WellSouth Primary Health Network
Hauora Matua Ki Te Tonga

Southern District Health Board
Piki Te Ora

Southern Primary & Community Care

Strategy and Action Plan

Update

October 2017

Kind Manaakitanga	Open Pono	Positive Whaiwhakaaro	Community Whanaungatanga

Disclaimer: Information to inform roadshow invitees only. The information in this report does not represent Southern DHB or WellSouth PHN policy

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Outline for today:

- Purpose of the Project
- A word from our sponsors – Chris Fleming and Ian Macara
- A bit about the project
- Recap on work undertaken to date
- A word about the new Dunedin Hospital
- Having your Say on our future system – Over to you!

A reminder of why we are all here:

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Part One: A bit about the project

Why develop a Primary and Community Strategy?

- We need to centre the system around people, in the context of peoples everyday lives - whānau and community
- We need to support people to stay well and where possible manage their own health in their communities
- We need to free up our acute services to be providing only acute care
- We need to strengthen the capability and performance of our primary and community sector
- Provide a clear direction and pathway for a 2030 vision of care in our district.

What's different this time?

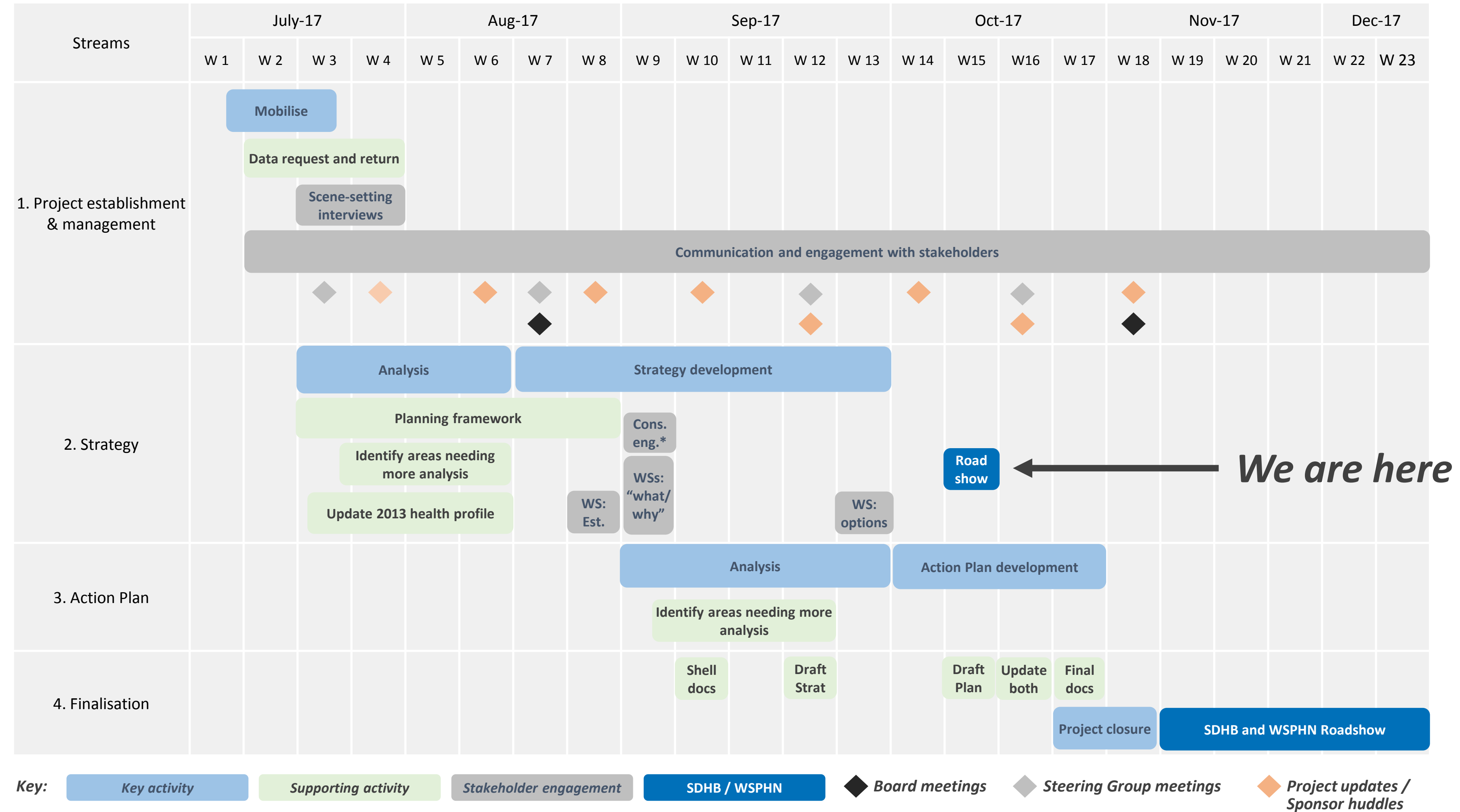
- Genuine partnership approach
- Great opportunity with the new build
- Need to deliver care that is better, sooner and more convenient
- New vision promoting One System…

