## Te Whatu Ora Health New Zealand

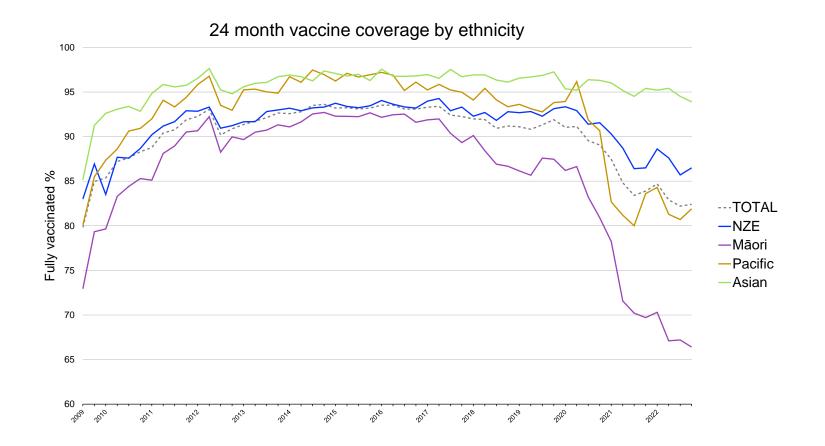
### Te Aka Whai Ora Māori Health Authority

## Nau mai haere mai e te whānau!

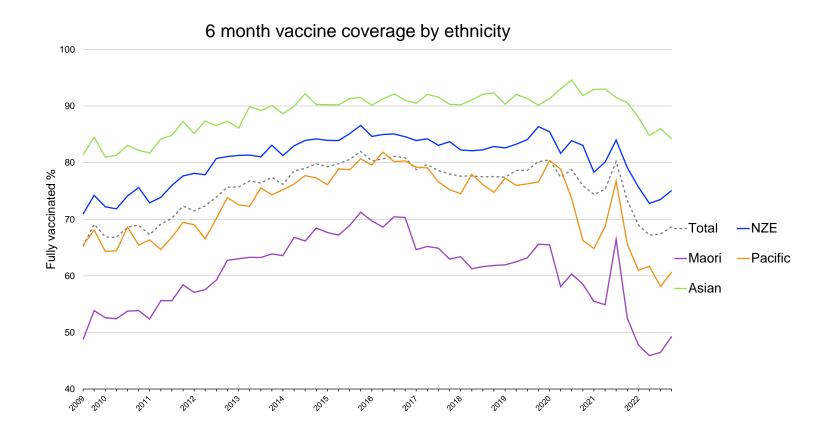
## The National Immunisation taskforce Initial priorities for the National Immunisation Programme in Aotearoa

Why was a taskforce needed?

## **Childhood vaccine coverage in Aotearoa**



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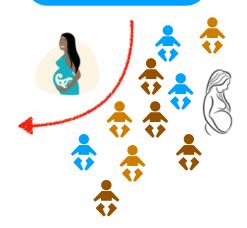
## What does the taskforce want?

Not waiting for missed immunisations and catching up

95% immunisation coverage ON TIME

> The life of every mother and child in Aotearoa has the same value irrespective of ethnicity or disability

Equitable Outcomes



## What did we find?

 Workforce
 legislation
 Barriers to care
 Poverty
 systemic racism
 poor data
 IT systems

 Index of effective governance
 Index of co-design or input from community groups, especially Māori
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Multiple Systemic Failures at all levels of the immunisation system

The Immunisation system achieves the outcomes it is funded and structured to produce

lack of consistency and quality of practice

lack of oversight and measurement of outcomes

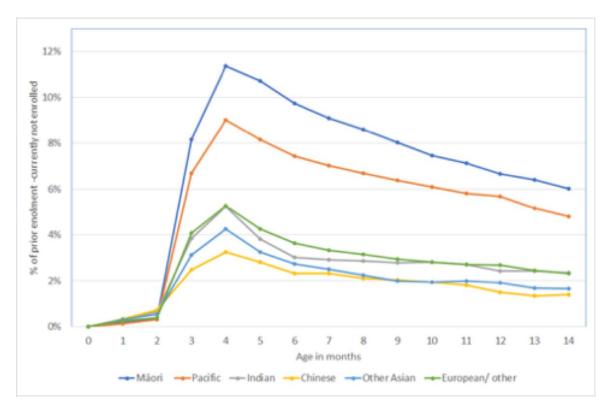


Information Standards of care

limited places for immunisation

information

accountability and responsibility



## Systemic issuesenrolment

Percentage of New Zealand children born in 2021 who were disenrolled after having a prior primary health organisation enrolment in the first 14 months of life, by ethnicity

