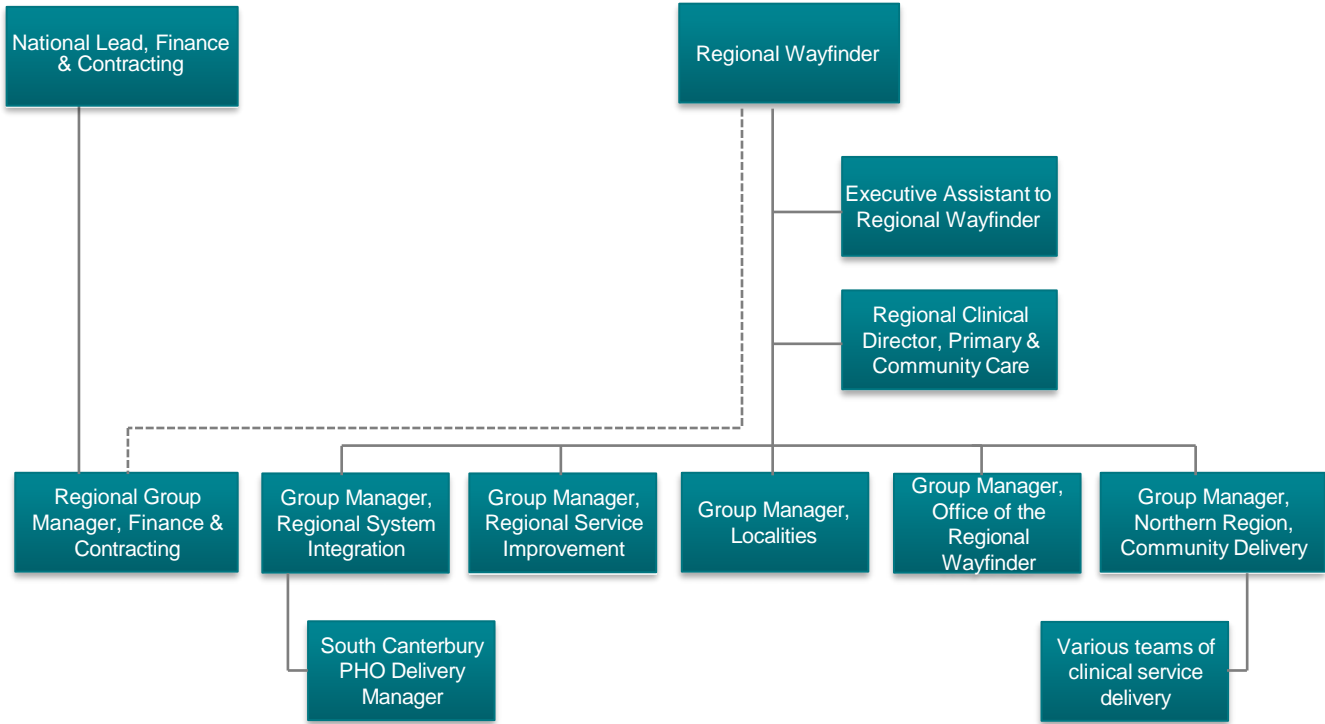
Commissioning – National Design Team, Mentally Well