What are the outputs?

Key deliverables

- Primary and Community Care Strategy (“Strategy”)
- Supporting Action Plan (“Plan”)

Project Timeframes



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Part Two: What we have learnt so far

Stakeholder engagement

Approximately **275 people** have been engaged as follows:

- **Direction setting workshop** – approx. 25 attendees,
- **Consumer engagement** – approx. 80 consumers through focus groups, in-depth interviews and wānanga in Dunedin, Invercargill and Queenstown
- **Sector engagement** – approx. 100 DHB, Wellsouth, NGO and GP attendees through workshops in Dunedin, Balclutha, Invercargill and Queenstown
- **Strategic options workshop** – approx. 70 DHB, Wellsouth, NGO and GP attendees in Balclutha

What we've heard so far:

Rural consumers can experience significant access issues

Information technology and other systems are not integrated

Previous planning exercises have not been fully implemented, and funding has remained constrained as demand has risen, leading to stakeholder scepticism that this time is different

Primary care business models have not adapted to changing population health needs and consumer preferences

Consumers experience access barriers, in particular to: routine radiology, mental health, after hours primary care

Persistent DHB financial deficit has limited investment in new care models and technology

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Sweeney consumer engagement summary

Perceptions of variable service quality

Access is an issue for all, but more pronounced in rural and remote areas

Variance of consumer costs between similar services can confuse consumers

Communication issues can frustrate staff and consumers

Consumers seek empowerment across primary and community care interactions

Consumers are interested in greater use of technology for consultations and access to information

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- **“ Using technology to improve services…..”**
- *“Having to drive to Invercargill for 2 hours for appointments that can sometimes only be 10 minutes long can put you at risk. I’d much prefer this.” (Queenstown)*
- **“Co-located services…”**
- *“I like this but some services can cost more at the GP – I went to hospital for eye tests and it was way cheaper so as long as the price doesn’t go up…” (Dunedin)*

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Wānanga

Tahi wānanga summary

Lack of continuity of care – Māori consumers often have to retell their stories, particularly the elderly, leading to whakamā (embarrassment)

Geographical isolation and the inability of poorer rural Māori to afford travel to their nearest primary and community healthcare facilities

No recognition of rongoā Māori / traditional Māori medicine and practitioners

Prejudice and disrespect – a common experience of "gatekeeper" attitudes, where Māori are treated without respect or dignity

There is a clear sense of lacking cultural understanding / understanding of Te Ao Māori (the Māori world and world view)

One size does not fit all – many Māori consumers feel that the current model of care does not cater to their needs

Are these also you concerns?
Do you have others?

Principles:

Do you agree that we have a responsibility to:

- Provide equitable access to appropriate care 24/7 regardless of the consumer's age, ethnicity, socioeconomic status or geography
- Reduce inequities of outcomes particularly for Māori and rural communities
- Make sure our population has the knowledge and skills to live well and self-care
- Make our health system easy to use for consumers and the health workforce
- Take a long-term view that moves from historic ways of working to be fit-for-the-future
- Treat each other with trust and respect
- Make all decisions in the best interests of our population and consumers rather than business, employment, professional or other interests
- Operate efficiently and effectively as one system, making the best use of available resources

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Strategic themes:

Do you agree that we should:

- Increase the capability of consumers and whānau to **self-care**
- Increase the capability of primary and community care to provide a broader **scope of services,** and lift the performance of services currently provided
- Better **coordinate care** within community settings, and between hospital and community settings
- Use **new technologies** to enhance access, strengthen diagnostic capabilities, and enable out-of-hospital models of care
- Develop **team-based ways of working** for people with more complex needs
- Create the necessary **infrastructure (e.g. care hubs, Electronic Health Record)** to support new primary and community care models, and integration with secondary and tertiary care
- Increase the capability of community providers to provide **step-up / down care**

Is this a useful vision?

