

Collaborative Aotearoa Workshop One

25 September 2024



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Executive summary

The purpose of Workshop One was to reflect on the current state of the primary care model in Aotearoa; specifically, the General Practice model: identify what's working well and what could be improved.

Prior to the workshop, the participants completed a Model of Care survey. This survey asked the participants to reflect on both the Health Care Home (HCH) model of care and other models of care working within the environments they work with. A capture of local evidence and international evidence was reflected upon. These survey results supported the direction of Workshop One, using AI tools to create emerging themes.

Key principles that are required to underpin any future model of care were determined. These principles will guide the design process in Workshop Two, driving the characteristics of the reimagined model to align with the principles to be considered for inclusion.

The model of care will be guided by a set of domains. Domains support the workflows, actions and measures that support the implementation of organisational change. The current domains were debated. Additional domains (environmental sustainability, health equity, strategic partnerships and workforce development) are suggested to be promoted to domain level with the recommendation to merge routine and preventive care into one section. The current domains are currently articulated in a key shape; this was discussed and will need to be revisited as the model design continues.

The workshop continued with deep kōrero, reflections on the current state, musings for opportunities and a collective desire to grow, build and strengthen a framework for primary care that delivers timely access to quality, equitable care for whānau.

Workshop Purpose

Review and reimagine our primary care model to better support whānau and kaimahi across Aotearoa.

Document Purpose

This document describes the kōrerorero gathered during the workshop.



Te kaupapa o te rā



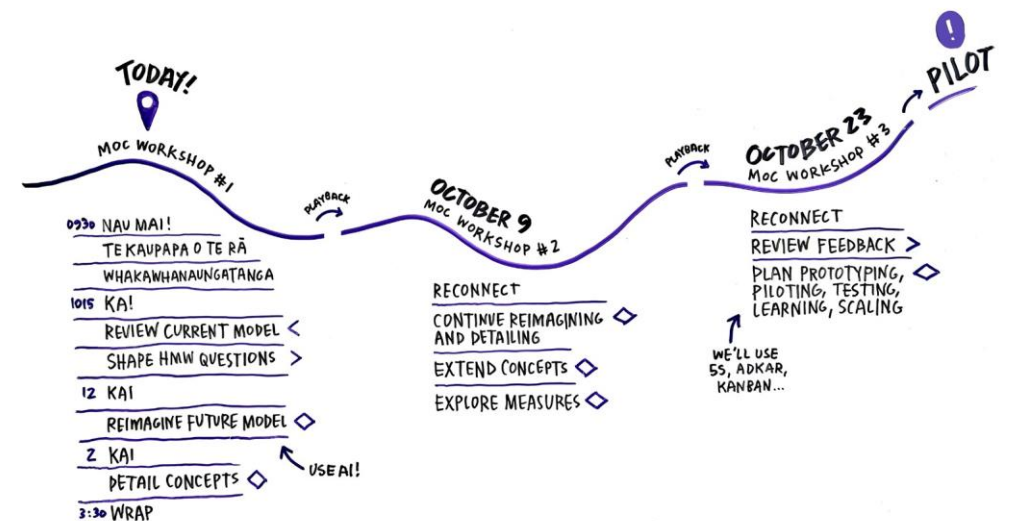
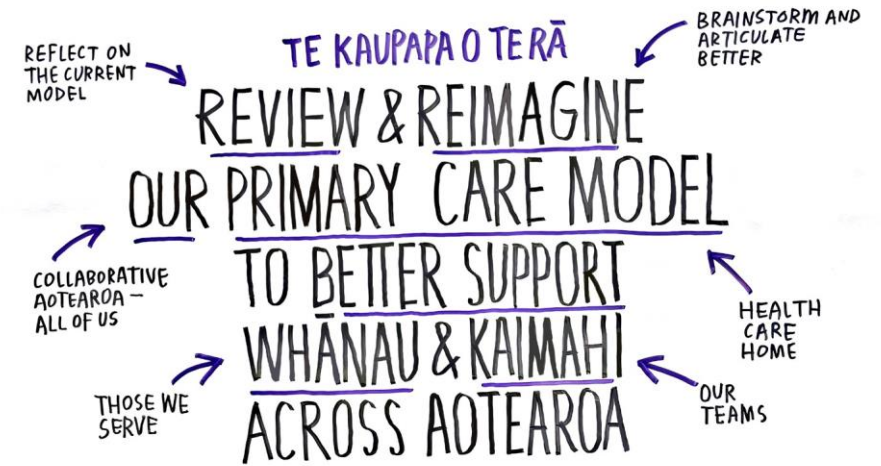
The purpose of the day was to review and reimagine our primary care model to better support whānau and kaimahi across Aotearoa.

