

Prepared for Change

Building on the strengths of primary care to
reform Aotearoa's health system

APRIL 2021

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CHAIR'S WELCOME



*E ngā mana, e ngā reo, e ngā iwi
Tēnā koutou, tēnā koutou, tēnā tātou katoa*

The Health and Disability System Review has set the direction for the future of the health system in Aotearoa New Zealand, with a focus on population wellbeing, improved equity, integration, consumer participation and effective leadership. This is a once-in-a-generation opportunity to recalibrate health services and support, so that all New Zealanders experience better health. The organisations and people GPNZ represent have the expertise, leadership, relationships, insight and desire to support these changes.

Primary care providers in Aotearoa New Zealand already provide most of the health care to most of the population, most of the time. The imminent health reforms present a tremendous opportunity to deliver even better primary and community care services, that will be better resourced, better co-ordinated and better designed with and for the people they serve. Achieving this will require leadership from those skilled at working directly with communities, organising multiple providers and coordinating services based on specific community needs. We don't want to preserve the status quo – change is long overdue – but we do need to protect and enhance the skills, expertise and leadership that already exists in organised primary care.

GPNZ's stocktake of services provided by its members highlights existing competence and confirms the value of these skills to the future development of primary care. It shows the power of connection, communication, coordination and courage. The delivery of PHO services is largely invisible in the system much of the time. Even in my various roles where I get to see a great deal of what we do every day, I was stunned by the breadth and depth of the services and support our stocktake has highlighted – and I know there is much more value behind these words. I know too that we could add even more value given the opportunity, appropriate resources and support.

This is a snapshot of the difference we make in organised primary care – sometimes in spite of, not because of, the environment we work in. It captures the richness of what we do and the value this adds to the health system and, most importantly, to people and whānau.

I'm excited that the implementation of the review will give us the tools, resources and autonomy to do more of what we're good at, to support individuals, whānau and communities with even better primary and community care services.

Enjoy the read.

A handwritten signature in blue ink, appearing to read 'Jeff Lowe', written in a cursive style.

Dr Jeff Lowe,

GP Karori Medical Centre, Director Cosine PHO, and Chair, GPNZ

INTRODUCTION

The health reforms commencing this year present a tremendous opportunity to build on the strengths and successes of our current system. Creating primary and community care services that are better resourced and better co-ordinated will deliver proactive, person-centred and equitable outcomes for all New Zealanders.

Achieving this will require leadership from those skilled at working directly within communities, organising multiple providers and coordinating services based on specific community needs.

The purpose of this report is to highlight the leadership, the innovation and co-operation already occurring, the value of organisation in primary and community care, and the appetite for change that exists. We want to encourage growth in these skills and capabilities that already exist as the system is developed.

Established in the early 2000s following the Primary Care Strategy, Primary Health Organisations (PHOs) were created with the aim of strengthening primary care, by promoting integration between providers and facilitating seamless services for patients.

There are currently 30 PHOs across the country covering a population of 4.7 million, with populations ranging in size from 9,000 to almost 800,000.

The common factor among all PHOs is that they are all parties to the PHO Services Agreement and enrol patients. However, the mix of services and support functions they offer varies significantly, as each has evolved in response to their local communities, DHBs and provider environments. This report highlights those common services, as well as identifies some of those bespoke initiatives that have been developed in response to local need.

Under the PHO Services Agreement, PHOs ensure that first level services provided to patients meet a set of minimum requirements through a 'back-to-back' agreement with general practices, Kaupapa Māori and Pacific health providers. The Agreement also requires PHOs to work in an alliance with their DHB(s) to support the delivery of System Level Measures (SLM) – local quality improvement programmes.

In this report we illustrate the value and potential of well lead primary care, beyond the delivery of those core PHO Services Agreement functions. It captures the richness of the activities delivered and the value they add to communities and to health service provision as a whole. The content for this report has been provided by GPNZ's 22 member PHOs who provide services for over 4.2 Million enrolled people.

1 LEADERSHIP, GOVERNANCE AND COMMUNITY ENGAGEMENT

1.1 Background

PHOs play a significant leadership role in the development and delivery of health services in all regions of New Zealand. Working with general practices and other community providers, PHOs lead and support new initiatives, co-ordination of non-hospital services and connections between hospital and community-based services.

Most PHOs are very connected to their communities, with community representation in their governance structures and community engagement a key focus of their activity. They work with communities and community groups to understand specific needs and to support the development of services to address those needs.

This connectedness has resulted in joint ventures with Iwi, a greater voice for consumers in local systems and general engagement on the wider determinants of health.

1.2 Prepared for Change

PHO Governance

Most PHO Boards incorporate a variety of skills that contribute to effective governance. This is reflected in Māori representation (and Pacific in many areas), provider representation including GPs, nurses and provider owners, finance, legal and governance expertise. Some look for specific requirements that reflect their community, such as East Health which has an Asian community representative position on its Board. Many PHOs have consumer representation on the Board, and ProCare's Board is chaired by the consumer representative.

PHO Boards are supported by subcommittees whose members' skills usually include equity and population health, clinical governance, and finance and risk. Many PHOs also have a data and digital committee. Other committees and groups specific to PHOs include Pegasus' research committee, Pegasus' culturally and linguistically diverse (CALD) health advisory group, Tū Ora's mental health advisory group, Western Bay of Plenty's after-hours advisory committee, THINK Hauora's cluster alliance groups, ProCare's Youth Advisory Committee, and Alliance Health Plus' Pacific people's health advisory group. Some of these advisory groups advise the system more broadly than just PHO activities.

It is a requirement of the PHO services agreement that PHOs will be in an alliance with their DHB(s), though alliance effectiveness has been varied.

