



Out & About in Wellington South:
Intersectoral worker
Jeanette McCracken.



Pacific expo:
Promoting health as a good career choice to Pacific youth.



Push Play:
Dylan Higgison, encouraging physical activity in the community

Primary Importance

Volume 1, Issue 3, 2004

A newsletter from Capital & Coast DHB for providers and community organisations involved in primary care.

Sixth PHO for Wellington and Kapiti Coast district

Almost 13 thousand people in and around Karori now make up the sixth PHO in the Capital & Coast DHB area.

The Karori PHO has 11 trustees including three from the Karori Medical Centre, along with local Maori, and representatives of various community interests and health providers.

PHO chairman and GP Jeff Lowe says “Our enrolled population has a unique demographic which includes many families, around 5% of people are Maori and there is a large Asian community.”

The new PHO is working closely with the community and other health services in Karori to assess the needs of the enrolled people and agree on the priorities for the PHO.

Trustee Margaret de Joux, a community representative, says the PHO’s partnership with the community will ensure that together they find local solutions to local health issues.

Dr Lowe says the establishment of a PHO was a natural progression for the Karori Medical Centre, which has been population-funded since 1987 and already has an infrastructure to support this style of funding and service provision.

The PHO trustees have already set up a forum for local health providers including physiotherapists, pharmacists and dentists. One of this group’s priorities will be to help ensure that patient care is well co-ordinated between the different services.

“We expect to develop further initiatives in services that will improve access to primary health care, health promotion, disease statement management and referred services management,” said Dr Lowe.



Above: Some of the PHO trustees and staff of Karori Medical Centre; Sitting: Robyn Taylor RN and trustee. From left: Teresa Wyndham-Smith, communications manager for RMS Refugee Resettlement and trustee; Jeff Lowe, GP and chair of the Board



of Trustees: Apii Rongo-Raea, public and health sector consultant and trustee; Lyn Allen, Karori Medical Centre PA/ Management Services; Jo Douglass practice manager/ Management Services; Prue Griffin, community RN and trustee; Margaret de Joux, retired social researcher and trustee; Peter Moodie, GP and trustee. RIGHT: From left, C&C DHB CEO Margo Mains, Dr Jeff Lowe and Health Minister Annette King at the launch of the Karori PHO.

South under the spotlight

How do you find out just what health services the people living in South Wellington want and need?

It's a question that Capital & Coast DHB and Regional Public Health are trying to answer and they've employed inter-sectoral worker Jeanette McCracken to find out.

Jeanette says there's only one way to know, and that's to talk to all the different communities, groups and various key individuals in south Wellington, particularly those with some interest in health services.

"There are a complex range of different communities in South Wellington with hugely varying health needs, and there are numerous agencies providing health and other services.

"We need to learn which services are effective and well co-ordinated so we can develop similar models. We also need to know where people feel their needs are not being met and where existing services are letting them down," she said.

Income, housing and family circumstances all play a part in a person's health.



An important part of Jeanette's work will be to find out how well the assistance and services provided by the different sectors work together. This includes Housing NZ, the city council, Work & Income, the DHB, and non-government organisations such as Presbyterian Support.

Jeanette has been employed on a one year contract and in June next year will send a report and recommendations to Capital & Coast DHB that reflect the issues and needs identified by the people of Wellington south.

From there the DHB will work with community providers and other agencies to change or improve services to address those issues.

Practical assistance

Sorting out life's practical details can be difficult for some people with a mental illness.

For Porirua and Kapiti Coast people, whose care is being managed by a GP, there is a service available that can help with everything from budgeting advice through to writing a CV.

It has evolved from the project between Capital & Coast DHB, WIPA (the Wellington Independent Practitioners Association) and the Mental Health Consumers Union to support the transition of people from hospital level mental health services to primary care services.

GPs expressed concern that these clients, and others with mental health needs, often had needs that went beyond clinical care and were often of a social nature. In response, WIPA employed community coordinators Maureen Hooper and Michelle Ropata (pictured below) to work with clients living in greater Porirua and on the Kapiti Coast.

"We are here to help with any social issues," says Michelle. It's usually short term assistance that is needed for a one-off difficulty. For instance someone may need advocacy support at WINZ or Housing New Zealand, or perhaps want help to look for employment or write a CV. Michelle and Maureen work closely with the client to identify the issue, and work out a plan to resolve it.

