



BAY OF PLENTY
DISTRICT HEALTH BOARD
HAUORA A TOI

Bay of Plenty District Health Board Secondary Services Purchasing Intent 2007-2010

Introduction

This paper outlines those current and new secondary healthcare services the Bay of Plenty District Health Board intends to purchase for the next 3 years (to 2010) on behalf of its population. This paper will inform operational decisions around optimum service delivery, ongoing facility development at Tauranga and Whakatane Hospitals and the most productive use of limited and valuable workforce.

Purpose of this document

The key purpose of this purchasing intent is to make more explicit those activities and services that require additional effort or attention to achieve improvements in the performance of our local health system. These performance improvements will rely on reducing variation in processes, eliminating gaps in service provision by fostering active collaboration between services area, ensuring the timely development of appropriate and sustainable infrastructure and focusing on achieving the greatest improvement in health status for the resources available (value for money.) Therefore the BOPDHB wishes to purchase district wide secondary healthcare services, fully utilising capacity across the two hospital sites (Tauranga and Whakatane) as well as community based health services. These services will be patient-centred; evidence based and integrated with primary/community and tertiary health services.

This purchasing intent will enable

- The BOPDHB Provider Arm to have certainty around the level of financial resourcing available for a three year period
- Key stakeholders to plan and prepare for new or redesigned services
- Workforce and asset plans to be further developed
- Primary and Community service providers to align current or develop new services

Structure of this document

This paper is based a set of core underpinning principles that were first identified in the Review of Population Need for Secondary Healthcare Services and mandated by the Board in December 2005. The paper specifies those service changes or developments that have already been agreed by the Board but have yet to be implemented, and where possible new service enhancements likely to arise from Health Needs Assessment and Service Reviews.

These services include secondary care service enhancements agreed to in:

- Midland DHB regional plans, eg cancer, cardiology, diabetes, renal, rheumatology, mental health
- National initiatives, eg introduction of neonatal hearing screen
- Mandated Programmes of Care, eg chronic conditions, acute care
- BOPDHB District Annual Plan

New service enhancements identified from:

- Service review reports such as the Primary and Community Health Service Review for Eastern Bay of Plenty and the Evaluation of the Implementation of the BOPDHB Palliative Care Strategy
- Yet to be completed health needs assessment such as the Review of Population Need for Elective Services and Current Provision and the Projected Population Need for Service Provision – Western Bay of Plenty
- Programmes of Care in development, including
 - Mental Health
 - Sexual and reproductive health
 - Child and youth

Timeframes and revenue status are also identified for each proposed service enhancement.

Purchasing Intent

The BOPDHB commits to maintaining the current level of funding, adjusted each year as required for changes in for demographic growth and changes in national prices. Within this quantum of funding the BOPDHB wishes to purchase those services agreed in the Service Level Agreement and a number of service volume changes, enhancements and improved models of care, that will result in the redesign of services and capacity to better match to population need. The Price Volume Schedule, negotiated annually will detail the purchasing intent outlined in this document.

The BOPDHB wishes to purchase

- Wherever possible, services planned and provided utilising a district-wide approach, which integrates across BOPDHB facilities.
- Core hospital services that cannot be offered in any other setting and which are most appropriately delivered locally

- Identified services, which could be moved out into communities or integrated into /with primary health care services
- Standardised clinical processes including alignment to best practice benchmarks across Tauranga and Whakatane hospitals wherever it is practical, cost-effective and appropriate.
- Increased use of community-based care outpatient and day patient services and ensuring inpatient resources are targeted to those most in need.
- Evidence based models of care that deliver increased benefits to patients and communities
- Practical system improvements that wherever possible are cost neutral.
- Services, which are targeted on improving the fairness of the distribution of resources to improve health outcome.

Resourcing

Unless other wise stated in this document no new funding is likely to be available to implement proposed changes, so a cost-neutral or cost saving approach will need to be taken. The BOPDHB is committed to the full implementation of this purchasing intent however it is understood that external factors such as changes to national health priorities, emergent pandemics and the need to ensure organisational financial sustainability may result a modification this intent. The BOPDHB's secondary healthcare service purchasing intent will develop over time as key components are progressively implemented. It is intended that this intent will be reviewed regularly and updated appropriately.

BOPDHB will work with the Provider to assist in the development, co ordination and timing of local services identified in Regional Midland DHB Plans. This assistance may include support for service design and transitional funding.

