



Healthy Ageing for all New Zealanders

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April 2019

Presenting today on ...

Health system overview

- Health System Review

Healthy Ageing Strategy (2016)

System integration

- Cross Agency Alignment
- Frailty – Early Detection Management
- Health and Disability Sector Standards Review

System enablers

- Digital Health Strategy
- Multi-Trans Disciplinary Approach

Health System Overview

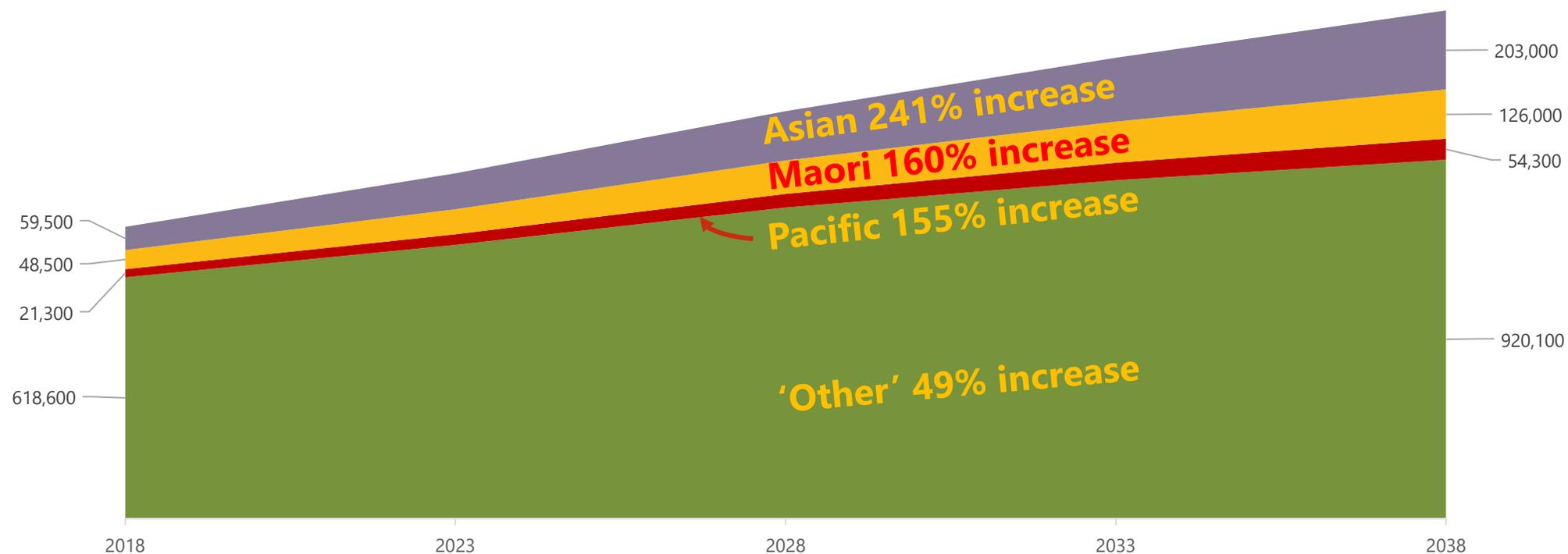
NZ Health System Performance

- The New Zealand health system performs well when investment is compared to outcomes (OECD)
- The structure of the system enables funding to follow key priorities
- The structure of the system facilitates fiscal and quality management but there are strong demand pressures
- Cross sector integration required to enable a well-being framework
- Improving equity remains a challenge and a high Government priority
- Changing populations, growing diversity

Equity Snapshot



Increasing Diversity



Funding and Support Environment

Options

Public

- General taxation
- Social insurance

Private

- Insurance
- Individual(s)

Support

- Family and whānau
- Communities

Settings / examples

- DHBs
- ACC

- Southern Cross
- GP visits, residential care

- Homes
- Social groups and programmes

Expenditure Aligned with Demographics and Policy

\$M	08/09	09/10	10/11	11/12	12/13	13/14	14/15	15/16	16/17	17/18	% increase
Residential Care	738	794	837	899	916	939	953	978	966	1,096	48%
Support in the Home	231	232	228	253	281	295	308	321	372	478	106%
Carer Support	40	40	39	41	44	46	48	49	50	75	87%
Hospital-based Rehabilitation	186	226	227	228	224	222	217	236	234	241	30%
Assessment, Coordination	34	38	39	42	46	41	44	48	47	47	38%
Total DHB Health of Older People Expenditure	1,229	1,330	1,370	1,462	1,512	1,544	1,570	1,632	1,668	1,936	58%
Core Crown Health Expenditure	12,368	13,128	13,753	14,160	14,498	14,898	15,058	15,626	16,223	17,159	39%