Commissioning – National Design Team, Ageing Well



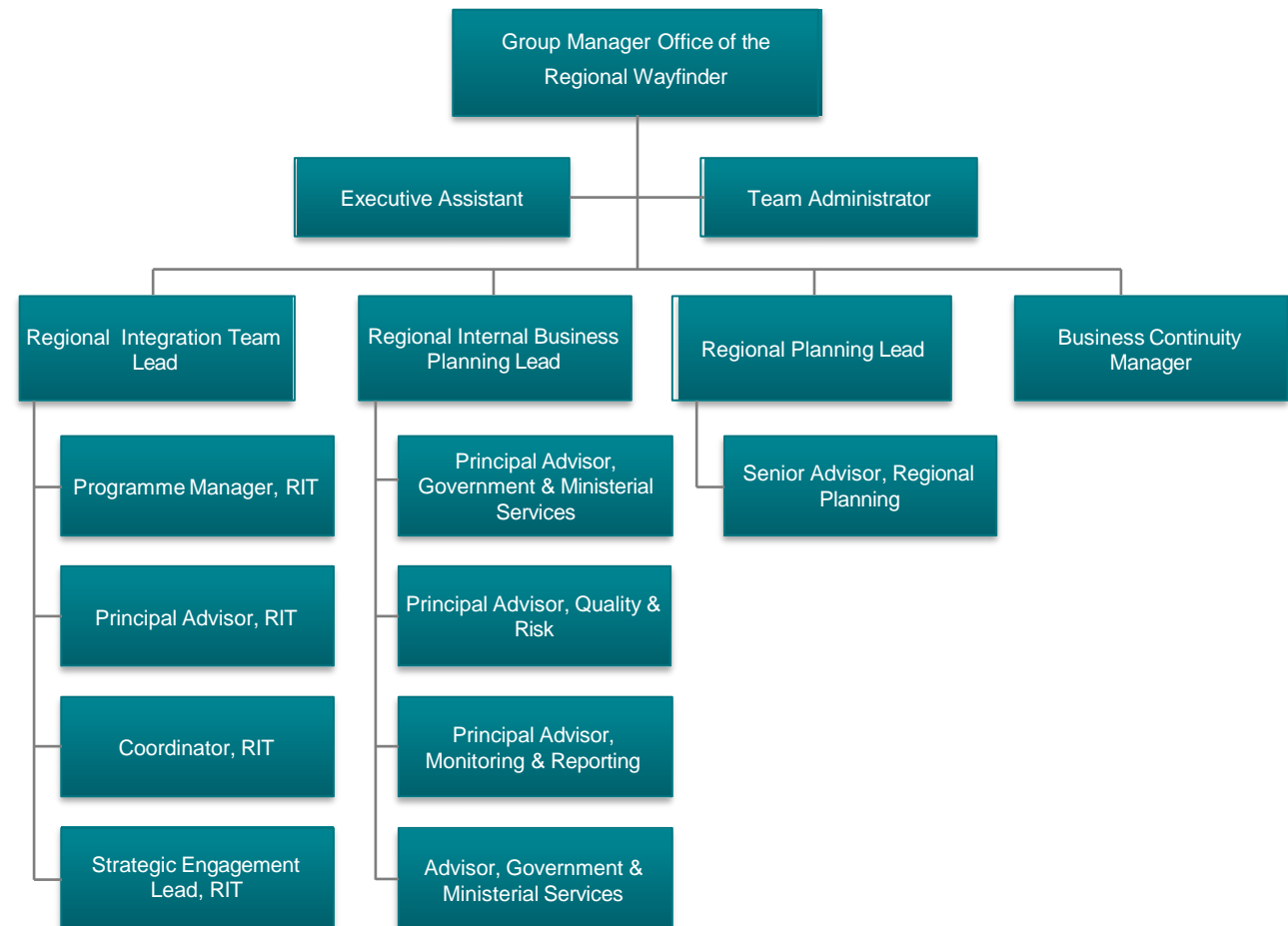
SECTION 5 : Regional, Commissioning Team



The Office of the Regional Wayfinder (Regional Office) is proposed to be the central coordination point for the regional commissioning functions. The team will work closely with the Office of the National Director, Commissioning to ensure consistent systems and practices across the regional business including internal business planning and risk management processes. The team will also support the National Office of the Director, Commissioning with any regional requirements around Government and Ministerial processes such as OIAs, PQs, Briefings, and reports.

Key functions of the Office of the Regional Wayfinder team include:

- Secretariat for Regional Integration Teams
- Coordinating and supporting regional input into the development of annual business plans, reports, briefings, etc
- Implementing consistent group-wide processes, procedures, tools, and templates at a regional level
- Implementing the risk management practices developed by the national office across the team
- Interface with NGOs and the national office on business continuity
- Regional planning

