

The Ministry of Health's Strategic Direction for 2005–06

2005



From the Director-General

The Ministry of Health has a unique role at the heart of New Zealand's public health system, just as District Health Boards have unique roles in their local districts.

We are accountable to the Minister of Health for the way in which we meet our objectives. We are entrusted with public money to achieve our goals, and our spending and conduct are rightly scrutinised. It is critical to our success as an organisation that the health dollar is seen to be spent wisely and that the Ministry maintains its credibility as an efficient and professional organisation.

This document provides a summary of the key priorities which have been agreed with the Minister of Health, the Hon Annette King.

The priorities build on the 2004/05 priorities and previously published strategies such as the New Zealand Health Strategy and the New Zealand Disability Strategy. More information about these key priorities can be found in the Ministry's *Statement of Intent 2005/06*, which is available on our website www.moh.govt.nz/soi

This document also provides information on the Ministry of Health's functions, structure, outcomes, priorities and funding.



Karen O Poutasi (Dr)
Director-General of Health



Key functions of the Ministry of Health

- Provide policy advice on improving health outcomes, reducing inequalities and increasing participation.
- Act as the Minister's agent.
- Monitor performance of the District Health Boards and other health sector Crown entities.
- Implement, administer and enforce relevant legislation and regulations.
- Provide health information and process payments.
- Facilitate collaboration and co-ordination within and across sectors.
- Provide nationwide planning and maintenance of service frameworks.
- Plan and fund public health, disability support services and other service areas that are retained centrally.

The Ministry of Health seeks to continually improve quality by being:

- knowledge-based
- people-centred
- systems-minded

Directorates

Corporate and Information

Debbie Chin

Corporate and Information is responsible for:

- strategic advice on information management and technology
- stewardship, management and co-ordination of national data collections
- processing of claims and payments on behalf of DHBs
- ministerial support services
- legal advice on policy development, legislation and regulations, litigation, prosecutions and contracting
- corporate services – communications, publications, corporate planning and reporting, human resources, financial management and information technology.



DHB Funding and Performance

Gordon Davies

DHB Funding and Performance is responsible for:

- funding and monitoring of DHB and Crown entity performance and providing accountability interface
- supporting DHB strategic and annual planning
- advice on industrial relations
- nationwide planning and maintenance of service frameworks
- facilitation of collaboration and co-ordination across the health sector
- funding and monitoring of some undeveloped contracts
- purchase of post-entry clinical training.



Sector Policy

Dr Gillian Durham

Sector Policy is responsible for:

- strategic policy advice across all aspects of the health and disability sector with a focus on long-term funding, the health workforce, regulatory frameworks, health system monitoring, health of older people and international issues, and assessing the implications of emerging issues
- administration of health professional statutes
- secretariat support for ministerial committees and administrative support for regional ethics committees.



Clinical Services

Dr Colin Feek

Clinical Services is responsible for:

- trusted interface between the Minister, the Ministry, health providers, professionals and communities
- policy advice
- management of strategic development of publicly funded clinical services
- evaluation of systems, services and projects to contribute to sector improvement
- administration of safety and facility licensing legislation.



Public Health

Dr Don Matheson

Public Health is responsible for:

- policy advice and management of public health issues and services, including reducing inequalities
- advice derived from monitoring the state of public health
- health protection and regulatory activities, including administration and enforcement of public health legislation
- health promotion and education and funding public health providers.



Māori Health

Ria Earp

- Policy advice on strategic direction of the sector with respect to Māori health and disability.
- Māori provider and workforce development.
- Improving access to and quality of services to Māori.
- Interventions to improve Māori health outcomes.
- Advice on Māori health aspirations and needs.
- Impact of policy and legislation on Treaty of Waitangi.
- Reducing inequalities.
- Policy for the health and disability sector, including operating and monitoring environment for DHBs.



Principal Medical Advisor

Dr David Galler

The responsibilities of the Principal Medical Advisor are:

- providing medical advice to the Director-General and Minister of Health
- providing medical input into policy development
- functioning as a liaison between the Ministry of Health and the medical profession.

The Principal Medical Advisor is seconded from the sector to ensure strong and ongoing sector linkages.



Disability Services

Geraldine Woods

- Advice on disability support policy, service development and funding, strategic direction of the disability sector, and future options for meeting disability support needs of younger people.
- Analysis of expenditure and service trends.
- Service development and funding of disability support services.



Mental Health

Dr Janice Wilson

- Policy advice on mental health issues.
- Implementation of the Mental Health Strategy.
- Administration of legislation and regulations related to mental health.



Business Units

There are eight business units in the Ministry of Health, which employ 43 percent of the total Ministry staff. The business units and their responsibilities are as follows.