All PHOs are not-for-profit organisations and must deliver against their constitutional requirements transparently. Despite not being public entities, they openly report the use of public funds to DHBs and the public.

Executive Leadership

There are several PHO CEOs who sit on the DHB executive team(s) as a fully participating member of DHB Executive. They generally also participate on DHB committees and are regularly present at DHB Board meetings.

In addition to standard operational leadership roles, most PHOs have clinical leadership at an executive level, typically part-time roles filled by practicing primary care clinicians. These roles are usually undertaken by GPs, but many PHOs also have nursing leadership roles.

Most PHOs also have a Māori health leader who reports to the CEO on matters of population health, equity and Māori engagement. In some PHOs there is also a Pacific leader on the Executive.

PHO Executive team members regularly participate in programme and project steering groups to support the system at a local level. All participate in System Level Measure (SLM) groups focused on planning, performance review and improvement.

Other groups PHOs often participate in locally include: Access and Choice (mental health), Acute Care, Suicide Prevention and Postvention, Youth Health, Frailty and Falls, Smoking cessation and Tobacco control, Bowel screening, Immunisation, planned care, Winter Planning, Breast and Cervical screening, Community Nurse Prescribing, Maternity Care, Diabetes, antimicrobial stewardship, pharmaceuticals and prescribing, healthy ageing, pathways and other specific local project activity.

At a national level, PHOs often contribute to working groups and governance committees to support national programmes. Examples include: Patient Experience Survey facilitation, Privacy Officers Round Table, HINZ, NENZ, and Groups to support Ministry of Health Programmes such as CSC and NES rollouts, and Healthy Families New Zealand.

Liaising with Māori

As well as having Māori representatives on their boards, PHOs often have partnerships with local mana whenua, Māori providers, Māori Community Services and the Whānau Ora Networks.

Examples include the Western Bay of Plenty Joint Venture with Iwi, and the THINK Hauora joint ownership of general practices with Iwi in Horowhenua.

Whilst most Māori are enrolled with mainstream providers, and most often present at their local GP, many of the supports needed are not within the scope of general practice services. Relationships and coordinated services are essential to support improved Māori health outcomes.

PHO relationships with Māori providers have resulted in specific initiatives including:

- Enhanced models of care reflecting specific community needs - such as the Hauraki model of care developed in collaboration with general practices, funders, iwi, Kaupapa Māori Providers and other key stakeholders to support the social wellbeing and clinical outcomes.
- Cross agency groups who work together to find local solutions – such as Te Kāhui o Papaki Kā Tai, a Pegasus funded and administratively supported Canterbury-wide Māori health reference group.

Telehealth for Matakana and Motītī

Western Bay of Plenty PHO, supported by the DHB and local council, has worked with iwi to establish a telehealth service to the island communities of Matakana and Motītī. The intent of the project is for true engagement and co-design of a telehealth service with the island communities, honouring the principles of Te Tiriti o Waitangi (Tino Rangatiratanga, Active Protection, Partnership, Equity, Options). Mana whenua are partners and co-designers in the project. Through better understanding of perspectives, current experiences with the health system and preferred solutions, a model of care has been developed to improve their overall health and access to services.

Community Engagement

PHOs often participate in activities that reflect the broader determinants of health at a local level and sometimes drive these initiatives.

It is common for PHOs to work with agencies such as Oranga Tamariki, Ministry of Social Development, Justice, Department of Corrections, Police, ACC, Ministry of Education, Emergency Management, Territorial Authorities.

They also work with local NGOs and providers such as Plunket, midwives, pharmacists, home care providers, schools, Kohanga Reo, churches, welfare coordination and food banks, YMCA, Salvation Army, Youth Groups and condition specific groups and societies such as the Cancer society, Alzheimer's, Diabetes, Stroke Foundation etc.

PHOs often participate in research studies and are engaged with the academic community.

Housing in the Hutt Valley

Te Awakairangi Health Network (TeAHN) works with Hutt City Council and Kainga Ora to support the provision of health and social services in new housing developments, and with Corrections on a project to support inmates prior to release and when released to engage with a GP and address their health care requirements.

1.3 Looking to the Future

PHOs have demonstrated an ability to provide leadership in an engaging and inclusive way. They have demonstrated an ability to work with other organisations and support change. With the proposed development of localities (neighbourhoods of health and social care), leadership and community engagement skills and experience are going to be required to:

- Include iwi voices in governance and decision-making to give effect to the principles of Te Tiriti o Waitangi,
- Connect communities, consumers and providers in order to understand, plan and deliver integrated services that will deliver better outcomes for people,
- Build on existing relationships and build trust in new systems to ensure meaningful community engagement, and
- Lead the change required at a community level.

Waimarino Wellness services

Whanganui Regional Health Network (WRHN) is working with iwi in Waimarino to develop a culturally appropriate wellness service and centre along with Whanganui DHB.

WRHN currently owns the general practice with a plan to return this to local community ownership as the new service develops.

This has provided continuity of service for the population and the space for a sustainable community-focused service to be developed.

2 POPULATION HEALTH AND CLINICAL PROGRAMMES

2.1 Background

Needs analysis, quality improvement initiatives, government directives and community feedback all lead to new clinical service developments. PHOs are often the drivers of new clinical initiatives and are generally responsive when new initiatives arise. It is not always possible to source capacity within existing providers to support delivery of local clinical programmes nor is the capability always available. As a result, almost all PHOs have developed clinical delivery services to respond to specific local needs, usually where capacity and capability is not available locally.