Partnerships and Collaboration

Aged Residential Care Sector

- 38,000 reported total beds, 420 legal entities, 660 premises

Home and Community Support Services Sector

- 80,000 people, 11 m support hours p.a.
- 70 providers (50% of business done by 2 providers)

Primary Health Care Organisations

35 PHO's, 1,000 general practices

Collaborative planning and approaches

Nationally - Joint working groups

Locally – Alliances

Home and Community Support

- National Framework to guide commissioning of services and quality around the country
- National Service Specification to drive funder/provider accountability
- Outcomes and measurement framework
- Collaborative oversight of implementation across Central agencies, funders (DHBs), providers
- Moving towards consistent resource utilisation using case -mix methodology



Health System Review

- In May 2018, Health Minister announced a review of the New Zealand health and disability sector.
 - "... look at the way we structure, resource and deliver health services – not just for the next few years but for decades to come."
 - *"Contribution of and the interaction between health and other social sector agencies in supporting health and wellness."*
- First feedback round underway up to 31 May about how the health and disability system is working currently and to identify critical issues to improve the effectiveness and equity of the system.
- In August 2019, interim report released. A second round of consultation will be invited on the interim report.
- In March 2020, a final report expected to be provided to the Government

Healthy Ageing Strategy (2016)

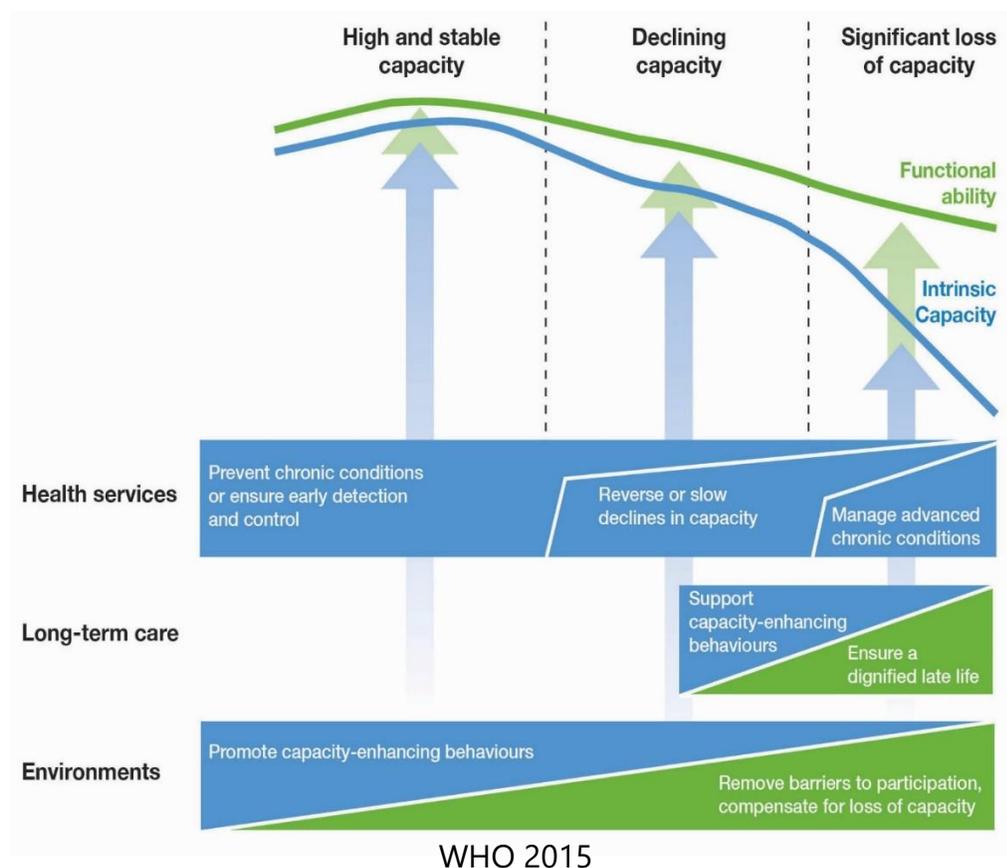
Broad scope, inclusive of aged care and other health and social services

