

WAITAKERE HEALTH LINK PERFORMANCE REPORT OCT-DEC 2016

Priority Area	Service requirement	Activities and actions	Feedback and evaluation	Outcomes and issues
<p><b>1 - Community Engagement Forum</b></p>	<p>Community networking and coordination to help build understanding of community issues and aspirations and to share information about DHB activities and engagement opportunities</p>	<p><b>Community Networks</b> Continued involvement with the following community networks: Open Door Meetings, New Out West, Ranui Network meeting, Waves meeting.</p> <p><b>Key activities</b> <b>NGO Open Door Day</b> 27th October: MPHS shared their humble beginnings. Representatives from Auckland Libraries, Auckland Council, Family Action, Gevena Health and Bowel screening.</p> <p>17th November: Key Note Speaker – Simon Vincent spoke about the benefits for community walking and cycling and the free workshops Auckland Transport delivers. Workshops Included – Beginner bike training for adults, Bike care and maintenance, Guided rides and Bubs on bikes</p> <p><b>New Out West Meeting</b> 24/11: Presentation by Careers New Zealand on a new programme called Work Connect – a free 10-hour Career Coaching and Employment mentoring programme which is a combination of face-to-face, group work and phone guidance.</p> <p><b>Ranui Network Meeting</b> 29/11: Updates from various organisations Shared Forum Details Connection made with Window on</p>	<p>Promoted NGO Open Day on 1st November, circulated Babies Out West, and the latest newsletter</p> <p>Shared Pharmac Forum Event, circulated Babies Out West, and the latest newsletter</p> <p>Shared Pharmac Forum Event, circulated Babies Out West, and the latest newsletter</p> <p>Shared Pharmac Forum Event, circulated Babies Out West, and the latest newsletter</p>	

		<p>Swanson Road newsletter</p> <p><b>Waves Meeting</b> 12/12: 2016 Year in Review by Charlotte and Amiria then Charlotte took us through an activity which has come out of the Primary Prevention project that she has been working on.</p>	<p>Collaborate across sectors about the ways in which we can mobilise the community to take action, circulated Babies Out West, and the latest newsletter</p>	
	<p>Provide support and advice to the DHB</p>	<p><b>Participation in WDHB Steering Groups</b></p> <p><b>Contact Centre Update/Patient Service Centre/Outpatient Letters:</b> Last year WHL advocated for increased funding for the Contact centre with WDHB and ADHB to include email and texting has failed. The system that was implemented in June has been plagued with problems, mainly with the existing infrastructure meaning that there are significant problems with the platform and a risk of failure. I understand new technology is currently being investigated by health Alliance.</p> <p>Working with Health Link North to review the Patient Service Centre Outpatient letters involved in the wayfinding programme of work, including developing an accompanying information sheet.</p>	<p>This programme of work has again highlighted the barrier for patients of free calling the WDHB to confirm appointments. Making all calls from landlines and mobiles free for patients could impact on DNA rates for outpatient appointments</p> <p>WHL flagged the concern of 0800 numbers not being free to all callers back in July 16. Some of these outpatient letters to patients also have a landline to ring which can also create a barrier for patients that do not have a landline but only a pre-pay mobile phone or patients that are out of AKL free calling area. As I have advised for the 0800 numbers, patients turn up at Citizens Advice Bureau who only have a pre-pay mobile with no credit and no money to top up, so can't ring the landline on the outpatient letters to confirm, change or cancel an appointment. Also if WDHB ring them on their mobile some people don't answer phone numbers they don't know so staff leave a message they don't pick it up as that also costs money to retrieve a recorded</p>	<p>It would improve accessibility of the letters and be more patient focussed if WDHB could provide a mobile number to text or an email address to use to confirm, change, cancel or ask a question about their appointment or access appointment information online. This would provide options for patients to utilise their preferred ways to access their health care.</p> <p>Assistant Patient Experience Director will work with WHL to write a report to senior management to highlight these concerns.</p>

