

Excellence in Action

Innovation, engagement and leadership quality were all celebrated in July at the 2015 Deloitte Fujitsu Public Sector Excellence Awards. Take a closer look at this showcase of public sector accomplishment, some of it lauded on the international stage, and a common theme emerges: collaboration. KATHY OMBLER explains.

e have departments sharing information and developing common programmes, health boards partnering with the private sector and collaborating with its patients; agencies working with iwi, and law enforcement agencies working not only as a team in New Zealand but also with international organisations to thwart crime.

From the health board that asked its patients what mattered most — and discovered it was all about the very first welcome, to the Police, Customs and Internal Affairs team that worked together to apprehend child abuse offenders and rescue several young victims, to the multi-agency co-operation that built a web tool to help young people make informed study choices, to the departmental and iwi collaboration that's attacked the cycle of unemployment in Northland — a definite pattern emerges of the power of working together.

There are more examples in the following profiles, all positive stories that show many agencies in the public sector are working together for the betterment of New Zealanders.

Prime Minister's Award

Prime Minister's Award for Public Sector Excellence Canterbury Clinical Network Canterbury District Health Board

The development towards a community-focused, citizen-centric health system where everyone involved in a person's health pathway works in collaboration, under an alliance framework, has won Canterbury District Health Board (CDHB) the Prime Minister's Award for Public Sector Excellence for 2015.

Since its inception in 2007, the Canterbury Clinical Network (CCN) has pioneered the alliancing approach in a health setting, enabling more people to access care in the community, closer to their homes. The result has been shorter waits for care, higher rates of elective services and reduced pressure on hospitals. Older people are staying in their own homes for longer and a range of conditions that were once treated purely and mainly in hospital are now provided in general practice. Last year alone, more than 30,000 people who would previously had been admitted to hospital with acute medical conditions received treatment in a community setting, including in their own homes. This has slashed acute medical admission rates to 30 percent lower than the national average (age adjusted).

If the rest of New Zealand admitted people to hospital at the same rate as Canterbury, it has been estimated there would be 120,000 fewer people in New Zealand hospitals.

British medical and social care think tank the King's Fund praised the Canterbury health system for its collaboration and integration and rated it among the world's top healthcare systems.

System is the key word, says David Meates, CDHB Chief Executive. "One of the first things to stress is that we are a district health board not a hospital board, and one of our core functions is the planning and funding of all health services for the population of

the Canterbury region. This includes community pharmacies, general practice teams, NGOs, home-based support services and aged care services, as well as hospital services. So a core element of this is looking at how to get all the different parts of the system working together with a common vision, with the patient at the centre of every single thing we do."

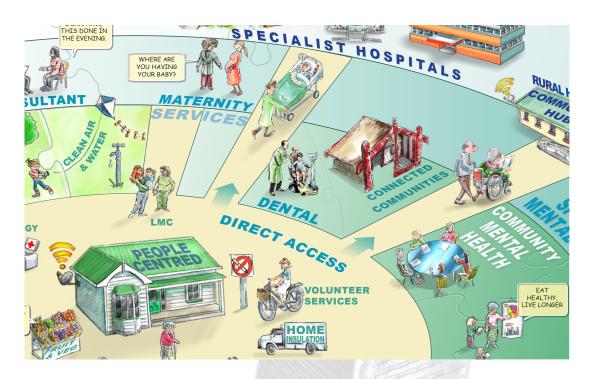
The establishment of the CCN has been the response to a looming crisis in the region's health system. In 2007, Canterbury faced growing hospital admissions and waiting times and an ageing population. Without change, by 2020 Canterbury would have needed another large hospital, 20 percent more GPs and 2000 more aged residential care beds.

"We needed to connect our health systems in a way that worked for providers and, more importantly, for Cantabrians," says Meates.

"The CCN has become the driver of our integration journey; the vehicle to drive the integration agenda and interface between the primary and secondary parts of our health system." The network is not an entity, he adds, but rather a range of clinical leaders from across the health system (described as the Alliance Leadership Team) chaired by Sir John Hansen, with planning and funding functions embedded.

Since 2009, the CCN has developed new service delivery models, funding and contracting mechanisms based on principles of high trust, low bureaucracy and openness and transparency between Alliance Partners and members, says Sir John Hansen.