World leading primary and community care that empowers people to live well, stay well and get well through integrated ways of working and use of new technologies

Now, over to you....

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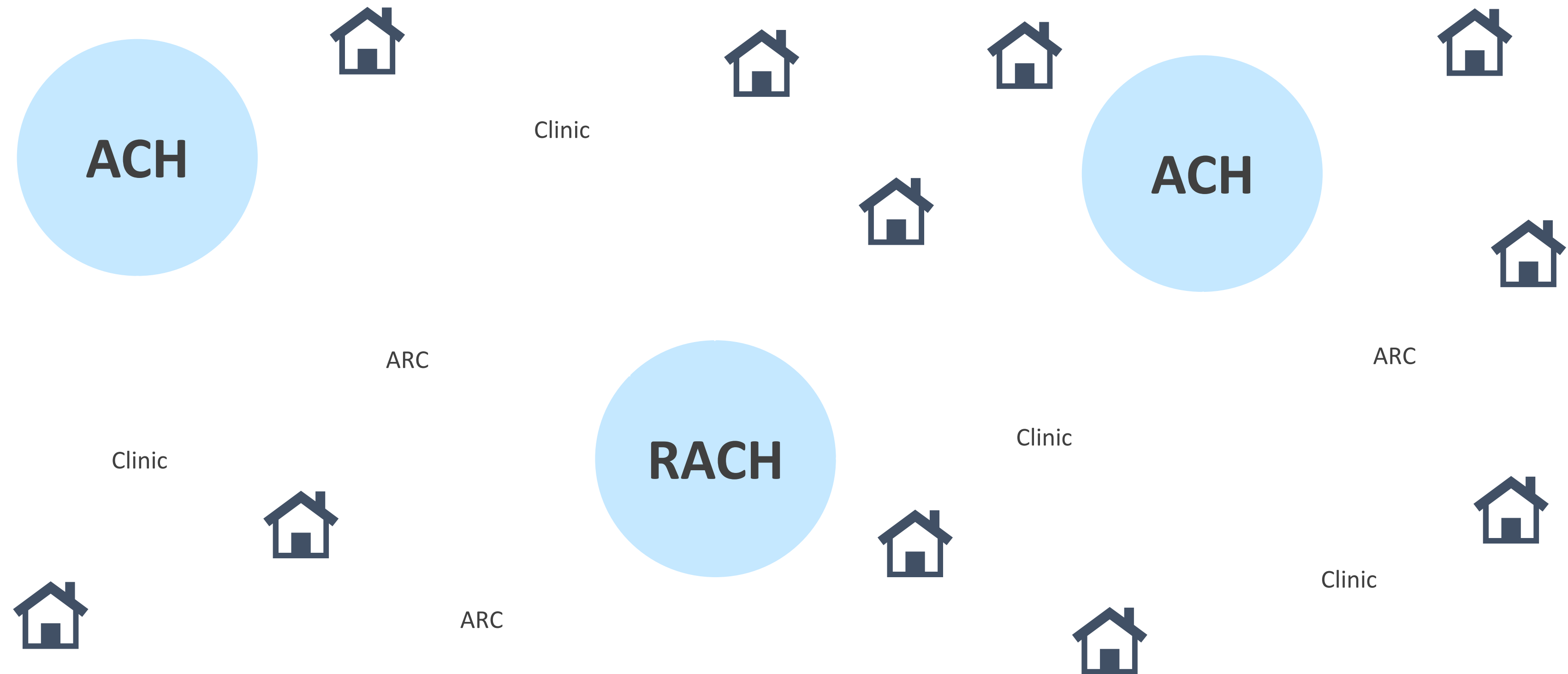
How might this look in 2030?

Examples…

Configuration…

70% of patients will be enrolled in ambulatory care hubs, with network arrangements to community clinics and providers



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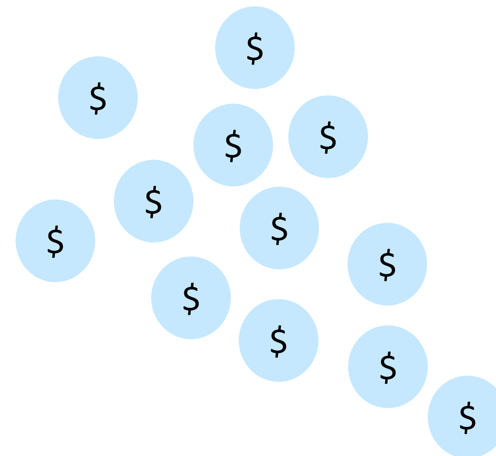
How might this look in 2030?

