

Briefing Points from Target Champions for 2009/10 End of Year Health Targets – August 2010

Overall results

National end of year results show very good improvement in performance in most health target areas in 2009/10.

The national Increased Immunisation target of 85 percent for 2009/10 was exceeded this quarter with further two percent improvement to 87 percent of two year olds fully immunised by July 2010.

Results show an excellent performance in Improved Access to Elective Surgery. District Health Boards (DHBs) have exceeded the national target of 131,718 discharges by five percent, or 6658 discharges. A total of 138,376 elective surgical discharges have been delivered in 2009/10.

Results for the Better Diabetes and Cardiovascular Services target show slow but steady progress, with an overall improvement of three percent compared to quarter one.

Good progress can also be seen in the Shorter Stays in Emergency Departments (ED) target, where current national performance is now at 87 percent of patients admitted, discharged, or transferred from an ED within six hours against a target of 95 percent.

In the Shorter Waits for Cancer Treatment target, 99 percent of all patients received radiation treatment within six weeks from first specialist assessment against a target of 100 percent. This is similar to quarter one performance, but an improvement compared to quarters two and three.

The Better Help for Smokers to Quit target shows the largest increase when compared to quarter one (40 percent). However, the current national rate stands at 57 percent of hospitalised smokers provided with advice and help to quit against a target of 80 percent.

Health targets overall results for quarter four 2009/10

Target Area	National goal	Quarter one	Quarter four
Shorter stays in Emergency Departments	95%	80%	87%
Improved access to elective surgery	100%	98%	105%
Shorter waits for cancer treatment	100%	99%	99%
Increased immunisation	85%	81%	87%
Better help for smokers to quit	80%	17%	57%
Better diabetes and cardiovascular services	N/A*	65%	68%

* The better diabetes and cardiovascular services health target is an average of three target indicators and there is no overall national goal.

Individualised performance-focused letters will be sent to all DHB Chairs from the Minister of Health. The letters will contain specific feedback from target champions about each DHB's end of year health target performance.

The table of DHB performance for publication in newspapers and newsletters has a column to describe the change in performance between quarter one and quarter four. Upward and downward triangles indicate where progress has increased or decreased and the dash '-' indicates no change. Changes up to and including one percent have not been displayed in the newspaper table as improvements or decreases in performance. Changes of 1.01 percent or more are displayed as upward or downward facing triangles.

The Improved Access to Elective Surgery health target is an annual target and DHB progress varies throughout the year depending on the phasing of delivery. Reporting end of year progress against the quarter one result includes variation that would not be related to actual trends in delivery. Therefore progress has been reported against the annual plan (discharges) in the table of DHB performance.

As in previous quarters, detailed data on the end of year results will be available on the Ministry website from Friday 27 August. This includes an interactive excel spreadsheet where detailed results are available by target area, including by ethnicity for some targets, and / or by DHB. Refer to www.moh.govt.nz/healthtargets

The Southland and Otago DHBs merged to become the Southern DHB on 1 May 2010. Each DHB has continued to report on its individual performance targets up to quarter four of 2009/10. Southern DHB results will be reported from quarter one of 2010/11.

1. Shorter Stays in Emergency Departments

Overall DHBs have maintained their performance against the target in quarter four with 86.8 percent, compared to 86.7 percent in quarter three. The number of DHBs achieving the target, however, has fallen from seven to five with the performance of Whanganui and Tairāwhiti DHBs dropping below the 95 percent target this quarter.

Quarter four covers the early winter months of April, May and June. Winter increases acute demand for our hospitals, particularly due to the exacerbation of long term respiratory and cardiac conditions, and also because of influenza and a number of other seasonal infections. As a result, both presentations to ED and admissions to hospital increase markedly, exacerbating 'bed block' - the principle contributor to prolonged ED length of stay.

When compared to quarter one, the quarter four results show that over the whole year good improvements in performance have been achieved. It is expected that this trend will continue in 2010/11.

Compared to quarter one:

- There has been an overall increase in performance of 6.5 percent - from 80.3 percent in quarter one to 86.8 percent in quarter four. This equates to 11,286 more people experiencing an ED length of stay of less than six hours.
- Seventeen DHBs have improved their performance over the year, by an average of 6.7 percent. The largest increases have been achieved by Hawke's Bay DHB (19.3 percent), Waikato DHB (15.5 percent), Waitemata DHB (13.2 percent) and Capital & Coast DHB (12.8 percent).

Four DHBs have achieved the 95 percent target consistently throughout the 2009/10 year – Nelson Marlborough, South Canterbury, Wairarapa and West Coast.

Counties Manukau DHB has achieved the target in the final two quarters of the year with performance reaching 96.7 percent in quarter four. This is an exceptional result for a large, complex DHB, and is largely a result of their 'Six Hours Can Be Ours' initiative which recently won 'Best Improvement Project 2010' at the Process Excellence Awards in Sydney as well as the 'Treasury Award for Improving Public Value through Business Transformation' at the 2010 Institute of Public Administration of New Zealand (IPANZ) Public Sector Excellence Awards.