2.2 Prepared for Change

There are a number of standard areas in which most PHOs provide clinical services. These include:

Primary mental Health (mild to moderate)

- Counselling and psychotherapies.
- Many PHOs have now rolled out at least the first tranche of Access and Choice programmes – providing health improvement practitioners and health coaches to provide hands on timely support in general practice, such as those in the Te Tumu Waioira programme.
- Youth specific mental health services.
- Access to online mental health tools and guides for their use.
- Some PHOs have introduced group therapy programmes.
- Extended GP consultations.

Piki Mental Health

Created by the lower North Island PHOs, Piki provides free mental health support to 18 to 25-year olds in the Greater Wellington Region using youth friendly apps and tools and available via self or assisted referral. Over 5000 young people have accessed Piki services since 2019.

Long Term Conditions Support

There are a variety of long-term conditions programmes provided by PHOs and in most instances funded programmes are targeted at high needs populations. In some instances long-term care funding (including Care Plus) is provided to practices flexibly so that they can develop the most appropriate plans providing specific services for their population.

The provision of clinical services can involve the coordination of existing local providers, and in some instances the PHO or Network will employ resources to deliver the programme. Programmes in most PHOs include self-management support, diet and nutrition, weight

management, stress, pain, wellbeing and other health promoting programmes which are delivered in many areas. Specific programmes generally fall into the following areas:

Taupo and Turangi Health & Social Care Hubs

In Taupo and Turangi, Pinnacle has supported the development of health and social care hubs, bringing together primary care and other community providers to plan and deliver integrated services targeting support for patients who need it most.

A team including a social worker, dietitian, community support worker, Māori peer support workers, clinical pharmacist, an exercise consultant and mental health workers partner with providers in practices, NGOs and iwi health providers to provide integrated assessment and care planning for high needs patients with long term conditions.

Diabetes:

- Diabetes care improvement programmes.
- Podiatry for moderate to high-risk foot care needs.
- Retinal screening.
- Clinical diabetes specialist nursing support.
- Prediabetes programmes.
- Annual Diabetes Reviews.
- Insulin starts and support.

Respiratory:

Improved access to general practice services for priority patients with respiratory conditions. Many PHOs also support programmes for this specific cohort including:

- COPD group therapies including choirs.
- Funded spirometry access.
- Home based pulmonary/COPD rehab.
- Walking groups.
- Clinical Respiratory nurse specialist services.

Ngā Kaitiaki Manawanui Whai Ora

Hauraki PHO delivers the Ngā Kaitiaki Manawanui Whai Ora programme with a mobile support service targeting vulnerable and hard to reach patients, many of them in rural communities. General practices make referrals to the mobile Whānau Ora long term conditions service which offers wraparound support from three PHO teams made up of nurses and kaiawhina. The team establishes a close relationship with people and their whānau, working with them over a period of months according to individual and specific needs.

Immunisations:

All PHOs run and support immunisations programmes to ensure the national immunisations schedule is delivered on. This includes supporting general practices and outreach providers with targeted activity such as flu campaigns for priority populations and catch-up programmes for all immunisations. Currently this resource is focused on MMR and HPV. PHOs provide logistical, data and often workforce support to achieve coverage, especially for priority populations.

Many PHOs also support the coordination of the local immunisations services which includes supporting cold chain and workforce accreditation. The accreditation support takes place across all immunisers including general practice teams, pharmacies, occupational health and other community-based services. These services also support the National Immunisation Register which involves ensuring data is up to date and accurate and supporting national development of the system.

Palliative Care:

Most PHOs provide support for patients and whānau when someone is in the last six months of life. This support usually comprises funded primary care, in-home support and co-ordination between hospital and community care including hospice. PHOs often support and promote advanced care planning initiatives also.

Screening Services:

Screening service support generally includes identification of at-risk populations, or those meeting clinical criteria, support for improving access to screening and treatment. These services are supported for a variety of screening initiatives including:

- Bowel screening,
- Breast screening
- CVDRA
- Cervical screening

Screening Innovation

An innovative partnership between Western Bay of Plenty PHO and a local nursing team has resulted in more people being screened. Practices can refer patients overdue for services such as breast and cervical screening, CVD risk assessment or those who haven't been reached to receive advice on how to quit smoking.

Planned and Acute Care Programmes:

Often referred to as Primary Options for Acute Care (POAC) or Continued Primary Options (CPO), most PHOs support the provisions of services that have traditionally been delivered in hospital, in primary care settings. The intention of these programmes is to keep people out of hospital. These programmes have usually been developed by a collaborative team across primary care and hospital-based teams with PHOs playing leadership roles.

Infusion Services

At Cosine PHO Aclasta infusions are provided by the general practice nursing teams delivering care closer to home, saving patients regular visits to the hospital.

The services provided by PHOs include managing the funding, developing and managing clinical programmes, supporting clinical governance and developing capability and capacity. Provision usually includes skin lesion removal, community radiology, acute urinary retention, wound care, DVT and cellulitis management, rehydration and gynae procedures such as Mirena insertion and pipelle biopsy.

Whilst not strictly POAC or planned care, in some places the funding programme also supports funded urgent care access for non-enrolled or financially destitute, ED-Redirect pathway where patients with lower acuity presenting to ED are redirected to an Urgent Care Centre for free services.

Other Clinical Programmes

There are a variety of local clinical programmes that are designed to support specific community needs. These might include:

- Rheumatic Fever - Timely assessment and treatment, Bicillin followup and managing the Electronic Rheumatic fever register.
- Cardiovascular disease programmes.
- Sleep Apnoea.
- Refugee health programmes, which usually include enrolment support, medicines use reviews, funded packages of care, navigation.
- Falls prevention and management.
- Sexual health and contraception.
- Gen 2040
- Maternity programmes.
- Positive parenting, activity lifestyle and raising Healthy Kids.
- B4SC
- Access to diagnostic such as access to ultrasound - query DVT, Accelerated Chest Pain, GP- Referred MRI, imagery.
- Surgical clinics

Equally Well

Kimi Hauora provides Equally Well - a physical health check in general practice for those with Metabolic syndrome.

