



HEALTH ROTORUA LTD

STRATEGIC PLAN
2011-2014

Adopted by Health Rotorua Ltd

Date: October 2011

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COMPANY DESCRIPTION

Name: **Health Rotorua Ltd**

Company number 1309025

Registered Office:

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Board.

Chair. Russell Burton.

Deputy Chair David Honore

Directors:

Colleen Neville (Chair Finance and Risk Committee)

Katrina Allison

Erana Hond-Flavell

Pauline Koopu

Ann Dibley

Nikki Elder

Management and support

Kathy Rex Manager (under contract from RGPG Ltd)

Ana Morrison Māori Liaison (under contract from Tipu Ora)

Jane Lane , Clinical Liaison (under contract from RAPHs Ltd)

Pollyanne Taare, Community Liaison (under contract from RGPG Ltd)

Peter Spurdle Financial controller(through a contract with

Our Vision – what do we want for our community

He Kāwai Waiora – Achieving intergenerational wellbeing in the community

Our Mission - what is our purpose.

To inspire and enable our community to take responsibility and action for their health and well being

Our Values

Leadership

Accountability

Collaborative

Consultative

Inclusive

WHO ARE WE?

Health Rotorua Ltd (HRPHO) is a limited liability company with charitable status first incorporated in 2003. It was substantially redeveloped in 2009 to enhance its focus on provision of strategically driven direction for the provision of Primary Health Services in the Rotorua and Murupara districts.

HRPHO is owned by the Health Rotorua Charitable Trust (HRCT). The relationship between the two is defined by the Constitution of HRPHO and the Statement of Corporate Intent. Of special relevance are the appointment of the board being:

- 3 Directors nominated by local Māori providers.
- 3 Clinical representatives (1 General Practitioner, 1 Practice nurse and 1 other nominated by HRCT)
- 1 Allied professional nominated by the Primary Care Advisory Network.
- 1 community representative nominated by the Community Advisory Group

As much as possible of the business of the board will be conducted in a public forum to enhance community participation. The following are invited to attend such meetings.

Korowai Aroha, Ngāti Pikiao, Rotorua Area Primary Health Services, Lakes DHB, Te Mana Hauora o Te Arawa, Tipu Ora, Rotorua District Council, Liaison officers (Clinical, Māori and Community), all our providers and others as required from time to time.

In addition HRPHO under its constitution cannot employ staff or itself actively engage in service delivery

The HRPHO Statement of Corporate Intent defines the core principles for HRPHO. These are (in summary);

- Be responsive to the community health needs by having a board which has widespread contact with the enrolled community.
- Ensure all patients receive services equally by making all services available to all regardless of the provider they are enrolled with
- Have knowledge of all contracts (services available) so providers are aware of what is available for their enrolled patients/clients
- Have knowledge of all contracts for the provision of primary health services for Rotorua community funded by government services
- Deal with contracts in a speedy and efficient manner so services are able to get to the enrolled community in a timely manner
- Act as a conduit of information from the community to the DHB and vice versa
- Have meaningful input into the DHB District Annual plan process before signing off
- Work inter-sectorally with other providers who impact on health – e.g. District Council, Justice, Education, MSD
- Work to reduce health disparities
- Adhere to the Treaty of Waitangi principles
- Work within a framework of social justice

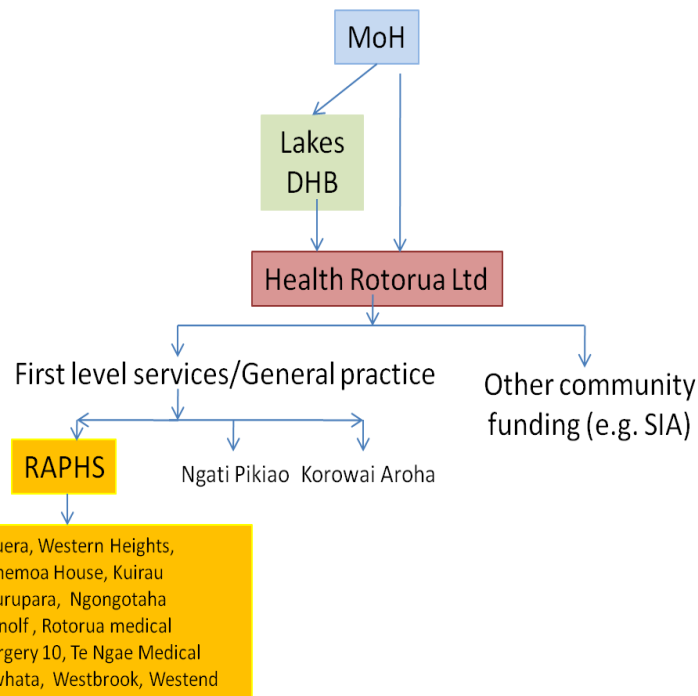
Our Community

The Government.

