Nelson Marlborough Health
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MEMO

To:	Board Members
From:	Bridget Jolly, Models of Care Programme Director
Date:	17 October 2018
Subject:	**UPDATE: Models of Care Programme**

Status

This report contains:
- ☐ **For decision**
- ✓ **Update**
- ☐ **Regular report**
- ☐ **For information**

Progress Overview

As discussed in the previous Board update, the Models of Care (MOC) Programme has summarised some emerging themes and initiatives (attached at the Appendix for reference). This output has been shared with a wider stakeholder group during September.

Feedback on the initial change initiatives was generally positive, but some feedback identified concerns that the initiatives are not transformative enough, and may not be identifying the major opportunities for change within the hospital settings.

In conjunction with the MOC programme, work is underway to progress the Indicative Business Case (IBC). This work includes clarifying and resolving key strategic issues that will be of significance for considering Nelson Hospital capacity and configuration and for options analysis in the IBC (the IBC Board update provides more detail). Advancing these issues will also provide important direction and detail to inform the MOC work.

Combined with the IBC work underway, the MOC Programme believes that, at this point in time, an appropriate breadth of initiatives and issues are being considered. We will continue to test and challenge thinking to ensure that transformative change remains the focus for the MOC programme.

Progressing Initiatives

The programme is conscious that the identified initiatives need to continue to show progress and become tangible change activity in order to maintain stakeholder support for change. Activity of note in progressing initiatives includes:

- Virtual Health – Care Foundation funding has been approved, this will support piloting virtual health initiatives across the district. The next steps include bringing together a range of people from across Nelson Marlborough Health to agree potential pilot activities and to recruit a project manager to work with clinicians to progress the work.
- End of Life Care – in conjunction with Grey Power, focus groups have been held in Stoke (25 September), Takaka (27 September) and Nelson (8 October) to support conversations about death, dying and end of life care. The Advanced Care Plan service is in contract. Negotiations are underway with the two Hospices and District Nursing to advance the Palliative Care review recommendations.
- Planned Care – an identified MOC change is shifting follow up appointments for melanoma and breast cancer from specialist to the patient's GP. This is well aligned with the desired MOC requirements including services being delivered closer to home, developing a skilled workforce, empowering consumers and a more connected system. There are a number of system changes required to enable this change including GP access to diagnostics and ease of information sharing between specialists and GPs. Work is underway to understand potential funding implications and bring this to scale by using a similar model in other departments.

- Towards Equity – note that the name of this workstream has been changed from Vulnerable Populations. A series of Service Provider hui are underway, bringing together providers from across the system to understand what initiatives are in place, how to work together better across the NMH system, and identify opportunities for joint system initiatives.

Resources
Project management resources within the programme team are becoming stretched as more initiatives require support to undertake appropriate levels of analysis and planning. Decisions may need to be made in the New Year about using additional NMH resources to enable change.

The MOC Programme has undertaken a recruitment process for a data analyst and communications advisor. A preferred candidate for each role has been identified and, subject to approvals, should start within the next six weeks**.**

Health Care Home (HCH) Update
The final selection meeting occurred for Tranche One HCH General Practices on 28 September. Five practices were selected equating to a combined 37,625 enrolled patients which is 26% of the district's enrolled population for Year One of the HCH programme. The practices are:

- Stoke Medical Centre
- Francis Street Health
- Scott Street Health Centre (soon to be Civic – Family Health)
- Greenwood Health
- The Doctors Motueka.

In parallel to this process, it emerged that the HCH Expression of Interest (EOI) was not clear in relation to the HCH resource and funding that practices would receive beyond Year One. ELT also expressed concern about the level of investment required beyond Year One before fully understanding what other resources would be needed to align and what the expected outcomes would be.

As a result, PHO and DHB leadership agreed to notify the practices that there was a change to the EOI, to be explicit that practices would be offered an HCH agreement for Year One and further work would be undertaken to consider on-going resourcing and investment for HCH Year Two and beyond. As part of this notification, the DHB and PHO signalled a desire to partner in a co-design process to inform this work and to consider what other system changes are required to enable HCH. These co-design sessions will commence on 31 October 2018.

Bridget Jolly
Programme Director

Appendix One: MOC – Emerging Themes

Models of Care: a multi-year health system transformation programme