Health promotion programmes

- Smoking cessation, which may include some or all of the following - ABC and quit card, including outreach, cessation support, counsellors and service co-ordination. PHOs also deliver and support specific local programmes sometimes focused on target groups such as Wāhine Māori.

- Alcohol Harm reduction
- Green prescriptions
- Transport to health
- Interpreting services to support access.
- Self-management programmes delivered in community sessions and with community groups such as churches, delivered by lay people.
- Wellness and family health coaches.
- Healthy eating and food preparation programmes in the community.
- Resilience programmes.
- Health system education for new migrants.
- New-born enrolment.
- School services such as clinics, skin care packs, tamariki dental programmes, enhanced school-based services, year 9 wellbeing programme, school leavers health information packs.
- Health Promotion activities at events such as waka ama nationals, Whānau Ora and Mana Wahine events, Te Matatini and other local events such as Children’s Day, Older Persons Health Expo, Polyfest, Suicide Prevention Hui, Strengthening Youth Sector Hui, and World Refugee Day.

Best Start to Life

More than 400 young pregnant women in South Auckland have received help and advice through the Best Start to Life programme, funded by Total HealthCare PHO. Supporting and empowering Māori and Pasifika pregnant women under 22 years old, the programme helps navigate health and social services and delivers a course to support pregnancy and a healthy life beyond.

System Support Programmes

In addition to clinical programmes and health promotion, PHOs provide specific services in the following areas:

- **Health Pathways**
PHOs have been instrumental in the development of health pathways nationwide. Health pathways support clinicians to navigate services and support clinical decision-making.
- **Emergency Management**
PHOs play a key role in emergency management. This has been evident during Covid but also for other issues such as the Christchurch Earthquakes, Havelock North water crisis and recent lead in the water issues in Otago.
- **After Hours**
A number of PHOs are involved in the ownership and or management of after-hours services to ensure services are available for communities.
- **Patient Experience Survey**
PHOs support access to the Primary Care National Patient Experience survey, and support practices to review results and consider service adjustments as a result. PHOs have also supported the national working and governance groups.

**Whakarongorau Aotearoa
(Homecare Medical)**

In 2015 Pegasus and ProCare grew the Homecare Medical organisation from a limited service providing after hours clinical support for general practices to provide telehealth services to all New Zealanders, offering free health and mental health and addictions support across a range of digital channels.

Homecare Medical has been central to supporting the response to some of significant events including helping to manage the ongoing effects of the Christchurch mosque attack in March 2019, through to the measles epidemic and the Whakaari eruption to making a significant contribution to the response to COVID-19.

With an average of over 4,000 contact received each day, Homecare Medical ensures that every New Zealander has access to free, high quality health advice and support, 24 hours a day, seven days a week, 365 days a year.

2.3 Looking to the Future

The health reforms will require expertise in the development of clinical services across existing providers in primary and community care localities. To grow and co-ordinate existing services and develop new clinical services the following skills can be enhanced from within organised primary care:

- To work with local communities to identify needs and gaps and to understand how these might be addressed.
- To work across providers maximising their strengths and growing required local capability.
- Strategic skills to support local system planning and envisage new services.
- To evaluate existing services and drive quality improvements to ensure services address community needs.
- Specific service development skills including service design, workforce development, clinical governance, evaluation, monitoring, communication, and engagement.
- Experience in safely transitioning or winding down services that no longer meet the needs of the community.

3 WORKFORCE DEVELOPMENT

3.1 Background

Securing a workforce that has the full range of clinical skills to meet community needs remains one of the most significant challenges for primary care in New Zealand. With support from PHOs, some health centres have been able to develop extended teams with a wide breadth of professional skills, to complement and enhance traditional general practice roles. PHOs have worked hard to support their local workforce by supporting recruitment, retention and role development in the medical and nursing workforce. PHOs are also supporting the growth of roles such as clinical pharmacy, health care assistants, navigators and health coaches. There has been a particular focus in recent years on development of new roles in primary mental health.

3.2 Prepared for Change

Some of the key areas of activity that PHOs currently undertake include:

Growing and retaining the workforce

- Supporting practices in offering placements to junior doctors at PGY1 and PGY2,
- Inducting GPs who are new to the region in local contractual variances in programmes and funding,
- Development and delivery of primary care assistant training programmes,

Maintaining skilled practitioners

- Supporting practices to offer placements to newly qualified nurses through the Nurse Entry to Practice programme,
- Supporting nursing portfolio work,
- Offering clinical training and system information sessions for GPs and nurses as part of continuing education requirements,
- Personal development, peer support opportunities, induction training and forums for practice managers and administrators,
- Supporting provision of specific training such as smear taking and CPR,

Cultural Competency and supporting the prioritisation of Equitable outcomes

- Provision of and driving engagement with Te Tiriti o Waitangi and cultural competency training, especially local tīkanga,
- Training to grow capability for working with a diversity of cultures,

Quality

- Training on specific system developments such as implementation of patient portal and the national enrolment service,
- Supporting practices with implementation of Cornerstone accreditation which supports development of the workforce.

Services provided by some PHOs:

Some PHOs provide specific support in additional areas including:

- Support for attendance at conferences and events,
- Supporting nurse prescriber and nurse practitioner training for Māori and Pacific students,
- Offering work placements and funded internships – particularly for Māori and Pacific candidates,

Workforce Sustainability

THINK Hauora along with the primary care teams in their network, has developed a workforce sustainability road map focusing on:

1. Developing the pipeline
2. Telehealth development
3. New ways of working

Supporting Pacifica Interns

Alliance Health Plus funds Pacific Interns from Tupu Toa, University of Auckland, University of Otago, AUT, and MIT to provide health experience to further their career development.