Better, Sooner, More Convenient Priorities for the Health Sector.

The delivery of primary healthcare is driven by the principles of the Primary Healthcare strategy (2001). This recognises that primary care provision keeps people healthier and cared for in their communities for longer, benefiting patients as well as reducing pressures on hospitals.

In 2010 this strategy is more important than ever due to the increasing burden on health services. This is recognised by the Ministry of Health Objective to achieve Better, Sooner, More Convenient Healthcare Services. This promotes the importance of clinically led service development, delivered in a collaborative and flexible manner with iwi/ Māori and community stakeholders.



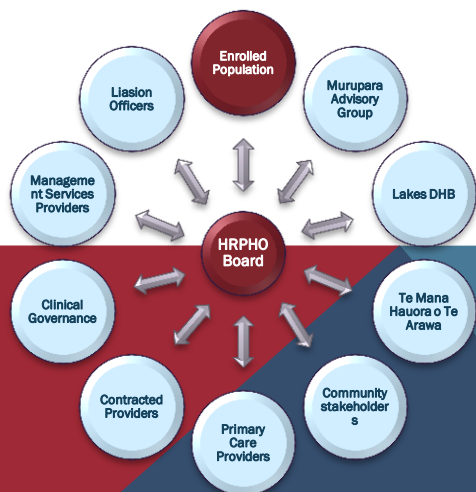
The Rotorua community.

As at July 2011, the enrolled population in Rotorua is 71,302

Ethnic mix of people is 41% Māori or Pacific Islander

Economic profile is 53% of our people are defined as High Health needs

Our challenge is to deliver high quality health care in an equitable manner to improve the health of our enrolled population.



The structure of Primary Health care delivery in Rotorua.

Health Rotorua Ltd (HRPHO) is the sole primary Health organisation for the Rotorua community. It therefore has the ability to best understand its community and needs and ensure that primary healthcare services are directed to meet the needs of the community. In addition there are 15 General Practices in the Rotorua (incl. Murupara) region, with 13 of these working under the RAPHS umbrella and two Kaupapa Māori Practices Korowai Aroha and Ngāti Pikiāo. The close association with all these practices and other critical stakeholders such as RGPG, Te Mana Hauora o Te Arawa and Tipu Ora (and others) creates a special operational environment in which to deliver primary care services.

Our Environment and Ambitions

The environment in which we operate.

National.

- Stable centre right Government
- Global economic downturn
- Government focused on obtaining operational efficiencies
- Greater focus on integration and collaboration across health provision
- Driving development of Integrated Family Health Centres
- Shifting services to the community
- Greater focus on prevention and self management to reduce pressures on secondary health care
- Impact of the Whanau Ora initiative

Rotorua

- Increasing health inequality
- Some 49% of Rotorua young people (0 to 24years) identify with Māori ethnic group as compared with 25.9% nationally.
- High levels of deprivation in the Rotorua area
- Māori life expectancy is about 10 years less than the average
- Specific issues noted in (addition to national priorities)
 - Child and youth health
 - Oral health
 - Mental health

Health Rotorua Ltd.

- Community representative Board.
- Strong community coordinated health provision
- Strong IT and knowledge base through RGPG
- Strengthening working relationship with Lakes DHB
- Low Profile – invisible in the greater community
- Limited funding to meet unlimited needs
- Māori Liaison role to enhance relationship with Māori community and Māori health stakeholders
- Clinical and Community roles to contribute to capacity of HRL
- Significant high needs population
- Supported by excellent providers

Our ambitions

Our stakeholders/owners

- To meet those national health targets that are within the influence of HRPHO .
- To enhance health and well being as identified by the special needs in the Rotorua and Murupara communities.
- To be operationally efficient, to be financially viable and to build a strong brand within Rotorua.

