

Improving quality of life in Maori patients with poorly managed Gout registered at Hora te Pai Health centre in the Kapiti Coast.

Primary Care Improvement Facilitators Programme 2019
James Westbury
Reuben Teo
Dr Chris Fawcett



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Improvement Facilitator

- Reuben Teo
 - Clinical Pharmacist at Westbury Pharmacy
 - Specialising in:
 - Aged residential Care.
 - Pain Management.
- James Westbury
 - Community Pharmacist at Westbury Pharmacy
 - Specialising in:
 - Service Development
 - Governance



Background/Context

- The Practice
- Hora te Pai is a low-cost access GP practice located in the Kapiti Coast, Wellington.
- They are the provider of choice to the Maori and Pacifica population of the Kapiti Coast.
- The burden of disease is significantly high for patients in the area with gout.
- The Pharmacy
- Westbury Pharmacy is a large community pharmacy supporting both community and aged residential care and is exploring new models of care to improve existing framework for gout management.
- The Issues:
 - Gout prevalence of 8.9%.
 - Ethnicity breakdown: Maori 52%, European 42%, Pacific 4%, Asian 2%.
 - Expected Gout prevalence should be higher.



Improvement Team

- Our project team is (will be) made up of:
 - James Westbury – Pharmacist
 - Reuben Teo – Clinical Pharmacist
 - Cherie Seamark – Practice Manager
 - Dr Chris Fawcett – General Practitioner
 - Carla Clark – Registered Nurse
 - Snooks – Maori Health Worker



Problem Statement

- There is a specific whanau identified by the staff at Hora te Pai that have a history of poorly controlled gout despite receiving medication leading to an increase in disease burden and more frequent urgent care appointments.
- Many of the members share medication and they have a very low prescription pick up rate.

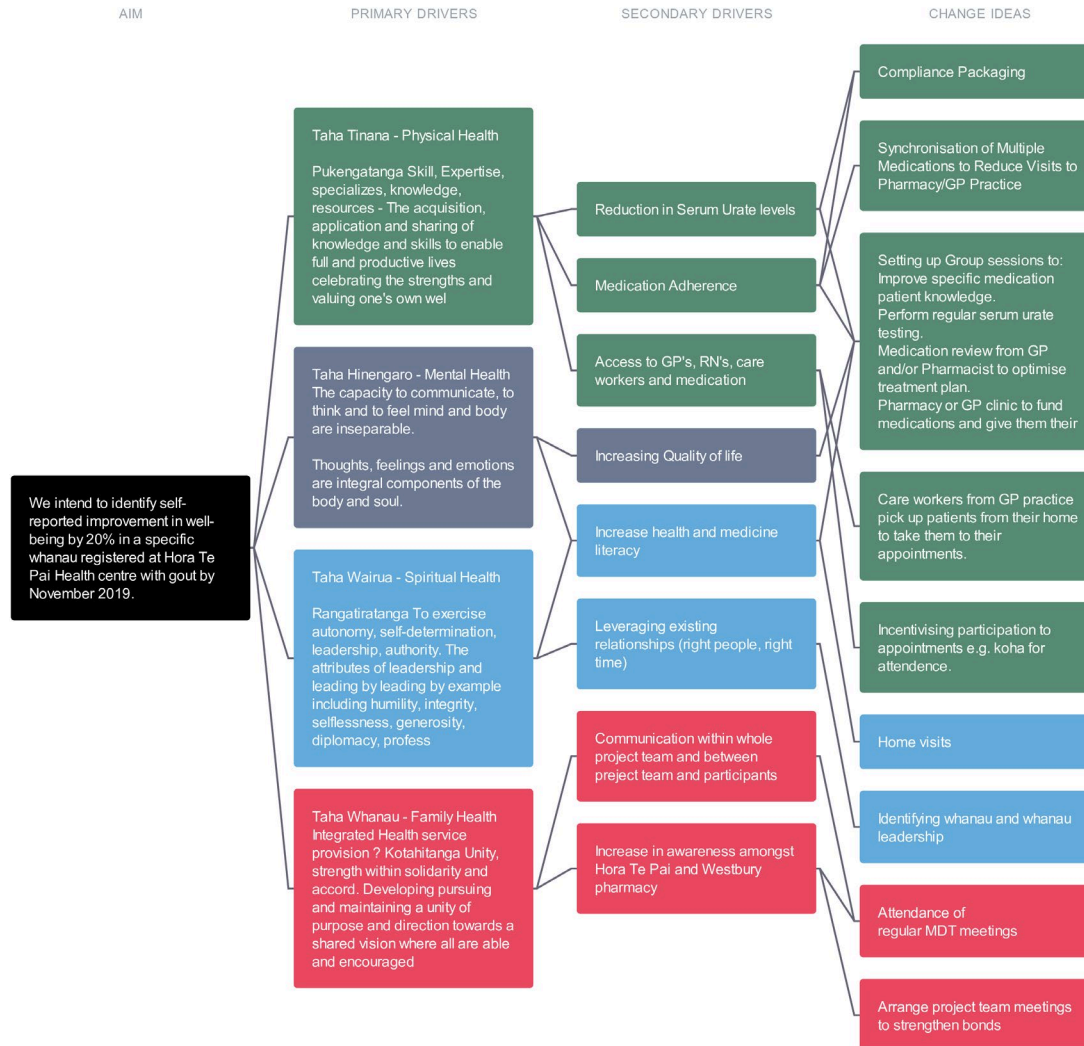


Aim Statement

- We intend to identify self-reported improvement in well-being by 20% in a specific whanau registered at Hora Te Pai Health centre with gout by November 2019.
- Measures: serum urate levels. Self-reported knowledge and understanding of their gout before, during and after the project. Medicine Adherence measures.
- Benefits:
 - Improved health literacy
 - Reduced disease burden
 - Reduced urgent care appointments
 - Improved medicine adherence
 - Improving health literacy
- **Need to develop model of care to illustrate benefit of pharmacy why do they need us???????**