- Non-clinical professional training in areas such as motivational interviewing and project management,
- Clinical training for specific programmes related to planned care such as skin lesion removal, spirometry and diabetes management,
- Health Care Home implementation training and clinical change management facilitation,
- Kiwi Host branded training for general practice administrators.

Adding Value:

PHOs across Aotearoa New Zealand have been focused on developing local workforces to support the needs of specific communities. These developments have often been shared with other PHOs:

- Development and training of specific roles such as Kaiawhina, navigators and health coaches
- Delivering Advanced Clinical Life Support Training
- Child protection training
- Family violence training
- Hauraki PHO provides specific local tikanga training for providers
- scholarships for local high needs youth wishing to study medicine are provided by Rotorua Area Primary Health Services
- Think Hauora has developed a specific workforce sustainability roadmap co-designed with the network.
- The Pegasus Small Group education programme is now operating across a number of PHOs
- ProCare has developed a comprehensive cultural competency tool kit for general practices.

Self-Management

Training lay people to deliver Stanford Self-management courses in the Wairarapa has not only helped Tū Ora to grow the delivery team, but also supports an accessible approach for participants, and provides them with a door-opener for a potential career in health.

3.3 Looking to the Future

It is vital that the upcoming reforms of the New Zealand health system nurture and grow the capacity and skills of the primary care workforce. PHOs have experience of:

- Developing programmes that encourage trainees to experience and enjoy primary care
- Supporting practitioners to maintain their accreditation and skills, and gain confidence in new areas of interest
- Organising appropriate mentorship, peer support and in some cases pastoral support for clinicians
- Supporting the development of back-office teams to ensure the smooth running of clinical services
- Monitoring the workforce and planning for the future
- Developing skills associated with new ways of working including change management, resilience, leadership and relationship building.

4 GENERAL PRACTICE SUPPORT

4.1 Background

General practices are provided with a wide range of significant hands-on practical support from PHOs, including training, model of care development, provision of specific workforces, help to manage policy requirements, and tools to enable improvement of both clinical delivery and business operations.

Without this direct support, practices would struggle to meet quality standards, adapt to wider system changes and proactively work on improving services for their communities.

PHOs have supported significant changes in the way the general practice model of care is delivered. This has had an impact more broadly than just within general practice, making providers easier to work with and change ready and has built stronger relationships within local systems.

What has been developed is an in-depth understanding of how to support providers through significant change to improve systems and get better results for patients and populations. Providers need a wide range of business and clinical support, from managing finances and IT systems to ensuring quality standards and achievement of key targets. Constant change in the system requires practical and relevant advice and support for individual providers.

The evolution of the Health Care Home model of care in Aotearoa is a high-profile example of a primary care network stepping in to find an innovative and sustainable solution to address issues raised by the community and care providers. Supports - whether large or small scale - are derived from an understanding of what the community needs, applying a sound approach to problem solving, focusing on quality improvement, building from the bottom up and sharing openly with others to scale solutions nationally.

Some of the support services highlighted in this section are offered beyond general practice to other providers, including youth services, school clinics, aged residential care, corrections, detox centres and community clinics. Support services are also often delivered across multiple providers, helping to develop relationships, build multi-disciplinary teams and moving towards a networked locality approach.

4.2 Prepared for Change

Foundation Standard and Cornerstone Support

PHOs offer practices a range of tools and advice to enable them to achieve the Foundation Standard set by the Royal New Zealand College of GPs (RNZCGP), ensuring a standardised level of quality is available in primary care. This includes supporting policy development, providing training, organising, and in some cases delivering, assessments. Many PHOs also support the achievement of the RNZCGP Cornerstone accreditation, particularly for those practices wishing to achieve or retain teaching practice status.

There is no consistent approach to funding Foundation Standard and Cornerstone on behalf of practices - some PHOs fund the whole process for their practices, others don't fund any of the process, whilst still providing support.

Some PHOs require that practices have Cornerstone accreditation or are working towards it. For some PHOs Cornerstone forms part of their quality framework.

Workforce provision

PHOs have been able to provide additional workforce resources into general practice to support clinical work on the ground, based on locally identified priorities and need. This has often been done in collaboration with DHBs. Workforces provided have included:

- Clinical pharmacists
- Specialty nurses (e.g. long term conditions, transitional care, palliative care)
- Health improvement practitioners and health coaches
- Kaiawhina, social workers, outreach support workers and navigators

- Discharge co-ordination staff
- Self-management experts, exercise consultants, nutritionists, and dietitians.
- Mental health practitioners
- Maternity support workers.

In addition to clinical staff, some PHOs have supported practices with locum practice manager and administration staff to help manage busy periods, targeted project management support to enhance service provision, and specialist resources to help with health target activity such as smoking cessation.

Many PHOs also support general practices to source staff including GPs, nurses, administrative staff, and locums. Some also provide HR support for recruitment processes, which may include advertising, working with agencies and working with the Medical Council to expedite overseas recruitment.

IT and systems support

Expectations of primary care information systems and technology have become increasingly demanding and some practices have struggled to keep up the increased complexity and sophistication. PHOs generally provide at least some IT systems support to practices. This will usually include:

- Advice and guidance on procurement of systems – some PHOs have centralised the procurement of specific systems and supported the purchase financially.
- Supporting implementation of new systems and integration with wider primary care and hospital systems.
- Advice and support on purchase of phone systems.
- Provision of a specialist help desk service to support individual systems and provide trouble-shooting.
- Liaison with technology providers on enhancements, developments, and fixes.
- Some PHOs provide application hosting, licence purchasing services and business continuity support.
- Coordination of system initiatives such as e-prescribing.
- Support for shared care records and shared clinical information across providers.
- Support for initiatives such as implementation and management of patient portals.
- Provision of claiming systems for practice funding.