Secondary Services Purchasing Intent Plans 2007-2010			
Actions	Measures/Milestones	Timeframe	Revenue
Cancer			
Participate in the Midland Region Cancer Network Implement of approved recommendations from the Midland Region Cancer Control Network Report within available resources	Attendance at Midland Region Cancer Network. Number of network recommendations implemented. Resourcing Midland initiatives (patient pathway mapping and clinical director's role)	2007 -2010	Existing
Participate in the development of a Midland Surgical Cancer Treatment Plan, linking with NSCT Plans and patient mapping	Midland Surgical Cancer Treatment Plan developed with actions plan	2008 - 2010	Existing
Continue implementation of BOPDHB Smokefree Policy Training programmes are provided for all frontline staff relating to 'Systems First – supporting smokefree leadership in NZ hospitals' Maintain system of documenting hospital admission smoking status. Offer intervention for patients Use data to target effective smoking cessation	Report on compliance of BOPDHB Smokefree policy	2007-2010	Existing

<p>Strengthen multidisciplinary care for cancer patients</p> <ul style="list-style-type: none"> • Participate in a district cancer technical advisory group (CTAG) to develop and apply innovative models of care • Review care co-ordination & options identified for improving links with community services and provider arm services (linked with patient mapping) • Development of care co-coordinators to facilitate the delivery of appropriate services • Apply the BOPDHB chronic progressive conditions model to provide and organising framework 	<p>Care co-ordinator roles developed (within allocated resources) for major tumour groups) Patient care co-ordinated</p> <p>Model developed and applied.</p>	<p>2007-2010</p> <p>2007-2010</p>	<p>New</p> <p>Existing</p>
<p>Participate in the mapping and improvement of the patient's journey for the major tumour groups¹</p> <ul style="list-style-type: none"> • colorectal and prostate • haematological conditions • ovarian 	<p>Site specific Action Plans developed and recommendations implemented within allocated resources</p>	<p>2007-2010</p>	<p>Existing</p>
<p>Participate in the development of a Midland Gynae-oncology Model of Care</p>	<p>Pathway mapped Model of Care and action plan developed with implications</p>	<p>2007- 2008</p>	<p>Existing</p>
<p>Implement the Midland Region Non-Surgical Cancer Treatment Service Plan, secondary services recommendations</p>	<p>Annual report on progress</p>	<p>2007-2010</p>	<p>Existing</p>
<p>On approval of business case and identified revenue stream implement essential psychological support services for Chronic Conditions including services for Cancer Patients and Family Whanau. Ensure service integrates and supports the service provided in the community by a Maori providers.</p>	<p>Psych-social model of care and framework developed and implemented for the BOPDHB</p>	<p>2007-2008</p>	<p>New</p>
<p>Agree new models of care for the Cancer Centres at Whakatane and Tauranga sites. (DAP)</p>	<p>Model of care agreed</p>	<p>2007-2010</p>	<p>Existing</p>

Implement the recommendations of the evaluation of the BOPDHB Palliative Care Strategy		2007-2010	Existing and New
Continue to develop consistent with the Midland Regional Cancer Network a workforce for cancer services in BOP	Participate in workforce planning	2007-2010	Existing
Cardiology			
Actions	Measures/Milestones	Timeframe	Revenue
Participate in annual Midland regional reviews of current angioplasty and cardiac surgery rates to ensure achievement of internationally recommended levels of revascularisation procedures	Annual review of review of systems and processes to identify blocks or issues in achieving recommended rates	2007 - 2010	Existing
Ensure equity of access to cardiac rehabilitation services for all patients by participating in the development of a regional coordination model for the delivery of CR services. <ul style="list-style-type: none"> ▪ Model should promote access to CR for groups currently underrepresented. 	Midland regional model of care developed which recognises different sectors of community BOPDHB implementation plan developed	2007/08	Existing
Ensure strong linkages between physicians and cardiologists across the region	Regular regional cardiac meeting continues at Waikato Hospital Annual Cardiac meeting continues	2007 - 2010	Existing
Ensure appropriate access to cardiac catheter laboratory services. Prepare a business case for the development of a dedicated catheter laboratory to undertake cardiac diagnostic angiography and pacemaker services for the Bay of Plenty.	Ongoing review of waiting times across the region.	2007	New Funding Proposal 2008 expected
Participate in Midland Regional Service improvement activities to identify service gaps, issues and opportunities, to ensure service meets NZ Guidelines including	Number of patient care pathways completed each year Gaps, issues and opportunities identifies for each care pathway.	2008 - 2015	Existing