Hawke's Bay DHB has recorded the largest improvement in performance over the year, increasing by 19.3 percent, to a performance of 92.6 percent in quarter four. Also encouraging are the good improvements in performance recorded by some of the larger DHBs, including Waikato, Waitemata, Capital & Coast and Auckland.

2. Improved access to Elective Surgery

Results show an excellent performance in Improved access to Electives Surgery. DHBs have exceeded the national target of 131,718 discharges by five percent, or 6658 discharges.

Nineteen DHBs have achieved their targets and a total of 138,376 elective surgical discharges have been delivered nationally in 2009/10. This means that the number of elective surgical discharges has increased by seven percent over the previous year when 129,744 discharges were delivered. When compared with 2007/08, more than 20,000 extra elective surgical discharges have been delivered, an increase of 17 percent.

The full year result is a significant improvement over the quarter three results when only 12 DHBs had achieved their planned levels. It has been apparent that several DHBs have focussed efforts to address local issues and lift performance to meet their targets.

Four DHBs (Hawke's Bay, Hutt Valley, South Canterbury and Tairāwhiti DHBs) were able to lift their performance significantly in the last quarter to achieve their health targets. In addition to these four DHBs, Otago DHB has achieved its health target for the first time in 2009/10, and has provided a significant improvement in access to elective surgery over previous years.

Nine DHBs (Northland, Waitemata, Counties Manukau, Waikato, Lakes, Whanganui, Wairarapa, Canterbury and Southland) have an 'outstanding' rating, where actual delivery is more than five percent over their planned level.

While Bay of Plenty DHB has not achieved their full health target plan, the DHB has achieved 99.9 percent of plan (rounded to 100 percent), and is only 11 discharges behind.

MidCentral DHB has struggled to meet its elective surgery health target in 2009/10, with a full year result of 96 percent. Although delivery of elective surgery is lower than planned, the DHB's actual delivery is higher than the level achieved in 2008/09.

Performance against the health target has been a result of focussed effort by DHBs and increased investment in elective surgery in response to government priorities and identified community need. The National Health Board has worked closely with DHBs to improve performance.

3. Shorter waits for Cancer Treatment Radiotherapy

Nationally, across the six cancer centres, 99 percent of all patients received radiation treatment within six weeks in the fourth quarter. This is an improvement from the 97 percent overall performance in the third quarter, with five cancer centres meeting the target and one centre not achieving the target.

For the months of April 2010 through to June 2010, the five regional cancers centres Auckland, Waikato, MidCentral, Capital and Coast and Southern (formerly Otago DHB) achieved the target for all of their regional DHBs. The regional cancer centre at

Canterbury DHB did not meet the target with 97 percent of patients from Canterbury and Nelson Marlborough DHBs being treated within the target, and 89 percent of patients from South Canterbury DHB being treated within the target. 100 percent of patients from the West Coast DHB were treated within the target time.

In quarter four 13 patients waited more than six weeks between first specialist assessment and the start of radiation treatment for capacity related reasons. This compares to 35 patients in quarter one, 50 patients in quarter two and 57 in quarter three.

The regional cancer centres at Capital and Coast DHB, Waikato DHB, MidCentral DHB and Southern DHB have shown a consistent performance against the target over all four reporting periods by either achieving or partially achieving the target.

The Auckland regional cancer centre has shown variable performance, although it has achieved the target for all of the fourth quarter.

Poorer performance has been largely explained by three factors:

- difficulty maintaining workforce with higher than normal vacancy rates (particularly radiation therapists) against established posts
- replacement of linear accelerators and diversion of resources to accelerate replacement programmes
- difficulty managing patient flow, including the recent surge in referrals, through the radiation treatment planning and delivery pathway.

Performance is being managed by assisting the cancer centres to identify the key barriers to performance, and supporting DHBs to take actions to address these.

4. Increased Immunisation

Overall quarter four results are very encouraging. The national target of 85 percent for 2009/10 was exceeded by two percent this quarter, resulting in an average of 87 percent nationally.

This year a number of DHBs have consistently achieved above their target, and some have achieved next year's target of 90 percent coverage for children under two years of age.

Outstanding performers include Auckland, Waikato, Lakes, Tairāwhiti, Hawke's Bay, Taranaki, MidCentral, Capital & Coast, Hutt, Wairarapa, Nelson Marlborough, Canterbury and Otago/Southland, all of whom have performed well this quarter and during the year.

Target achievers include Counties Manukau and Waitemata. Counties Manukau achieved 86 percent, a sound performance. Counties Manukau has the highest number of un-immunised children in the country due to its high birth rate and young population and will need to achieve higher immunisation coverage if New Zealand is to achieve 95 percent coverage. Waitemata has achieved their total target and good Pacific figures provide an overall positive picture. The Maori target was not achieved.

