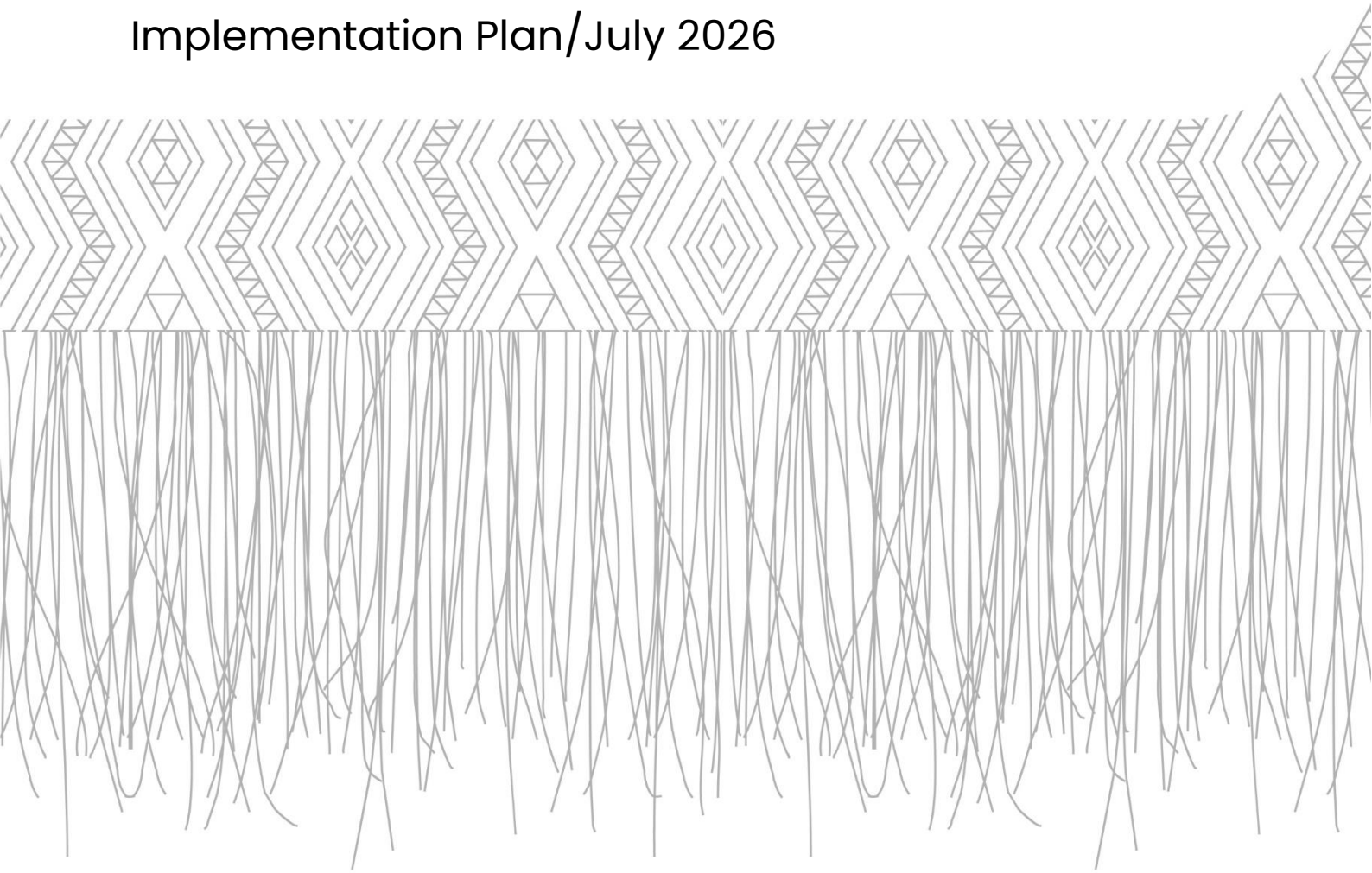
Health New Zealand
Te Whatu Ora

The Primary Care Health Target

Implementation Plan/July 2026



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Foreword – The Minister of Health

General practice is the cornerstone of health and wellbeing in New Zealand.