#### Ten Key priority areas

Workforce More immunisers	Antenatal immunisations	Better authorisation processes	Governance
Enrolment	Catch up immunisations	Information resources	Long term sustainable funding
	Proactive outreach services	Delivery standards for immunisation services	

# Our recommendations

#### 54 specific recommendations

# Our recommendations

**Prioritisation Matrix** 

	Māori	Pacific	Quintile 5 Non-Māori & non- Pacific	Quintile 1-4 Non-Māori & non- Pacific
6-week	1	2	2	4
Antenatal Pertussis and flu	1	2	2	4
MMR-1	1	1	1/2*	3
3-Month	2	3	3	4
5-Month	2	3	3	4
MMR-2	3	4	4	5
4 -Year	3	5	5	6

## Te Whatu Ora Te Aka Whai Ora Health New Zealand Māori Health Authority

The populations with the lowest coverage are the most vulnerable, and any system that works for these populations, especially Māori, will work for all.

## How we're changing the system

Maximising outreach immunisations for priority groups through partnership and data sharing

Focusing on the immunisation journey from māmā to pēpi and giving opportunistic immunisations at all interactions

> Monitoring immunisation coverage through cogovernance and national oversight to achieve equity and Pae ora

Increasing and

diversifying the vaccinator workforce through changes to vaccinator

training and authorisation

Funding Māori and Pacific providers to deliver whānaucentric healthcare

Investing in technology that enables immunisations to be given on time

#### Immunisation Taskforce Recommendations Implementation Programme

Project Workstream	Priority Areas	Recommendations	Activity update
System Infrastructure & Enablers	Funding for providers that is long-term and sustainable Governance, technical advice, and service coverage oversight	11 of 16 recommendations underway	<ul> <li>New OIS funding model: \$2.5m has been provided to Te Aka Whai Ora; \$1m to Pacific team in Te Whatu Ora; \$500k to Whaikaha and Ministry of Ethnic Communities.</li> <li>Governance: Interim steering group established Dec 2022. Paper proposing joint oversight group and membership going to NPHS National Director.</li> <li>Aotearoa Immunisation Register: being deployed in phases. Pharmacy and other non-general practice providers are being onboarded to the AIR vaccinator portal.</li> <li>Uplift for vaccine administration fee: MMR and childhood imms price increase from 20 Feb to 30 June 2023.</li> </ul>
Service delivery models ♦+••	Proactive outreach immunisation services Catch-up immunisations Quality and standards for providers delivering immunisations to tamariki in New Zealand	5 of 14 recommendations underway	<ul> <li>Prioritisation Matrix: implemented Dec 2022, ongoing support &amp; development underway Q1 2023. Policy statement shared with the sector and available online.</li> <li>Re-call: outreach via Whakarongorau Aotearoa commenced early March 2023 and continues with follow up calls to those included in the Phase 1 cohort.</li> <li>OIS: working with regions, districts and local providers to identify immunisation opportunities e.g., Te Matatini, Polyfest.</li> <li>WCTO providers: 100% of providers contracted to deliver immunisations.</li> <li>Data sharing: upscaling data sharing partnership with Iwi, Hauora, Pacific healthcare providers, and across government</li> </ul>
Vaccinator workforce	Expansion of vaccinator workforce Authorisation of childhood vaccinators	8 of 15 recommendations underway	<ul> <li>VHW training: Stage 2 live, 474 enrolled in Stage 1 of which 251 completed; 23 in Stage 2 training.</li> <li>March webinar to promote VWH role: 129 people attended</li> <li>VHW pilot: Northland trialling VWH in schools</li> <li>Centralised authorisation: working on paper that explores this policy change.</li> <li>Medical Regulations: exploring reclassification of vaccines through MCC</li> </ul>
Whānau pathways	Antenatal Immunisations Enrolment into health services from birth Development of new provider and consumer facing resources for immunisations	2 of 7 recommendations underway	<ul> <li>Immunisation microsite: website launched March 2023</li> <li>Kahu Taurima: we're working with the Kahu Taurima team as they formalise the universal model of care working group.</li> <li>Enrolment technology: with NIR being turned off, we are working with the enrolment/ identity technology team to transfer this functionality into the same areas as NHI, NES etc.</li> </ul>



## Ngā mihi nui ki a koutou