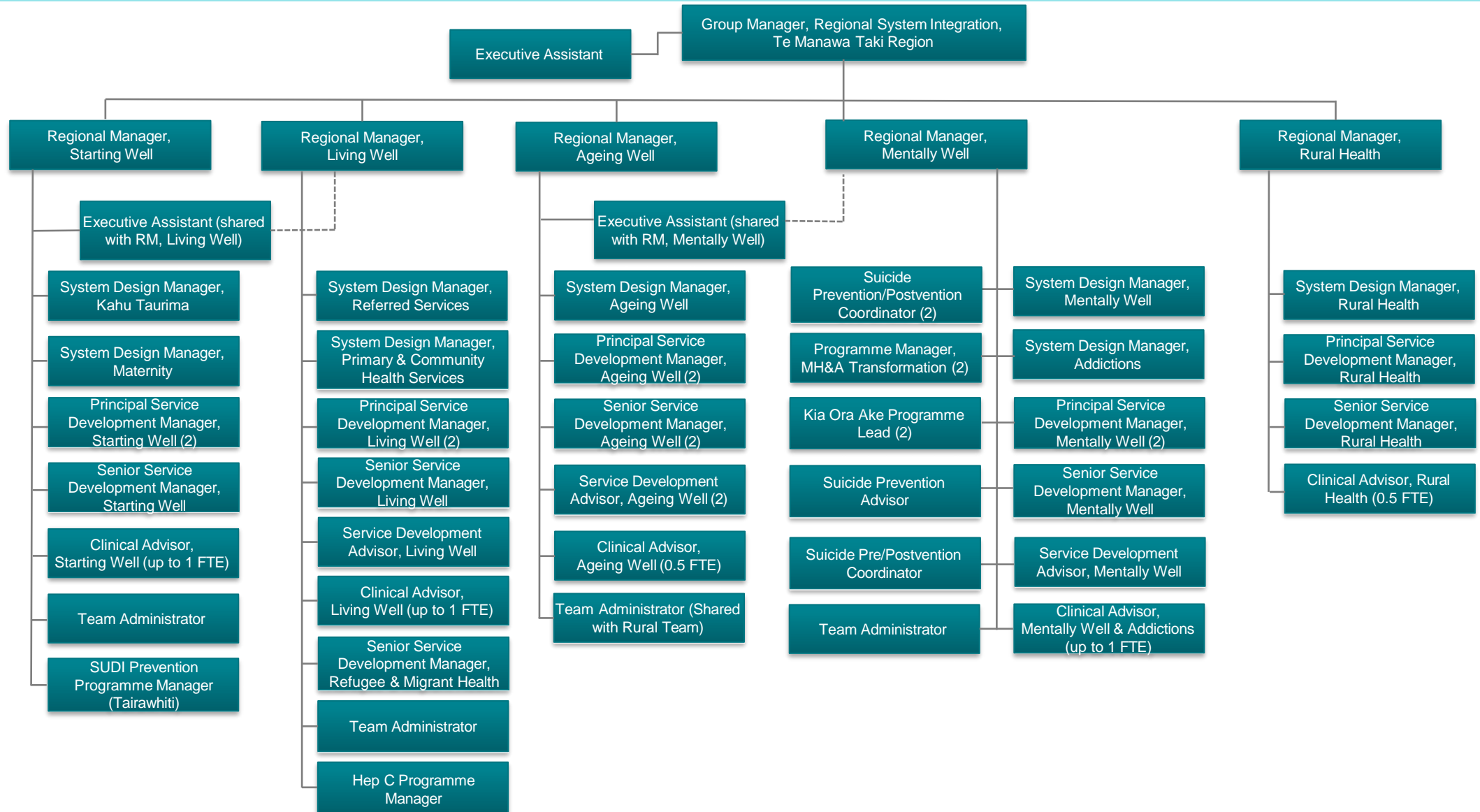


The Regional System Integration team is proposed to be made up of subject matter experts, system design thinkers and change leads, contract and relationship managers, and clinical advisors who will lead system integration across regions and localities. The team is designed to support the Senior Locality Managers to navigate complex service issues across providers and localities and work with the regional system improvement team to address key issues of service quality, supporting key integration and change programmes of work. Improving Māori health outcomes and addressing equity gaps will be a particular expectation of the work of the team.