Our community

- To sustain a strong partnership with all key stakeholders in the community.
- To work in a collaborative way with all parts of the Rotorua health community.
- To be well informed of the community health needs to ensure quality decisions are made and best use made of the scarce financial resources.
- To enhance the quality of delivery of health services.
- To expand communication of HRL activities to the Community.

Our processes

- To ensure that contracting and contracting processes are robust and transparent.
- To manage all health related investment processes in an open and transparent manner.
- To manage risk to minimise failure and maximise outcomes.

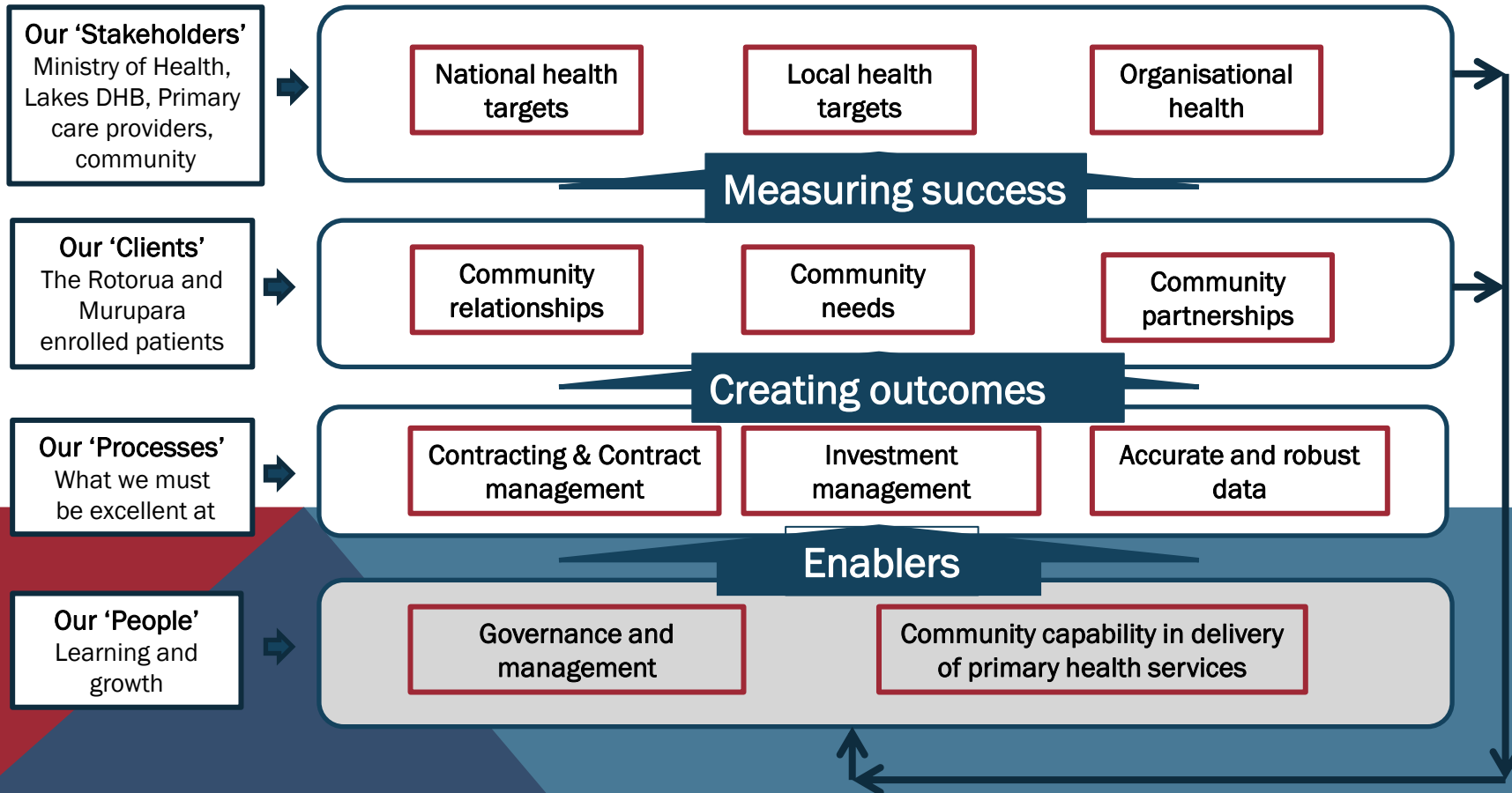
Our 'people'

- To ensure best practice Governance and Management.
- To strengthen Rotorua capability to support health service provision.