For most people, their general practice team is the first place they turn to for care. Strong, ongoing relationships with a GP and general practice team help people stay well, deliver better health outcomes, and reduce pressure across the wider health system.

But access is not always where it needs to be. Too many New Zealanders feel that they are waiting longer than they should to be seen.

The Primary Care Health Target sets a clear expectation that more than 80 percent of people will be able to access an appointment with a general practice provider within one week. This reflects what people should expect when they seek care.

This target will help build a clear, consistent picture of access across the system, so we can better understand where pressures exist and where attention and resources can make the greatest difference for patients.

We have worked closely with the primary care sector to design a measure that is meaningful, consistent, and grounded in real-world practice. This includes testing the data, refining definitions, and making sure the target reflects the different ways care is delivered across the country.

This implementation plan sets out the first steps to build that national picture and support improvement over time. By working together, we can ensure New Zealanders can access timely, high-quality care, when and where they need it.

Hon Simeon Brown
Minister of Health

From the Chief Executive

The Primary Care Health Target is another important step toward improving access to care for New Zealanders.

For the first time, we will have a consistent, national view of how long people are waiting for a primary care appointment.

This will give us a clearer understanding of where access is working well and where further attention and resource is needed to drive improvement.

This work has been developed in close partnership with the primary care sector.

It has been guided by those with a deep understanding of the pressures that can impact timely access to patient care.

Early adopter practices and advisory groups have played a critical role in testing the approach, refining the data and ensuring the measure is practical, relevant and grounded in day-to-day clinical practice.

Alongside the target, we are working to support primary care workforce capacity and build a better understanding other factors that influence access to care.

This implementation plan focuses on the first year of delivery. It sets out how we will establish a baseline, strengthen data systems and support practices and regions to improve access.

The insights we gain will guide the next phase of work and shape the longer-term plan to 2030.

We are committed to working alongside the primary care sector to make this successful.

By building a shared understanding of access and focusing our efforts where they will have the greatest impact, we can ensure New Zealanders get the care they need, when they need it.

Dr Dale Bramley

Chief Executive

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Contents

Introduction

The Primary Care Health Target sets a clear expectation that more than 80 percent of people will be able to access an appointment with a general practice provider within one week. It focuses on a simple but important measure of access, using the time between when an appointment is booked and when it happens.

To support this, we have worked closely with the sector to agree what data will be collected, and how it will be used and accessed. This has included a data governance group made up of sector and public representatives, helping ensure the approach is transparent, appropriate, and maintains public trust.

We have also worked with a primary care advisory group to shape how the target will be measured. Their input has helped ensure the measure is meaningful, reflects how care is delivered in practice, and works across different models of care.

Data collected from participating practices from 1 July will count towards the first measurement of the target. Results will be aggregated and published later in 2026, providing the first national view of access to primary care appointments.

How the data is used to measure the target

The measure looks at the time between when an appointment is booked and when it takes place. This gives a simple, consistent way to understand how long people are waiting for care.

To make sure this reflects real access, we have worked with the advisory group to identify the specific data to be included in the measure and what elements of the data should be excluded to ensure a meaningful measure. You can find out more on the target's data definition here.

We include booked appointments with members of the wider general practice team, not just GPs, whether they are in person or virtual, so the measure reflects how care is actually delivered in general practice.

We leave out things that would give a misleading view of whether people are able to have a timely appointment. For example, very short appointments (under five minutes) are not included, as these are usually quick administrative tasks rather than clinical care. We also exclude appointments that are booked

well in advance for planned or routine care, as it is appropriate they be provided later on.

Taken together, this approach helps us focus on real waiting times for care that is needed quickly by people. It will help us understand where access is working well and where improvements are needed.

Balancing measures and wider context

We know this target does not capture the full picture of access, the breadth of care general practice teams provide, or all the ways high quality care is delivered. General practice teams provide a wide range of care beyond appointments, including coordination, follow-up, prevention, and ongoing management of long-term conditions.

The target is a starting point, focused on timely access. Over time, this will be supported by a broader set of measures to build a more complete picture of the care that people receive from their primary care teams for their different needs.

