

Private Surgical Hospital Association Conference

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To:	Hon Simeon Brown, Minister of Health		
From:	Cath Cronin, Executive Regional Director, Midland Te Manawa Taki		
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Contact for further discussion (if required)

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Attachments

- Appendix 1: Runsheet for Event
- Appendix 2: Speech Notes
- Appendix 3: Question & Answers
- Appendix 4: Biographies

Appendix 2 and Appendix 3 have been withheld in full

About the event

Purpose	You will deliver the closing speech at the New Zealand Private Surgical Hospitals Association (NZPSHA) 2025 Annual Conference, <i>Leading Change, Enhancing Productivity in HealthCare</i> .
Date	Friday 19 September 2025
Time	3.00pm to 4.30pm
Venue	The Cordis Hotel, 83 Symonds Street, Auckland. Great Rooms 1 and 2.
Expected attendees	Chris Roberts, Chief Executive, NZPSHA Blair Roxborough, President, NZPSHA Fiona Michel, Vice-President, NZPSHA Audrey Sonerson, Director-General of Health and Chief Executive, Ministry of Health Most attendees will be senior managers from private hospitals, along with the suppliers of medical products and services. Biographies are attached as Appendix 1.
Health New Zealand Te Whatu Ora representatives	Dr Andrew Connolly, Deputy Chair, Health NZ Board Cath Cronin, Executive Regional Director, Midland Te Manawa Taki
Media	Some health media may be present, NZPSHA to advise
Talking points	Speech Notes have been provided in Appendix 2.

Background

1. The NZPSHA was established in 2005 and its members are private facilities providing surgical services across New Zealand. Its purpose is to promote, connect, and represent the private surgical hospital sector. On behalf of its members, NZPSHA seeks to engage with long term planning and partnerships in the delivery of planned care.
2. All major private surgical facilities are members of the NZPSHA. Its membership comprises 34 organisations with 47 surgical facilities operating nationwide. NZPSHA member hospitals undertake around two-thirds of all elective surgery performed in New Zealand.
3. Private hospitals continue to invest in staff and facilities. According to NZPSHA figures, in 2024/25 its members have 215 operating theatres, 11 more than the previous year, and 1,258 inpatient beds, 23 more than the previous year. They also report that private hospitals employ 2,863 FTE nurses in 2024/25, which is 448 more than 2023/24.
4. NZPSHA 2025 Conference brings together hospital leaders, experts and representatives from across New Zealand's health system to discuss and debate relevant issues in the private hospitals sector with panel discussions, keynote addresses and conversations during the social functions. The theme of the 2025 conference is 'Leading Change – Enhancing Productivity in Healthcare'.

Discussion

Health NZ's relationship with NZPSHA

5. Health NZ holds a good relationship with NZPSHA and both organisations are aligned on strategic goals. In September 2024, the NZPSHA published a position paper advocating for joint public-private solutions and whole-of-sector collaboration to reduce waitlists for elective surgery and improve outcomes for patients.
6. Health NZ is collaborating with the private sector as a key strategic partner to increase timely access to elective treatments and provide more clinical training through public surgical lists delivered in private settings. Your speech will announce new clinical training arrangements with the private sector.

Public Private Collaboration (including the Statement of Expectations)

7. Health NZ inherited a variable, reactive, transactional, and costly approach to outsourcing, which was used to fill short-term capacity gaps or top up volumes to meet elective targets.
8. Health NZ and private hospital providers are now working together as strategic partners to build New Zealand's publicly funded surgical capacity. Partnership principles underpin this public-private collaboration. They were endorsed by Health NZ's former-Commissioner and Chief Executive and private sector equivalents.
9. This is requiring Health NZ to improve its processes for selecting and referring patients to the private sector. It has challenged the parameters of our panel agreements, and we are working to further develop the panel agreements to meet the increasing delivery of treatments in private hospitals.
10. It is also requiring the public and private hospitals to work with medical consultants.
11. The partnership principles have been embedded into a '*Statement of Expectations for Public-Private Surgical Collaboration*', which we will publish on Health NZ's website at 3.30pm, 19 September 2025, to coincide with your speech at this conference.
12. The Statement of Expectations sets out Health NZ's commitment to work collaboratively with individual private surgical providers on the development of long-term partnerships that build New Zealand's capacity to deliver timely high-quality surgical care.

Elective Boost

13. Health NZ committed to 10,579 additional elective treatments by 30 June 2025 to meet the 63% Health Target milestone. This goal was exceeded, with 16,005 procedures delivered, a major step toward the 70% target by June 2026.
14. Over 2025/26 Health NZ will deliver 215,000 planned care surgical treatments, of which about 37,000 will be outsourced to the private sector. This is 11% more planned care treatments (an additional 21,000 procedures) compared to 2024/25.