Our objectives together were to:

- reflect upon the current state of the primary care model: identify what's working well and what could be improved (worries / concerns), and
- using these reflections, collectively brainstorm how we will adapt the model to respond to these areas.

Outcomes beyond this workshop include:

- transforming the primary care model into a 2024 future-forward approach, building on decades of learning,
- creating a model that is practical (clearly defined steps for action) and sets up for an aspirational future,
- national consistency: health care providers across Aotearoa unite on a clearly defined framework.



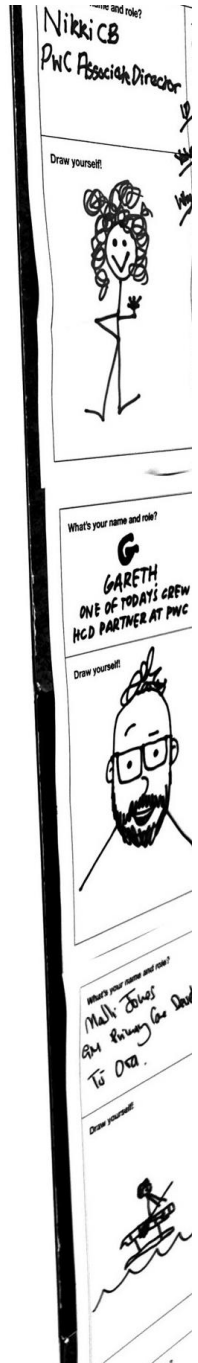
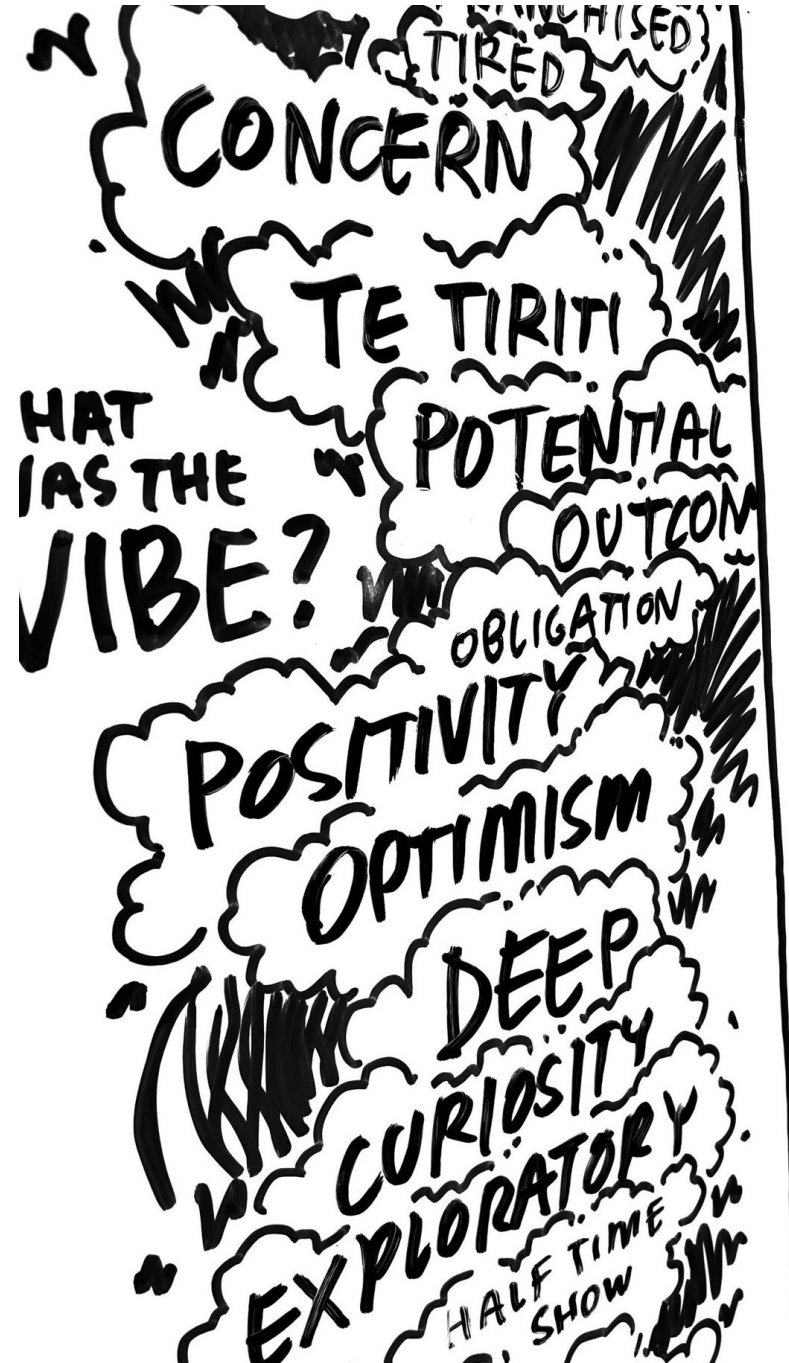
Whanaungatanga