"We can take them through paperwork, go with them to appointments, find experts to help, or simply identify the right person to refer them to," said Michelle. "We can also work with clients to make up a plan of things they can change about themselves to help reach a certain goal."

Clients can be referred to the Community Co-ordinator Service via a GP, practise nurse or various community agencies. Clients can also simply contact the service themselves by calling (04) 237 4534 or 0800 107 220.



Overcoming the transport barrier

For some people, getting to medical appointments can be fraught with difficulties, particularly if they have no car, a disability, or some other issue to overcome. It can mean they do not seek medical assistance.

The funding provided to PHOs to improve access to health services is being used by South East and City PHO, Porirua Health Plus and Tumai Mo Te Iwi PHO to help patients known to have particular problems getting to their appointments.

All three PHOs have contracted a taxi firm to provide return trips between a person's home and the health service. The PHO is invoiced for the cost.

SECPHO member, Te Aro Health Centre says the transport service has been invaluable and has on occasion also been used to take patients to hospital when the alternative may have been an ambulance, which can be an inefficient use of resources as these cases are not always emergencies.

SECPHO special projects manager, Justine Thorpe says the service is available for any medical appointment which may include trips to community laboratories, hospital appointments, and community pharmacies. All of which are essential in maintaining the wellness of the patient.

Data on the use of the high needs taxi service in Porirua, a joint initiative between Porirua Plus PHO, Tumai PHO and C&C DHB has recently been analysed. The results show that just over 500 trips took place between March 03 and May 04, with the numbers increasing each month and people largely travelling from their homes to an outpatient appointment in Newtown.

A pathway back to employment

A joint effort is underway in Wellington, Porirua and on the Kapiti Coast to help people on a sickness or invalid benefit who want to return to work but have been prevented because of a health issue.

The PATHS (Providing Access to Health Solutions) programme is designed for people who may, for example, be unable to afford a particular aid that would allow them to function in the workforce. Or, they may need a programme of primary care intervention or some other health assistance.

Capital & Coast DHB is employing a registered nurse to coordinate the assistance given to people who ask Work & Income for help to overcome the medical barriers that are preventing their return to work.

The programme is voluntary and the health costs are funded by the DHB, the Ministry of Social Development and ACC.

The DHB, Ministry of Social Development, ACC and Work & Income, will work closely together. For more information contact Tania Nixon at Work & Income.

Improving care in the home and community

The Board of Capital & Coast DHB has approved a proposal for 'integrated home, community, primary and specialist services' which was the subject of public consultation earlier this year, aims to improve services for older people, adults with chronic illness and others with a short-term need.

The key features of the new approach are:

- A new Care Co-ordination Centre – a single point of entry for all services. This will make it easier to co-ordinate each patient's home and community service needs.

- New positions called 'Care Managers', who will keep an eye on the 'bigger picture' for each patient – which, for example, could enable them to more easily spot the early warning signs of emerging health problems or risks.

- Developing one assessment process for every patient, that creates a 'care plan' which is used (and updated) by all health professional who see that patient.

- Developing specialist multi-disciplinary services, for example a specialist Older Persons Service and a Stroke Service, to

help treat people with multiple or complicated health problems.

This new approach is for people in the DHB region who are:

- Adults over 16 years of age with chronic illness and/or high health needs, (eg: chronic respiratory and congestive heart diseases).

- People aged 65+ and the 50-64 age group with early onset of conditions more commonly associated with older age, for instance Alzheimers dementia.

- People with a short-term need for home based nursing, therapy, support or other home based care.

The new approach will help improve co-ordination of the care people receive from different health services, and this should also help to reduce disparities – both of which are high priorities for the C&C DHB Board. It will also provide new employment opportunities for staff of C&C DHB and other providers. Staff will also benefit from an improved and more integrated working environment. The changes will occur over time and staff and their unions will be consulted during planning and implementation.

Improving access – getting the best out of interpreters

The mixed ethnicity of the population enrolled with the South East and City PHO (SECPHO) in Wellington means there is strong reliance on interpreting services.

Member practice, the Newtown Union Health Service, employs its own Assyrian interpreter for patients while the Pacific Health Service is developing its own interpreter services.