Development of Health Care Home (HCH)

Many PHOs are involved in supporting and delivering the HCH model within their practices. Some PHOs have identified a different model of care (not HCH) but offer similar levels of support to their practices. Support typically includes:

- Overarching support for implementation of the programme including gaining DHB and practice involvement
- Project management and change management at a system and practice level
- Funding and performance management
- Promotion of the model to the community
- Working with other local providers including Māori providers and Iwi
- Provision of training and resources for providers.

Health Care Home

First introduced by Pinnacle Health Network ten years ago, the Health Care Home model has been adopted by more than 175 general practices across Aotearoa, with practical support from PHOs. An evidence-based approach to primary care that contributes to improved patient and staff experience, better quality of care, and increased sustainability and efficiency of Services, the model consists of four domains:

1. Timely provision of urgent and unplanned health care;
2. Planned proactive care for people with complex needs;
3. Systematic routine and preventative care; and
4. Sustainability.

National/local project support

PHOs actively support the planning and rollout of initiatives at both national and local level, typically with representation on both national and DHB working groups in advance of significant projects, as well as providing practical support for implementation of programmes in the general practice environment. This includes the roll out of the national enrolment system, implementation of community services cards, audit of primary care ethnicity data audit, and introduction and management of System Level Measures.

The support at general practice level includes required infrastructure changes, provision of templates, data extraction, liaison with IT providers, education, specific training and communications.

Administrative support

Specific administrative support is provided to general practices in a wide range of areas including:

- Payment of capitation and other funding
- Setting fees and fees reviews
- Business and infrastructure decisions (e.g. financial and data modelling scenarios, new buildings, new sites, expansion, practice ownership)
- Liaison between practices, DHBs and other organisations
- Provision of website templates, website hosting and promotion of online fees information
- System compliance and audit processes (such as Healthshare, enrolment, claiming, and annual practising certificates)
- Payment calculations and claiming
- Capacity planning, service volumes and reporting
- Cold chain accreditation
- Procurement support (e.g. group purchasing of licences, text servicing, office equipment, and IT services)
- Police vetting of core workers
- Emergency response and business continuity planning
- Mentoring and coaching practice managers on HR matters, workforce recruitment and retention, and team culture.

Musculoskeletal Services

In 2017 ProCare partnered with ACC and Mercy Radiology to pilot a scheme where GPs could refer patients with certain musculoskeletal injuries directly for an MRI, rather than having to be referred by a specialist.

This new referral pathway has been hugely successful, with patients waiting on average three weeks less for an MRI appointment. The new approach has also significantly improved access to MRIs among young people and Māori and Pacific communities.

Following the successful pilot, in 2018 the service expanded to all ProCare general practices and all six private radiology providers in Auckland and is now being delivered in other parts of the country.

Performance reporting

Performance reporting is a key area in which all PHOs provide support to their practices. Many provide practices with their own portals or dashboards to understand individual performance more effectively, supporting decision making on equity, capacity, efficacy and efficiency.

Information provided to practices generally focuses on clinical indicators and supports quality improvement in target and priority-related activity. PHOs can deploy local population risk stratification and cohort identification with some systems capable of collating information by population demographics and geo-spatial netblocks.

Portals tend to highlight equity issues and equity focused performance, with PHOs providing analytical and business improvement expertise to support the data available, ensuring practices can make best use of information to improve outcomes, particularly for high needs communities. This is often supported by a data governance group or process.

Some PHOs also use data, with permission, to support community health needs analysis and other research projects on behalf of their local populations.

Communications

PHOs provide regular consolidated communications to providers to keep them up to date with activities across the system, including sharing clinical information. PHOs use a variety of methods including hard copy and e-mail newsletters and bulletins, practice portals, webinars, conference calls and face-to-face meetings.

Infrastructure and sustainability

A number of PHOs are instrumental in supporting the sustainability of primary care by ensuring practices don't close when, for example, key people retire. In some instances, PHOs have purchased practices that may otherwise have collapsed to ensure that the population can continue to be served.

Some PHOs have worked with their providers on workforce sustainability planning, covering not only general practice but also the wider primary care workforce, such as community pharmacy.

4.3 Looking to the Future

There is a need for both large scale and small-scale innovation and problem-solving capability based on population insights at a wider community level. Providers typically don't have the capacity for long-term planning and strategic development and need to draw on expert resource.

Key capabilities that have been developed that will support further improvements and growth within primary and community care include:

- Innovation – Capability to find solutions, work them up and implement them in a challenging and complex system with multiple drivers and constrained resources
- Change management - The ability to drive change with and across a range of providers, not just general practices
- Service development - The ability to respond to the community and develop services accordingly; experience in applying continuous improvement programmes and innovation skills and to share and scale learnings.
- Effective processes - Experience in supporting providers to ensure systems and process are working effectively and to adapt to new system requirements.
- Quality – The ability to focus on service improvement, set expectations and track delivery in terms of quality measures.

5 DATA AND DIGITAL

5.1 Background

Technology support provided directly to general practice is a substantial proportion of the overall support PHOs provide to their member practices (see General Practice Support Section 4). However, wider data and digital expertise and innovation beyond the general practice is an important and growing part of what PHOs do.