The first activity of the day was whakawhanaungatanga.

Participants were invited to describe their role, draw a picture that represented themselves, and identify some of their key values. Participants were also prompted to share what they were most excited about for the future of primary care.

Using their canvas, they greeted each other and introduced themselves to their table groups. This helped participants build greater connections with each other, and understand the core values that underpin their colleagues's culture.

Clear themes emerged from this exercise, including curiosity, exploration, respect, and honouring Te Tiriti o Waitangi.





Health Care Home current state

Before delving into the activities for the day, we reflected on the current HCH model.

Reflections on the current Health Care Home model is evidenced through sixteen different evaluations. Through a Keep, Stop, Start, Change activity and kōrero, we learned that there are many important aspects of the Health Care Home Model of Care that are worth retaining in the redesign - we are not starting from scratch. Although this activity captured the transactional activities within general practice, it provided guidance on where valuable elements of the current model are.

Elements of the model that were never realised (including shifting work from acute demand to preventive care) were simply not realised due to the growing unmet need in communities continuing to pressurise practices. This, alongside an under-resourced sector, has concluded in opportunity for evolution.

Although Health Care Home isn't universal in Aotearoa, it is adopted by over 300 practices, with many more picking elements of the model of care to implement.



Domains

Attendees were curious about whether the Key as a visual representation of the Domains was relevant for Aotearoa.