Surgical Panel Agreements

15. Health NZ has established four regional surgical panel agreements covering 32 providers across 52 sites and 12 different specialties. The panel agreements streamline the procurement process and include nationally aligned and consistent contractual terms and conditions, clinical pathways, service specifications and national pricing.
16. Work has started on a plan to move to one longer-term nationwide surgical panel agreement. This will support nationally consistent care so all New Zealanders have timely access to elective care, no matter where they live or who they are.

17. Having a national surgical services panel agreement will facilitate longer-term agreements. Health NZ expects to transition from the current panel agreement terms, which range from one-to-three-year terms, to three-to-five-year terms, and then five-to-ten-year terms.

Health NZ will confirm with the sector its three, five and ten year need for private sector support to deliver planned care.

Clinical Training

18. Health NZ is working with the private sector to ensure that RMOs' training programmes are not impeded by outsourcing, and that they can access training through public surgical lists delivered in private settings where needed to progress training.
19. Health NZ is working to run six pilots (including one to-be-confirmed) that have been identified as well-suited to formalise shared training arrangements across the public and private sectors. These pilots build on existing ad-hoc arrangements and comprise three training models:
 - a) RMOs train on private-operated public lists, delivered in private settings – with Health NZ bearing the costs of employment.
 - b) RMOs train on private-operated public lists, delivered in private settings – with a cost-share agreement between Health NZ and the private provider.
 - c) RMOs train on publicly-run lists, delivered in private facilities (a "wet lease" arrangement) – with Health NZ bearing the costs of employment.
20. At least five of the pilots will be operating by 19 September 2025. In mid-2026 we will review the performance of the pilots to inform our preferred settings for long-term training arrangements, and for wider expansion (including to private radiology and pathology settings). By integrating training opportunities into private sector partnerships, we are supporting the timely development of future SMOs and reinforcing the pipeline for clinical workforce retention.

Enhancing Surgical Productivity

21. In addition to outsourcing higher volumes of elective surgery, Health NZ is working to optimise internal capacity and surgical productivity. Theatre productivity improvements have been made through initiatives like the +1 model, where each theatre list aims to complete one additional case per day (or per list) through efficiency gains, such as reducing late starts and early finishes, better scheduling and reducing cancellations, and improved preparation and recovery processes.
22. To drive continued productivity gains, Health NZ is working to create a single, national benchmark for each theatre KPI across all districts, reported at a regional level. This allows regions to offset more challenged smaller hospital sites with improvements in medium and larger sites where there is more opportunity for improvement.

Appendix 1: Runsheet for Event

Time	Details	Minister's Office notes
2.45pm - 3.15pm	Conference afternoon tea break	
3.00pm	Minister arrives at The Cordis, greeted by Chris Roberts, NZPSH Chief Executive	
3:10pm - 3:40pm	Minister's Speech	
3.40pm - 3.55pm	Questions & Answers, facilitated by MC Jehan Casinder	
4.00pm	Minister departs	

Appendix 4: Biographies

Chris Roberts, Chief Executive, NZPSHA

Before joining NZPSHA in May 2025, Chris enjoyed a varied career which included almost eight years as Chief Executive of Tourism Industry Aotearoa. He began his career as a radio journalist and has also worked at Parliament, in the energy and research sectors, and as an independent consultant. He holds several governance positions and has been a keynote speaker at conferences in New Zealand, Australia, Canada and Fiji.



Blair Roxborough, President, NZPSHA

Blair Roxborough is the Chief Executive Officer at St George's Hospital, Director St George's Cancer Care Centre, Director Heart Centre 2003 and Director RESS JV Ltd.

Prior to joining St George's Hospital, Blair held executive leadership positions in the Tourism sector in New Zealand and overseas, most recently in Melbourne where he was responsible for both luxury and main stream hotel accommodation brands in Victoria, Queensland, South Australia and Tasmania.



Blair is a Member of Certified Practicing Accountants (CPA) and a Graduate Member of the Australian Institute of Directors (GAICD).

Fiona Michel, Vice-President, NZPSHA and Chief Executive, Braemar Hospital, Hamilton

Since 2021 Fiona has been CEO at one of New Zealand's largest private hospitals. She has executive and governance experience in health, technology, banking, insurance, public service, property, primary industry and utilities. She holds an MBA from the University of Auckland, is an alumnus of Harvard Business School, a Chartered Member of the NZ Institute of Directors and the Australian Institute of Company Directors, and a Chartered Fellow of the Australian Human Resources Institute. Fiona is an Independent Director for New Zealand Medical Indemnity Insurance and is Chair of the Board of Trustees for Dress for Success Hamilton.



Prior to joining Braemar Hospital, Fiona was seconded into the Ministry of Health's COVID-19 Vaccination and Immunisation Programme to lead the identification and development of new vaccinators and manage health stakeholder relationships across the Northern Region.