		<p><b>Wayfinding Update:</b></p> <ul style="list-style-type: none"> <li>• External Signage: Waitakere, Northshore, Mason Clinic WDHB have the external signage plan ready to go to the Contractors for manufacture. Contract is signed and the documents are with the Contractor being prepared. Waitakere Hospital will likely be ready December-January. Mason Clinic about this time too and Northshore in the first quarter of 2017.</li> <li>• Internal Signage: Carol Hayward has facilitated a number of consumers to walk over the sites and feedback. WHL have provided ten consumers to participate. This will feed into the consultation that has to be done about internal signage which is being mapped out</li> <li>• Parking and vehicle access and signage: Kieron and Leith have oversight of this work being</li> </ul>	<p>message, so the messages are not getting through.</p> <p>Working with Assistant Patient Experience Director and met with the Patient Service Centre to highlight the importance of providing free alternative options for patients to confirm, change, cancel or ask questions about their appointments and surgery.</p> <p>Access online is also an option requested by consumers.</p> <p>The general feedback from consumers is the Waitakere pictures are confusing and there is a push to standardise wayfinding across the sites and regionally.</p> <p>Waiting on the process through the union to implement more patient parking</p>	<p>The wayfinding group is visiting other hospitals and venues to view different wayfinding solutions going forward.</p> <p>Lack of patient and visitor</p>
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		<p>scoped for improvement across the hospital sites. This includes moving the 2pm staff car parking and making the whole space between the healthwest building and the marae all visitor parking. This is being delayed through a union process. The other major piece of work is planning a new pedestrian route from visitor parking to main reception. This is also urgent due to people walking across the roundabout...</p> <p><b>Cancer Journey Meeting with Richard Bohmer</b> Following the cancer workshops, Lynda Williams and I met with Penny Andrew to discuss concerns with the cancer patient journey. This lead to Penny arranging a meeting with Richard Bohmer who is based in England and consults on Clinical Management and Care Redesign. Richard was in Auckland for a week to work on the Regional Cancer Redesign which includes Waitemata, Auckland and Counties.</p>	<p>Advocated for improved pedestrian access from the car park to main reception.</p> <p>Lynda identified the concerns and gaps she has experienced with her year long battle with cancer and learnings in accessing cancer services.</p>	<p>parking is being addressed</p> <p>A business plan is being scoped to improve pedestrian access.</p> <p>Richard was planning to take the perspectives learned into the week long workshop with regional stakeholders.</p>
<b>2 - Initiating and Facilitating Community Engagement</b>	<p>Provide advice on the best ways of reaching communities</p> <p>Plan, implement and report on community engagement events</p>	<p><b>Monthly newsletters and e-news</b> during the reporting period have included articles <b>October Newsletter:</b> NGO Open Day, Emergency Department Opens, Free community health expo, national cervical screening consultation, CAB language service, procares free diabetes programme, free cooknkiwi, youthline café, delirium explained, support hospice, free stop smoking service, events in your community and whats on</p>	<p>Waitakere Health Link posts 700 hard copy newsletters bi-monthly to local health providers and general community, schools, kindergartens, pharmacies, GPs.</p> <p>The enews is circulated bi-monthly to 520 contacts of similar categories. The enews generates 32.5% opens and 5% clicks.</p>	<p>On-line and feedback from stakeholders and community meetings indicates the enews are above the non-profit industry average of 22% with 32.5% opens.</p>

