

Additional information about the Regional Services Plan

Who are the Central Region DHBs?

The Central Region's six District Health Boards are Capital and Coast, Hawke's Bay, Hutt Valley, MidCentral, Wairarapa and Whanganui.

How do the Central Region DHBs work together?

The Central Region DHBs have been and will continue working together on planning, organising, funding, delivering and continuously improving the region's health and disability services.

Central Region DHBs have collaborated on a number of initiatives and specific projects in specialist areas such as cardiology, cancer and mental health - they are committed to continuing to work together to make better use of their collective resources to ensure future sustainability, affordability and fair access to health services for everyone in the region.

What's a Regional Services Plan (RSP)?

The RSP builds on the existing regional collaboration to make better use of available resources to ensure the region's services are sustainable, fair and meet the changing needs of the population.

The Central Region DHBs have developed a Regional Services Plan 2011-2012 at the direction of the Minister of Health and each year the plan will be updated.

The RSP plan builds on existing regional work programmes (such as the Regional Clinical Services Plan or "RCSP") and includes some new initiatives as well.

The RSP was prepared collaboratively by the six Central Region DHBs with input from their clinicians, managers and consumer representatives.

The RSP received feedback from the National Health Board and received final approval from the Minister of Health on 11 July 2011.

The RSP is about working smarter and more sensibly as a region using collective resources to plan for the future to meet the changing and diverse needs of the Central Region's population and health sector workforce.

The RSP outlines how the Central Region DHBs will work together to bring a regional perspective to planning and service delivery that will improve health outcomes for the collective population irrespective of an individual's postcode and proximity to a major hospital.

What's in the RSP?

The Central DHBs have agreed on a series of regional priorities for action to maximise clinical and financial resources, reduce service vulnerability and meet the Minister of Health's expectations.

The RSP outlines 11 regional priorities for action in 2011/12 grouped under the headings, health targets, strengthening vulnerable services, key regional enablers and sub-regional actions:

Health targets

1. Cancer - Reduce morbidity and mortality from cancer among the population of the Central Region through more effective service delivery, including exploring the development of an integrated cancer service.
2. Elective services - Deliver the required levels of service to the population, reduce waiting times, and enable better patient outcomes through the development of a Central Region system for managing referrals, waiting lists and elective services booking.

Strengthening vulnerable services

3. Older adults and rehabilitation - Support older adults to live independently in their community by developing a model of care to promote and maintain healthy ageing, effectively manage chronic conditions, and reduce reliance on hospital based services.
4. Radiology Services – Develop a sustainable regional radiology service that is patient focussed, high quality, timely and affordable.

Key regional enablers

5. Strengthening Clinical Leadership and Clinical Governance – Strengthen clinical governance systems, improve clinical quality and enhance patient safety across the region, including primary care, through the establishment of a Regional Clinical Board.
6. Central Region Information Systems Plan (CRISP) - Deliver the vision of One Portal, One Password, One Patient Record through a Regional Information Systems platform that will support clinical and administrative needs of health sector providers in the region.
7. Capital and Asset Management - Develop a more coordinated and affordable approach to capital asset management across the region through the establishment of a regional capital committee.
8. Shared Support Services - Increase regional collaboration in non-clinical services specifically internal audit and laundry services, as well as the national work underway with Health Benefits Limited.
9. Transport and Accommodation – Develop a coordinated regional system of transport and accommodation to support and move consumers, whānau and staff around the region in response to their needs.

Sub-regional actions

10. The Central Alliance – Whanganui and MidCentral DHBs to develop collaborative arrangements for agreed clinical and non-clinical support services between the two DHBs that will improve, promote and protect the health of DHB populations, and promote inclusion and participation in society.
11. Capital & Coast, Hutt Valley and Wairarapa DHBs – To deliver sub-regional integration of services where there are real gains to be achieved in access to and delivery of care for consumers, and demonstrate value for money.

Why do we need an RSP?

The Minister of Health has directed the Central Region DHBs to prepare a plan to co-ordinate health services in the region and look for optimum arrangements for the most effective and efficient delivery of health services in the region.

Each DHB will use the RSP as the basis for its Annual Plan from 2011 onwards – the RSP provides a shared and agreed vision and framework for future decisions on the development and improvement of services across the region and each DHB will be accountable for progress made.

Who is leading the RSP?

The RSP has been signed by the Board Chairs and CEOs of each Central Region DHB and the Chair of the Regional Leadership Committee on behalf of Senior Clinical staff from the Central Region.

A leader has been appointed to take responsibility for each of the priority and action areas outlined in the RSP.

When will it be completed?

The RSP covers the period from July 2011 – June 2012. The RSP will be reviewed and updated annually.

How will the RSP be implemented?

The priority areas and actions will be addressed as individual projects including implementation plans. At this early time, project plans are at different stages of development and more information about these projects will be available as the project teams come together and the projects progress.

When the projects start implementing specific actions, outcomes of the projects and benefits to patients in particular will be measured and reported.

How will it affect individual DHBs?

This is the first year the RSP has been part of service planning and accountability documentation for the DHBs - it is a significant step in establishing an agreed framework and commitment to working together as a region that involves individual accountability for the results of that collaboration.

Individual DHBs will need to identify specific actions they will undertake to give effect to the RSP at a local level in their Annual Plans.

Will it affect services delivered by DHBs?

The RSP is the first step towards developing an ongoing, robust and co-ordinated regional programme of work. The six regional DHBs have agreed on the priorities they will focus on in the first year and quite likely they will build on these in subsequent years.

The RSP has identified some early actions on vulnerable services and key priority areas. Some examples of early actions in the areas of vulnerable older adults and radiology are:

- Developing a regional training programme for registered and non-registered staff working with older adults on dementia, delirium and depression.
- Starting to develop consistent criteria to apply to all patients in the region when prioritising access to radiology services
- Increasing registrar training for radiology services

Is the RSP a money saving venture?

All DHBs face funding pressures and are responsible to ensure services are delivered in a clinically sustainable and financially viable way.