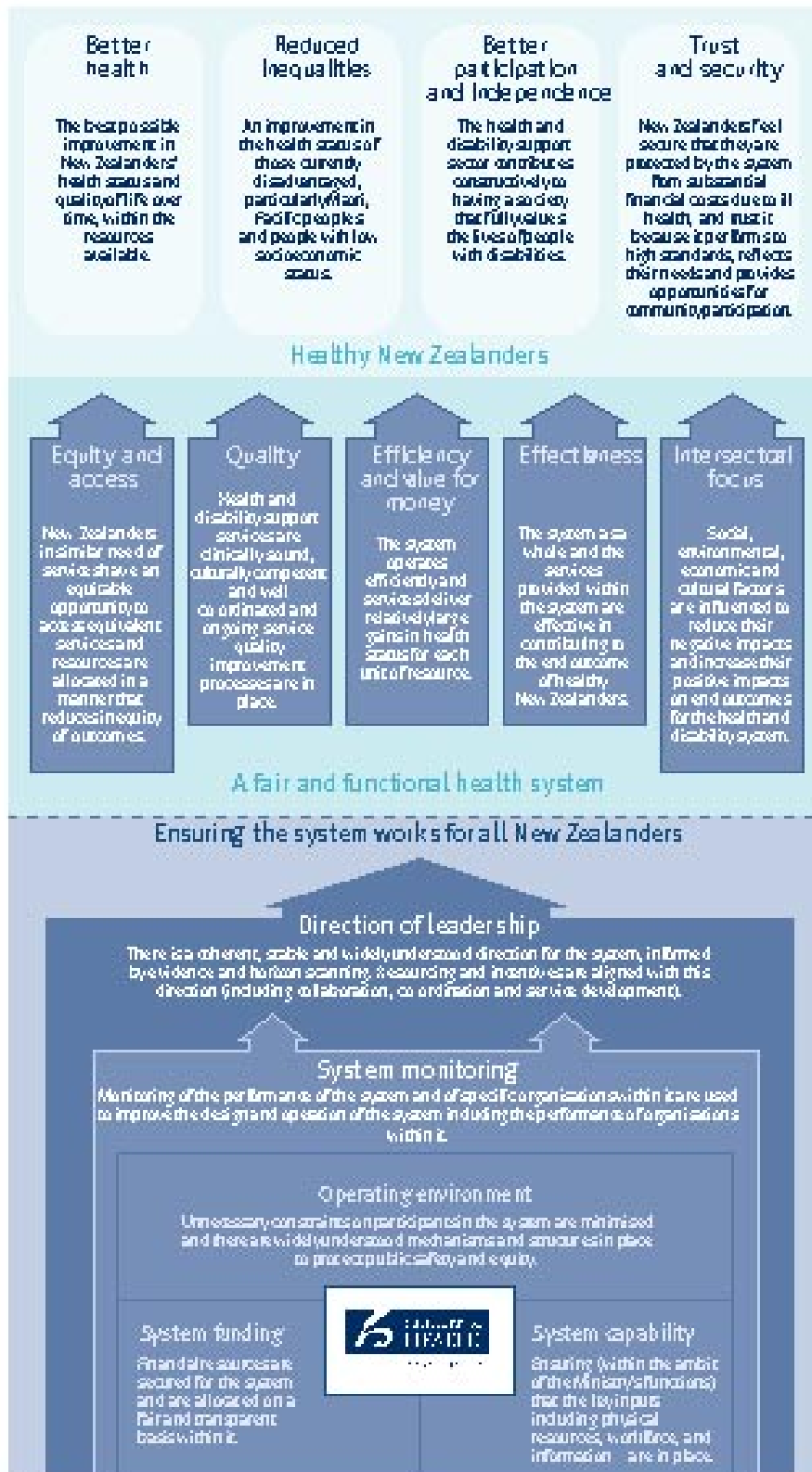
- [New Zealand Health Information Service](#) – responsible for the stewardship, management and co-ordination of national data collections and the dissemination of health information. www.nzhis.govt.nz
- [HealthPAC](#) – responsible for processing claims, payments and agreements on behalf of DHBs for the health and disability sector, including the audit of claims and agreements to ensure that they comply with requirements in contracts.
- [National Screening Unit](#) – responsible for ensuring the effective delivery of the National Breast Screening Programme, BreastScreen Aotearoa and the National Cervical Screening Programme.
- [Medsafe](#) – responsible for the regulation of therapeutic products in New Zealand under the Medicines Act 1981 and parts of the Misuse of Drugs Act 1975. www.medsafe.govt.nz
- [National Radiation Laboratory](#) – responsible for expert advice, service provision and research capability on matters concerning public, occupational and medical exposure to radiation, the performance of radiation equipment, and the measurement of radiation and radioactivity. www.nrl.moh.govt.nz
- [Clinical Training Agency](#) – responsible for funding post-entry clinical training programmes.
- [Information Technology Shared Services](#) – provides information technology services to DHBs and to the Ministry of Health.
- [Public Health Intelligence](#) – monitors the health of the population over time by analysing population health outcomes, risks and determinants, and by examining inequalities in health across regional boundaries and between population groups (including age, sex, ethnic and socioeconomic groups).