Examples…

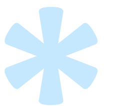
A more equal spilt of public funding resources…

Funding will have shifted to support the delivery of a broader range of out-of-hospital services



2017…

2030…

50%


** Note that these figures are illustrative to indicate a strategic direction*

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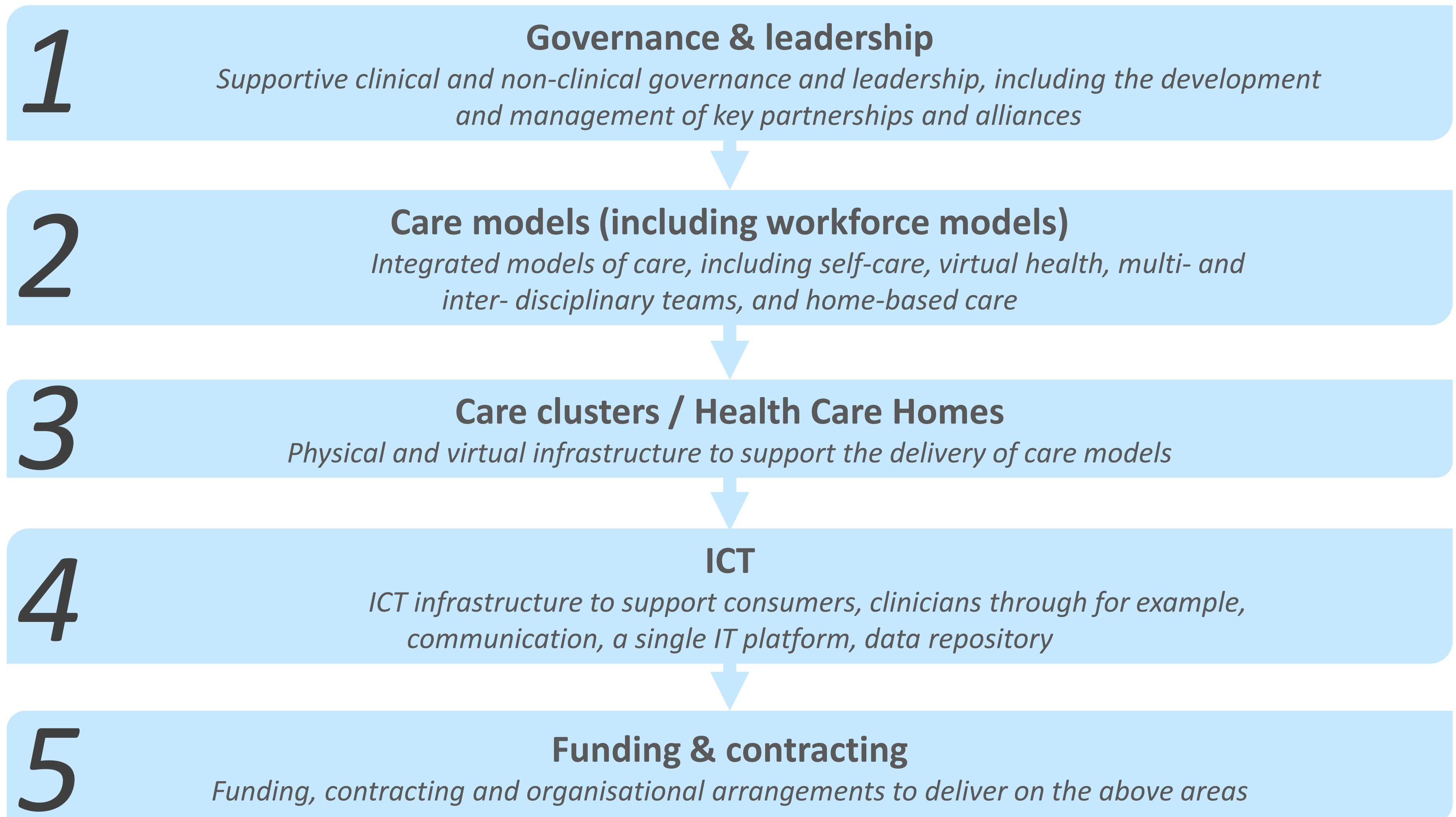
Delivering on the Strategy:

Potential Action Plan focus areas



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Next Steps

- Feedback from the community considered
- Draft Action Plan (mid October)
- Strategy and Action Plan finalised (end of October)
- Share Strategy and Action Plan with the community (November)
- Implementation

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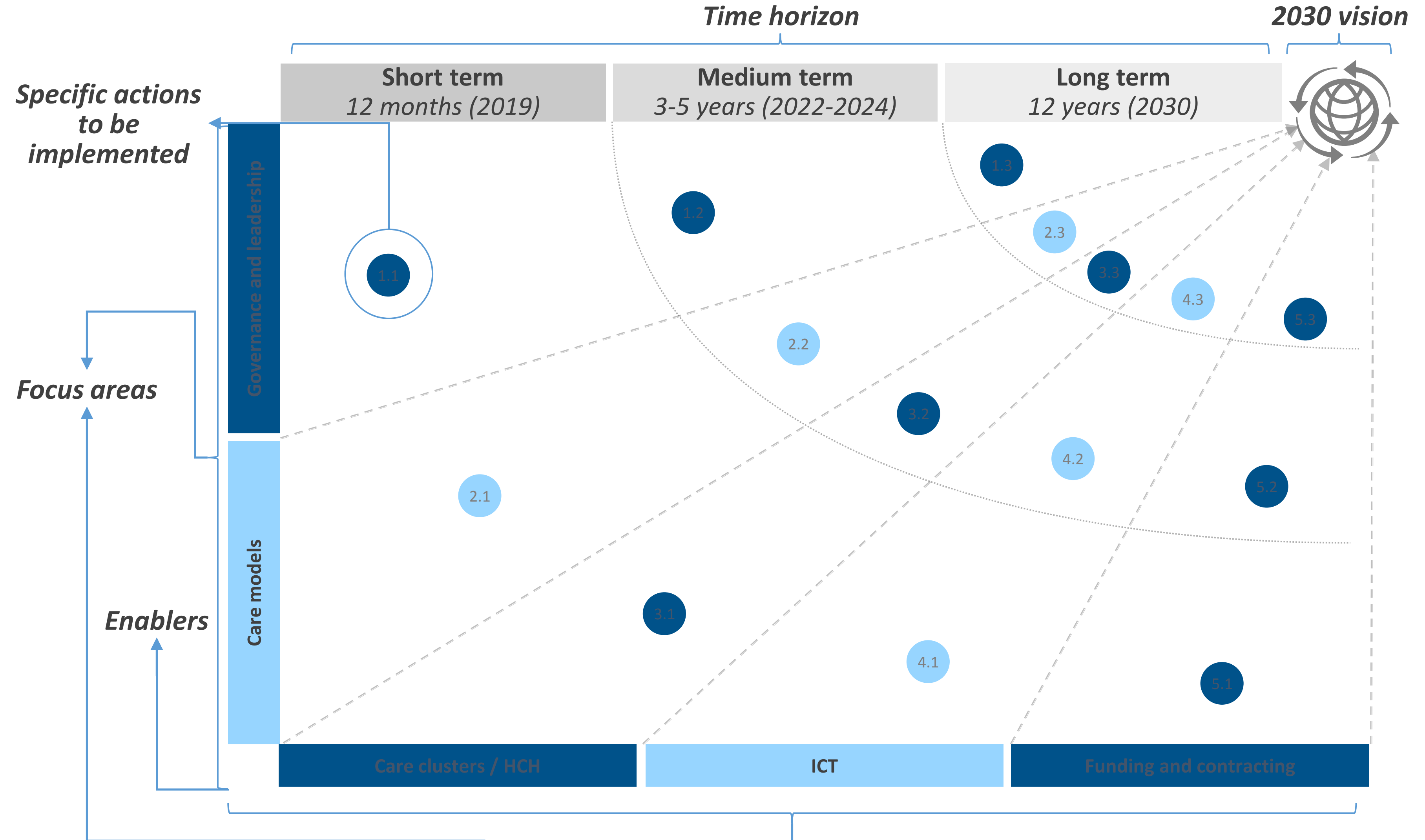
Roadmap of actions…



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Thank you for your contribution to shaping the Primary and Community Care Strategy and Action Plan, and safe travels home