

## **ARPHS strategic plan consultation**

### **Summary**

The Auckland Regional Public Health Service emailed a draft copy of its strategic plan to over 150 external contacts from key stakeholder organisations, and all ARPHS staff. To ensure it was as easy as possible for everyone to respond to the draft an online survey was developed which asked questions around the key themes of the strategic plan. There were 16 external responses received which included the Ministry of Health, NZFSA, Ministry of Social Development, Auckland Regional Council, North Shore City Council, Tihi Ora MAPO, St Johns, Auckland, Waitemata and Counties Manukau DHBs, Manukau City Council, Procure and others. The general feedback was helpful with constructive criticism; the plan was generally perceived to be on the right track, but required further work, and these ideas were fed back to help shape the final document.

Key issues that were commented on included a surprise that an **outcomes focus** was not more evident considering ARPHS was one of the first public health organisations to employ this method of programme evaluation. There was a conscious decision to not make the Service Delivery Plan a large part of this strategic plan, as so much consultation and work had been invested in its development previously, and its continual development towards outcomes based planning. There are also tensions that exist between employing an evidenced based long term framework, and developing it for operational use within a fluid changing political environment, that it was difficult to go into too much detail about this piece of work while maintaining a high level strategic overview. This was also evident in the feedback on the strategic priorities and how different organisations agreed with different priorities due to their relationship with ARPHS. Following this feedback though it was agreed that the strategic priorities should be reordered so that excellence in core delivery came first, with some explanatory notes around the move to outcomes based planning and quality work. This then emphasised an internal focus before shifting to an external gaze which many ARPHS staff agreed with.

There was a response that there was little evidence of the impact that **non-communicable disease** will have on the Auckland region both now and in the future within the plan, mentioning that communicable disease factored in terms of its arrival across New Zealand borders, and how the wider determinants of health can factor in the spread of communicable disease. Therefore in response to this more explicit reference was made to non-communicable disease and greater reference was made to the important health promotion work being done in this area. An additional goal was also added to outline ARPHS responsibility to the DHBs and other stakeholders and the support which ARPHS gives them in achieving their own goals.

There was also feedback that was surprised at a lack of specific referencing to the linkage between the Strategic Plan and the **Auckland Sustainability Framework**, which takes a longer term approach to many of the issues the plan raises. As this framework was being developed at the same time as the strategic plan it was difficult to reference another document which was also in draft. However as this was finalised at the same time as the plan, and owing to the submissions that referenced this, there is explicit reference to ARPHS supporting the relevant goals of the framework, 'fair and connected society', 'a quality and compact urban form' and 'a resilient infrastructure'. The 'One Plan' for Auckland also received a direct reference in support for a system which also assists in a more coordinated and cohesive approach to Auckland's development and growth. However there was also an acknowledgment of how ARPHS have

already contributed to the development of local plans and policies which are trying to address some of Auckland's key challenges for the future.

There was also some negative feedback around the perceived historical inaction by ARPHS in developing a **relationship with manawhenua**, however the plan makes a commitment to manawhenua and how the organisation will strive to develop this relationship. The plan also signals ARPHS intent to work with manawhenua in a partnership, protection and participation model and support their aspirations for health, wellbeing and the reduction of inequalities for all of those living in the Auckland region. Other key issues were around greater cultural reflective practices in the workplace such as pōwhiri and whakatau, Māori workforce development, and a stronger focus on Māori leadership and collaboration. It was also noted that it was important for ARPHS to work within already existing Māori structures. Key references have been made to align ARPHS workforce strategy with that of the Ministry of Health public health workforce strategy as well as trying to strengthen the diversity of the workforce to reflect all the communities the organisation serves.

The leadership and advocacy role of ARPHS was commented upon to be very much **aligned with local government core business** and priorities which is a useful harmony upon which ARPHS can build relationships with territorial local authorities as key stakeholders in public health initiatives. However another commented that public health leadership and advocacy could also be extended to include relationships with clinical providers which were not a focus of the plan. The plan was not changed to specifically comment on clinical partnerships but it is hoped that the role and use of ARPHS public health expertise would extend to encompass clinical as well as other providers of public health. It was also commented upon that within ARPHS future focused work it could help re-orientate health services; presumably away from reactive treatment to proactive prevention and population health focus.

It was evident from submissions that the breadth of ARPHS's role, which encompasses **issues of sustainability, resource usage, the wider health and wellbeing of the public** and more, is still not fully communicated so as to be understood by all stakeholders as there were questions raised of ARPHS mandate and role, versus that of the government. It is important that public health messages are heard across the region on a variety of interrelated issues and ARPHS can be used as a source of public health knowledge and opinion. This can actually support local and regional government in their aims for the sustainable development of the region and to address the wider determinants of health such as public transport, housing, and access to green spaces. A greater exploration of relationships and innovative ways of working is needed to ensure that a public health perspective is contributed where it will result in health gain and it is a challenge for ARPHS to bridge this gap.

## Conclusion

ARPHS has been commended for the contribution it has made so far in the development of local interventions and strategies but more still needs to be done. This is in building relationships, ensuring that ARPHS contributes to health outcomes and continues to be recognised as a leading provider of public health knowledge. ARPHS was credited with already demonstrating it has the public health expertise and is ideally positioned to provide leadership for public health in the Auckland region. It was also stated that ARPHS should continue to make its strong contribution to the development of regional and local plans and policies, and that ARPHS input into the development of strategies and interventions to address wider inequalities is critical to alleviating health inequalities across the region. Greater detail is required around our commitment to manawhenua and what this means. We also need to be clear about how we are continuing to respond to all of the Service's stakeholders, as ARPHS delivers public health services alongside a large number of other organisations with an interest in public health, including DHBs, TLAs, Primary Health Organisations and many other local and regional non-government organisations with public health contracts. The plan will also need to be reconsidered against how it may address the goals of other key initiatives such as the Auckland Sustainability Framework, and the issue of regional governance and scope for 'One Plan' for Auckland.