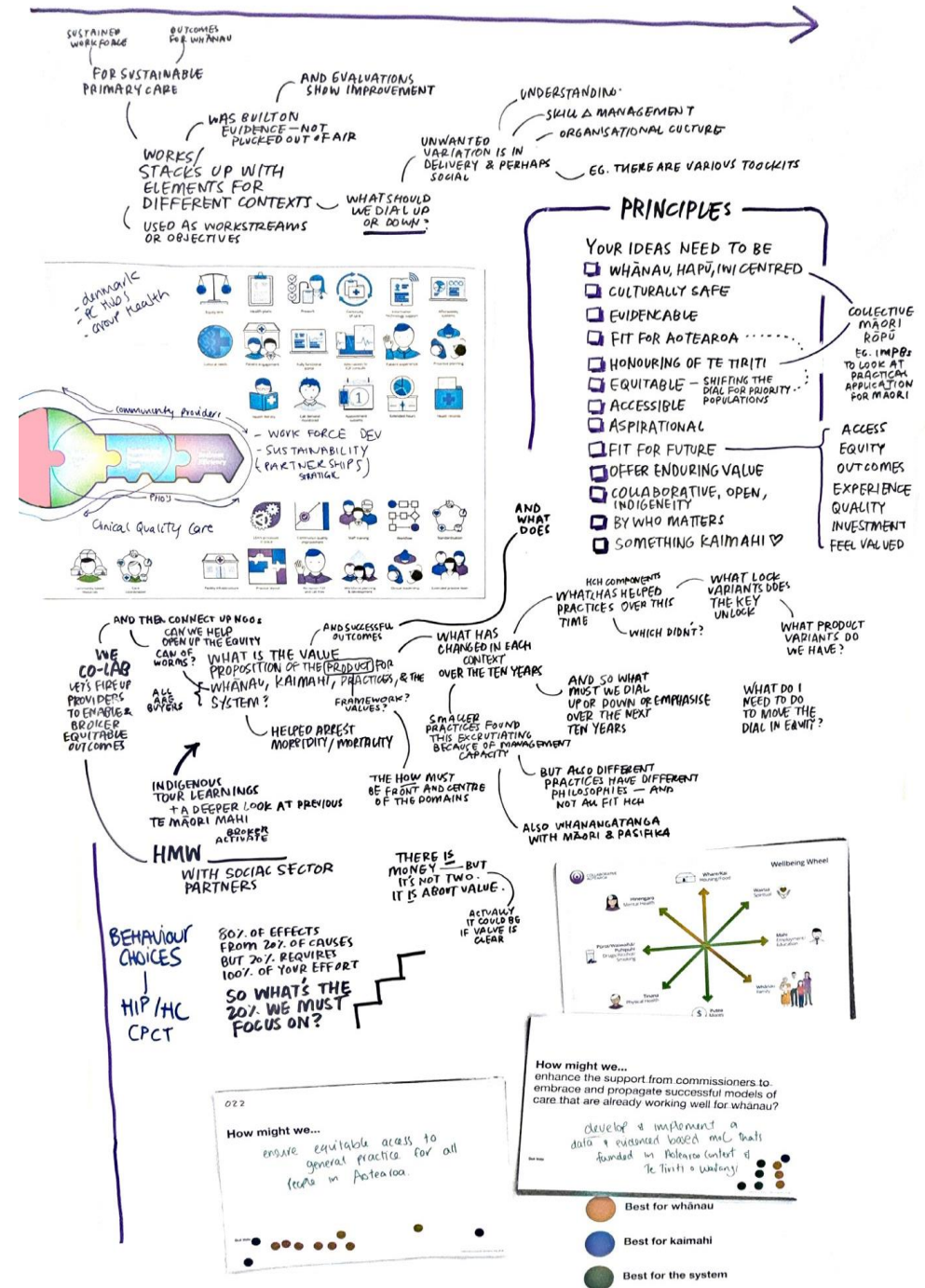
There are four current domains:

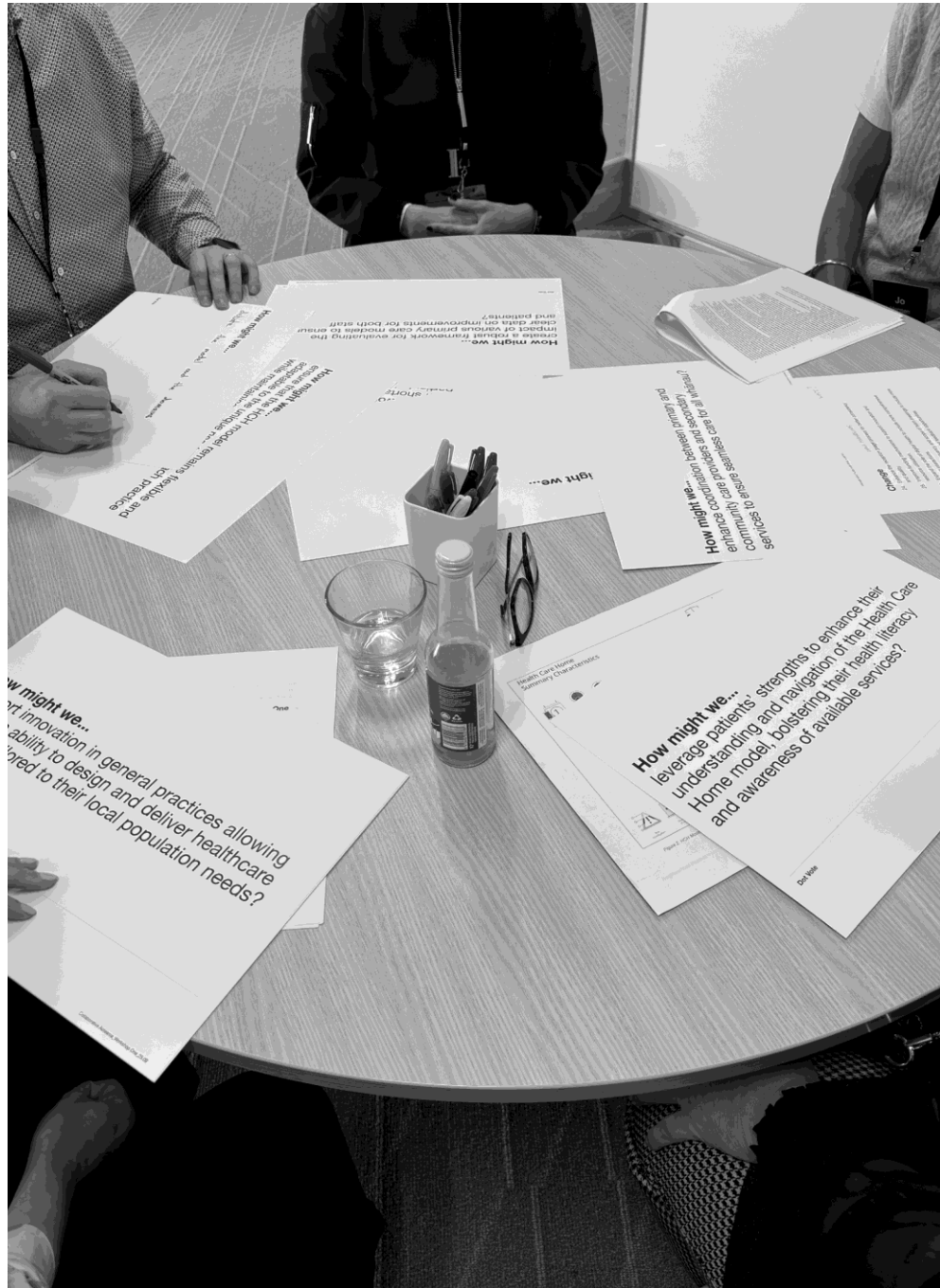
- **Sustainability:** When I visit the practice
- **Urgent and Unplanned Care:** When I'm unwell
- **Proactive Care:** To help me stay well
- **Routine and Preventative Care:** To keep me healthy

Some findings from the discussion included:

- Consolidating proactive and routine and preventive care
- Adding health equity
- Adding digitally enabled
- Adding environmental sustainability
- Adding workforce development (retention and recruitment)
- Adding strategic partnerships

Domains are often treated as workflows within a model of care. These domains better reflect the desired work programmes required for model of care development and evolution.





Problems to solve

After reflecting on the current state, we reviewed the AI-generated problem statements.

In small groups, problem statements were discussed and tailored to ensure that the needs of whānau and kaimahi were addressed. After sharing back to the room, a long, detailed and honest conversation across the group consolidated similar ideas/themes, concluding with the following problem statements.