"As a result, Canterbury people are increasingly taking greater responsibility for their own health and accessing care in the community closer to their homes. The evolution of our approach and advances made to provide integrated care closer to home have resulted in alliancing being adopted nationally," he adds.





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Meates says the CCN is redesigning the way health services are delivered. "Healthcare providers operate collaboratively through a number of clinically-led work streams and service level alliances to ensure the right care is delivered in the right place at the right time and by the right person. These alliances are accountable for exploring, identifying and recommending new service delivery approaches to the CCN's Alliance Leadership Team. They have a clear scope, mandate and membership with a range of competencies and perspectives from across the system."

Collaboration fundamental

Collaboration has been fundamental, says Meates. "We work in a high-trust environment. All parties are at the table and we are designing and shaping what we are going to do together. This is very important, with 122 general practices, 111 pharmacies, 70 NGOs, 5000 aged resident care beds and the hospitals and health centres, and we've got all of these thinking and operating on one system.

"Building trust in the alliance way of working and confidence that if it is the right thing to do then the funding will follow has been fundamental to success," he says.

A stand-out example of the network's achievements has been the Canterbury community-based falls prevention programme. This is specifically designed to reduce falls in the community, hospitalisation as a result of falls, and to help people maintain their independence.

Since 2012, 3500 elderly people have been through the falls programme, reducing ambulance

presentations for falls by (an estimated) 1000 people, says Meates. "Calculated by the number of people we would normally expect to be presenting with hip fractures, 370 hip fractures have been avoided. This equates to 30 fewer hospital beds occupied on any given date. Most important, this equates to a whole number of people not going through the misery of breaking their hip."

Meates also credits the network for enabling the Canterbury health system to cope following the Canterbury earthquakes. "We had been on our integration journey for a number of years; it began before the earthquakes, not in response to them. It is because we were already working in such an integrated way that the system didn't implode, when otherwise it surely would have. It enabled the system to respond in a number of ways you wouldn't normally associate with a health system."

The King's Fund report hailed Canterbury's health system as a rare example internationally of a system that has made the transformation towards integrated care with a measurable degree of success.

"What the Canterbury experience demonstrates is that it is possible to provide better care for patients, reduce demand on the hospital and flatten or reduce elements of the demand curve across health and social care by improved integration — particularly around the interface between the hospital, primary care and community services," the report stated.

"A small number of leaders were at the heart of Canterbury's transformation, however this leadership rapidly became collective, shared and distributed," it added.



David Meates, Chief Executive, Canterbury District Health Board: "Building trust in the alliance way of working...has been fundamental to success."



However, the King's Fund report also noted that creating a new system takes time, and that Canterbury's journey is far from complete.

Meates knows the journey towards becoming a fully integrated system is still evolving. He says transparency and partnerships are key to achieving this. "A key learning (to date) has been the importance of investing in building trust and confidence and the development of strong partnerships between clinical and non-clinical staff. CCN learnt early on that engagement and transparency were key to success. Without the partnership with all parts of the Canterbury health system, including health managers, challenging for change would not have been as successful."

He says a second, albeit obvious learning has been the importance of having a really clear, combined and over-arching vision. "For us, the home, family and the individual is at the centre of everything we do."

IPANZ president John Larkindale said the Canterbury Clinical Network is a great example of collaboration and integration of services. "The network has transformed the way health services operate in Canterbury, with astonishing results."

For Meates, the most significant outcome is that Canterbury people are taking a greater responsibility for their own health. "A citizen-centric health system is absolutely core to where we are and where we are going to continue to go, making it totally seamless for the family and individual."

The Canterbury Clinical Network also won the Excellence Award for Improving Public Value through Business Transformation.

2015 Prime Minister's Award Winner
The Canterbury Clinical Network,
Canterbury District Health Board.

Other winners of Deloitte Fujitsu Public Sector Excellence Awards

Excellence in Integrity and Trust Measuring Performance – linking patient/customer experience to organisational values

Waitemata District Health Board

Giving life to patient feedback has been at the core of developing new organisational values for the Waitemata District Health Board (WDHB). In looking for a new way to measure performance and monitor improvements, a suite of reports were developed that mapped narrative feedback from patients and visitors to the DHB's organisational values and behavioural standards.