		<p><b>November Enews:</b> Pharmac forum information  <b>December Newsletter:</b> sensory approaches to stress, tree of remembrance, stroke, maternity services consumer council advert, WDHB knitting through delirium, mobile health clinic, travelling with diabetes, managing feelings of stress, help finding a relief carer, healthline, healthpoint, babies out west, services offering support, information and help over holidays.</p> <p><b>Babies Out West Brochures</b>  15,000 copies of the BOW Brochures were printed in late July</p>	<p>Currently we have only 5,000 copies remaining which speaks volumes in terms of the demand and popularity of these brochures with WTK hospital, midwives and NGOs in the community.</p>	<p>Look at options for a reprint next year</p>
		<p><b>NGO Open Day</b>  Had the biggest number of NGOs since the first ever open day. 45 NGOs attended. Unfortunately, WDHB staff had no notified WHL of changes to access to the corridors due to new health and safety rules. Following the day, WHL received a map of the new access spaces for future open days, which is probably reduced to half the current space.</p>	<p>WHL need to decide how to proceed in the future, as it would be so small and booking rooms inside the hospital.  Followed up with the WDHB Fire officer advised the space now allowed for at the Open Day.</p> <p>Mailchimp opens 29.1% opens</p> <p>WHL received 25 feedback forms from NGOs:</p> <ul style="list-style-type: none"> <li>○ Good opportunity to network— not just with NGO’s but general public</li> <li>○ The opportunities for making connections</li> <li>● Good to see different</li> </ul>	<p>Due to reduced capacity for NGO space in the corridors a survey has been sent to NGOs to provide their preference of a reduced number of NGOs attending the day or reduced space for each NGO. WHL should have this information available in the next reporting period.</p>

			<p>organisations and the services they provide as well as letting hospital staff know about our services</p> <ul style="list-style-type: none"> <li>○ Meeting the staff and talking to them in person</li> <li>○ Thanks for facilitating such a useful networking event.</li> <li>○ Thanks to you both for another fun event – always like getting out and seeing everyone</li> <li>○ Appreciate the opportunity to be part of it.</li> <li>○ Services we provide and what other providers are providing</li> <li>○ Great networking opportunity</li> <li>○ Increased awareness of services/supports in the community</li> <li>○ Good networking opportunity</li> <li>○ Friendly atmosphere</li> <li>○ Meeting people from other services.</li> <li>○ Good cross section of NGO services. Good Networking</li> <li>○ Being part of the local community</li> <li>○ One stop health shop</li> <li>○ Like making connections with staff and participants</li> <li>○ Meeting new people/organisations.</li> <li>○ Getting an insight of what's out there</li> </ul>	
		<p><b>Pharmac Forum</b>  Pharmac staff presented at a forum held in Kelston. 35 community members attended representative of the local community and was well informed on how Pharmac prioritises medicine, the TPP and answered specific questions from the audience.</p>	<p>11 people provided feedback, a selection is as follows:</p> <ul style="list-style-type: none"> <li>• Jude is a very informative speaker. I have a much better understanding of how Pharmac works with DHB's and Community. This has changed</li> </ul>	<p>Requests from consumers for followup information from Pharmac was:</p> <ul style="list-style-type: none"> <li>· A link to the 'Special Authority Waiver' online</li> <li>· A link to join the online consultation group</li> <li>· Copy of the presentation,</li> </ul>