Our Plan

The Health Rotorua Ltd strategic plan uses the balanced scorecard approach. This is described below. For clarity to deliver the expectations of the community (and implicitly the owners or those who exert ownership pressure on HRPHO) and thereby meet the national and local health targets, it is essential that HRPHO is well informed by the community necessitating quality partnerships across the community along with sustaining quality internal processes. The foundation for all of these are strong and effective Governance and Management. This is described below diagrammatically.

Health Rotorua Ltd : Leadership in the community: Transparency honesty and integrity: Operate from being informed



Our Health Targets

Title	Outcome	Actions	Who	When	Current HRPFO Contracts - using Service to Improve Access funding stream
Smoking	To reduce the incidence of smoking in our enrolled population.	<ol style="list-style-type: none"> 1. Review of smoking cessation support services available to our enrolled population 2. Identify any gaps if any 3. Engage Clinical Leaders re additional service provision if required 4. If required develop RFP to address gaps 	HRPHO – via RFP	December - 11	Community Based Respiratory Services
Immunisation	Support our providers to meet the Immunisation Health Target of 95% of 2 year olds.	<ol style="list-style-type: none"> 1. Review Health Target reporting provided by Clinical Liaison 2. Monitor progress – currently HRPFO meets the Ministry Health Target of 90% 	Clinical Liaison	Ongoing	
CVD / Diabetes	Support our providers to meet the CVD/ Diabetes Health Target	<ol style="list-style-type: none"> 1. Review Health Target reporting provided by Clinical Liaison 2. Monitor progress on CVR Contact via reporting framework 3. Engage Clinical Leader Group to advise if additional resource required 	<ol style="list-style-type: none"> 1. Clinical Liaison 2. RAPHs 	Ongoing	Cardio vascular Risk and Assessments Contract including Outreach
Youth health	All Rotorua Youth have access to health facilities.	<ol style="list-style-type: none"> 1. Review current programmes 2. Determine activities to enhance outcomes. 3. Determine on-going actions 	HRPHO	<ol style="list-style-type: none"> 1. Sept-11 2. Sept- 11 3. Oct- 11 	Rotovegas Youth Contract Clinical Leader Youth Health
Mental health	To provide primary mental health services to the Rotorua population with mild to moderate mental health disorders.	<ol style="list-style-type: none"> 1. Review all data collected from contract provider via reporting framework 2. Determine whether there are any gaps in the provision of the services. 3. Monitor progress. 	HRPHO	Quarterly	Ngāti Pīkiao

Our Health Targets

Oral health	To support the providers to improve access for low income adults, kaumatua, those with disabilities and their whanau/caregivers	<ol style="list-style-type: none"> 1. Review current programmes 2. Determine activities to enhance programmes 3. Determine on-going actions 	1. Clinical liaison		Dental assistant oral health initiative Murupara Oral Health Initiative
Healthy Lifestyle	Encourage activities within the community that both improve healthy lifestyle and promote implementation of other health targets.	<ol style="list-style-type: none"> 1. Review current actions and determine gaps 2. Seek ideas to address gaps. 	HRPHO	TBD	Green Rx and Family Lifestyle Coach Te Arawa Pride contract Rotorua In Gear
Health equity	Improve access to Health services and address the disparity in health and well being among our enrolled population	<ol style="list-style-type: none"> 1. Review current actions and determine gaps 2. Seek ideas to address gaps. 	HRPHO	First quarter '12	Community Chronic Care Nurse Fordlands Outreach GP services Ngongotaha Hauora Outreach Service Palliative Care Surgical Bus connection Murupara SIA group of contracts to improve access
Māori Health	To reduce health in-equality in the Rotorua/Murupara communities.	<ol style="list-style-type: none"> 1. Complete and agree Māori health plan 2. Implement key actions from Maori health plan 3. Determine other gaps and develop action plan 	<ol style="list-style-type: none"> 1. HRPHO 2. Māori Liaison 3. HRPHO 	<ol style="list-style-type: none"> 1. September -11 2. September – 11 3. November - 11 	Māori Health Plan Service Bundle Palliative Care – Access to Traditional Māori therapies Clinical Leader Maori Health

