# Rural Hospital Summit 2026

## Summary report

8 October 2026

Hauora Taiwhenua Rural Health Network

**11** Rural Hospitals | **3** Presentations | **1** Health NZ workshop | **4.5 / 5** Summit rating




## Five Key messages

1. **Local solutions are strengthening rural healthcare**
   Across New Zealand, rural hospitals are demonstrating that innovation is born from necessity, with locally designed solutions improving care and service sustainability.

2. **Sustainable urgent and after-hours care remains a critical priority**
   Nearly every rural community is grappling with how to provide safe, affordable and sustainable urgent care services 24 hours a day, seven days a week.

3. **Workforce sustainability requires new thinking**
   Rural hospitals are increasingly creating and investing in workforce solutions through training pathways that enable new models of care and expanded scopes of practice.

4. **Collaboration supports better and more sustainable care**
   The strongest examples of success emerged when hospitals, primary care, ambulance services, telehealth providers, communities and iwi worked together to solve shared problems.

5. **Rural services are most effective when designed around local needs**
   Growing demand, rising complexity and resource constraints have not prevented rural hospitals from improving access, quality, safety and patient outcomes.

## What hospitals shared at the 'Soap Box'

### After-hours and urgent care

- Three Te Tai Tokerau hospitals are developing injury and illness facilities.
- Rawene is running a pilot with Ka Ora to cover non-acute GP walk-ins 7 nights a week, with GPs cover status 1 & 2 presentations.

### Safe patient transfers

- Oamaru reviewed transfer criteria and ran simulation with Hato Hone St John.
- Keeping care local in Wānaka and Golden Bay reduces the time that ambulances are out of town,

### Nurses and paramedics leading

- Dargaville's facility is nurse-led, with nurses at the top of their scope.
- In Wānaka, 8 clinical nurse specialists run the afterhours service, with telehealth support from Dunstan; 80% of patients stay in town.
- Golden Bay's Rural Urgent Care service has reduced transfers to Nelson.

### Equal access for NGO hospitals

- The 9 NGO-operated hospitals have variable access to Health NZ clinical pathways.
- Many are also not included in the rollout of RITA telehealth services.

### Growing our own workforce

- Taupō's registrar, student and house officer roster has resulted in a fully staffed ED that better copes with huge increase in demand.
- The West Coast's Transalpine Pathway trains rural doctors; it's resulted in about 19 doctors being employed in the region.
- The Rural Health Academic Centre has trained about 1,000 practitioners in 10 years.

### Governance, data and digital

- Lakes District improved on 10 of 18 clinical governance measures in a year.
- Gore is making great use of AI for meetings and interviews and works with hospice on palliative care.

## Six themes emerged

### 1. Delivering care closer to home

Rural hospitals work to provide the care their patients need as close to home as possible, reducing the need to travel long distances for assessment, treatment, and follow-up care. This supports people to remain connected to their whānau and communities, while also reducing demand on larger hospitals and improving equitable access to healthcare for rural communities.

### 2. Evolving models of care

In their responses to workforce limitations, population needs and changing patient expectations, rural hospitals have adapted and redesigned service models better suited to urban settings. Based on the realities of their rural environment and collaboration, they embed multidisciplinary approaches, extended scopes of practice and telehealth opportunities.

### 3. Workforce development and sustainability

Workforce shortages were a key concern across all discussions, but the focus extended beyond recruitment to the retention, development, and succession planning of the existing workforce. Presenters highlighted the importance of creating sustainable pathways into rural practice, supporting learners and early-career clinicians, and fostering workplace environments that encourage staff to build long-term careers in rural communities.

### 4. Partnership and integration

Collaboration emerged as a key enabler of success. Hospitals highlighted the value of working closely with primary care, ambulance services, iwi, community organisations, specialist services including hospice, and neighbouring providers. This approach is assisting them to manage workforce and resource constraints while improving continuity of care for patients.

### 5. Innovation driven by necessity

Many examples illustrated how rural services continue to innovate in response to practical challenges. Innovation was often less about new technology and more about finding pragmatic solutions, adapting existing resources and creating models that are fit for purpose in rural settings. This ingenuity is one of the rural hospital sector's defining strengths.

### 6. Building resilient rural health services

Whether discussing workforce, governance, quality improvement, service design, or infrastructure, rural hospitals are ultimately addressing the same challenge: how to build resilient services that can meet the needs of their communities well into the future. The ongoing challenges faced by NGO rural hospitals, including inequitable funding arrangements and limited access to infrastructure, digital systems, and national health service supports were also highlighted.

## Health NZ's Working Session

Health NZ's rural team presented its draft Rural Health Services Framework and proposed guidelines for overnight clinical cover in rural hospitals.

This will underpin Rural Hospital Service Specifications and so facilitated a workshop to test early thinking on a graduated framework for understanding rural hospital and rural health services.

## Summit Actions

### 1. Produce the first rural hospital report

Establish a working group to develop the first Rural Hospital Report. The biennial report will draw on data such as service activity, admissions, transfers and workforce information to provide a national picture of rural hospital care.

**When:** Starting January 2027

### 2. Share what works

The Rural Hospitals Chapter will run a webinar series based on Soap Box content: Te Tai Tokerau injury and illness facilities; Taupō's medical workforce pipeline; the Te Nikau trainee programme; and Oamaru's patient transport evaluation.

**When:** Starting February 2027

### 3. Seek equal access for NGO hospitals

Write to Health NZ on behalf of NGO rural hospitals, requesting RITA at the same cost and ongoing support as Health NZ hospitals (possibly through HealthX) and access to Health NZ clinical pathways

**When:** December 2026

### 4. Develop rural hospital service specifications

The Health NZ rural team will work with the Chapter to develop the rural hospital service specifications.

**When:** Early 2027