WHAT IS THE RSP?

The RSP lays the foundation for collaboration between the six DHBs in the Central Region. It provides the overarching framework for the six DHBs’ annual plans and ensures that the DHBs are working towards common goals for the 873,000 New Zealanders living in the Central Region.

- Six DHBs: Whanganui, MidCentral, Hawke’s Bay, Wairarapa, Hutt Valley and Capital & Coast.
- Delivering health services to around 20% of the NZ population.

RSP BENEFIT REALISATION

This leaflet explains at a very high level the Regional Service Plan (RSP). It attempts to summarise over 100 pages of text and hours and hours of work into this small brochure. More information can be found at www.centraltas.co.nz.
THE RSP IN MORE DETAIL

The RSP is an important document because it recognises that our six DHBs are not working in isolation from each other, and that to sustain quality healthcare for our shared population we need to work together. The RSP provides strategies in key areas to achieve better health outcomes for patients.

While each RSP focuses on the coming year, they are always future focused within a three year context and developed with the national guidelines firmly in view. The RSP builds on previous successes and continues to work towards the ultimate goals identified in the RSP diagram on the front of this brochure.

The RSP seeks to address some of the challenges the healthcare system and Central Region are facing, such as an ageing population, constrained resources, attracting and retaining a high-quality workforce, reducing inequities of access, and maintaining quality of health services available across the region.

KEY HIGHLIGHTS FOR THE 2013/14 YEAR

• Detailed action plans for cancer, cardiovascular, electives, stroke, mental health and addictions, and radiology.
• Guidance plans for Better Public Services supporting vulnerable children through the approach to reducing rheumatic fever.
• Plans for Māori health, the health of older people, quality and safety, and population health, including smoke-free initiatives.
• Action plans for non-clinical areas such as Central Region Information Systems Plan (CRISP), workforce and Regional Training Hub developments.
• Sub-regional work programmes (centralAlliance, 3DHB and Hawke’s Bay) are integrated into the regional plans.
• More work on aligning and integrating clinical services at regional and sub-regional levels.
• Action groups and networks continue to be clinically led.
• System integration opportunities with primary care partners at a local level.
• Revised governance structure supports more effective decision-making at a regional level.

GOVERNMENT EXPECTATIONS

“Well New Zealanders live longer, healthier, more independent lives.”

The NZ Government has set some whole of government key result areas that DHBs are responsible for and this RSP addresses.

THE REGIONAL FOCUS

So what do the national expectations mean for the Central Region? Better integrated, more convenient and patient-centred services – meaning a better experience for our patients.

The Central Region will focus on:
1. Service models – designing services to meet individual needs as demographics change.
2. System/Service integration – patient-centred healthcare through better co-ordination and integration amongst healthcare providers.
3. Improving the patient experience.
4. Building a workforce for the future – finding innovative ways to create a sustainable workforce across all areas of health.
5. Infrastructure and other enablers – regionalising some IT systems to enhance patient care by enabling the sharing of information between the Central Region DHBs.
6. Improving quality and safety across regional services – improving the design and co-ordination of care, and understanding how costs and productivity affect a patient’s experience.
7. Promoting strong corporate and clinical governance – effective leadership ensures that the region is moving in the same direction and working collaboratively.
8. Increasing productivity whilst living within our means – increased focus on preventative measures and earlier intervention.
9. Managing the impacts of major services development – a ‘whole of system’ approach is being led by the DHB clinicians and managers to integrate and transform the Central Region health system.
ACTION PLAN FOR 2013/14

National Priority Services

Better Public Services for Children – Rheumatic Fever Reduction

Regional Priority Services

Elective services – improvements in elective services impact quality of life, reducing pain and discomfort, improving independence and wellbeing. The Central Region is working towards a four-month wait by the end of 2014.

Cancer services – the Central Cancer Network (CCN) is working across organisational and service boundaries to reduce the incidence and impacts of cancer, address inequalities and improve the experience and outcomes for people with cancer.

Cardiovascular services – from prevention through to specialist care and cardiac rehabilitation, using existing and new initiatives and technologies to improve population health outcomes and inequalities.

Stroke services – a regional stroke network to facilitate the implementation of the New Zealand Guidelines for Stroke Management 2010 to reduce risks and make improvements to acute and rehabilitation stroke services.

Mental Health and Addiction services – a network that leads regional planning and service delivery to reduce inequalities in mental health and addiction outcomes.

Radiology – a working group is guiding standardisation in prioritisation, access criteria and radiology services across the team and working with the CRISP team to implement technological change.

Enablers

CRISP – a suite of shared, standardised and fully integrated information systems that will enhance clinical practice, drive administrative efficiencies, enable the regionalisation of services and reduce current operational risks.

Capital asset management – a regional approach to capital investment to ensure expenditure aligns with service plans and is sustainable.

Workforce – maintain and support a high-quality workforce and improve clinical workforce development through a collaborative approach throughout the entire Central Region; programmes aim to strengthen and standardise recruitment and training, improve retention and skills’ development, and increase coordination of training and education.

Clinical Networks

CCN – see Central Cancer Network (left)

Cardiac Network – see Cardiovascular services (left)

Mental Health and Addiction Network – see left

Health of Older People Network – formed to ensure that people are supported to live independently in their own homes, services are outcomes focused and support restorative models and access is equitable and based on need.

Renal Network – ensures the regional population has improved, equitable and timely access to renal services, and will investigate greater regional alignment.

Other Regional Work

Māori Health – Māori Health Plans prioritise improving Māori health and reducing disparities.

Population Health – a ‘whole of system’ approach to delivering integrated preventative services.

Quality and Safety – working towards a zero preventable harm culture.
RSP BENEFIT REALISATION

The work outlined in the RSP is designed to make significant improvements in the lives of New Zealanders through the ‘triple aim’ outcomes shown in the diagram on the front page of this brochure.

These outcomes will be realised and measured in each specific RSP area. The general benefits that we expect to see are summarised below:

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<th>AIMING TO REDUCE</th>
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<td>Equitable access to intervention</td>
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<td>Access to specialist services</td>
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<td>Quality of service delivery</td>
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<td>Clinical and financial viability</td>
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<td>Workforce capacity and capability</td>
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* including assessment for Mental Health & Addiction services

If you want to know more about the RSP, please contact Tricia Sloan,
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