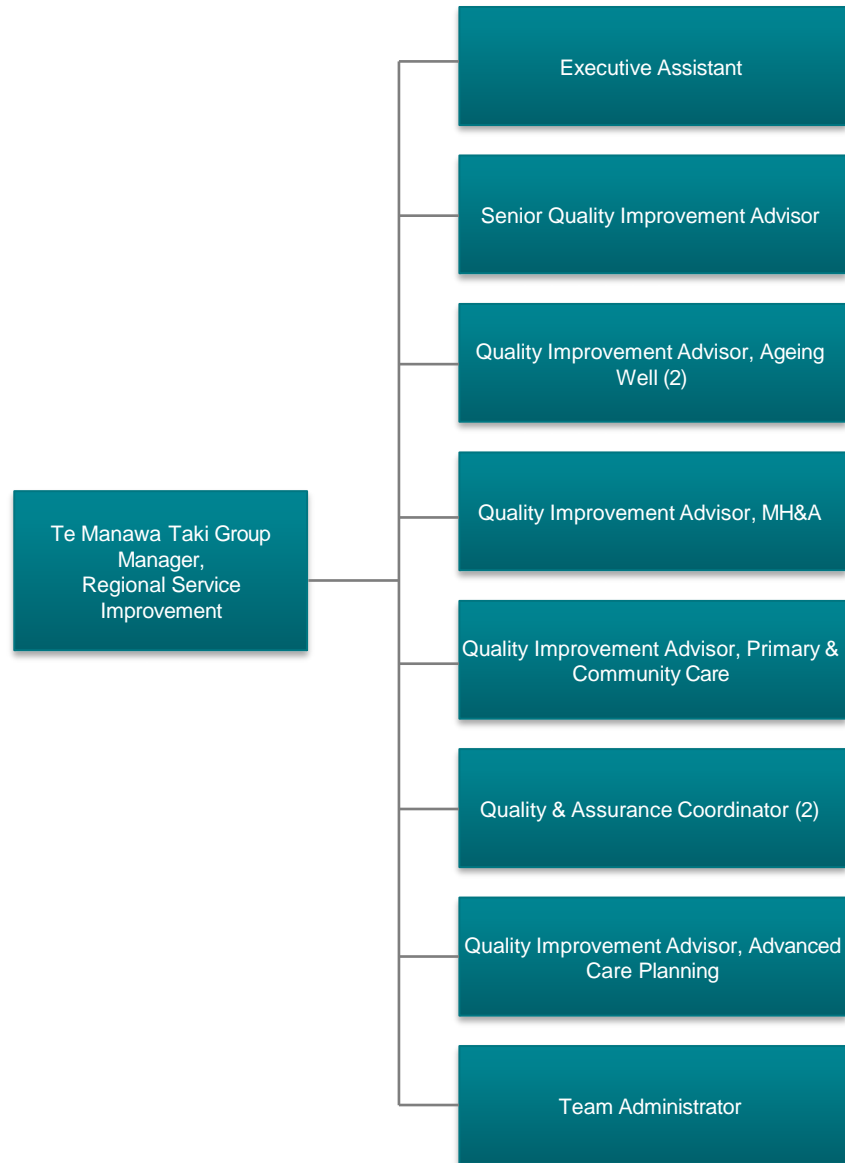
The key functions of the Regional System Integration team include:

- Lead the procurement and provider relationship management of funded services
- Lead regional system and service re-design across the life span in partnership with national and other regional teams
- Lead implementation of integration change programmes
- Lead sector-facing engagements across the NGO funded sector
- Support the management of key operational issues that occur across a network of providers across a region and/or a locality
- Holding key relationships with sector leaders across the region and localities
- Act as the Pou to Senior Locality Managers

