

Pae Ora – Healthy Futures
All New Zealanders live well, stay well, get well

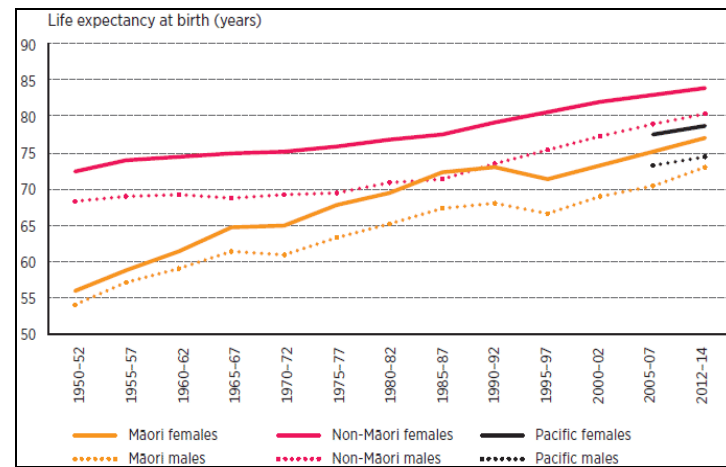
WAI ORA
Healthy environments

WHĀNAU ORA
Healthy families whānau

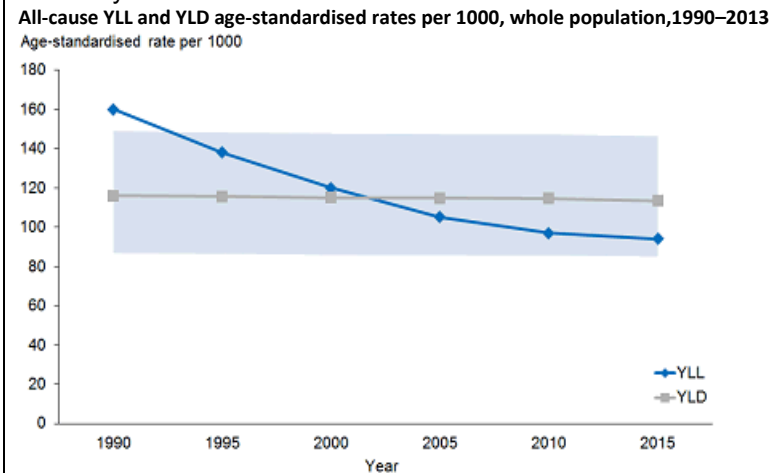
MAURI ORA WAI ORA
Healthy individuals

INDICATORS
What would it look like if these outcomes were achieved?

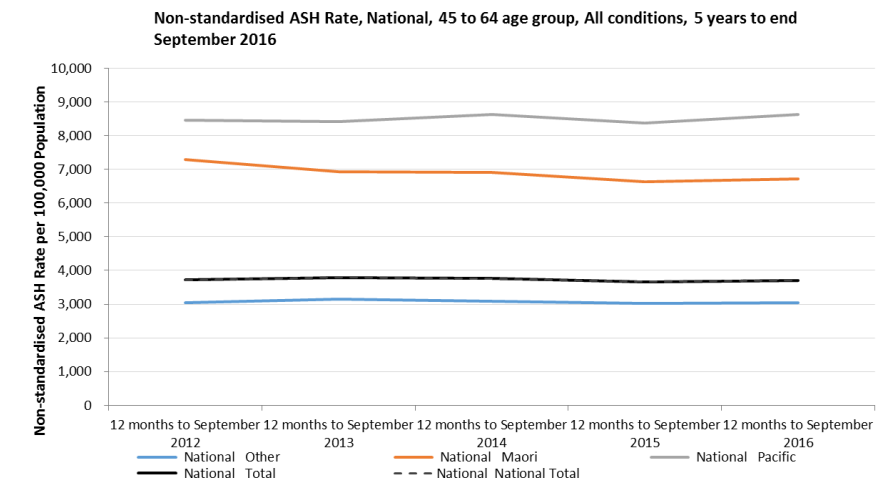
AN INCREASE IN LIFE EXPECTANCY
Improved experience for all people across the life course, from prevention, service access to recovery and palliative care.ⁱ