- Inter agency involvement: MSD, Seniors, Housing
- Gradually developed through series of workshops
- Cabinet approved late 2016
- Strategy launched December 2016
- First implementation plan began 1 May 2017
- Cross sector refresh underway



Smarter Approaches

Life Course approach



Shifting Life Curve Up

- Promote healthy lifestyles and ways of reducing risky behaviours
- Prevention
- Self management
- More of a re-ablement focus in HCSS and ARC
- Integration in health sector and across government and communities
- Focus on models of care and conditions with greatest potential:
 - frailty
 - Dementia diagnosis and support

Kings Fund

First Two Years

Key focus areas

- Age friendly communities
- Aged care workforce
- HCSS models of care
- Streamline acute care, treatment and discharge
- Outcomes and measurement
- Palliative care
- Falls prevention with ACC
- Regional economic growth
- Palliative care and pharmacy actions
- Pay Equity and In Between Travel

Broad sector engagement

- Sectors and community interests remain engaged and committed

Shared commitment and ownership

- DHBs heavily involved
- Some cross government interest secure

Collective agreement on actions

- Achieved through workshop agreement
- To be re-tested through current implementation plan refresh

Time for a Refresh

- Collaborative approach to develop 2nd action plan to implement
- Series of workshops with older people, central agencies, DHBs, providers, national groups
- Complementary alignment to Positive Ageing and Carer's Strategy refresh
- Emerging themes – greater equity focus, performance and measurement, innovation, family/whanau and fewer actions
- 1 October 2019 release



System Integration

LIVE STRONGER FOR LONGER

PREVENT FALLS & FRACTURES



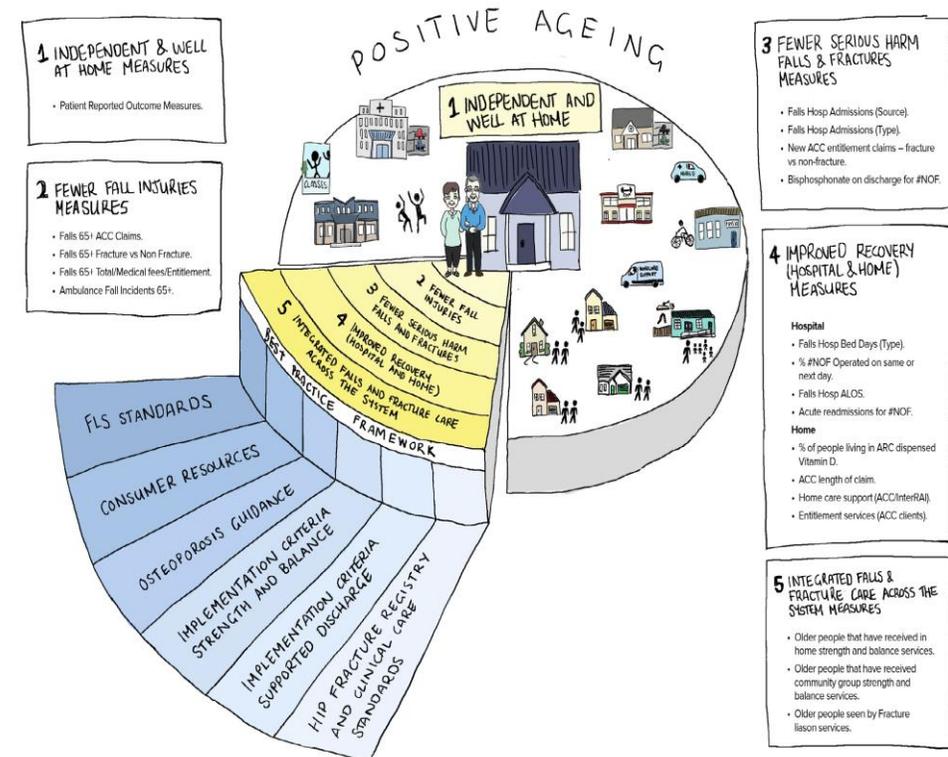
Te Kaporeihana Āwhina Hunga Whara



Falls and Fracture System

- ACC, MoH, HQSC partnership and shared vision with DHBs, PHOs, NGO's to implement a shared commitment to develop innovative and improved services within the health system for older people
- Working with new and existing providers to:
 - co-design and deliver new models of care
 - identify people at risk of a fall or fracture
 - target interventions that are known to have a significant impact in terms of future risk
- Creating and testing new funding approaches to redesign pathways for older people to reflect the whole patient journey
- Collective measurement of outcomes
- Building sector capability – no single partner can achieve success on their own

