

Health Care Home

The Healthcare Home initiative being undertaken at Clutha Health First has borne some significant changes over the last 12 months.

- **Same Day Appointment Process:** A process of GP Triage was introduced which leveraged off the existing Nurse Triage system that was already operating at CHF. Using this methodology resulted in a resolution rate for patients requesting same day appointments ranging between 35% and 45% for all requests made.
- **Under 6 year old Walk in Clinic:** Recognising the logistical challenges parents face in obtaining short notice appointments, particularly for children under 6 years of age who are feeling unwell, a new weekday walk in clinic was established that operated for 30 minutes twice per day on a first come first serve basis. Accommodation was made in each of the GP appointment diaries that enabled children to be uplifted very quickly from the waiting room and to be managed quickly and efficiently. To date these clinics have treated generally 90 patients per month and has released significant resources back into the general appointment books.
- **Alternatives to Face to Face Appointments:** As part of the GP Triage service patients who are identified as not necessarily requiring a face to face appointment have been offered a telephone consultation. This offers convenience for patients who do not need necessarily to travel to obtain an appropriate outcome. Uptake of this facility increased notably during the Covi-19 lockdown period.
- **Patient Portal and Open Notes:** Patients have online access to their medical information held by the Practice. This includes making appointments, asking for prescription renewals, reviewing lab results and recently the ability to view the doctor's visit notes. At this stage almost 50% of eligible patients are registered on our portal. We hope to increase this during the next year.

"I was impressed at the care and understanding shown, no matter how busy the Nurses were, they always made time for me" Patient Feedback

Strategic Planning

It has long been the practice of Directors and Management to reassess the company's strategic direction every two years. This year's strategic planning workshop, which had to be delayed by three months because of Covid-19, took place on the 4 July. The workshop involved input from the SDHB, the PHO, community health sector providers, and the staff at Clutha Health First. The outcome of the workshop was a focus for the ensuing two to three years with the objectives of:

- Developing clinical services,
- Enhancing community engagement,
- Upgrading physical facilities,
- Actively participating in regional networking, and
- Continuing to enhance the financial strength of Clutha Health First.

These objectives will now provide guidance to the operational decision-making and initiatives for the company.

It is worthy of note that the overriding purpose of Clutha Health First was reiterated as "To improve the health of our community through innovation, advocacy and leadership".

What we value as a company continues to be:

- Our people,
- Honesty and respect, and,
- Excellence.



Global Pandemic: Covid-19

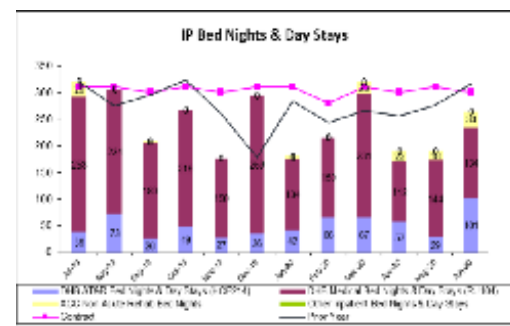
It all started suddenly in January with news that there is a potential respiratory illness in China. It escalated quickly into a world-wide pandemic that has affected every country to a varying degree. Its impact on people can vary from being a-symptomatic, mild conditions all the way to death.

At the beginning the New Zealand experience and trajectory looked scary as it duplicated other countries. The projections were frightening both from the perspective on people as well as from the perspective of how our health system would cope with the emergency. Who knows how many times we will go into and out of lock downs. Certainly this is also affecting our economy and the welfare of our population.

Clutha Health First, as the primary provider of health services in our region needed to adjust how we delivered our service while maintaining as safe an environment for our patients and staff. I have to say that this was done with dignity and commitment to safe practice. Access to the Facility was limited and we tried new ways to deliver consultations with patients using both telephone and video. This has offered some learnings which we have been able to include in our ongoing practice. During the lock down we had to find a new way to deliver the seasonal flu vaccination in an efficient and safe way. The staff took up the challenge with the support of Clutha Emergency Services, the Cross Recreation Centre, St John and even New World offering sustenance for our staff. We carried out several drive-through flu vaccination clinics at the Cross Recreation Centre Car Park. This was essential as it offered additional immunity for the population in case we have a significant presence of Covid-19. The staff performed admirably despite some inclement weather.



Covid-19 also had an impact on other aspects of CHF business. Our Inpatient ward experienced reduced admissions during the lock down period, our District Nursing team were on the front line continuing to deliver essential services to the community, as were our Occupational Therapists. Other CHF services successfully continued to operate with a combination of staff working from home with limited access to the offices. We are proud to say that during this pandemic, our patients health and wellbeing continued to take priority, while we as a business took care of our staff.



93.5% of patients attended their scheduled Outpatient specialist appointment.



100% of Maori patients with long term conditions or high risk health needs have been invited for a Comprehensive Health Assessment (CHA).