To support this, balancing measures are being introduced. These will help us understand access alongside other important factors, such as workforce capacity, continuity of care, and the need to maintain planned and ongoing care. This helps ensure improvements in one area do not create unintended pressures in another, which is just as important.

Making it meaningful for the patients and the public

We will continue to work with the sector and the public to ensure the results are easy to understand and provide the right context.

This includes testing how information is presented, making sure it reflects how care is delivered, and clearly explaining what the results do and do not show. The aim is to support informed understanding, not just reporting of numbers.

The implementation plan

This implementation plan sets out the first year of activity. It focuses on:

- establishing a reliable baseline
- strengthening data collection and reporting
- supporting practices and regions to improve access.

The insights from this first year will guide the next phase of work and inform a longer-term plan to 2030, with progressively improving expectations over time.

The implementation plan

2030 Health Target	Baseline as at June 2026
>80% of people can access an appointment with a general practice provider within one week	Not established as national data is not currently collected.
	2027-2030 performance expectations Baseline and annual milestones to be set in 2027 once quarterly reporting cycles are established.

The aim of this target is to enable more people to access an appointment with their general practice provider within one week.

The scope of this plan is the activities Health NZ will implement to support target delivery in the first year only (2026/27). By the end of the first year to 30 June 2027:

- a baseline and governance oversight for target delivery will be established
- learnings from baseline data and improvement initiatives will inform a follow-up 2027-2030 implementation plan with progressively improving milestones to 2030.

Initiatives	2026/7			
	Q1	Q2	Q3	Q4
Action 1. Establish baseline and improve data systems				
• Onboard all participating practices to share data for target reporting; develop and implement strategies to encourage remaining practices to participate.	✓	✓	✓	
• Support data sharing processes by providing contingent capitation to general practices participating in data sharing.	✓	✓	✓	✓
• Standardise data collection by: ○ using Health Information Standards Organisation (HISO) standards and appropriate data definition and elements	✓	✓		
○ working with vendors to standardise data collection requirements.		✓	✓	✓
• Implement an information sharing readiness campaign to support increased understanding of cyber security matters, enable practice assessment processes and uplift IT vendor preparedness	✓	✓	✓	✓
• Develop a plan for data collection and management options that Health NZ may transition to in time.			✓	✓
Action 2. Establish governance and strengthen reporting				
• Establish shared Health NZ and sector governance arrangements to oversee target performance and support implementation.	✓	✓		
• Develop and implement workforce capacity and continuity of care balancing measures to understand timely access performance in context.	✓	✓		
• Monitor for unintended consequences and changes in practice to skew results, including potential impact on unmet need.	✓	✓	✓	✓
• Publish quarterly results at district and Primary Healthcare Organisation level as part of Health Target and Primary Care Outcomes and Performance Framework reporting (Quarter 1 data collected 1 July – 30 September, published December 2026).		✓	✓	✓

Initiatives	2026/7			
	Q1	Q2	Q3	Q4
• Develop a process to securely share anonymised practice-level results with comparable practices.			✓	✓
• Develop a 2027-2030 implementation plan, including to use baseline data to set progressively improving milestones to 2030.			✓	✓
Action 3. Support general practices to implement improvement initiatives				
• Build sector buy-in through early engagement, dedicated PHO leads, clear communication of benefits and comprehensive online information.	✓	✓	✓	✓
• Build public understanding of the purpose of the health target and the approach of access related to general practice teams to align patient expectations of access with good practice models of care.	✓	✓		
• Develop and implement regional performance improvement plans for timely access to general practice teams, with localised initiatives to address variation.		✓	✓	✓
• Incorporate primary care access target and balancing measures in the Primary Care Outcomes and Performance Framework	✓	✓		
• Analyse data to understand barriers and levers to timely, equitable access and work with the sector to inform targeted improvement initiatives and future planning.		✓	✓	✓
Action 4. Improve primary care capacity				
• Create national and regional primary care workforce plans aligned with primary care services demand and projections.	✓	✓	✓	
• Increase the primary care workforce by training general practitioners, nurse practitioners, primary care nurses and other workforces.	✓	✓	✓	✓
• Improve recruitment and training by implementing strategies including incentives for rural and high-need populations.	✓	✓	✓	✓

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