"For the past two years we've taken a customer-led approach to our organisational development; what is it our patients and families want and how do we deliver that," says Sarah McLeod, Workforce Development Manager. "This has helped us use the patient's voice in a way the staff can understand. It gives life to the feedback from the patients; it's their feelings being expressed, not just quantitative data."

"It means we can move away from using electronic surveys for the wards, which currently miss some areas and teams such as orderlies, who can make a significant impact on a patient's experience," adds Jarrard O'Brien, Patient Experience Manager.

"We now have a set of 16 behavioural standards that have been developed by us and the community. This gives us solid ground that what the public is telling us is important; for example, how the initial contact is

critical. We have learned that being welcoming and friendly right at the start is the single most positive thing we can do for a patient experience. That really resonates with our staff."

Excellence in Crown–Māori Relationships Project Haere Ministry of Social Development

Haere, meaning journey, is an apt name for this project that has succeeded in moving unemployed people from Northland to help address workforce shortages in Canterbury. It began when Northland's Te Aupouri Māori Trust Board approached the Ministry of Social Development seeking to break the cycle of unemployment in Northland. It asked the Ministry to address the region's limited employment opportunities, along with social barriers to employment such as poor education, limited work experience, and

As a result, Project Haere was developed to link with job opportunities in Christchurch. Participants completed an intensive marae-based training programme in Northland and then, working through Ngāi Tahu and employers, were deployed to Canterbury and employed on Allied Workforce Contracts. Accommodation, meals and transport to work were provided, as well as further training opportunities and pastoral care. More than 80 percent

drug and alcohol use.





who started with Project Haere are still employed, and remain off the benefit.

Eru Lyndon, Regional Commissioner for Social Welfare Development
Northland, says 'haere' represents not only the physical journey of project participants but also the personal journey that each individual, whānau and community is taking. "It is also important to note that the journey is not a one-way outcome; it is the programme's intent that participants return home with skills and experience that will enable their continued independence and contribution to the Northland economy."

Lyndon said a major project highlight was seeing people improve their career prospects by taking on study and working part time to financially support themselves. "Other highlights include helping people to overcome drug addictions, alcohol dependency and long-term unemployment."

Excellence in Digital Impact Deciding with data – Compare study options Ministry of Education, Statistics

Ministry of Education, Statistic New Zealand

Which tertiary course should a student choose? A web tool that outlines the benefits of specific study options, along with a clearer, overall view of the value of our tertiary education system, are the happy outcomes of a prolonged information-sharing programme between several government agencies.

When the Ministry of Education saw the need for a tool that would allow young people to compare careers and make informed study choices, it called on data collected with the help of Statistics New Zealand, with input also from Inland Revenue, the Ministry of Business,

Innovation and Employment, Careers New Zealand and the Tertiary Education Commission, to build a picture of where former students went after their study, and which qualifications provided certain benefits. Through the resulting web tool, Compare Study Options, students can now find out median salaries, employment rates and a range of other information about courses they are considering. In its first week the tool had a staggering 41,000 views.

Roger Smyth, Ministry of Education Group Manager Tertiary Education, said developing the tool was complicated and involved pioneering work. Considerable care had been taken to set up procedures to satisfy privacy legislation, for example.

"The resulting tool enables students to carry out quite specific comparisons between qualifications. The overall benefits of understanding the employment outcomes of tertiary education are also of value for tertiary providers, and to New Zealand as a whole. This information didn't exist before and this project has created a path. Other government departments are now expressing interest."

Excellence in Improving Performance through Leadership Excellence (joint winner)

The '8' Programmes – Xcelr8/ Collabor8/Particip8 Canterbury District Health Board

People generally go into health to make a difference. Reconnecting people to those reasons, empowering them and enabling them to transform systems have been the principles behind Canterbury District Health Board's successful '8' programmes, says Chief Executive, David Meates.

Dealing with a growing and ageing population, increasing demand and funding challenges meant something had to change in the Canterbury health system. Hence the development of the three workshop programmes. Xcelr8 is about leadership and management development. Collabor8 introduces staff across the health system to lean thinking and other leadership principles. Particip8 gives participants the tools to enable change.

Participants are taken out to explore different industries, for example hotels and Air New Zealand, says Meates. "The reason is to introduce different ways of thinking, outside the health context, and not be constrained by the thinking that says 'but we've always done it this way'."