2,566 General Practice patients have registered with ConnectMed, our online patient portal.

"After many visits here in the last year, the service is still the same - very, very good" Patient Feedback

Health and Disability System Review

The Labour Government commissioned a review of the New Zealand Health System. This is a significant piece of work that produced a preliminary report last September and the final report with recommendations was published in July 2020. You can find this report at <https://systemreview.health.govt.nz/>. So why is this important to Clutha Health First?

- Tier 1 vs Tier 2 health services:** This is new terminology as currently we use Primary vs Secondary/Tertiary Care. Primary Care has traditionally meant General Practice which is funded through PHO capitation (set centrally), Patient Fees, ACC contracts, and private business such as providing clinical services to a local employer. Secondary Care includes hospital admissions plus a number of ambulatory services such as District Nursing. Under Tier 1 the proposal is that this includes General Practice, but also a range of ambulatory services described in more detail in the report. It is noteworthy that CHF is currently funded for Secondary Services on a limited basis, but we are also a General Practice. In fact we already have Tier 1 services, but also some Tier 2 services.
- Locality Network including funding arrangement:** The report says that Locality Networks should focus on a community and coordinate services that are Tier 1 based. In South Otago, Clutha Health First could be considered as a locality network provider. Where we fall short is that the intent is that a locality is funded collectively for all General Practice, but also for a range of community services, community pharmacy, aged residential care, school based services amongst other activity. Clutha Health First is certainly not a provider of all these services. So, the question is, where will we fit in this new model?
- Shift of more services into Tier 1:** The recommendations from the Review strongly suggest that in the future DHBs devolve more services to localities and Tier 1 level services. This includes specialised diagnostics and procedural activities. This shift certainly is beneficial to rural communities such as ours, and will likely place increased demand for designated facilities, this is another reason that we are looking at our Facility Master Plan, mentioned by Clutha Health Incorporated.

36,323
General Practice visits
were provided in the
last year

Training of Health Professionals

CHF has supported for years the training of health professionals, which includes Medical, Nursing, Midwifery, Occupational Therapy students among others. We appreciate the effort of the Rural Medical Immersion Programme led by Dr Branko Sijnja on a national basis, and Dr David Mason as the local clinical coordinator. The development of the health workforce is critical especially for rural areas, and offering a rural placement in Balclutha gives us the opportunity to expose them to our health model and our community.

We are working with the Medical School and Polytechnics on a project to introduce Inter-professional education at CHF. This is a structured process of learning that partners the health workforce to work collaboratively. The plan is to introduce Inter-professional education at CHF starting in 2021.

Midwifery Services in South Otago

Clutha Health First employs four local Midwives who provide Lead Maternity Carer (LMC) services to the women of South Otago.



The LMCs support their clients wherever they may choose to safely have their baby, be it at home, at Clutha Health First's own primary maternity unit or at Queen Mary.

The LMCs are backed by a team of ward base midwives and registered nurses that work in the primary maternity units, delivering post-natal care to mums and their babies.

CCHCL Board of Directors



Rear L to R: Conway Powell, Alex Tickle, Alastair McKenzie, George Benwell with Ray Anton (CEO).

Front L to R: Branko Sijnja, Bill Thomson (Chair) and Leeanne Samuel.



Clutha Health Incorporated



Clutha Health First Facilities and Future Planning

Last year we indicated in our annual report that our facilities provided to CHF were modern having recently refurbished the Inpatient and Maternity Wards. We also upgraded the Air Conditioning System throughout the building. So why are we now completing a facility master planning exercise?

The answer is:

- CHF continue to experience increased demand for space. This includes more appropriate space for the Day Rehabilitation Service, teaching space for medical and other health trainees and increased demand in our Outpatient Clinic area. Looking into the future, CHF continues to see pressure on space with new services. One example is the introduction of the Te Tumu Waiora Primary Mental Health Programme and the need to find new offices for these clinicians. This programme started at CHF in August 2020.
- The building located at 24 Clyde Street is owned by us, Clutha Health Inc, and is leased to the Southern District Health Board to house their Mental Health and Public Health staff. This building is reaching the end of its useful life and we need to consider its replacement.

Late in 2019 we started a consultation process with the help of consultants, Logic Group to review our long term needs for facilities. We are currently in the business case step of this process. We are excited with this opportunity and further information and consultation with the community will be organised in the future.

We have been steadily building up our reserves that will ultimately be used for the development and maintenance of facilities that are used by CHF. Our outgoings are relatively modest, and the 10 year maintenance schedule means there are no sudden surprises or shocks.

The trustees of CHI are dedicated to representing the interests of people of Clutha District and discharge the duties that this involves in a professional and amicable manner.

Hamish Anderson
Chairperson
Clutha Health Incorporated

**Our District
Nurses provided
6,039
treatments in the
last year**