Commissioning – Regional System Integration Team, Te Manawa Taki



Commissioning – Regional System Improvement Team



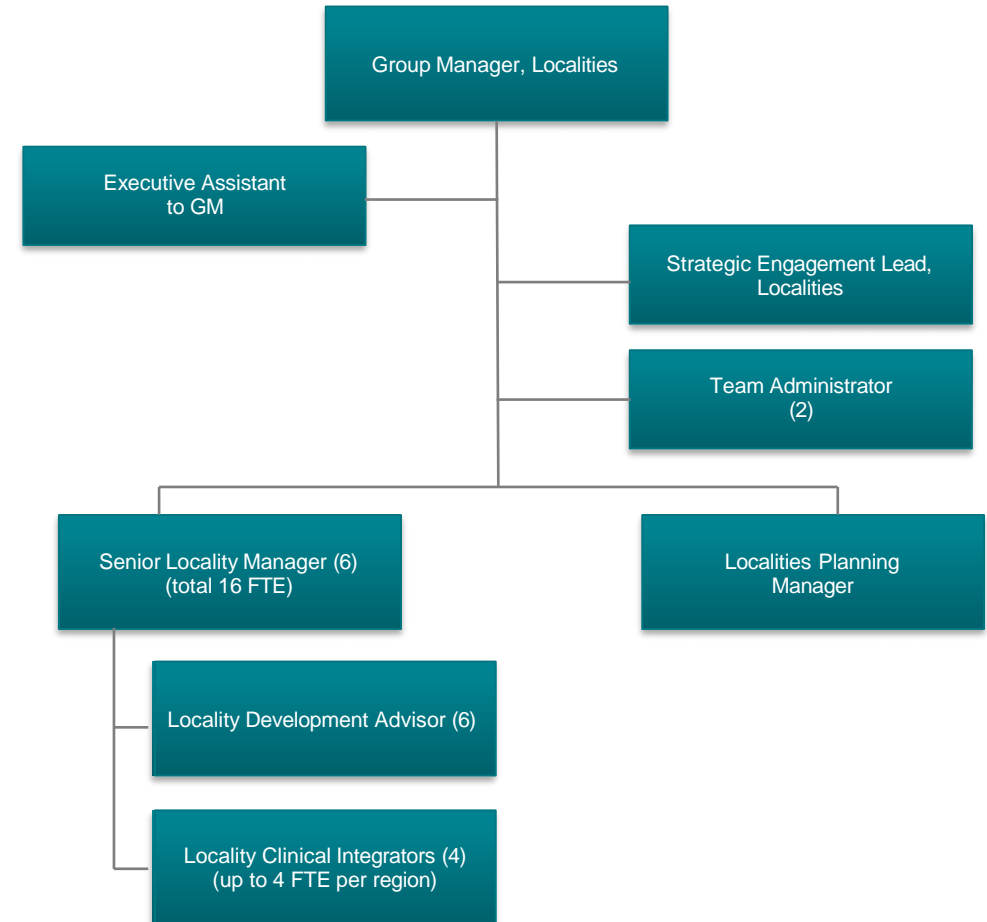
Localities

This team will have dual responsibility for establishing and maintaining localities across the region, as well as holding the critical contract management and relationships with funded health providers across the regions. Maintaining strong relationships across communities, IMPBs, Pacific Health, NPHS, local government and other NGOs will also be a key function of this team.

The Localities team will work closely with the Regional System Integration team and the Regional Service Improvement team who will hold the service subject matter experts, quality improvement experts, and change management experts to support the development of new models of service and care, management of key service risk issues, as well as drive the integration programme of work across the system.

Key functions include:

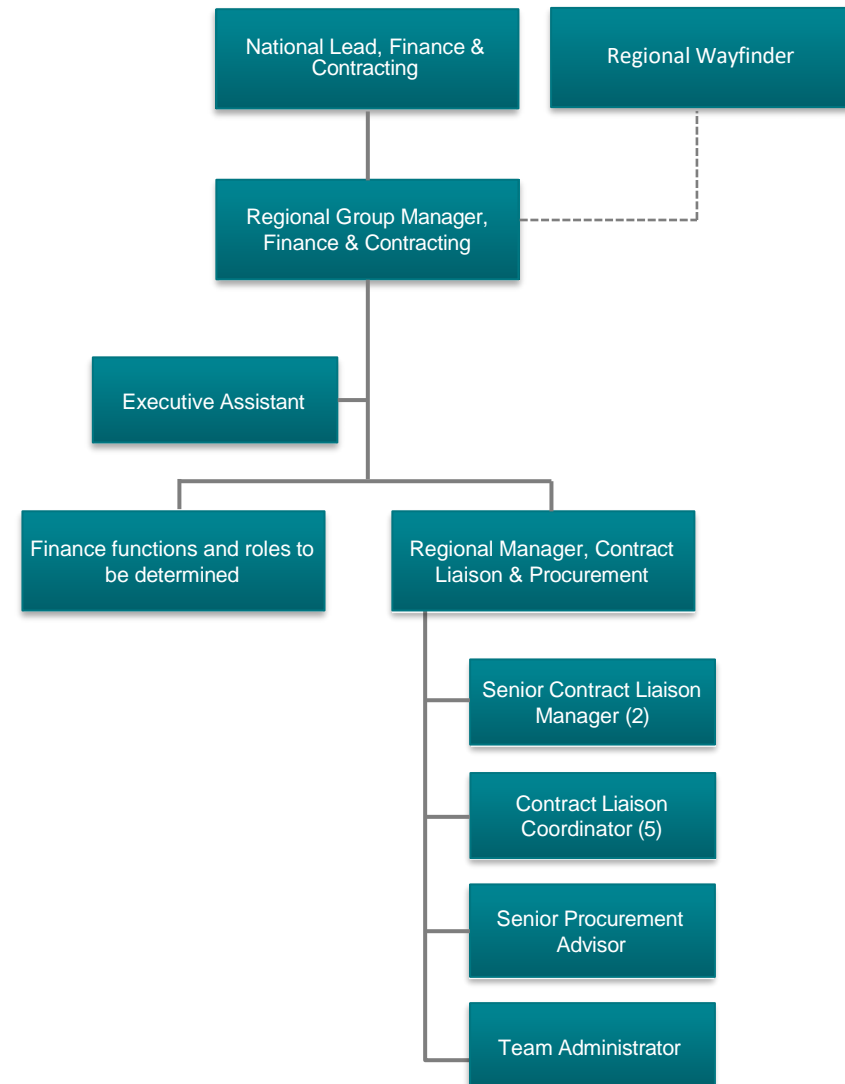
- Establishing and supporting localities and locality partnership groups
- Supporting the development of locality plans
- Building relationships and working with communities, IMPBs and intersectoral partners
- Directing the procurement of services, managing contract and provider relationships
- Supporting the integration and connection of services across localities.