		Mailchimp 31.2% opens	<p>my impression of Pharmac.</p> <ul style="list-style-type: none"> <li>• Very informative. Good opportunity to understand the process and overview. Provided information that I can take back to consumers to clarify of issues or concerns about why funded or not</li> <li>• I did not have much understanding of Pharmac and do now</li> <li>• Very useful presentation for me personally. Better understanding of how Pharmac works and funding implications.</li> <li>• Really good presentation - gave information that I was not aware of</li> <li>• Very clear to present Pharmac's role, the process of medicine affiliation. Good discussion for Q &amp; A</li> </ul>	<p>especially the circle diagram</p> <p>This was provided back to attendees via email shortly after the forum.</p> <p>Feedback for WDHB was staff planning programmes that included specific medicines needs to advise Pharmac so they don't run out of stock. This has been forwarded to WDHB for their information.</p>
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<p><b>3- Consumer Representatives</b></p>	<p>Develop a framework for ongoing support and evaluation of consumer representatives</p>	<p><b>Consumer representatives</b> Requests for Consumer reps that have occurred this quarter have included: <i>CT Project Design Group</i></p> <p><b>Consumer rep Support</b> Development of framework that provides guidance and on-going support identified by WDHB, Health Links and consumer representatives <i>Oral Health Consumer Rep</i></p> <p><b>Current demographics</b> of the 17 Waitakere Health Link consumer reps and/or attended focus groups are:</p> <ul style="list-style-type: none"> <li>• 3 under 25</li> <li>• 6 between 25-50</li> <li>• 4 between 50-65</li> <li>• 4 over 65</li> <li>• female, 1 male</li> </ul> <p>6 European, 4 Asian, 2 Pacific, 2 Maori, 3 African</p>	<p>Feedback from project owners regarding the selection and placement of consumers on their projects was positive.</p> <p>Feedback given by consumer reps was positive and continues to inform future support and next network meeting.</p> <p><b>Consumer Rep feedback on Waitakere CT Project</b></p> <ol style="list-style-type: none"> <li>1. <i>I felt my contribution was valued and supported, in particular by Carol and Jenny... but later Karen Wills and others at the table.</i></li> <li>2. <i>Mainly this occurred re direct comments about family/access and safety as well as security for night staff in emergency with patient/family/staff components.</i></li> <li>3. <i>By being able to voice directly to the reality of an issue to remind this work group that when access from ED to scan patient with family happens security and facilities must be robust and appropriate - you will have a stand up fight potential if you try to stop whanau/families from accompanying their loved one in this situation.</i> <i>People respected and acknowledged this in our forward planning. This really helped further input, however, the time constraints for the meeting were always an issue and reality of the work.</i></li> <li>4. <i>I was, asked in particular, at certain times re issues eg: family room - available size of area offered. The capacity to have a private area to be able to discuss with a patient</i></li> </ol>	<p>Waitakere Health Link is working to ensure ongoing recruitment reflects a range of ages, gender and cultural mix.</p> <p>Confirmation and placement of consumer reps put forward to project owners on the WDHB CT Project Group Waitakere.</p> <p>Next consumer rep network meeting will take place in February 17</p> <p><b>Feedback on Consumer Payments:</b> <i>Consumer Rep placed on this temporary project to resiting the CT scanners in Waitakere Hospital. Payment of consumer reps is still a complicated and lengthy process that sees our consumer reps waiting to up to six weeks to be paid, when they loss that cash value from their benefit the week of the meeting. Feedback from consumer rep "just wanted you to be able to reflect what kinds of barriers are involved with WDHB really connecting with the needs and realities of some of their people".</i></p>
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			<p><i>about an outcome that will be life threatening and unavoidable to address at time of scan etc. My personal experience to talk to a situation, again, helped us work as a unit together - I felt, still professionally but with the reminder of people first.</i></p> <p><i>5. The reality is - no matter how professional the clinician may be, the patient knows something is off, not right, it is inappropriate to not address the patients real and timely questions in a respectful and private place rather than referring back to a specialist or GP. This is best care! Case by case of course.</i></p> <p><i>6. If just one person has a better experience by the small voice I have shared to assist with where things are and how things happen - it will be worth it.</i></p> <p><i>7. The people were really good and in the end I hope they also realised they needed me there!</i></p>	
		<p><b>Consumer Network Meeting Feb 17</b> Working with HLN to host another network meeting, utilising feedback from the August Consumer Network meeting in August.</p>	<p>Themes going forward are:</p> <ul style="list-style-type: none"> <li>• Provide mentors for Consumer Reps who would like one</li> <li>• Put together an information sheet for chairs of project groups on "How to welcome Consumer Reps onto your Project Group". This was drafted up in the health literacy groups and will be circulated to all Consumer Reps at the network meeting.</li> </ul> <p>Identify training requirements "How to be heard in meetings" is included</p>	Using feedback from August network meeting to frame up next meeting and build capacity.