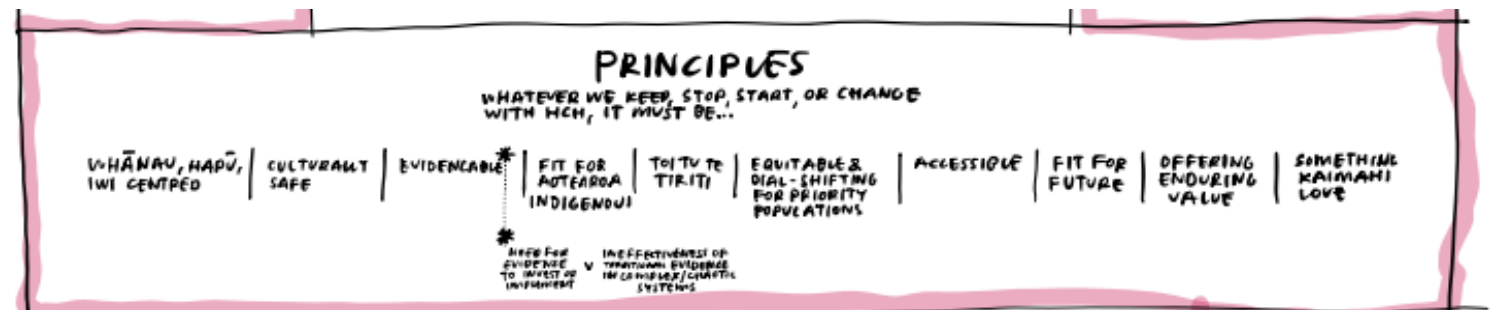
1. Whānau have limited options for accessing primary healthcare, reducing their ability to choose services that suit their needs, and this impacts overall health outcomes.
 2. A robust framework is needed to evaluate the impact of various primary care models, ensuring clear data on improvements for both staff and patients.
 3. Whānau lack consistent access to a dedicated care team, especially when their regular GP is unavailable.
 4. There is a need to foster whānau-centered, culturally safe care for priority populations.
 5. Equitable access to digital tools, including AI, is needed to streamline processes and enhance the efficiency of whānau care delivery.
 6. Clinical administrative overload in General Practice is overwhelming healthcare professionals, reducing time for patient care, and contributing to burnout, ultimately affecting the quality and efficiency of healthcare delivery.
 7. Workforce pressures such as fatigue, staff shortages, and retention challenges, especially in rural areas, threaten a sustainable and supportive work environment for healthcare workers. We also have a high number of professionals who will retire from healthcare within the next 5 years.
 8. A solid funding procurement plan is needed to effectively communicate with commissioners.
- The final problem statement is the heart of why these workshops exist and will continue to guide the outcomes for the workshop series.
9. **There is a need to adapt and expand the model to create a flexible, comprehensive, and integrated toolkit for primary healthcare that addresses both medical and social needs.**

Principles

Throughout our kōrero we explored the existing Health Care Home Model of Care alongside new ideas. We recognised that all components of a reimaged model must be anchored in principles that are important to us and the communities we serve. Being explicit about principles provide us guidance for decision-making, ensures behaviour and practices remain consistent, helps align our efforts, and provides a benchmark for assessing choices, actions, and outcomes, enabling continuous improvement.

The following principles were agreed:

- Whānau, hapū and iwi centred | Community centred
- Culturally safe
- Evidencable
- Fit for Aotearoa and into the Future
- Toi tū Tititi
- Equitable
- Accessible
- Something Kaimahi love





Group kōrerorero

With innovation and change there is always going to be tension between evidence and innovation. We experienced some of this healthy tension along with the variables within our context that are complex.

The framework on the right illustrates the environment we are navigating. It represents a complex domain influenced by factors such as context and outcomes, which, while important, are largely beyond our control. It's essential to acknowledge these elements and remain aware of their limited role in shaping our design.

