

**NATIONAL
HEALTH
BOARD**

POARI HAUORA Ā-MOTU

Version 1 December 2010

Working Together 2010/2011



Overview

District Health Boards have asked for greater communication on key milestones for the National Health Board and associated entities: the Capital Investment Committee, Health Workforce New Zealand and the National Health IT Board.

This document includes:

1. The purpose, objective and structure of the National Health Board and the Capital Investment Committee, Health Workforce New Zealand and the National Health IT Board
2. A Gantt chart of National Health Board priorities and associated key milestones, and
3. Planned engagement with DHBs.

This document will be updated regularly.

National Health Board

NHB Purpose

The public health and disability system faces serious challenges which range from rapidly rising costs to increased demand for services, an ageing population and international shortages of skilled clinical specialists.

The NHB, along with the Capital Investment Committee, Health Workforce New Zealand and the National Health IT Board, was established by the Government in 2009, to address these issues and improve the quality, safety and sustainability of health care, for New Zealanders.

Section A provides further information on the Planning, Funding and Accountability Framework for DHBs. This is a key objective for the National Health Board in 2010/2011.

Structure

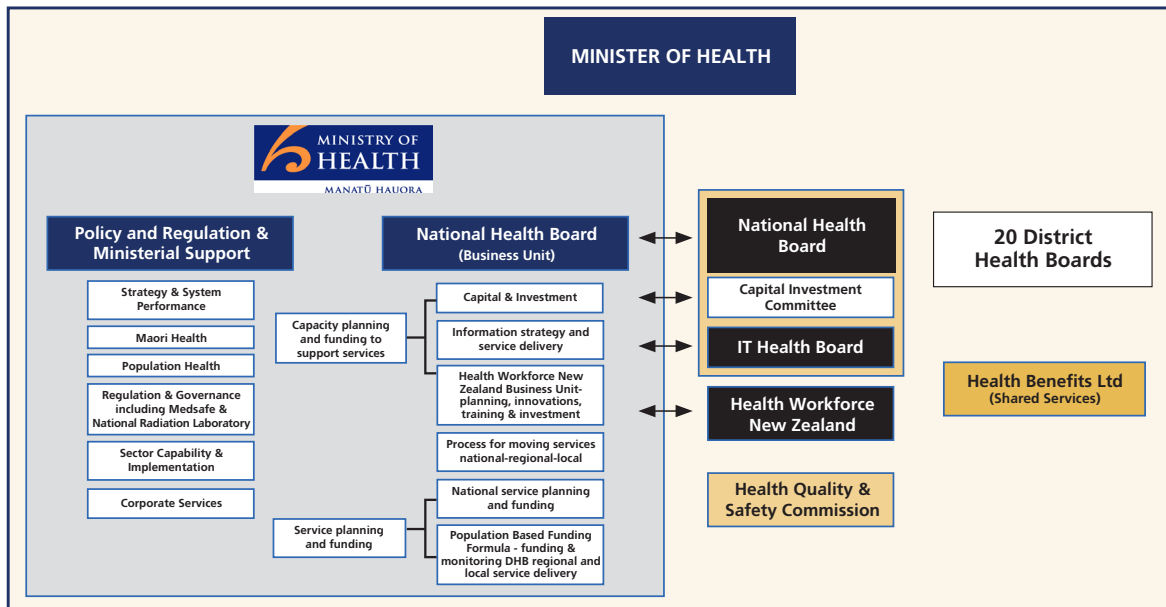
The NHB is made up of a Ministerial appointed Board and a business unit within the Ministry of Health.

The Chairs of Health Workforce New Zealand, National Health IT Board and Capital Investment Committee groups are members of the NHB Board and these groups are serviced out of the NHB to ensure our efforts are closely coordinated.

The NHB also works closely with two other entities: The Health Quality and Safety Commission, an independent body tasked to improve safety and quality within the health and disability sector, and Health Benefits Ltd, a shared services organisation set up to reduce the cost of non-clinical support functions in DHBs, and to harness the benefits of bulk purchasing. These entities also have their own work programmes which are not explicitly linked to the National Health Board annual work programme.

Section B provides further information on the purpose of National Health Board associated entities

Figure 1 – Structure Ministry of Health and associated entities



Overview of National Health Board priorities and key milestones

The National Health Board annual work plan is based on the National Health Board Terms of Reference and responsibilities delegated to the National Health Board in March 2010.

The eight priorities in this plan are designed to collectively create a more unified health system for New Zealand, where there is much greater co-ordination of effort and wasteful duplication is eliminated.

