## An Evaluation of Comprehensive Primary & Community Care Teams (CPCT) in Southern

## **Part One: Design and Early Implementation**



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#### **Background to CPCT**

CPCT is a national programme funded by Te Whatu Ora and Te Aka Whai Ora that aims to expand the capacity and capability of primary and community care by incorporating additional roles into the primary care workforce.

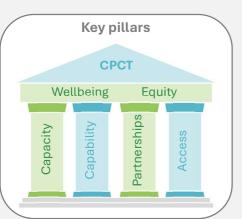
#### WellSouth's role in CPCT

As the coordinator of CPCT in Otago and Southland (Southern), WellSouth established 'clusters' of organisations across the district, to encourage partnership working and collaboration in the delivery of CPCT. Eight clusters had been established at the time of the evaluation.

#### The evaluation

The process evaluation aimed to identify what worked well and areas for improvement in WellSouth's implementation of CPCT, as well as understanding more about how the programme is operating across Southern and lessons that could be learned for future initiatives.

### **Evaluation methodology**



Semi-structured

• 34 individuals, representing 17

• WellSouth, general practices,

• Reflexive thematic analysis - to

identify themes and patterns

• 32-item survey with focus on

Responses on six-point scale
 1 - not at all, 6 - completely

• 7 responses across 5 clusters

· Results triangulated with

interview data

community providers

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Waiora survey

partnership working

interviews

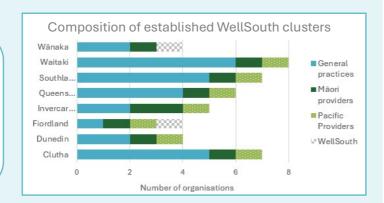
• 23 interviews

organisations

### **Overview of cluster statuses**

### **Employment model categories:**

- General practice(s) manage FTE – 3 clusters
- Community provider(s) manage FTE – 3 clusters
- Split FTE 2 clusters



### **Survey results**

## High performance areas

- Readiness to change
- Commitment to community engagement

### **Core areas for improvement**

- Systems thinking
- Trust
- Partnership synergy

Overall summary: Providers are open to change and collaboration but there is scope to strengthen relationships to enhance partnership working

## Interview findings

"[WellSouth] was very good at actually guiding or leading us into what we could and couldn't do" "We're a little bit stuck with the referral pathway... it's really hard to get consent"

"I got very disillusioned with the whole thing because it took so long"



## Collaboration and new ways of working

Huge value in bringing providers together and positive outcomes anecdotally reported

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## Balancing structure and flexibility

Flexibility to meet local needs was appreciated but some guidance and structure sought

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## Communication and relationships

Relationships with
WellSouth are generally
good but mixed messages
can damage trust



## Barriers to collaboration and service delivery

Barriers include short-term contracts, recruitment issues and data sharing concerns



## Process improvement opportunities

Delays a challenge for providers but improvement opportunities identified for WellSouth



## Looking to a future beyond CPCT

Concerns over the impact of loss of funding and ideas for alternative future funding models shared

"[CPCT] would be a huge, huge loss here because they're busy getting calls every day from whānau needing support"

## "The biggest positive of all of this is that I actually have got people I can call on"

"I liked that it was just one point of contact... I didn't have to talk to three different people"

## Considerations



Advocate for continuation of CPCT funding



Support providers to overcome referral pathway barriers



Continue network
coordination role
for providers



Consider taking a staged approach to large initiatives



More robust project management practices



whilst protecting autonomy



resourcing whakawhanaungatanga



ga and contracts

Specific to CPCT For WellSouth beyond CPCT

Wider system considerations

He mana tō te whānau Whānau Centred Tōkeke Equitable Manawa whakaute Respectful

Pono Transparent