Key facts about the Ministry of Health

- In March 2005 there was a total of 554.2 fulltime-equivalent (FTE) staff employed across six regional offices and in eight directorates.
- A further 427.82 FTE staff are employed in the following business units: Clinical Training Agency, HealthPAC, Information Technology Shared Services, National Radiation Laboratory, National Screening Unit, New Zealand Health Information Service, Medsafe and Public Health Intelligence.
- The core Ministry also had 92.5 fixed-term employees and the business units 28.31 fixed-term employees.
- The total Vote Health budget for 2005/06 is \$9,681 million (GST exclusive) of which \$150.199 million (GST exclusive) is specifically allocated to the Ministry.

Towards Healthy New Zealanders

The Ministry's outcomes framework clarifies its contribution to the goal of Healthy New Zealanders and guides future activities.



Key Priorities for 2005/06

The Ministry's policy priorities for the coming year build on those developed over previous years and flow from the implementation of key health and disability strategies and government decisions to extend and establish specific services. The following priorities and related roles are set out in the *Statement of Intent 2005/06*:

- progressing the New Zealand Disability Strategy
- reducing inequalities
- the Korowai Oranga (Māori Health Strategy)
- health of Older People Strategy
- improving mental health
- quality and safety, with emphasis on development of the health and disability support workforce
- progressing the Primary Health Care Strategy, including:
 - strengthening PHO health promotion leading to effective chronic disease prevention and management
 - more effective community input
 - stronger PHO infrastructure, workforce and information management
- developing health infrastructure, including:
 - workforce
 - information
 - performance assessment and management
 - developing regional networks between DHBs
- improving elective services overall:
 - progressing the orthopaedic projects
 - developing and implementing a cost-effective cataract project
- progressing the Meningococcal Vaccine Strategy and achieving improved overall immunisation rates
- focusing on diabetes amelioration through:
 - implementing Healthy Eating–Healthy Action
 - collaboration within the sector
 - collaboration intersectorally (especially with New Zealand Food Safety Authority)
- implementing the New Zealand Cancer Control Strategy, incorporating prevention, screening, treatment, palliative care and research
- collaborating across agencies to progress programmes that:
 - reduce tobacco and alcohol use
 - address drug use effectively
 - minimise family violence, child abuse and neglect
- implementation of the Autism Work Programme, including improving access to services, improving respite care options, providing information on ASD, improving support services (including education and culturally appropriate services and case management services)
- establishing a trans-Tasman regulator (for the Ministry of Health only).

The Ministry's *Statement of Intent 2005/06* can be found on the Ministry's website:
www.moh.govt.nz/soi

Key facts about the New Zealand health and disability support sector

In a typical year there will be:

- over 15 million visits to general practitioners
- 40 million dispensings (provision of subsidised pharmaceuticals by a community pharmacist)
- 620,000 hospital discharges for medical and surgical treatment
- 414,000 cervical smears taken
- 350,000 free influenza vaccinations
- 61,000 free checks for people with diabetes
- 292,000 assessment, treatment and rehabilitation ‘bed days’ provided for some 14,000 people with disabilities or age-related disorders.

Ministry Capability

We have identified five new key areas for organisational development for 2005–08. These areas were identified through a comprehensive analysis of current and projected environmental and workforce issues and their implications for the Ministry. The five new areas are:

The Ministry as a career choice – We must be able to recruit and retain staff with the skills and experience most critical to the Ministry.

Management capability – We must develop and reinforce management qualities that will motivate and enable our staff to achieve their full potential based on their skills and experience.

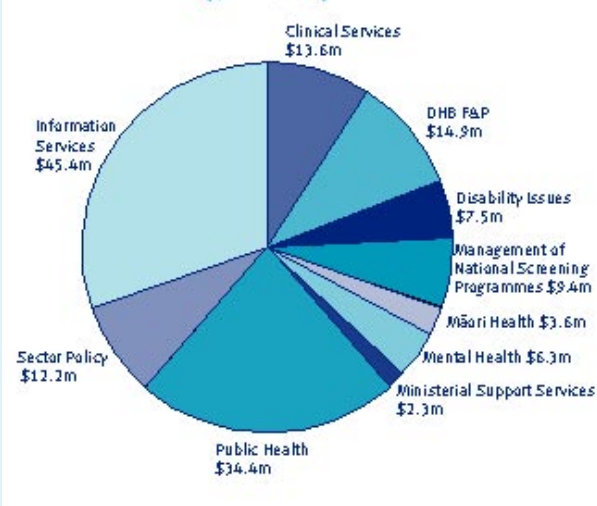
Partnership – Our staff need to be skilled in leading and managing co-operative and shared ways of working and be able to build sound relationships with other organisations.

Performance – Performance management helps us carry out our role by aligning behaviours (competencies) and results (objectives) so that co-ordinated organisational outcomes are achieved. Individual and team performance is integral to organisational performance. Organisational performance is dependant on our being able to take a whole-of-Ministry perspective.

Working environment – To achieve our strategic goals we need to continue improving the environment in which we work. We need to prioritise and manage our workloads and resources better, continue to streamline internal processes and systems to improve efficiency, increase the Ministry’s flexibility and reduce constraints that arise from organisational arrangements.

Departmental and non-departmental appropriations 2005/06 (GST incl.)

Departmental appropriations (\$ million)



Non-departmental appropriations (\$ million)