REDUCED MORBIDITY
There is reduced health loss (measured as DALYs) from long term conditions (LTC) across the population. We may be living longer but we may also be living in poor health, increasing pressure on the health systemⁱⁱ



ACHIEVING EQUITY OF HEALTH OUTCOMES
People have equity in access and service responsiveness.ⁱⁱⁱ



Population outcomes 3 to 5+ years	People live well	People stay well	People get well	
Short and medium-term outcomes 1 to 3 years	More people experience wellbeing and have healthy lifestyles	People are enabled to stay well in their own communities	People have good access to effective and responsive health services	People are supported to manage their long term conditions

There are multiple pathways and whole of system approaches to achieve population level outcomes

Life course approach	Early Life		Adult Life			Older Life
Continuum of health care	Health information	Prevention	Early identification and intervention	Self-management, management and treatment	Support and rehabilitation	Palliative care
Social determinants of health	Income and poverty	Employment and occupation	Education	Housing	Culture and ethnicity	Social cohesion and social support

Key strategies, policies and frameworks contributing to long term condition population outcomes

[New Zealand Health Strategy](#)

[He Korowai Oranga – Māori Health Strategy](#)

[NZ Disability Strategy](#), [Healthy Ageing Strategy](#), [Ala Mo'ui: Pathways to Pacific Health and Wellbeing](#), [Rising to the Challenge](#), others^{iv}

System Level Measures Framework	Equity of Health Care for Māori: A framework	Whānau Ora Outcomes Framework	Disease Specific frameworks^v	Other Frameworks	Quality Frameworks^{vi} eg Well child Tamariki ora Quality Indicators framework	Cross sector plans^{vii}, local and other Government/ agencies contributing programme^{viii}	WHO Global Action Plan for the prevention and control of NCDs Ottawa Charter for Health Promotion
---	--	---	---	----------------------------------	---	--	--



Line of sight

Long Term Conditions Outcomes Framework

The LTC Outcomes Framework (the LTC Framework) is a population level framework in two parts. The Line of Sight (Part A) recognises the contributory relationships of other strategies, whole of system approaches and frameworks to achieve the outcomes. The LTC Outcomes Indicators and Measures Framework (Part B) has more detailed indicators and measures to tell the story of improvement at a population level. It is designed to be used with the National Expectations for the Prevention and Management of Long Term Conditions that provides guidance to the sector and other agencies on design, development and commissioning of publicly funded services that contribute to reducing the health loss of all New Zealanders.

The LTC Framework identifies population outcomes, indicators and measures to enable the sector to work together to:

- use indicators to ‘tell the story’ of how well we are doing on addressing health loss from the impact of LTC across the population and measure the contribution of their service/intervention/ programme – towards the population level outcomes
- clarify the ‘line of sight’ relationship of strategies and other frameworks across the Ministry of Health/other government agencies and the sector
- improve the design, development and delivery of services/interventions/programmes to reach all New Zealanders to reduce the health loss from long term conditions.