Implement approved recommendations within available resources	Diabetes Network. Number of network recommendations implemented.		
<p>Participate in Midland Regional Diabetes Network service improvement activities to identify service gaps, issues and opportunities, to ensure service meets NZ Guidelines, including:</p> <ul style="list-style-type: none"> • Consistent referral criteria/systems for the use of all parts of the continuum of care: <ul style="list-style-type: none"> ▪ Specialist diabetes physician/paediatric team ▪ DNS/DNE ▪ Podiatry (high risk) ▪ Dieticians ▪ Retinal screening/ophthalmology ▪ Other specialities (eg psychosocial services, renal, vascular etc) ▪ Workforce development programmes ▪ Information Systems planning and development ▪ Primary Care capacity and capability development ▪ Specialist Obesity services 	Redesigned system and services in place	20 08	Existing
On approval of business case and identified revenue stream implement essential psychological support services for Chronic Conditions including for patients with diabetes and their Family/ Whanau. Ensure service integrates and supports services provided in the community by a Maori providers.	Psych-social model of care and framework developed and implemented for the BOPDHB	2008	New
Participate in national MoH/DHBNZ quality improvement groups and participate in defining national research priorities for diabetes	Representation as appropriate on national working groups for diabetes research and quality improvement projects	2007 -2010	Existing

Rheumatology			
Actions	Measures/Milestones	Timeframe	Revenue

Implementation plan to be developed across Midland 2007/08			
Renal			
Actions	Measures/Milestones	Timeframe	Revenue
Implementation plan to be developed across Midland 2007/08			
SHSOP			
Actions	Measures/Milestones	Timeframe	Revenue
Participate in a service redesign project for SHSOP that will: <ul style="list-style-type: none"> • Identify current service gaps, pressures, opportunities, dependencies and resource requirement/ • Identify preferred best practice model of care • Identify key service dependencies & structure, including <ul style="list-style-type: none"> ○ primary care referral ○ ED presentation ○ Stroke service ○ Geriatric Orthopaedics ○ Psychogeriatric ○ Early rehab intervention ○ Virtual consultations ○ Health access resource teams –(HART) rapid response early assessment and intervention team • Forecast resource requirements and develop • Implement the district wide rollout of the evaluated InterAI2 tool 	SHSOP model of care and framework developed and implemented for the BOPDHB	Model fully implemented 2010	Existing and New
Develop a sub project to identify and scope integrated solutions to psycho geriatric/ mental health/ disability issues for older people will be developed.	Scoped solutions identified and business case developed for implementation	2008	Existing
Chronic Conditions			

Actions	Measures/Milestones	Timeframe	Revenue
<p>Conduct service redesign to implement the BOPDHB Chronic Conditions continuity of care model (DAP) including:</p> <ul style="list-style-type: none"> • Consistent referral criteria/systems for the use of all parts of the continuum of care: • Development of care co-coordinators to facilitate the delivery of appropriate services • Map the patient journey for major chronic conditions • On approval of business case and identified revenue stream implement essential psychological support services for Chronic Conditions • Patient self management support services 	<p>Redesigned system and services in place</p>	<p>2008 2009 2008 2009 2008</p>	<p>Existing and New</p>
Child and Youth Health			
Actions	Measures/Milestones	Timeframe	Revenue
<p>Strengthen multidisciplinary care for children and young people including:</p> <ul style="list-style-type: none"> • Introduction of HIV screening • Continue roll out of Family violence initiatives • Introduction of community dentist service • Introduction of agreed services identified in the oral health business case • Introduce neonatal hearing screening • HEHA • Introduce opportunistic immunisation screening <p>Scope a service redesign to increase community delivery of specialist paediatric services, particularly for rural communities</p>	<p>Number of new initiatives developed and implemented each year</p> <p>Gaps, issues and opportunities for service and health equity identified.</p>	<p>2009</p>	<p>New Existing New New New New New New Existing</p>
Acute Care			
Actions	Measures/Milestones	Timeframe	Revenue

See Acute Care new purchasing section			
Referred Services			
Actions	Measures/Milestones	Timeframe	Revenue
Participate in Midland regional data repository project			
Outpatients			
Actions	Measures/Milestones	Timeframe	Revenue
Complete the general surgery outpatients waiting list redesign project and review and redesign discharge planning processes at Whakatane Hospital see section - Primary Secondary Interface	Project redesign implemented	2008	Existing
Review current arrangements for the provision of outpatients clinics as per Grafton group report	Project redesign implemented	2008	Existing
Mental Health			
Actions	Measures/Milestones	Timeframe	Revenue
Implement Service Redesign identified in the BOPDHB Mental Health Programmes of Care Implement the sector infrastructure development activities identified in the Blueprint Strategic Mental Health Plan Dec 06, including: <ul style="list-style-type: none"> • Establishment of an analyst position to assist with the implementation and utilisation of the MHINC data collection system 	MHINC Analysts	2008	New
Palliative Care			
Actions	Measures/Milestones	Timeframe	Revenue