Driver Diagram



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HEALTH SYSTEM INNOVATION AND IMPROVEMENT

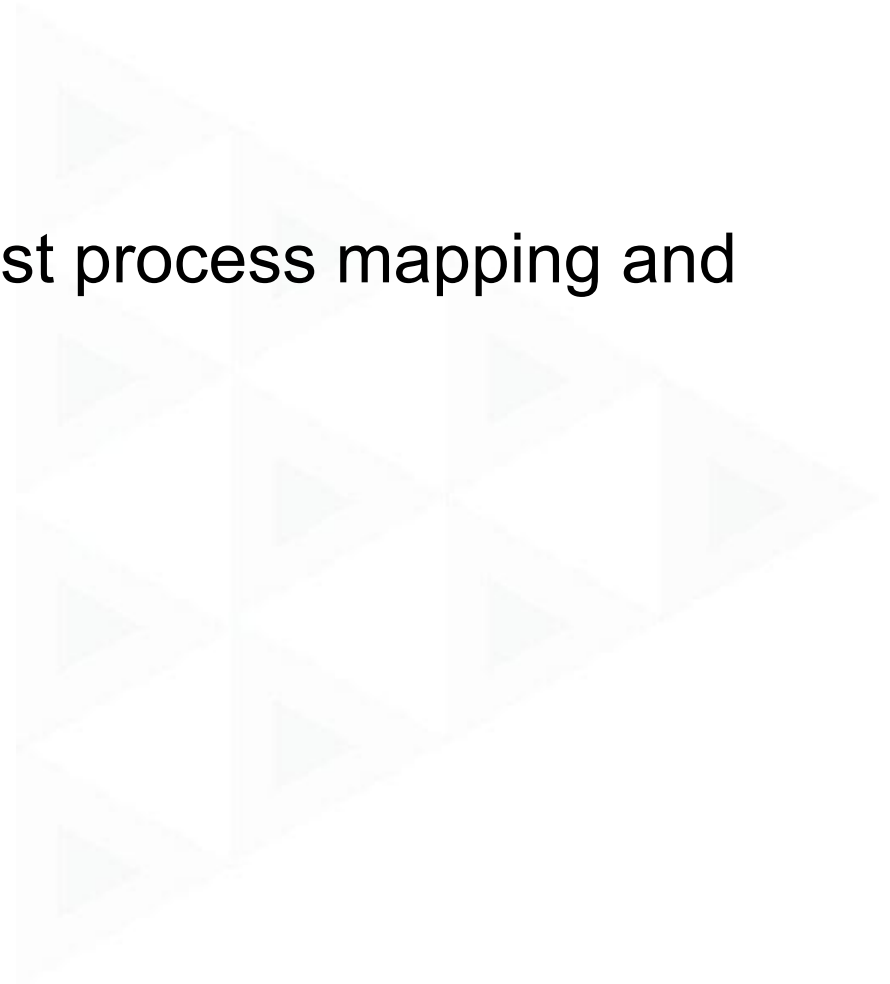
Diagnose the problem – data

- 8.9% of enrolled patients have a diagnosis of Gout.
- Reports from staff that medications are commonly shared between patients
- We have Read code data for patients affected with Gout
- We have prescription data
- We have limited patient experience data



Diagnose the problem- tools

- Ishikawa – Fishbone
- 5 –Y’s
- Driver diagram used to assist process mapping and align project plan



Capturing the Patient Experience

- We plan to use a modified 5 point Flinders type assessment to assess patient adherence at each of the workshops.
- Plan to use a patient feedback questionnaire to measure patient experience at workshops.
- Plan to use a weekly text or call to measure gout symptom score and number of NSAIDs taken.



Our Plan

- We plan to hold three one-hour group sessions every two months that will provide the medium to answer questions about their gout in a group setting.
- There will be a questionnaire asking questions about how the participants feel the course has helped and what they expect from the programme and other general feedback about the project.
- At the group meetings we intend to carry out the serum urate tests and questionnaires about how the participants feel about their gout.
- Follow-up GP consultations can be arranged throughout the project for a more private consultation

Stakeholders Analysis Date Completed/Updated

Stakeholder	No commitment	Let it happen	Help it happen	Make it happen
<i>Patients</i>		X		
	Action/s planned to move stakeholder			
<i>Dr Chris Fawcett</i>			X	
	Action/s planned to move stakeholder			
Cherie Seamark			X	
	Action/s planned to move stakeholder			
Snooks				X
	Action/s planned to move stakeholder			
Reuben Teo				X
	Action/s planned to move stakeholder			
James Westbury				X
	Action/s planned to move stakeholder			
	Action/s planned to move stakeholder			

Mark the current state for your Stakeholders the desired state and how y **X = Current State** | **X = Desired State** desired state

Stakeholder communication plan

Stakeholder	Motivation/values	Action/message	Strategy	Responsibility	Reflection
The Whanau	Improved Health Outcomes	To participate in group Learning			
The Practice	Reduce work burden				
The Pharmacy	To colaberate				
Other					

Key Success/barriers

- We have had a successful start to the project with a constructive meeting with clinical staff and health workers to socialise the project and refine the project outcomes.
- Our greatest challenge has been the limited data availability.



Lessons Learned

- Early planning
- Whole team (integrated approach) to project planning including buy in
- Patient involvement
- Communication
- Ensuring the project manageable and defined
- Co-operation

