

Invitation to Consult

BREATHE Strategy | Information Sheet

Thank you for your interest in helping develop the BREATHE (Building Respiratory Excellence Across the Health Ecosystem) Strategy by providing your perspective and experiences around respiratory health. This context document briefly outlines what this project is about, what we would be asking of you, and how your information will be used.

About this work

Project BREATHE is a sector-led initiative to unite respiratory care in Aotearoa New Zealand under a clear, national direction. Respiratory disease remains a leading cause of illness and death in New Zealand. However, it has not been a national priority since the 1980s, and there has been no Government agreed comprehensive national respiratory strategy for decades. Despite significant mahi across the sector, action remain fragmented, with inequitable access, variable funding, and inconsistent service delivery across regions and populations.

BREATHE aims to provide a strong, collective voice for the respiratory sector, placing patients and equity at the centre of decision making and supporting coordinated, system wide change. Strategy development is governed by the BREATHE Steering Committee, comprising representatives from across the respiratory sector including: Thoracic Society of Australia and New Zealand, Asthma New Zealand, Respiratory Clinical Leads Network (rural and urban), NZNO College of Respiratory Nurses, Asthma and Respiratory Foundation, Royal New Zealand College of General Practitioners, Paediatric Society of NZ, Pharmacy, Allied Health, Research supported by Deloitte New Zealand as a pro bono service.

This programme of work will deliver:

- A standalone national respiratory strategy describing the current landscape, key challenges, gaps, and opportunities across all respiratory condition groups (Fig 1.0);
- Supporting documents to enable advocacy, investment, and implementation.

Why now?

There is increasing recognition of respiratory health within central Government, presenting a rare opportunity to align the sector, articulate shared priorities, and strengthen advocacy ahead of the next election cycle. To succeed, the Strategy must reflect real-world experience across the system. Your perspective is therefore critical to ensure the Strategy accurately represents sector challenges, opportunities, and aspirations. Consultation will intentionally be broad, to engage the range of organisations and groups involved in respiratory services.

Consultation groups

Purpose and process

Consultation identifies stakeholders with condition specific expertise to help shape the Strategy (Fig 1.0). You have been identified as either a key individual or a contact within a key organisation for respiratory health. You can nominate other individuals within your organisation or your networks who are well-positioned for/or interested in contributing to this consultation. The collated insights will support the development of a robust, credible, and actionable Strategy. Consultation will occur through virtual group workshops or short surveys. Participation is voluntary.

You (and/or your nominations) are invited to share perspectives on:

- Current challenges experienced within their condition group(s);
- Existing initiatives addressing these challenges;
- Priority issues requiring action; (opportunity to rank problems)
- Practical opportunities for improvement (the best way to solve these challenges)

What will happen to your information?

We listen to your perspective and will synthesise insights to build a sector wide view of key challenges, opportunities, and inequities. This will help us identify areas of existing momentum and sector gaps, to inform priority setting and strategy recommendations, and outcomes that can be achieved. Your privacy is important to us. Information collected will be used solely for the purposes of this consultation and strategy development. Your contact details and any recordings will not be shared with anyone outside the Deloitte team. All information and perspective provided by you will be de-identified (no names) by the Deloitte team. You will be able to review your input prior to finalisation of the BREATHE Strategy. We will share the results of your consultation sessions with you (if you wish) to thank you for your participation. It is expected the full strategy document will be available July 2026, where it will be published publicly and shared with Health New Zealand.

Use of Generative AI tools

Deloitte's approach assumes the use of generative AI tools to support aspects of delivery, including summarising source material, structuring content, generating initial drafts, and refining and proofing outputs. This may include tools provided by Microsoft. All AI generated content will be fully reviewed and quality assured by Deloitte before submission. In participating in Consultation, you agree to the use of generative AI tools to support the delivery of the BREATHE Strategy.

BREATHE Strategy Condition Groups

Overview of how key respiratory conditions have been grouped for Strategy development, and what the BREATHE Strategy should consider within the entire scope of respiratory health.

Condition groups	Airways	Sleep & Ventilation	Lung Cancer	Interstitial Lung Disease	Infections	Pulmonary Vascular	
Key conditions	<ul style="list-style-type: none"> Asthma Chronic Obstructive Pulmonary Disease Bronchiectasis Bronchiolitis Cystic Fibrosis Chronic lung disease of prematurity Chronic Cough Pre-School Wheeze 	<ul style="list-style-type: none"> Obstructive Sleep Apnoea Central Sleep Apnoea Neuromuscular Sudden Infant Death Syndrome Obesity Hypoventilation Syndrome Parasomnias Narcolepsy Restless Leg Syndrome Idiopathic Hypersomnolence 	<ul style="list-style-type: none"> Non-small cell (squamous cell, adenocarcinoma, large cell undifferentiated) Small cell Other neuroendocrine (large cell, carcinoid) Mesothelioma Thymoma Smoking related Non-smoking related Occupational related (asbestos, silica, heavy metals, radon, diesel) Early stage Advanced stage with targetable mutations Advanced stage without targetable mutations 	<ul style="list-style-type: none"> Idiopathic Pulmonary Fibrosis Occupational Airways Disease Tuberculosis Sarcoidosis Asbestosis Hypersensitivity pneumonitis Connective tissue-related ILD 	<ul style="list-style-type: none"> Pneumonia Tuberculosis Pertussis Upper & lower tract infections Chronic Superlative Lung Disease Non-TB Mycobacteria Influenza, RSV Pneumococcal pneumonia COVID-19/SARS Immunocompromised hosts 	<ul style="list-style-type: none"> Pulmonary embolism Pulmonary hypertension Recreational drug use of methamphetamines (if causes pulmonary hypertension) Auto Immune Diseases 	
Strategic Pillars	Social Determinants		Access	Equity	Prevention & Early Intervention	Diagnostics, Treatment	Research & Innovation

Fig 1.0: High-level condition groups and their key respiratory conditions