<p>Develop service redesign based on recommendations from the evaluation of the Implementation of the BOPDHB Palliative Care Strategy May 2007, including</p> <ul style="list-style-type: none"> • Participation in the reactivated Palliative Care Network • Contribute to the development of a district wide specialist palliative care service comprising Palliative Physician, Nurse Practitioner, Pain Management and social worker service. This service will work across hospital, hospice and community for both EBOP and WBOP • Development of a district secondary care inpatient service based on the Liverpool Care Pathway that provides for the co-ordination and provision of expert palliative care (e.g. inpatient palliative care teams or coordinators) • Participation in Midland Regional Palliative care planning and service alignment. 	<p>Regular participation in Palliative Care Network</p> <p>District secondary care inpatient service using the Liverpool Care Pathway in place</p> <p>Regular participation</p>	<p>2009</p> <p>2007 -2010</p> <p>2007 -2010</p>	<p>Existing</p> <p>Existing and New</p> <p>Existing</p>
Primary Secondary Interface			
Actions	Measures/Milestones	Timeframe	Revenue
<p>Collaborate across the range of providers to agree the right place for right care for step down beds once acute phase has been stabilised –DAP As part of the SHSOP service redesign project identify a patient pathway around sub acute step down care</p>	<p>Patient pathway identified and appropriate services design to meet need described.</p>	<p>2009</p>	<p>Existing</p>
<p>Implement the Primary Care minor surgery project</p>	<p>No of minor surgery cases provided in primary care</p>	<p>2008</p>	<p>Existing</p>
<p>Participate in the Primary Care Information Plan (PIP)</p>	<p>PIP progressed</p>		<p>Existing</p>
<p>Review and redesign discharge planning processes at Whakatane Hospital –Grafton group report</p>	<p>New processes in place</p>		<p>Existing</p>
Women's Health			
Actions	Measures/Milestones	Timeframe	Revenue

Implement service redesign to improve administrative coverage in In-patient Maternity Services Whakatane – Grafton report	Administration coverage improved	2008	Existing
Scope the introduction of ante natal services and lactation services – Grafton report	New service scope and resourcing identified	2008	New
Inter District Flows			
Actions	Measures/Milestones	Timeframe	
In order to address section A4. in the Service Level Agreement undertake a project to identify inappropriate IDF referrals and institute redesigned referral protocols and processes, including: <ul style="list-style-type: none"> • Identification of inappropriate types of referrals between Whakatane Hospital and Waikato Hospital 	Increase in the level of appropriate referrals	2008	Existing
Elective Services			
Actions	Measures/Milestones	Timeframe	Revenue
Ensure appropriate resource allocation and utilisation to meet agree elective service volumes including <ul style="list-style-type: none"> • Cardiology 440.50 • Cardiothoracic 684.87 • Dental 361.88 • ENT 498.51 • General Surgery 2662.97 • Gynaecology 777.73 • Neurosurgery 195.15 • Ophthalmology 451.62 • Orthopaedics 3305.86 • Paediatric Surgery 126.06 • Plastics and Burns 207.88 • Urology 6.23 • Vascular 459.15 	Elective Volumes met	2008	Existing and New

And plan for the expected 10% p.a volume increase		2008-2010	Existing and New
Maori Health/Health Equity			
Actions	Measures/Milestones	Timeframe	Revenue
Hē Ritenga completed to contracted level	Number of audits using He Ritenga	2008	Existing
Pilot the kaupapa primary and secondary care service 'Whanaungatanga' Model	Aligned referral and discharge planning protocols agreed between Te Puna Hauora; Ng Mataapuna ranga and PHOs	2008	Existing
Increase compliance with ethnicity data collection protocols	% increase in accuracy of ethnicity data	2008	Existing
Agree and implement Mai Ī Ngā Kurī ā Whārei ki Tihirau Māori Workforce Plan (MNKWKT)	Number of new initiatives developed and implemented each year Gaps, issues and opportunities identified.	2008	Existing

New Purchasing

Acute Care			
Actions	Measures/Milestones	Timeframe	Revenue
After hours provision ED/primary care interface- Grafton Group report In conjunction with Planning and Funding team undertake a review of ED attendances to identify the volume, type and mix of ED and afterhours accident and healthcare services required for the EBOP. Quantum of service volumes will continue while a new service. ED volumes will then be modified as appropriate to reflect the change.	Ed review completed Participation in the development of the new A&H service New service volumes established	2008	Existing
Elective Services			
Actions	Measures/Milestones	Timeframe	Revenue

Utilise the findings of the BOPDHB Review of Population Need for Elective Services and Current Provision, to redesign the provision of elective services	Reviewed elective service volumes in place	2008	Existing and New
Sexual Health			
Actions	Measures/Milestones	Timeframe	Revenue
Implement Service Redesign identified in the BOPDHB Sexual and Reproductive Programmes of Care	Number of new initiatives developed and implemented Gaps, issues and opportunities for service and health equity identified	2008	Existing and New
Mental Health			
Actions	Measures/Milestones	Timeframe	Revenue
Redesign of Mental Health In patient services in the EBOP to address equity, quality and safety issue – Grafton Group report		2008	Existing and New