			in the agenda. We plan to use the video to provoke some discussion	
	Sourcing Consumers for Focus Groups	<p><b>Oncology Workshops</b>  Waitakere Health Link sourced 11 consumers to attend workshops. A further 10 Pacific consumers were offered by rejected by the organiser and 1 Asian was also declined.</p> <ul style="list-style-type: none"> <li>• 3 between 25-50</li> <li>• 4 between 50-65</li> <li>• 4 over 65</li> <li>• 10 Female 1 male</li> </ul> <p>8 European, 2 Pacific, 1 Maori,  Sourced patients/family members to participate in a number of oncology workshops to improve cancer services for Waitemata. I attended two workshops and supported consumers to attend and participate in the workshops and liaised with WDHB.</p> <p>Issues with WDHB staff behaviour at the Pacific workshop is yet to be resolved David Lui is followed this up with David Price and the Pacific Service of WDHB.</p>	<p>The workshops were held to identify gaps and highlight processes that work well to improve the waitemata patient cancer journey.</p> <p>Identified a gap in the oncology workshops for deceased patients, and successfully advocated for a workshop for family/friends of deceased patients to highlight concerns at the end of the cancer journey for patients that passed away.</p> <p>WHL have advocated for an online survey and for WDHB to access existing support groups to gain further feedback following their initial consultation. The reason for these options is that less than half the people I contacted had the capacity to participate in the cancer workshops. Cancer is a full time job and people prioritise their family and just don't have time. The reasons were:</p> <ul style="list-style-type: none"> <li>• Cancer patients are not prepared to participate in a workshop as it is too emotional for them to open the pandoras box, but would complete a survey in their own home with the support of their family.</li> <li>• Participants that are willing to share their experiences are finding the workshops are not at a convenient time or location and don't have half a day to commit to a workshop and lose</li> </ul>	<p>No information yet on how this work will progress.</p> <p>Waiting to hear back on what is next up for this redesign from either contact regarding next steps and more opportunities for community to feed into the process.</p> <p>I have advocated for an online survey and for WDHB to access existing support groups to gain further feedback following their initial consultation.</p>

			<p>income to attend.</p> <p>Feedback from consumers that echoed many times was <i>“More than happy with an online survey - the timing of the discussion group for working people just didn’t work - early morning or late afternoon would be easier to get away from the work life but what works for me won’t work for others so an online survey could be the solution. Let me know if you get the survey up and running – more than happy to complete”</i></p>	
		<p><b>Focus Groups:</b></p> <p><b><i>Taste Test Meals</i></b>  Waitakere Health Link sourced 10 consumers to attend the meal tasting.</p> <ul style="list-style-type: none"> <li>• 3 under 25</li> <li>• 3 between 25-50</li> <li>• 2 between 50-65</li> <li>• 2 over 65</li> <li>• 8 Female 2 male</li> </ul> <p>4 European, 1 Indian, 2 Pacific, 1 Maori, 2 African  Tasting meals for Well Foundation looking to endorse a new meal provider. This was a big group of 10 with a good mix of ethnicity, gender and age.</p>	<p>Here are the general comments that were made during the debrief:</p> <ul style="list-style-type: none"> <li>• Cost is a barrier and this was the general consensus</li> <li>• Would like produce to be sourced in New Zealand</li> <li>• Use of Fish sauce not always appropriate, if not a fish dish</li> <li>• Food attractive</li> <li>• Use plain/clear descriptions eg: Cauliflower rice was not rice.</li> <li>• Salads were nice and refreshing</li> <li>• Quite bland, not spicy enough</li> <li>• Meat chewy and too big</li> <li>• Vegetables were good, pasta average</li> <li>• Clear labelling for halal meat, no salt etc</li> <li>• Well balanced with nutritional content available</li> <li>• Colourful</li> </ul>	<p>The range of consumers provided a good variety of feedback on all aspects of the food and its delivery.</p>