Partial achievers include Whanganui, West Coast and South Canterbury DHBs. Although Whanganui DHB did not achieve its own target for immunisation coverage for the total population, it achieved excellent overall coverage levels of 87 percent for the total population and 91 percent for Maori. This reduction in ethnic disparity is commendable. Whanganui, West Coast and South Canterbury DHBs have performed well overall but their small population numbers are also leading to fluctuating quarterly coverage. All three DHBs will need to consider how to address the issue of fluctuating coverage.

5. Better Help for Smokers to Quit

Key results from the fourth quarter are:

- DHBs have made significant progress in this quarter, with three quarters of DHBs achieving results of 50 percent or more in quarter four.
- Two DHBs achieved the 80 percent target. These DHBs are Wairarapa and Hutt Valley.
- Although the target has not been achieved by the majority of DHBs, the progress made since quarter one has been significant. In quarter one, the DHB average for the percentage of hospitalised smokers receiving advice and help to quit was 16.6 percent. By quarter four the DHB average increased to 56.9 percent.
- Based on the data, over 6400 smokers received help and advice to quit in June 2010. This compares to around 1500 in September 2009. The increase can be attributed to behaviour change amongst clinicians, and improvements in the recording of the offer of advice and help to quit.
- DHBs have provided monthly breakdown of their results, and these demonstrate that month-on-month progress is being made against this target. Performance for the June month alone was 64 percent, so there is continuing improvement.

Hutt Valley DHB has been making consistent progress throughout the year and has undertaken a range of activities to supported both clinical change and systems improvement to achieve the target. Hutt Valley DHB has made the biggest improvement since quarter one.

A number of DHBs have made good progress in the quarter. Although they did not achieve the target in quarter four, there are three DHBs that have achieved June results of 80 percent and above. These DHBs are Hawkes Bay, South Canterbury and Tairāwhiti.

Waitemata DHB did not achieve the target, but made significant progress in each month of quarter four, improving performance from 34 percent in quarter three to 70 percent in June 2010.

Bay of Plenty DHB and Auckland DHB were bottom three performers in quarter three but have both made good progress in quarter four, and their results in June are particularly encouraging. Taranaki DHB has also made progress in quarter four, but is still in the bottom three performers for this target. However, results received for the month of July show significant progress in the last month.

6. Better Diabetes and Cardiovascular Services

Improvement in overall DHB performance against the Better Diabetes and Cardiovascular Services Health Target continues to be slow but steady.

- **Average composite performance:** Twelve DHBs recorded an improvement in their average composite performance in quarter four compared to quarter one, with an average increase of 4.5 percent. The performance of the remaining nine DHBs decreased by an average of 1.8 percent.
- **CVD Risk Assessment:** DHBs continue to perform well in this indicator. Nationally the percentage of the eligible population who have had their CVD risk assessed in the last five years has increased from 72.7 percent in quarter one to 75.3 percent in quarter four. South Canterbury is the only DHB that has not achieved its DHB-specific target for the total population and recorded an increase in their performance in quarter four compared to quarter one, however, it has had data issues during 2009/10 which has affected its results
- **Diabetes Free Annual Checks:** Results in this indicator are generally much lower than in the other two indicators and not showing strong improvement. Nationally the proportion of people with diabetes who attended their free annual diabetes check during the 2009/10 year was just 55.0 percent. Thirteen DHBs have recorded an increase in their performance in quarter four compared to quarter one while only eight DHBs have achieved their DHB-specific target for the total population.
- **Diabetes Management:** While actual performance in this indicator remains reasonable, with nationally 72.8 percent of the people who received their free annual diabetes check during 2009/10 having satisfactory or better diabetes management, a concern is the lack of improvement demonstrated in DHBs' performance. Only nine DHBs were able to either maintain or improve their performance in this indicator over the year, while for the remaining twelve DHBs their performance decreased between quarter one and quarter four by an average of 4.4 percent. As a result, only seven DHBs have achieved their DHB-specific target for the total population.

Wairarapa, MidCentral, Taranaki and Hutt Valley DHBs have performed consistently well over the year filling four of the top five rankings in average composite performance in each quarter.

Whanganui DHB has achieved a strong improvement in performance over the year, with its average composite performance increasing from 56 percent in quarter one to 70 percent in quarter four. This has seen Whanganui DHB move from the bottom ranked DHB in quarter one to ranked sixth in quarter four.

The Ministry has recently contracted a part-time National Clinical Director of Diabetes, Dr Brandon Orr-Walker, to champion the Better Diabetes and Cardiovascular Services Health Target and to work with DHBs and diabetes services to improve performance. Over the next two quarters Dr Orr-Walker will begin visiting DHBs, starting off with those that are performing poorest, to provide advice and discuss strategies for improvement.