

## Midland Region Clinical Governance – 29 February 2012

### Notes from Presentation by Cathy Cooney

#### National Directions: 7 Key Directions – Slide 2

1. Need to look at how we look at early interventions
2. Population will be getting older, % of Maori bigger portion and increase in younger age groups

#### National Directions: 7 Key Directions – Slide 3

3. Models of care may change over time, this group (MRCG) will be spearheading the direction
4. “What is the definition of “reducing waste” – examples given eg. Unused medication

#### National Directions: 7 Key Directions – Slide 4

6. This is the role of the (MRCG)
7. Intersectoral Activity & Whanau Ora

#### National Directions: Ministers Letter of Expectations – Slide 5

All in the room acknowledged their DHB received the letter and some have sighted this

- Integrated Care: Primary Care – Continuum of Care
- Regional Integration: Clear direction from the Minister

#### National Directions: Central Agencies – Slide 6

- In the past Clinical Governance groups made decisions on IT, this will be taken over by the National IT Board
- National IT Board a critical enabler with directive, prescriptive IT approach
- Health Benefits Ltd - \$7m will be reinvested over 5 year period on frontline

#### Regional Activity Related to the National Entities – Slide 8

- MoH – providing policy advice
- NHB – monitoring the sector accountability and performance
- HBL – reducing costs in back room support eg. Some DHBs moving into environment with multi-copiers (removing individual printers), one provider for petrol etc
- IT Health Board – Capital projects already happening, identifying key priority areas
- HWNZ – High level direction for workforce. Hub management, eg GP training placements. Expectation HWNZ will monitor schedules from July 2012

#### Other comments

- Important the MRCG have robust discussion to influence the national entities
- Map the key persons MHC & DSS
- Eventually across the nation there will only be one or two finance systems

#### Regional Activity: MH&A – Slide 14

- Sector owned sector led
- Rapid pace for change to occur and this will continue to accelerate
- Budgets for projects sit with Midland MH&A and all currently go through a prioritisation process for deliberation, GMs Planning & Funding – future decisions will be made by the MRCG group

**Regional Activity: MH&A Cont'd – Slide 15**

- The region needs strategic leadership
- Main responsibility – pitch things up an extra level
- To provide consultation and other avenues to provide feedback

**KPI**

- MoH are looking at winding down the KPI project, request if Midland budgets could fund this for the region?
- If the MoH was no longer going to fund the project then it would be highly unlikely that Midland would fund it
- Is the data that is being collected already available elsewhere, if so why is this not being used
- A paper will need to go to the GMs with a cost benefit analysis