

133 Molesworth Street
PO Box 5013
Wellington 6140
New Zealand
T+64 4 496 2000

13 February 2024

J Bruning

By email: fyi-request-25086-5402bbd0@requests.fyi.org.nz
Ref: H2023033847

Tēnā koe

Response to your request for official information

Thank you for your request under the Official Information Act 1982 (the Act) to the Ministry of Health - Manatū Hauora (the Ministry) on 8 December 2023. We note that you made four similar requests on 8 December 2023, for information specifically held by individual directorates within the Ministry. The current request specified:

This Official Information Act request is specifically directed to Public Health Agency Deputy Director-General – Dr Andrew Old and his senior leadership team within this agency. Please do not forward this to another department within the Ministry of Health.

You requested:

1. *Budget for this team for the current and estimated next (2024/2025) financial year.*

The budget for the Public Health Agency for the 2023/24 financial year is \$91.763 million. The 2024/25 budget has not been allocated or estimated.

2. *Income of the Deputy Director-General of the Public Health Agency; and number and members of the senior leadership team and their incomes.*

There are eleven members of the PHA senior leadership. Their roles and pay-bands are outlined in the table below.

Table 1. Deputy Director-General and Senior Leadership incomes

Position	Pay-band	Pay-band Midpoint
Deputy Director-General	24E	\$286,992
Director of Public Health	23D	\$267,525
Director- Emergency Management	22G	\$216,144
Director – Hauora Māori Tūmatanui	22G	\$216,144
Director – Pacific Health	22G	\$216,144
Group Manager – Global Health	22G	\$216,144
Group Manager – Intelligence, Surveillance and Knowledge	22G	\$216,144
Group Manager – Public Health Strategy & Engagement	22G	\$216,144
Group Manager – Public Health Policy and Regulation	22G	\$216,144
Manager – Office of the Deputy Director-General	20G	\$157,407
Chief Advisor	21G	\$175,627

3. *Terms of reference/expectations for this team and the name of the head of department that established the terms of reference/expectations.*

The Public Health Agency does not have a term of reference or an expectations document. However, you may wish to refer to the publicly available information relating to the establishment of the Public health Agency, including an establishment document here: <https://www.health.govt.nz/our-work/te-pou-hauora-tumatanui-public-health-agency>.

4. *Information held by or requested by this directorate including research/memos/advice/emails relating to:*

- a. *The prevalence of metabolic syndrome in New Zealand, a cluster of symptoms characterised by central obesity, dyslipidaemia, hypertension and insulin resistance.*
- b. *Current and predicted cost to the health system from metabolic syndrome which presents as multimorbidity (i.e. cost of multimorbidity for those diagnosed with metabolic syndrome).*
- c. *Metabolic syndrome and multimorbidity as a risk factor for viral and bacteriological infections.*
- d. *Metabolic syndrome as a risk factor for poor mental health.*
- e. *Socioeconomic status as a predictor for metabolic syndrome.*
- f. *Diet high in ultraprocessed food as a predictor for metabolic syndrome.*
- g. *Population level data relating to nutrient deficiency (which may include but is not limited to vitamins B,D,C and iron) by age and socio-economic status.*

5. *Public health knowledge and surveillance system - extent to which this data is being monitored and aggregated:*

- a. *Average cost of metabolic syndrome by age, gender and socioeconomic status.*
- b. *Identifying prevalence of diet-related gastrointestinal disorders by age and gender.*
- c. *Identifying key nutrients people with diabetes, cancer and mental illness are commonly deficient in.*
- d. *Identifying the proportion of the diet based on ultraprocessed food by age and socioeconomic status.*

- e. *Reviewing success and cost of school lunch programme initiatives throughout New Zealand.*

On 14 December 2023 we contacted you to clarify parts 4-5 your request and advised that the Ministry does not widely use the metabolic syndrome classification. We asked you to clarify if you are seeking information specifically about metabolic syndrome only or have a broader interest in obesity, diabetes, hypertension etc. Your clarified request is copied below and responded to below.

4. Information held by or requested by this directorate including research/memos/advice/emails relating to:

- a. *Metabolic syndrome is recognised by the World Health Organization. Any reports and white papers held which reference metabolic syndrome (a cluster of symptoms characterised by central obesity, dyslipidaemia, hypertension and insulin resistance).*
- b. *Current and predicted cost to the health system from multimorbidity (i.e. cost of multimorbidity) for those diagnosed with Cardiovascular Disease or at risk for Cardiovascular Disease.*
- c. *Diabetes status as a risk factor for viral and bacteriological infections.*
- d. *Diet/nutrition status as a risk factor for poor mental health.*
- e. *Socioeconomic status as a predictor for cardiovascular disease.*
- f. *Diet high in ultraprocessed food as a predictor for cardiovascular disease.*
- g. *Population level data relating to nutrient deficiency (which may include but is not limited to vitamins B,D,C and iron) by age and socio-economic status.*

The Public Health Agency does not hold any information in scope of part 4 of your request as these topics have not been part of the directorates work programme since its establishment in July 2022.

5. Public health knowledge and surveillance system - extent to which this data is being monitored and aggregated:

- a. *Surveillance and reporting of data to identify healthcare cost when people have multimorbid conditions, such as diabetes and cardiovascular disease by age, gender and socioeconomic status.*
- b. *Identifying prevalence of diet-related gastrointestinal disorders by age and gender.*
- c. *Identifying key nutrients people with diabetes, cancer and mental illness are commonly deficient in.*
- d. *Identifying the proportion of the diet based on ultraprocessed food by age and socioeconomic status.*
- e. *Reviewing success and cost of school lunch programme initiatives throughout New Zealand.*

The Public Health Agency does not hold any information in scope of part 5 of your request. The Public Health Knowledge and Surveillance System supports knowledge mobilisation and surveillance activities. It does not of itself, generate or analyse data - it is an enabling system function.

I trust this information fulfils your request. If you wish to discuss any aspect of your request with us, including this decision, please feel free to contact the OIA Services Team on: oiagr@health.govt.nz.

Under section 28(3) of the Act, you have the right to ask the Ombudsman to review any decisions made under this request. The Ombudsman may be contacted by email at: info@ombudsman.parliament.nz or by calling 0800 802 602.

Please note that this response, with your personal details removed, may be published on the Manatū Hauora website at: www.health.govt.nz/about-ministry/information-releases/responses-official-information-act-requests.

Nāku noa, nā

A handwritten signature in black ink, appearing to be 'A. Old', written in a cursive style.

Dr Andrew Old
Deputy Director-General
Public Health Agency | Te Pou Hauora Tūmatanui