As a whole group, we discussed the implementation challenges of Health Care Home, the divergent value propositions, and the complexities.

The future model of care will require small, manageable and considered micro-pilots that will enable us to build evidence to support larger scale interventions. Therefore, design and planning needs to be considerate of the continuity of service delivery though changes calling for effective change leadership approaches. We have started building this capability and capacity both within practices but also within Primary Health Organisations (PHOs) over the past decade through the Health Care Home implementation. Utilising and growing this will remain essential to the output in which we land.

THE FUTURE OF HCH ON A PAGE WHAT ROLE SHOULD HCH PLAY?

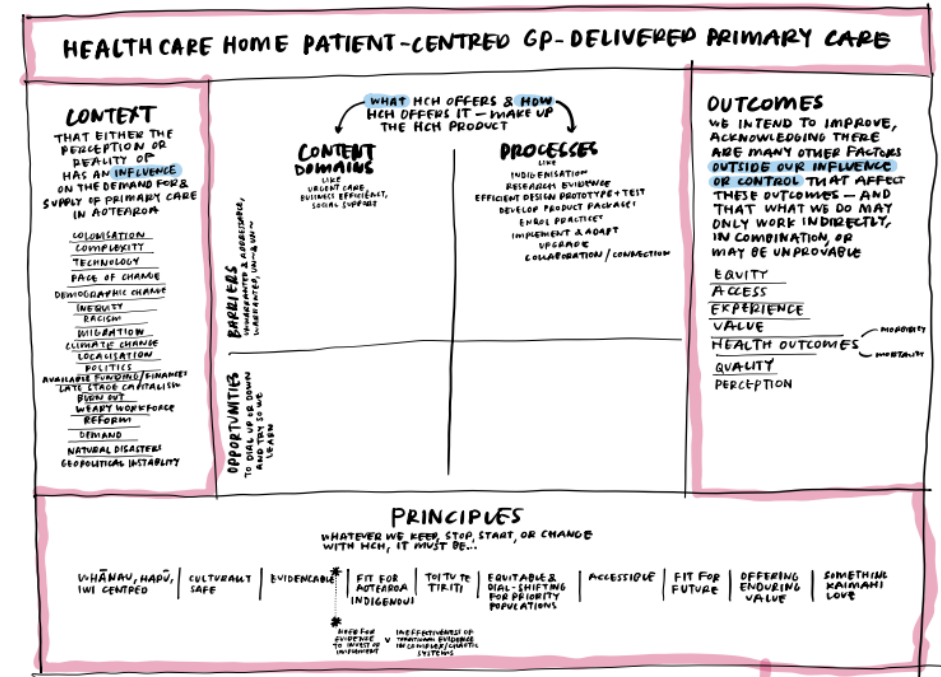
THE HISTORY

1. WE HAVE A PRODUCT - HCH
2. HCH WAS CREATED AS PATIENT-CENTRED GP DELIVERED PRIMARY CARE
3. HCH HAS MADE A MEASURABLE POSITIVE DIFFERENCE THE QUALITY
4. AS THE CONTEXT HAS INTENSIFIED, HCH HAS HAD TO ADAPT AND RESPOND
5. GIVEN THE CONTEXT IS LIKELY TO FURTHER INTENSIFY, WHAT ROLE SHOULD HCH PLAY?

THE HCH VALUE PROPOSITION

- FOR WHĀNAU:
- FOR KAIMAHĪ:
- FOR PRACTICES:
- FOR THE SYSTEM:

THE HCH MODEL IN A NUTSHELL



Next steps

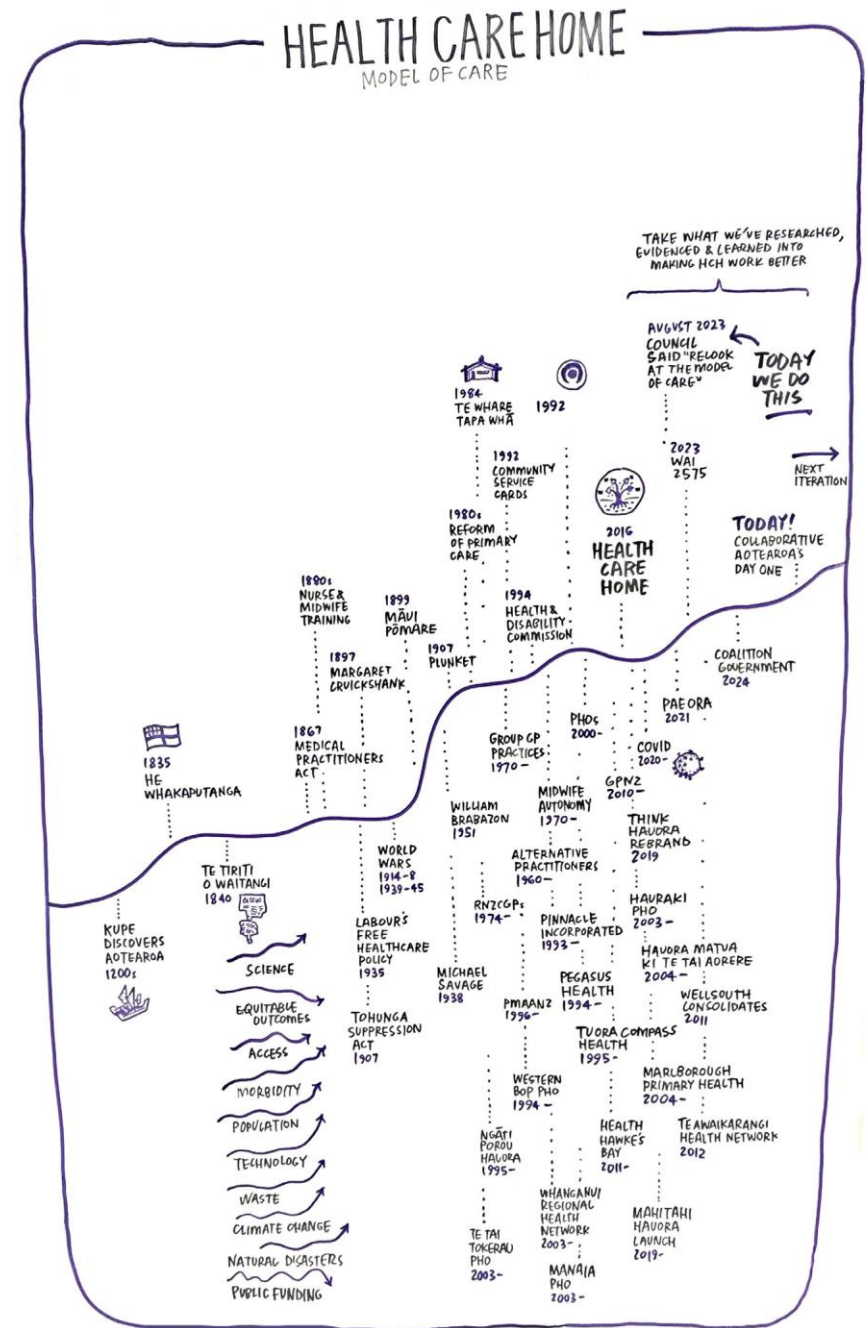
Workshop Two

What to Expect: Workshop Two will take a different approach. We've learned from the complexities we faced in Workshop One and will adapt our methodology to drive us towards our goal of reviewing and reimagining the model of care.

To facilitate this, we will split participants into two rōpū: One group focused on generating probes for the most impactful, least effort problems. Another group focused on developing wildcard ideas.

We will remain flexible and agile, with various approaches ready to guide us where we need to go. However, we ask that you come prepared to review and reimagine. Be bold and courageous as you think about the future.

The next workshop will be held on Wednesday 9th October 2024, at the PwC Sandbox in Wellington



Ngā mihi nui.