		<p><b>Wayfinding Focus Groups</b></p> <ul style="list-style-type: none"> <li>5 Nov - Worked with Community Engagement Manager to source consumers for wayfinding focus group at North Shore.</li> <li>17 Nov - Sourced consumers for a wayfinding focus group at Waitakere Hospital. Participated to collect feedback on the wayfinding walkabout and following discussion</li> </ul>	<ul style="list-style-type: none"> <li>Everyone liked the dressings</li> <li>Vegetables stayed crunchy</li> <li>A soup option requested</li> <li>Consumers appreciated their feedback being sought</li> </ul> <p>Sourced 4 Asian consumers via WHL exec member for the wayfinding group.</p> <p>Sourced 2 African, 1 Pacific, 1 European 2 under 25 yrs and 2 between 25-50 yrs.</p> <p>Feedback was combined into an overall wayfinding report.</p>	<p>The feedback reported will inform the Wayfinding work WDHB is currently undertaking.</p>
<p><b>4 – Health Literacy Focus Groups</b></p>	<p>Manage and facilitate health literacy groups</p> <p>Provide ongoing support and advice to the wider health literacy programme</p> <ul style="list-style-type: none"> <li></li> </ul>	<p>Fortnightly health literacy group meetings held</p> <p>Demographic breakdown of health literacy volunteers:</p> <ul style="list-style-type: none"> <li>0 under 25</li> <li>6 between 25-50</li> <li>5 over 65</li> <li>10 female, 1 male</li> <li>6 European, 1 Asian, 2 Pacific, 1 Maori</li> </ul> <p>The documents drafted up or reviewed at each meeting were:</p> <p>1<sup>st</sup> Oct Mtg:</p> <ul style="list-style-type: none"> <li>Liver resection 26 pages</li> </ul> <p>2<sup>nd</sup> Oct Mtg:</p> <ul style="list-style-type: none"> <li>Ileo Pouch Anal Surgery 22 pgs</li> <li>High risk diabetes appt letter 2 pgs</li> </ul> <p>1<sup>st</sup> Nov Mtg:</p> <ul style="list-style-type: none"> <li>Drafting new content for Info for Consumer Reps on</li> </ul>	<p>Oral feedback from the health literacy group members identified that: 100% felt the opportunity to provide feedback from a consumer’s point of view was important.</p> <p>Project owner feedback included: <i>“Thank you for your assistance. It has been most helpful to have your perspectives. I know it has been a push with such a large group and your prioritisation is much appreciated.”</i></p> <p>Jos Peach, Wayfinding Outpatient letters.</p> <p><i>“You have done such amazing work for us in the past – I really look forward to your feedback”</i> and after review <i>“I always appreciate your groups input”</i></p> <p>Cecilia Rademeyer, Emergency</p>	<p>During this quarter 23 docs totalling 89 pages have been reviewed. Feedback provided to project owners.</p> <p>The Wayfinding outpatient letters has identified the need for alternative options of booking, changing, cancelling and asking questions about outpatient appointments Online access.</p>

		<ul style="list-style-type: none"> <li>Project Groups 2 pgs</li> <li>• Tips for Consumer Reps 1 pg</li> <li>• Ileostomy – Advice for eating well 3 pgs</li> <li>• Mirror therapy following stroke 5 pages</li> </ul> <p>2<sup>nd</sup> Nov Mtg</p> <ul style="list-style-type: none"> <li>• Wayfinding outpatient letters 13 pages</li> </ul> <p>Dec Mtg</p> <ul style="list-style-type: none"> <li>• Active Surveillance Key Points 2 pgs</li> <li>• Active Surveillance 11 Pgs</li> <li>• Nausea and Vomiting in Pregnancy 2 pgs</li> </ul>	<p>Medicine Specialist</p> <p><i>“Thank you so much Tracy, much appreciated”.</i> Belinda Old, Senior Surgical Dietitian</p> <p><i>“Thanks Tracy, and thanks for all the hard work you and your group have done for us over the year.”</i> Sharyn Gruzelier, Older Adults and Home Health</p> <p><i>“It was a very well run meeting... great engagement from everyone there and I think we will do a great job of making a real difference to these letters”.</i> David Price, Director Patient Experience</p>	
<b>5 – Training and Professional Development</b>	<ul style="list-style-type: none"> <li>• Participate in professional development activities to ensure the provider can meet the ongoing needs of the DHB for community engagement.</li> </ul>	<p>Attended a 2 day workshop hosted by International Association for Public Participation, Australasia.</p>	<p>Provided an understanding of how to design and engagement program including selecting the engagement methods most suited to your need, to maximise the benefits to be gained through engagement and to achieve a successful outcome.</p>	<p>The Counties Patient Experience Manager was also attending we chose to focus our activities during the workshop to focus on the Regional Cancer Redesign</p>