The priorities are interlinked and represent the key areas of focus for the National Health Board. They form the basis of the National Health Board work programme for 2010/2011.

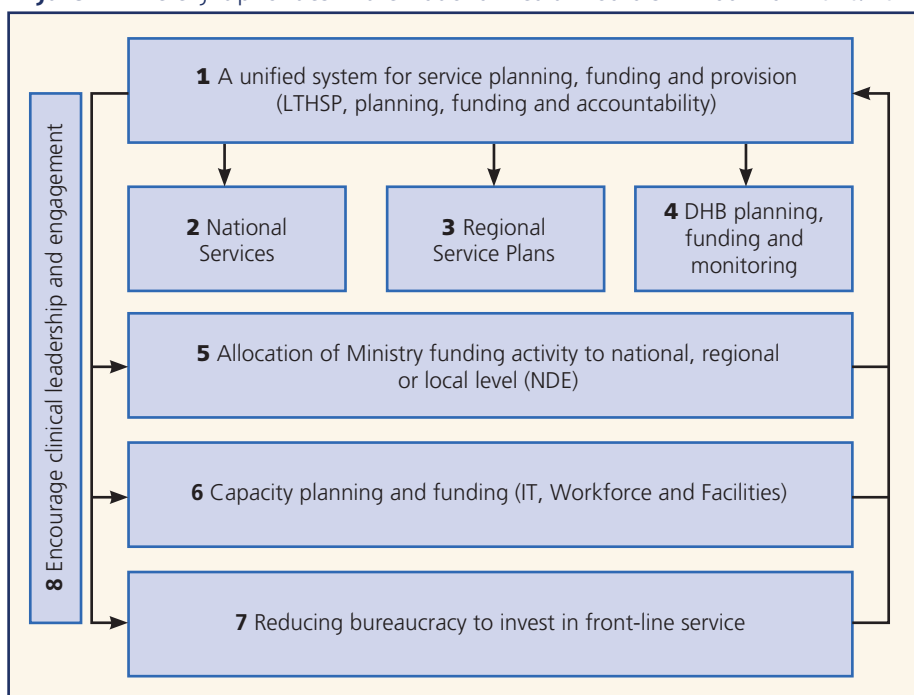
The Gantt chart providing the key milestones associated with the eight priorities in the National Health Board's annual work programme and which entity is responsible for implementing these milestones is available on the National Health Board website:

<http://www.nationalhealthboard.govt.nz/work-programme-gantt-chart>

A copy of the NHB Annual Plan can also be found on the National Health Board website:

<http://www.nationalhealthboard.govt.nz/resources/plans>

Figure 2 - The eight priorities in the National Health Board's Annual Plan 2010/2011



Section A

The Planning, Funding and Accountability Framework for DHBs

With the passing of the New Zealand Public Health and Disability Amendment Act 2010 the National Health Board will be required to implement a new Planning, Funding and Accountability Framework for DHBs. An overview of the key component of this Planning, Funding and Accountability Framework is provided below.

Long Term Health Sector Plan

The National Health Board will oversee the development of a Long Term Health Sector Plan as an important step in developing a more integrated health and disability support system.

The plan will provide a high level direction over a very long term (20 years), and describe the challenges the system faces and options for models of care that offer solutions and implications for the way services are configured in the future.

This plan will guide future decisions regarding service configuration and investment at all levels of the system and support DHBs in their regional and local planning.

The National Health Board will use this long term planning to inform its reviewing of national, regional and local plans.

Service Planning

National Services

A range of national services will be planned and/or funded by the National Health Board where doing so helps:

- secure sustainability
- improve quality
- improve efficiency
- meet Government objectives

Regional Services

Regional service plans will be central to the DHBs' delivery of health and disability services and at the heart of DHBs' increased collaboration to plan services.

Regional service plans will deal with service strategy for a region and lay out what services over time will be implemented collaboratively. They will need to include implementation plans for those services.

Remaining services will be planned and delivered at a district level. The National Health Board will engage with DHBs to assist in this process and communicate any concerns.

Regional service plans will be signed by contributing DHBs and subject to the Minister of Health's agreement, ensuring clear accountability for delivery.

A booklet outlining the changes can be found on the National Health Board website:

<http://www.nationalhealthboard.govt.nz/resources/related-reports>

Flexibility will be built in so that services can be planned in collaborative groupings that make good clinical sense:

- With one or more DHBs from outside their region, and or
- With a subset of DHBs within the region.

District Services

An Annual Plan will still need to be produced at the district level and that will need to incorporate a DHB's responsibilities at the regional level and the services it is delivering at the district level. The Annual Plan will continue to be approved by the Minister of Health.