At the end of the programme participants pitch their improvement ideas to Meates and the executive team. Upon successful completion of the Xcelr8 programme, participants receive a 'permission to change the health system card' and successful projects are aligned with executive sponsors and appropriate resources to proceed.

Since 2007, nearly 2000 staff have taken part and more than 1000 stories of change have been brought to life. These have driven improvements and savings at clinics and departments throughout the system; for example, slashed waiting times, improved communication between duty nurses, reduced reporting wait times for X-ray and scan results, and realised total savings of nearly three million dollars across all projects. Many initiatives, and the '8' programmes themselves, are being used in other regions. The non-financial benefits include staff being valued. Having the CEO's permission to change the system, it seems, is a powerful tool.





Excellence in Improving Performance through Leadership Excellence (joint winner)

DIA Talent Development: developing leaders for success Department of Internal Affairs

A leadership development framework and culture programme that moved the organisation from an all-time low engagement level to one that now sits above the state sector benchmark has been achieved in just three years, at the Department of Internal Affairs (DIA).

In 2012, after taking on several new functions including all-of-government ICT, the department was fragmented, lacked clear purpose and needed a 'step change' in performance. The new Leadership Development programme, including a Talent Development approach, was created for leaders and managers. Specific offerings included manager induction, a 10-month core leadership development programme, a senior leadership programme and participation in cross-sector opportunities.

Engagement surveys since 2012 have shown a positive and observable shift in leadership and culture, with a 117 percent increase in the number of engaged staff. The DIA has also supported the development of the State Sector Talent Toolkit.

In 2014, 9.9 million travellers crossed the New Zealand border. By 2019, we expect to process 12.7 million travellers each year.

Growth projections

Average aircraft capacity has grown by more than 25% over the past routes.

Average aircraft capacity has grown by more than 25% over the past 20 years.

Global air traffic is expected to double in the next 15 years.

Seeing their leaders develop and DIA becoming a great place to work has been incredibly satisfying for Anna Finlayson, DIA Manager HR Development. "We're a small HR team which worked really closely with the Executive Leadership Team to develop and embed a fantastic leadership programme in a relatively short time.

"What was really helpful was the collaboration with our executive team. Our Chief Executive was quite clear about what he wanted from DIA leaders and the key part they play in embedding culture change across the organisation. We were given license to be creative and innovative. They really supported us."

Excellence in Achieving Collective Impact

Doing better, together, for our customers and our people at Auckland Airport

New Zealand Customs Service, Civil Aviation Authority

Protecting our borders and at the same time caring for our travellers: cross-agency collaboration has been the essence of this programme aimed at streamlining security clearance processes and improving the traveller experience at Auckland Airport. The 'Combined Departures Process' (CDP) has seen the Civil Aviation Authority, NZ Customs and Auckland International Airport Ltd work together to improve each department's understanding of the whole departures process. The shared approach has delivered a smoother flow for customers, a better SmartGate experience and easier compliance with restrictions on liquids, aerosols and gels.

Most satisfying for Peter Lewis, Manager Passenger Operations at Auckland Airport for the New Zealand Customs Service, has been the change in behaviours of staff. "They are now developing stronger relationships with airport agencies and understanding customer needs. There is no longer a view that the organisations develop a system based on what is best for them. Now it's about what is best for the customer and how that fits into the organisations' requirements.

He says the programme has been exciting on many levels. "This includes developing stronger relationships with government and private sector agencies and being part of an innovative and unique design in passenger processing."

The CDP was designed through initiatives of the State Services
Commission and its mandate to implement a continuous improvement culture within government sector agencies, he adds. "Once the CDP has been implemented it will be a world-first, single-step customs and security screening departure process."

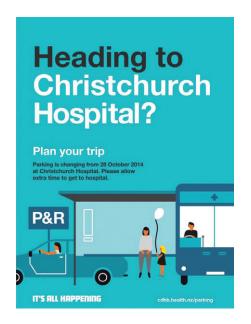
Excellence in Public Sector Engagement Heading to hospital – Plan your trip! Canterbury District Health Board

A lot of sick, frail people come to hospital; many arrive in emergency situations, and even able-bodied visitors need to know where to go to deliver their passengers and park their car. So when three months' notice was given that the entire Christchurch Hospital car park was to be closed to allow for the construction of a new acute services building, alternative parking had to be found. Not only that, the public had to know where to go.