OUTCOMES AND BEST PRACTICE FRAMEWORK



Frailty – Early Detection Management

- Frailty is not an inevitable consequence of ageing
- Preventable via proactive approaches
- Integrated care an effective way to improve outcomes
- Services meet the needs of all populations
- Better use of information and technology
- Aim - positive outcomes for the person, caregivers as well as health and social system



Health and Disability Sector Standards Review

- Key opportunity to better reflect contemporary practice
- Focus areas include staffing, interdisciplinary working, person centered care, equity

<https://www.health.govt.nz/our-work/regulation-health-and-disability-system/certification-health-care-services/services-standards/health-disability-services-standard-and-fertility-service-standard-review>



System Enablers

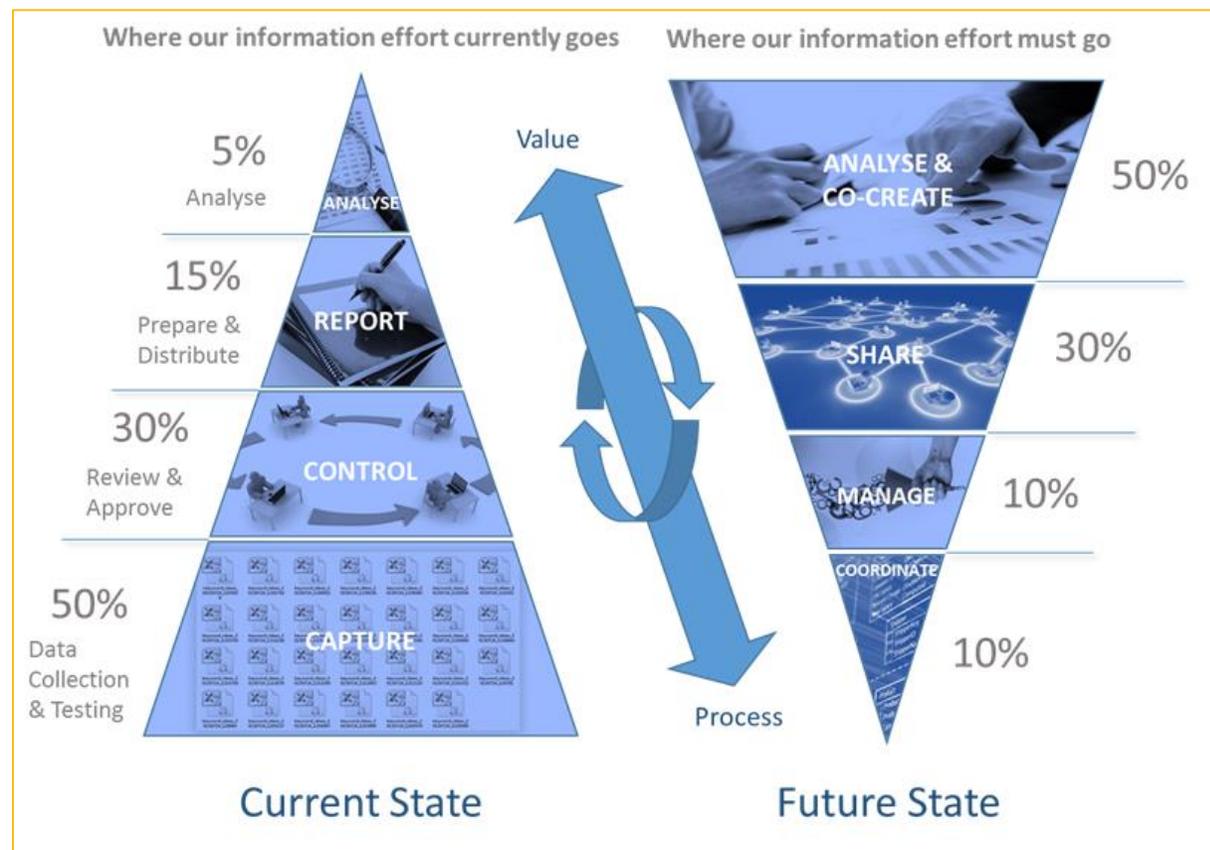
Health Technology Vision



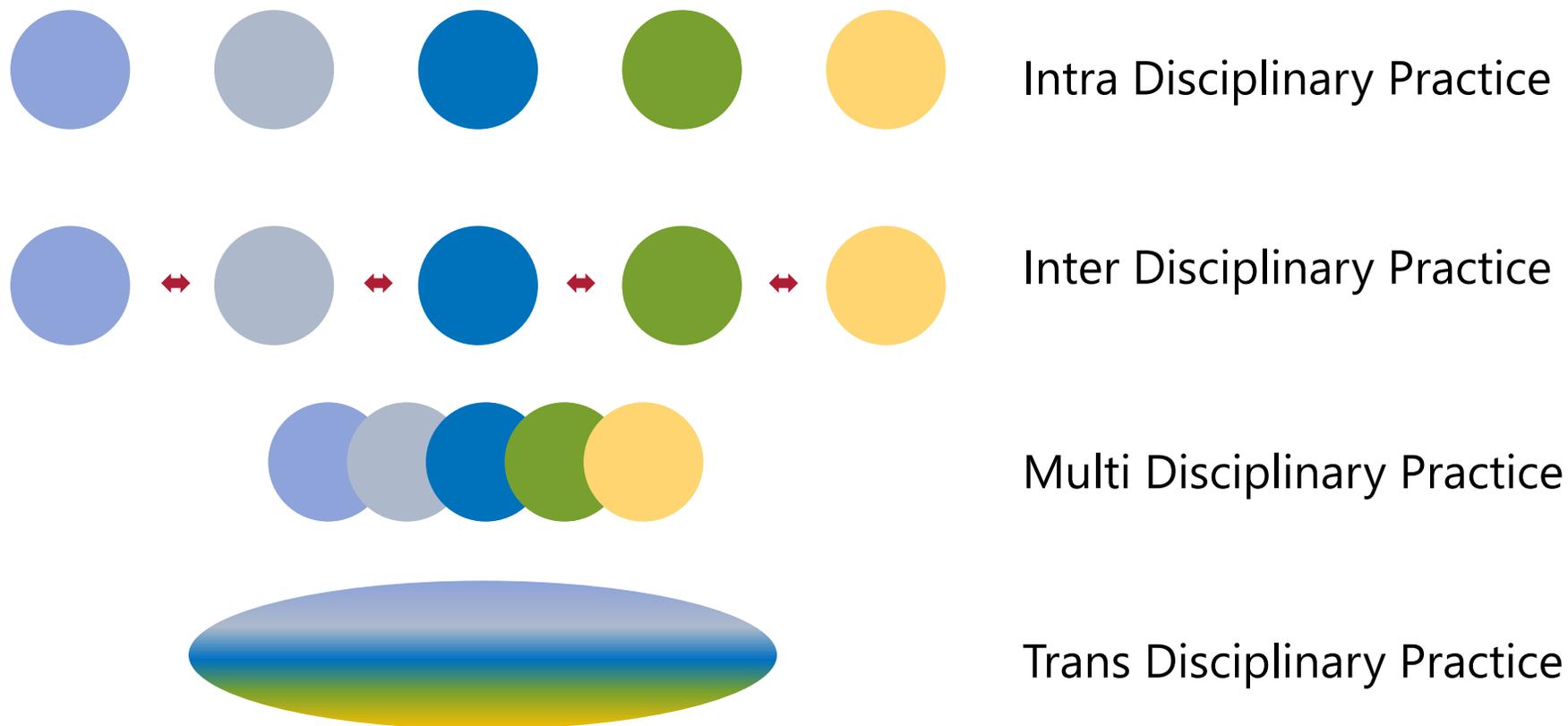
Current State vs Future State

“There is an immense opportunity for technology to assist with information sharing, gathering of health data, and identifying trends in performance that feedback into whole of system improvements.”

Future direction - 2016



Multi → Trans disciplinary team practice



In our approach we will address the Government's **Treaty of Waitangi** obligation to improve Māori health outcomes

Thank you