5.2 Prepared for Change

Data Services:

Business intelligence and analysis teams are now embedded within most PHOs. These teams undertake a range of functions including:

- **Standards and specifications** - establishing and sharing data standards and specifications that support consistency, quality and analysis.
- **Data engineering** - managing secure data sharing principles, data modelling, analytics infrastructure and architecture
- **Business intelligence and decision support** - including development and maintenance of data collections, often in a data warehouse. PHO teams often manage the design and testing in house.
- **Data analytics** – PHOs provide analytic services to support health needs analysis, service development and quality improvement initiatives across PHOs and in collaboration with DHBs. This includes supporting clinical, population and management dashboards, planned and ad-hoc reporting as well as insight generation, infographics, videos, and storytelling through data.
- **Reporting services** - PHOs provide a wide range of data and analysis to support quality reporting to DHBs and the Ministry of Health. PHOs are skilled at sense testing data, including identifying and investigating anomalies and variation. Some PHOs conduct peer benchmarking exercises to identify inconsistencies and support quality improvement, the results of which can be used to support decision-making.
- **Data stewardship and governance** – PHOs need to ensure that data – be it clinical or financial - is collected, stored, used and shared appropriately through an agreed set of local rules. This often includes master data management, data quality controls, data contracts and relationships, data literacy, end user training, privacy and security, and business rule development.
- **Data Sharing** - Working with DHB colleagues, PHOs support system-wide access to information including patient and specific clinical services data held on hospital platforms, through initiatives like Health One which facilitates shared care records in the South Island. These initiatives require innovation, tenacity and trust, and relationship development skills from PHOs combined with technical IT skills.

ERMS

Since 2010, Pegasus has developed and delivered the ERMS electronic request management system that is now used across the whole South Island with more than 400 referral types of requests and 2300 active service providers. This provides:

- Over 800,000 referrals between primary and secondary care each year
- A system that is fully integrated into the general practice PMS
- has referral forms that integrate with Health Pathways
- supports e-triage where required
- valuable demand and wait time insights.

Procurement and support

PHOs provide a variety of procurement support for general practice and sometimes for other providers to support quality and up-to-date IT systems. This improves buying power with vendors and achieves greater value for the health dollar. This support can include:

- Purchasing licences such as Dr Info, decision support tools, MIMs

- IT hardware purchases (including support through installation)
- Supporting practices to select, secure and implement PMS solutions
- Hosting and templating websites with content management support

Telehealth

PHOs have developed telehealth solutions and continue to support providers on their telehealth journey. They are also instrumental in promoting telehealth services to populations. Use of telehealth in general practice largely started with patient portals, but PHOs - particularly those involved in the Health Care Home model of care - have been promoting use of telephone and email options for consultations for several years.

The value of this was demonstrated in March 2020 when providers quickly had to adapt how they offered services and engaged with their patients during lockdown. COVID-19 was a driver for PHOs to further develop their telehealth services and expertise. They supported practices to build capacity with telehealth services such as e-prescription, rescript, and eOrder.

To support providers with their telehealth solutions, PHOs generally provide:

- 'How to' guides, policies and recommendations on processes and hardware to deliver quality services and keep everyone safe.
- Resources for patients to promote the value of telehealth and explain processes
- Support for addressing barriers to access for specific populations, including advocating for data free telehealth services
- Practical implementation and go-live support.

Additional specific Initiatives provided by individual PHOs include:

- a consistent telehealth service delivery model and PMS agnostic virtual consult platform delivered by a collaboration of PHOs around New Zealand
- after hours back up support to rural general practices in North Canterbury via telehealth virtual consultations.
- also in Canterbury, telehealth after hours support to Aged Residential Care facilities via the 24Hour Surgery by Pegasus
- CareHQ, a virtual general practice overflow service provided by ProCare in partnership with Southern Cross Health Insurance
- Homecare Medical Limited, provider of Healthline and several other national telehealth services was the brainchild of Pegasus and Procure. This service has delivered tremendous value to New Zealand during Covid and provides support across a variety of health and health related services to the population.

Health One

Pegasus and Canterbury DHB have jointly developed and deliver the South Island's shared electronic health record - HealthOne, which is the regional health platform for 20% of New Zealand's population. This empowers healthcare providers in primary, secondary and community settings to share data and participate more effectively in the healthcare ecosystem. HealthOne:

- Integrates primary care, community pharmacy and other community records
- Has more than 27,000 active users
- Enables secure access to the records for clinicians across the South Island at the point of care
- Enables primary care clinicians access to secondary care records and diagnostic information

5.3 Looking to the Future

The Health and Disability System Review identified the importance of data and digital service provision, sharing people's health data securely and appropriately and developing more robust systems to support service providers. As evidenced above, PHOs have, developed extensive skills and knowledge in these areas. They are well positioned to bring to life the vision set out in the review. They have built strong and trusted relationships with a diverse group of stakeholders. They have demonstrated innovation and courage in technology projects, including specific capability in important areas which need to be retained and developed including:

- Data collection, management, integration and quality
- Meaningful analysis, business intelligence and decision support
- IT project management, implementation and integration
- Working successfully across the system with funders, DHBs, technology providers and health providers to deliver on digitally enabled services
- Providing user support (population and health workforce)

6 COVID-19 CONTRIBUTION

6.1 Background

During the COVID-19 pandemic PHOs have provided strong leadership and support to ensure providers have been able to provide the resilient front line public health response needed to halt the community spread of COVID-19. Meanwhile, maintaining the required level of general practice services to support the population. It entailed supporting their practices to shift, literally overnight, to delivering 70% of consultations by telephone or video during periods at Alert level 3 and 4.