Definitions

Continuum of Health Care	The continuum of health care reflects a person and their whanau oriented system of health care across their lifetime. It achieves better health outcomes through an integrated and comprehensive range of health, mental health, support and social services from prevention and care at all levels.
Equity	The Ministry of Health uses the World Health Organization definition of equity as ‘the absence of avoidable or remediable differences among groups of people’. The health system will work towards pae ora to support the achievement of health equity.
DALY/ Health loss	Health loss is measured in disability-adjusted life years (DALYs). One DALY represents the loss of one year lived in full health. Health expectancy is a generalisation of life expectancy that estimates how long a person can expect to live in good health.
Indicator	Success is measured by a range of indicators that are linked to achieving improvement (turning the curve). Population-level indicators measure changes in the condition or well-being of children, families, or communities (ie, reduction in teen pregnancy rate, or infant mortality rate). Changes in population level indicators are often long-term results of the efforts of a number of contributing programs, agencies, and initiatives.
Measures	Identify the data which can be accessed to support each indicator (PART B) of the outcomes framework provides a range of measure which could be utilised. These measures are from across Ministry of Health collections of data. Some may be from cross sectorial work which contribute to a collective impact of improving outcomes.
Life Course Approach	This is the life continuum from conception through to elderly. For convenience it has been simplified into the three categories. The Life Course Approach – In epidemiology it is used to study the physical and social hazards during gestation, childhood, adolescence, young adulthood and midlife that affect chronic disease risk and health outcomes in later life. It aims to identify the underlying biological, behavioural and psychosocial processes that operate across the life span. (A Life course approach to Chronic Disease Epidemiology eds Dianne Kuh and Ben-Shlomo, 1997).
Social determinants of health	Report from the National Advisory Committee on Health and Disability (National Health Committee) June 1998 https://www.health.govt.nz/system/files/documents/publications/det-health.pdfA In addition to summarising the evidence on social, cultural and economic determinants of health in New Zealand, this report examines strategies for intervening to reduce socioeconomic inequalities in health and makes specific recommendations for action to the Minister of Health.
Morbidity	Ill health
Multiple pathways	Continuum of Health Care - The continuum from primary prevention through to early intervention, management, support, rehabilitation and palliative care is reflective of the provision of services to the population at all stages of the life course.
Pretransitional conditions	Disorders characteristic of societies prior to the epidemiological transition (ie, infections, nutritional deficiencies and neonatal disorders).

The LTC Population Outcomes Framework Line of Sight (part A) and Measures (Part B) and the National Expectations for the Prevention and Management of Long Term Conditions are available on the NSFL website: www.nsfl.health.govt.nz/service-specifications/long-term-conditions-outcomes-framework

ⁱ ‘Baseline data for reporting against SI1/SLM ambulatory sensitive hospital admissions www.nsfl.health.govt.nz/accountability/performance-and-monitoring/data-quarterly-reports-and-reporting/ambulatory-sensitive (select 00-04 yrs or 45 to 64 years)

ⁱⁱ Our health system has been better at helping people to avoid early death than avoiding or ameliorating morbidity. High rates of health loss in older age groups reflect the steeply increasing prevalence of multiple long-term conditions with advancing age. Whether morbidity has also expanded in relative terms is not clear, but there is no evidence of the reverse trend where people spend a higher proportion of their longer lives in good health.

ⁱⁱⁱ ‘Increase in equity of health outcomes’, source: Ministry of Health data

^{iv} including: [Primary Health Care Strategy](#), [Child Health Strategy Taking Action on Fetal Alcohol Spectrum Disorder](#), [National Drug Policy](#), [Smokefree 2025](#), [NZ Suicide Prevention Strategy](#), [Palliative Care Strategy 2001](#) and others.

^v Disease/Condition specific frameworks eg: [Child Obesity outcomes framework](#), [Respiratory Framework](#), [Dementia Framework](#), [Equally Well Framework](#) and others.

^{vi} Also includes A Framework for Health Literacy

-
- vii Cross sector plans eg: [The Children's Action Plan](#) is a cross-agency initiative which began in 2012 to better support vulnerable children and their families/whānau, they have developed a [Vulnerable children outcomes framework](#).
- viii Health in all Policies is an approach to policies across sectors that takes into account the health implications of decisions, seeks synergies, and avoids harmful health impacts to improve population health and health equity.
- ix Evidence based research and health intelligence sources: eg [New Zealand Health Survey](#), [National Maternity Collection](#), [Mortality Collection](#), [NZ Cancer Registry](#)