Each DHB will produce a single annual plan by integrating its Statement of Intent with their Annual Plan. To reduce administrative cost and reduce duplication and confusion, the resulting package will be managed with one process to provide one logical, integrated and coherent plan and set of performance information.

There will be no district strategic plan as strategic planning will be dealt with at the regional level, via the Regional Services Plan.

The National Health Board will oversee the development of a Long Term Health Sector Plan as an important step in developing a more integrated health and disability support system.

Section B

Purpose of associated entities

Health Workforce New Zealand
www.healthworkforce.govt.nz



Health Workforce New Zealand was set up in 2009 to lead and co-ordinate the planning and development of the country's health and disability workforce.

Its aim is to ensure that New Zealand has a high quality, fit-for-purpose, and motivated health workforce, keeping pace with clinical innovations and the growing needs and expectations of service users and the public.

Health Workforce New Zealand works in collaboration with training providers, professional bodies and employers, to build on existing networks and to create new opportunities to involve clinicians and health care providers in planning our future workforce.

It has a diverse range of work programmes, building on initiatives already underway to ensure that New Zealand has a high quality, flexible and diverse health sector workforce.

Its work is overseen by an independent board and is organised into four teams: Investment and Purchasing; Innovations and Projects; Planning and Intelligence; and Education and Training.

Health Workforce New Zealand Key Objectives:

- Addressing the issues faced in health sector workforce development, encompassing all aspects of health workforce development including investment and purchasing
- Planning and managing the purchase of post-entry clinical training for New Zealand health professionals
- To encourage workforce innovation that has the potential to:
 - Positively impact on productivity
 - Improve quality and outcomes
 - Reduce costs in the long term
 - Unlock the potential of the workforce
 - Be sustainable nationally

... high quality, fit-for-purpose, and motivated health workforce, keeping pace with clinical innovations and the growing needs and expectations of service users and the public.

National Health IT Board

www.ithealthboard.health.nz

ITHealthBoard

The National Health IT (Information Technology) Board was established to strengthen leadership of health information technology within the context of improving the overall performance of the health system.

The National Health IT Board provides strategic leadership on information systems across the sector and ensures that IT strategy is reflected in capital allocation processes and capacity planning decisions.

The National Health IT Board replaced the Health Information Strategy Advisory Committee.

Its two key responsibilities are to:

- Review investment decisions - The Board was directed by the Minister of Health to review all business cases for IT investment over \$500,000 submitted by the Ministry of Health, District Health Boards and subsidiaries of the Ministry and DHBs
- Administer Primary Health Care IT Grants - The Minister also directed the Board to administer applications from across the health and disability sector for grants awarded from a Primary Health Care IT Grants Fund

National Health IT Board Key Objectives:

The National Health IT Board's vision is to achieve high-quality health care and improve patient safety, and by 2014 New Zealanders will have a core set of personal health information available electronically to them and their treatment providers regardless of the setting as they access health services.

- National Health IT Plan - Maintain a whole of sector plan to guide and prioritise investments in IT solutions throughout the health sector
- Develop common platforms in each region to manage patients and handle clinical information
- Implement Phase 1 of the Plan which is to deliver a consistent level of capability for accessing and transferring health information and consolidating systems
- Design and implement Phase 2 of the Plan which is to provide a Shared Care platform to support an integrated model of care
- The National Health IT Board will encourage regional IT solutions to support regional service plans

The National Health IT Board provides strategic leadership on information systems across the sector and ensures that IT strategy is reflected in capital allocation processes and capacity planning decisions.

Capital Investment Committee

The Capital Investment Committee has been formed to develop a new centrally-led process for the national prioritisation and allocation of health capital funding.

The Capital Investment Committee will play an important role in driving better investment decisions in the health system. It replaced the National Capital Committee.

The Capital Investment Committee's primary objective is to establish better planning and prioritisation processes for health capital funding and investment in the health sector in future years.

It will ensure that when capital plans are developed by DHBs, they take into account future service needs including workforce and IT planning.

All capital investment over \$10 million or capital investment which requires crown entity support and other strategic investments will need to go to the Capital Investment Committee.

There will be a lower threshold for Information Communication Technology (ICT) projects.

There will also be a focus on regional investment and proposals will need to come through Regional Capital Committees.

The Capital Investment Committee's Capital Investment Guidelines will be available soon. They herald a more transparent process that will take a long-term, service driven view that places far more emphasis on national and regional priorities.

The Capital Investment Committee will play an important role in driving better investment decisions in the health system. It replaced the National Capital Committee.