The huge range of support provided to practices ranged from the very practical such as arranging the supply of personal protective equipment (PPE), virtual health equipment, swabs and perspex screens for reception desks, through to dedicated clinical support, daily COVID-19 newsletter updates, redeployment of displaced clinical staff into testing centres, hospitals or isolation centres and human resources, IT and financial support and advice.

6.2 Prepared for Change

PHOs across Aotearoa supported providers, communities and iwi to do what was necessary to keep people well during the pandemic. The key areas of support provided have been:

COVID-19 Testing

All PHOs supported practices as they started COVID-19 testing, with planning, training, advice on practice set-up, PPE supply, logistics, and communications. PHOs provided data and supported regional reporting, including input into regional COVID-19 dashboards. Some PHOs provided staff to support providers where their own staff had to isolate.

Many PHOs set up and operationally managed community-based as well as general practice-based CBACs to support providers and the local system. Some set up cloud-based IT solutions and workflows for use at CBAC sites to ensure timely and paperless processes. Supporting CBACs involved not only clinical services and workflow, clinical workforce planning, sourcing and rostering, but also practicalities such as procurement and setting up tents, traffic management and security. In many instances PHOs provided the cashflow to ensure services were operational before the system had determined how services would be funded and delivered.

Several PHOs developed outreach mobile COVID-19 testing services to ensure vulnerable communities were supported.

Other key areas of support during the pandemic included:

Communications and National Networking

During the pandemic all PHOs have worked together in a national network to share information, policies, good practice and advice. This network, managed by GPNZ, has been instrumental in feeding intelligence into the system and has been a responsive engagement vehicle for communications from Government to individual clinician level.

PHOs acted as conduits for communications supporting general practices, other providers and the community including:

- Public communications so that local communities knew where and how testing would be available.
- Emails, updates and webinars for clinicians and providers
- Liaison between regional emergency co-ordination and providers
- Supported communications with iwi and Māori providers

Integrated Call Centre

During lockdown Rotorua Area Primary Health Services (RAPHs) stood up an integrated call centre to triage patient calls to services including clinical assessment, PMS system, swab appointment booking, electronic booking of patient details for swab centre and patient results follow up. RAPHs ensured that the service had multiple entry points and modalities so that those with a disability were not excluded from access.

Liaison and Welfare

Most PHOs have worked closely with Iwi and other agencies to ensure that the welfare functions were connected with COVID-19 testing processes, so patients and whānau who needed wrap-around services received them. Other specific support provided by PHOs included:

- The dissemination of whānau care packages to rural communities.
- Mental wellbeing support for primary care clinicians and general practice staff
- Welfare checks for older people

Telehealth support for providers and digital inclusion

PHOs supported the move to most consultations being done virtually. Health Care Home practices made a relatively easy transition while other practices needed significant support. PHO teams also:

- Supported practices and community pharmacies to implement NZePS during COVID-19 lockdown.
- Supported continuity of care by providing practices with the technical and procedural ability to treat patients virtually.
- Supported practices and patients where practices had to close due to a staff member testing positive, by redirecting phones and enabling the practice team to work remotely from isolation
- Enabled mental health response to continue moving Fresh Minds to Doxy.me
- Liaised with DHBs and MIQs in setting up PMS systems
- Auckland PHOs worked with Health Alliance to set up the Metro Auckland “your health summary”
- General provision of equipment to providers

Supporting Access to Telehealth

During the response to COVID-19, Te Awakairangi Health Network obtained funding from MSD to provide mobile phones and data plans to clients who would otherwise be unable to access health services using virtual tools. They also developed a series of videos in collaboration with entertainers, the Māori Sidesteps to encourage uptake of telehealth services in their population.

Funding and Claiming

PHOs have provided the main support in establishing systems to enable practices to claim fees for COVID-19 consultations and swabbing. This involved establishment of payment codes, and preparation and distribution of practice guidelines on service criteria, as well as daily data extraction, validation of claims and reporting to DHBs. Additional capacity was brought on by some PHOs to ensure there were no hold-ups in payments being made to their practices.

PHOs provided the establishment costs for many community testing centres, including set up provision of the testing workforce, computers, phones, printers and ensuring cashflow for testing services. This prevented paralysis in the system and enabled agility and speed in the establishment of essential services.

Vaccination planning

PHOs have almost all been active participants in planning for the vaccination roll-out. Their main roles have been working collaboratively across the system to identify the vaccinator workforce, combined with training needs and readiness to deliver a coordinated phased vaccination programme once vaccine is available.

Several PHOs have been involved in the set up and running of COVID-19 vaccination programmes for border workers and close contacts of border workers and MIQ or health workers.

Other activities to date have included:

- Planning for hard-to-reach communities
- Provision of authorised vaccinator and cold chain assessors
- Identification of at-risk patients in clinics for vaccine rollout
- Active participation in planning for any potential resurgence of community transmission during vaccination phase

Border Support

Where appropriate, PHOs have supported services at the border. This support has included:

- Weekly and ad-hoc border testing at ports
- Clinical leadership and liaison
- COVID-19 surveillance initiatives
- Liaison with Port Authorities, Stevedore agencies etc.

6.3 Looking to the Future

The pandemic has demonstrated the value of the depth and breadth of capability sitting within PHO teams which enabled organised primary care to pivot nimbly with a high-quality response to very specific needs.

PHOs have been able to maximise capability and skills regardless of where they sit in the system, to support the right provider to provide a service, to respond to community needs and to lead without hesitation.

The skills demonstrated during the pandemic that are going to support the development of primary and community care going forward include:

- Leadership across organisations focused on community appropriate outcomes
- Delivery of effective public health response through primary care
- Ability to respond nimbly and in a sustained way to support communities
- Innovation and delivery of unique solutions despite constraints and barriers.