Our Stakeholders – Organisational health

Title	Outcome	Actions	Who	When
Brand	HRPHO Brand is well recognised in the community.	<ol style="list-style-type: none"> 1. Annual climate survey with key stakeholders. 2. Review of website . 3. Develop formal communication media 4. Promote good news stories 	HRPHO	<ol style="list-style-type: none"> 1. Ongoing 2. First quarter '12 3. Immediate 4. Ongoing
Efficiency & robustness	Minimise management costs to service delivery without compromising risk profile.	<ol style="list-style-type: none"> 1. Seek to develop longer term higher trust contracts. 2. Develop a n approach with Lakes DHB to minimise transactional costs. 3. Review contracts to simplify. 	HRPHO	1. Ongoing
Financial viability	Sustain a robust balance sheet and cash flow and seek to maximise spend of available funds into the community.	<ol style="list-style-type: none"> 1. Monthly review of financial reports. 	1. Finance and risk committee of HRPHO	

Our Clients and Stakeholders

Title	Outcome	Actions	Who	When
Iwi/Māori relationships	Strong partnership with local Iwi/Māori	1. Six monthly hui with local Iwi	HRPHO	Six monthly
Lakes DHB	Strong relationship with Lakes DHB – Lakes DHB manages all Primary health contracts through HRPHO	1. Quarterly meeting at Chair to Chair level 2. Review all primary health contracts in Rotorua area.	1. Chair 2. Manager	1. Quarterly 2. Ongoing
Rotorua District Council	Strong relationship and mutual understanding between HRPHO and RDC	1. Annual Mayoral forum with RDC and HRPHO 2. Define mutual actions and implement.	1. Chair 2. Manager	1. August -11 2. On-going
Primary care providers	Strong primary care provision.	1. Survey all primary care providers to determine gaps and opportunities. 2. Include in annual plan.	1. Manager	1. Annual
Communication	Strong community awareness	1. Determine effective means to communicate activities to community	1. Manager	TBD

Our Processes

Investment development

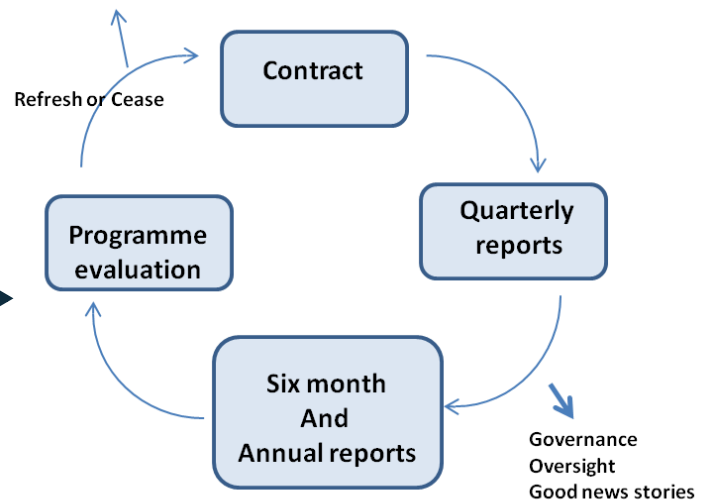


Criteria

(see Website for complete criteria)

1. Addressing health targets?
2. Providing equitable access to all enrolled HRL patients?
3. Seeking to improve access and meets guidelines for funding criteria?
4. Value for money on a per patient basis?
5. Clinically robust and evidence based?
6. Supported by stakeholders ?
7. Is not duplicated and addresses an identified gap?
8. Addresses health inequities?

Investment management



Our People

Title	Outcome	Actions	Who	When
Governance	Strong and effective board as determined by internal and external review	<ol style="list-style-type: none"> 1. On-going governance training 2. Annual review 	<ol style="list-style-type: none"> 1. Chair 2. Chair and owner 	<ol style="list-style-type: none"> 1. Annual training session 2. Annual review
Management	Strong management	<ol style="list-style-type: none"> 1. Six monthly review with contract providers and Board 	<ol style="list-style-type: none"> 1. Chair 	<ol style="list-style-type: none"> 1. Six monthly
Providers	A strong consortia of quality providers	<ol style="list-style-type: none"> 1. Sustain actions to support provider development. 	<ol style="list-style-type: none"> 1. HRPHO 	<ol style="list-style-type: none"> 1. On going
‘Ex officios’	Both parties see mutual benefit in the public board and governance process.	<ol style="list-style-type: none"> 1. At least six monthly review of board processes with all parties. 	<ol style="list-style-type: none"> 1. Chair 	<ol style="list-style-type: none"> 1. On going