“Fixing Health” – who is serious about it?

Kathy Spencer

Chris Hipkins says our health system is “in a deepening crisis” while Christopher Luxon prefers to describe it as “incredibly challenged”. But is either leader genuine when he says he wants to “fix health”?

There is little doubt that most of us are concerned about the public health system. According to a recent poll, 74% of us think that the public health system is no longer able to provide timely care when people need it. Only 7% disagreed with this statement, and the other 19% were neutral or unsure.

The Post/Freshwater Strategy survey of 1,000 New Zealanders also found that improving healthcare ranked as the second priority for voters, after addressing the cost of living.

For those of us who regard health as a priority, it comes down to whether Labour or National would deliver a stronger public health system in the coming 3 years.

National’s election pamphlet says “our record investment means patients spending less time in emergency departments and facing shorter wait times for elective surgeries like hip, knee and cataract operations”.

I have a significant problem with each part that statement.

The first is the reference to the government’s “record investment”. It is a longstanding practice for governments to include “cost pressure funding” in Vote Health for the coming year – this funding is aimed at maintaining the status quo in the face of increasing costs, mainly due to inflation and a population that is growing and ageing.

Compensating for these factors requires annual increases of 5% - 6% in operating funding for Health NZ. So, when Vote Health increases from one year to the next, it is nothing out of the ordinary, and nothing to crow about.

In 2024, the current government decided to cobble-up an absurdly large figure by announcing 3 budgets worth of cost pressure funding at once. It added the figures up over multiple years and called it the biggest investment ever.

Most people have not been fooled – the recent poll showed that 75% of us think that too little funding is going into the system. Of those surveyed, 61% thought extra funding should be moved into health from other areas, even if it meant cuts in those areas, while 41% were willing to pay more tax to provide more funding for health.

When National claims that patients are spending less time in emergency departments, it may be true compared with last year, however, the current performance is dismal with only 76% of attendees getting out of the ED within 6 hours. One tragic result was the patient who had been waiting over 9 hours in Waikato’s emergency department only to be found dead in a toilet by another patient.

The current performance is much worse than it was 10 years ago, when 91% of people attending EDs were either admitted, discharged or transferred from the department within 6 hours.

And are people facing shorter waits for planned surgeries as National's election pamphlet claims? These are surgeries that don't have to be done within 7 days and include hip and knee replacements, heart valve replacements and heart bypass surgery.

Only 73% of people are waiting less than four months for these procedures. Again, that's far worse than the performance 10 years ago, when the figure was 98%. Bear in mind that the wait for treatment comes on top of the wait to be assessed by a specialist – likely another four months, or longer.

Their track records show that both National and Labour can be relied on to put in cost pressure funding to maintain the status quo. The amounts calculated by the Ministry of Health and Treasury are: $1.40 billion from 2027/28, a further $1.44 billion from 2028/29, and a further $1.55 billion from 2029/30.

In another example of smoke and mirrors from National, it has extended cost pressure funding out to 2030/31, by a further $1.55 billion. This latest attempt to bamboozle us should be disregarded, with the focus instead being on each party's commitments over and above funding for cost pressures.

National says it will provide extra new funding averaging $196m per year, including $151m per year for medicines and an average of $45m per year to expand bowel screening.

Labour is promising additional funding that averages $626m per year to pay for: 3 free GP visits, various mechanisms to support GPs and free-up appointments, free maternity scans, and a return to free prescriptions. In my view, Labour's emphasis on primary care will help to get health conditions treated earlier, and should reduce demand at emergency departments.

Other promises from Labour and National will be paid for from existing funding or cost pressure money.

Polling suggests that a majority of New Zealanders want a public health system that provides timely care when people need it. But, despite the claims from Luxon and Hipkins that they want to "fix health", not even Labour's package will come close.

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