Canterbury District Health Board's response "Heading to Hospital – Plan your Trip!" found substitute parking space close to the hospital, set up a free 'Park and Ride' scheme, re-organised hospital traffic flows, engaged volunteers to help at dropoff zones and launched a massive, multichannelled publicity campaign so that everyone knew about it.

"It was really critical for people to know," says strategic communications manager, Karalyn van Deursen. "We trialled options with our oncology patients; some very ill people. Then we launched our public information campaign. We emailed groups and clubs, went on social media, we had bus stop posters, fliers, and we engaged at staff meetings so staff could spread the word. We also communicated with other hospitals because we take a lot of referrals from throughout the South Island."

Up to 900 people now use the shuttle services each day, with 49,000 journeys made on the shuttles in the first 14 weeks of operation.

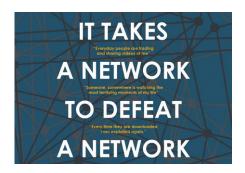


Excellence in Regulatory Systems Operation HYPER: An innovative multi-agency approach to child exploitation investigations

Department of Internal Affairs, New Zealand Police, New Zealand Customs Service

A collaborative response across three agencies, tackling the international distribution of child abuse material and actual child sexual abuse, netted much more than an IPANZ Award for the Operation HYPER team. In one heady day of action, following a systematic step up that included carefully co-ordinated, covert online interaction across three countries, seven offenders were apprehended and have subsequently been convicted. As well, seven young victims were rescued and placed into safe situations.

The agencies involved – New Zealand Police, Customs, and DIA – had identified clear overlaps where they could work



together to get the best possible outcome, says Jon Peacock, DIA Team Leader Censorship Compliance Unit, Wellington.

"It's something we have been aware of for many years: that there are three agencies in New Zealand with a degree of legislative commonalities, us from the publications point of view, police from publications and physical abuse points of view, and New Zealand Customs in protecting our borders from this kind of material.

"While we have always had a good working relationship, this operation formalised the collaborative arm to undertake online investigations."

Such operations can be very challenging and very difficult to manage in order to get a successful outcome, he adds. "Succeeding not only in identifying offenders but also in identifying and rescuing the kids has been incredibly rewarding for everyone involved."

Peacock says New Zealand is now developing an international reputation for co-ordinating joint agency operations. "Looking ahead, it's about recognising the value of working together and exploring ways to improve our collaboration even further, to continue to achieve successful outcomes on a global basis."

Young Professional of the Year Rachel Tremewan (nee Bowley) Waikato Institute of Technology

Going on a journey with and shifting the perspectives of school principals have been stand-out highlights for Young Professional of the Year, Rachel Tremewan – along with the telephone calls from grateful parents.

Working in her role as Wintec's Waikato Trades Academy Manager, Tremewan has helped to more than double the numbers of Waikato secondary school students completing trade courses.

"Essentially it's been a journey we've gone on together, with the principals changing curriculums, structures and in some cases their entire timetables to enable the students to take on trade classes."



Rachel Tremewan (right) accepting her award from Gillian Peacock, General Manager State Sector, Local Government & Corporate at The Skills Organisation.

By developing flexible funding plans, new vocational pathway programmes, and partnerships with secondary school principals, Tremewan has brought more than 26 schools across Waikato and Thames on board with what has become the largest Trades Academy in New Zealand. Student numbers attending Academy courses have increased from an inaugural 48 in 2013 to 580 in 2015.

In the process, Tremewan has become recognised by the Ministry of Education, secondary school principals and her peers as an expert on secondary/tertiary partnerships.

"What it really means to me is all the little stories, realising that you have made an impact on so many students. The girls' engineering class, for example, with 14 students enrolled in 2015 and a plan for a girls' construction class as well next year. We weren't seeing girls coming through before.

"Getting phone calls from the parents; one from the parents of a boy who was told by his teachers he couldn't learn. He was in his second-to-last year in school and had no qualifications and, by the end of his year at the Trades Academy, he had achieved NCEA Qualifications level 2 and a top student award.

"It's a major system change, not just little band aids. We really needed to do something," she adds. •