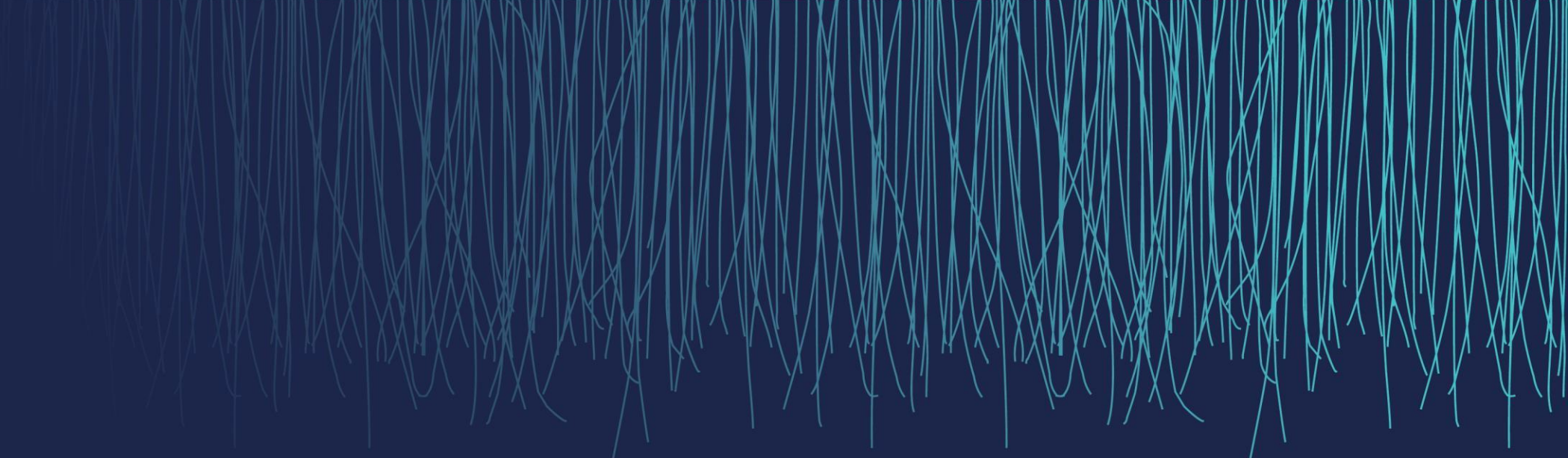


Contract Liaison and Procurement

With the establishment of a fully embedded finance function within Commissioning at a national and regional level, the functions of procurement, contract liaison and administration are proposed to be shifted into the newly formed Finance and Contracting team.

The team will be a regional team reporting to a Regional Group Manager, Funding and Finance (who will hold a dotted reporting line to the Regional Wayfinder and a formal reporting line to the National Lead, Finance & Contracting). This role and the associated teams under these roles will be expected to be regionally based, and work closely with the Regional Wayfinder and Regional Integration team.





Te Whatu Ora
Health New Zealand