Through the funding to improve access to services, the PHO also has a budget for interpreters and this is available to member groups as well as outside organisations who work with people enrolled with SECPHO, such as Plunket.

The PHO's manager of special projects, Justine Thorpe, says "It is preferable to use interpreters who are not friends or family members – this avoids issues around privacy and means that the translator is not filtering the information being

exchanged, or giving their own view on what is wrong with the patient."

Newtown Union Health Service manager Chris Clarke says "Interpreters improve the level of communication and understanding and this leads to better treatment and outcomes for patients."

Clinicians and others generally book an interpreter at the same time as they book a patient appointment, believing the service works better in a face to face situation. However, if there hasn't been time for this preparation, the interpreting can be done by phone.

The demand for this service has meant SECPHO has had to increase its original budget and this still may not meet the demand. The service does not include hospital visits as C&C DHB has its own funding to provide interpreting services.

To other health agencies who are considering setting up this type of service, Justine recommends talking to other groups who have an interpreting service before signing up with an interpreting agency, as fees vary.

If you have comments/suggestions, or if there are topics you would like us to cover in future newsletters, contact Michael Tull – phone 04 385 5325, or email michael.tull@ccdhub.org.nz

To receive 'Building Health', our Hospital Redevelopment Project newsletter, email brenda.warnock@ccdhub.org.nz

To receive our DHB Newsletter, email hawaiki.winterburn@ccdhub.org.nz

If you have any questions call our information hotline: 0800 999 442.

Specifically Pacific Expo – Wellington 2004

Specifically Pacific, a celebration of Pacific achievements, economic prosperity, communities, health, culture, diversity and families, was held recently at the Queens Wharf Event Centre in Wellington.

Specifically Pacific is an annual inter-agency event to create effective links between government agencies, businesses, schools, families and the community which allow Pacific youth to sample education and careers experience.

Capital & Coast DHB and Regional Public Health joined forces on an information stall at the Careers Day to promote health as a career option for Pacific youth. The stall was well received and there was a lot of interest in the wide variety of careers available within the health sector.

Pacific Health Service Wellington also had an information stall at the Careers Day and provided free health assessment checks, especially popular was the finger prick testing for diabetes.



Royce Pili (C&C DHB) getting one of the many finger prick tests for diabetes that were performed at the Careers Day. Looking on is Joy Sipili (Regional Public Health).

Pacific Health Service Porirua AGM

The Pacific Health Service Porirua had its annual general meeting with a strong attendance by the local community. Speakers at meeting on 27 August included the Mayor of Porirua, Jenny Brash, and Bill

Katene (Ngati Toa). During the meeting particular mention was made of the improved accessibility and affordability of primary health services. There were also cultural performances from each of the Pacific communities represented at the meeting.

An active involvement in community care

The national campaign to ‘Push Play’ encourages people to be physically active for at least 30 minutes a day. In Porirua, some local GPs are able to prescribe a physical activity educator for those who would most benefit from encouragement to get off the sofa and head outside for a walk.

The Tumai Mo Te Iwi PHO is using some of its funding from Capital & Coast District Health Board to employ physical activity educator Dylan Higgison. He promotes physical activity within the community and works with individuals referred to him by GPs and primary care nurses.

“My clients are often inactive and experiencing a health problem that could improve with a change in lifestyle and an increase in physical activity,” he said.



Dylan offers motivation and support for each person for up to six months, beginning with weekly sessions and easing gradually down to monthly sessions. His work with each client begins with them setting goals, working out a plan and then supporting, monitoring and measuring progress.

“Each programme is tailored to the individual client and their needs and often we get the whole family involved.”

Dylan’s role is also to encourage physical activity in the community. He’s part of the Porirua Defeat Diabetes Team, which involves a wide range of health and community groups. He has organised a touch rugby competition for local youngsters as part of a Healthy Living Festival, and visits schools and other groups to discuss the benefits of physical activity.

Julia Carr, C&C DHB’s primary care funding manager says “the development of PHOs and the change in funding for primary care services has allowed this sector to make some major changes to where and how they provide services for their communities. Creating supportive environments is a key element of health promotion. Dylan’s work is one example of how PHOs can work with people to take charge of their own health.”