



Quality Improvement Scientific Symposium 2023

Time		
8.00 am	Registration opens and poster viewing	
8.45 am	Mihi whakatau and welcome from tangata whenua <i>Mana whenua:</i> Ngāti Tamaoho, Ngāti Koheriki, Ngai Tai, Ngāti Pou, Ngāti Aitaki <i>Manuhiri:</i> Matua Doug Edwards	
9.15 am	Whakanoa and Morning tea	
9.40 am	Welcome Dr Peter Jansen, Chief Executive Tumuaki Te Tāhū Hauora Health Quality & Safety Commission	
9.50 am	Reflections from a consumer council co-chair Angie Smith, Co-chair Consumer Advisory Council Group Te Tāhū Hauora Health Quality & Safety Commission	
10.05 am	The learning health system – implications for quality of care in Aotearoa New Zealand Professor Jeffrey Braithwaite, Founding Director Australian Institute of Health Improvement The learning health system has been defined by the Institute of Medicine as a health system where ‘science, informatics, incentives, and culture are aligned for continuous improvement and innovation, with best practices seamlessly embedded in the care process, patients and families are active participants in all elements, and new knowledge is captured as an integral by-product of the care experience.’ In the context of Aotearoa New Zealand, which has an advanced health system, is the learning health system concept a useful one to pursue, and how can the ideas and framework be exploited further? In this keynote presentation, Prof Braithwaite will present the most recent information on the learning health system and apply relevant examples. We will then examine the implications for quality of care in Aotearoa New Zealand and how this affects our health care system	
Time	Concurrent rapid-fire sessions	
	Jean Batten ballroom	Richard Pearse room
10.55 am	On PAR-FOUR shots required for ‘PATIENT AT RISK’ team Fiona Burns Hauora a Toi Bay of Plenty Adele Ferguson Te Whatu Ora: Hauora A Toi Bay Of Plenty: Whakatane	Child health integrated response pathway (CHIRP) – from chaos to collaboration Kim Blair Te Whatu Ora Anja Theron Te Whatu Ora

	<p>The design and implementation of a Patient at Risk (PAR) team has been successful at Whakatāne Hospital, a small regional hospital serving a largely rural and high Māori population.</p> <p>Keeping patients safe in the after-hours setting, against a background of rising acute admissions and higher acuity patients, was the identified problem. Because senior clinical decision-making was reduced on-site during the afternoon period a new senior nursing role was piloted. Through recognition and response to early deterioration there has been improved patient safety, along with a reduction of inpatient transfers back to an ICU/HDU bed. Sustainability has been enabled through the coaching function of the role. The role is now 'planted' to enable a team approach for safe patient/whānau care.</p>	<p>CHIRP - Child Health Integrated response Pathway, placed first at the Health Round Table Poster Innovation awards 2023 for most impactful innovation in the 'patient access' category, and placed 2nd overall out of 64 Innovations from Australia and New Zealand. It is Te Whatu Ora, Bay of Plenty's answer to stopping children falling through gaps, and to provide a timely, meaningful and responsive diagnostic assessment/support service for Tamariki with neuro-diversity and neuro-developmental challenges. By breaking down silo's and working closely with Education, Schools and Primary Care, Bay of Plenty have seen wait times halved and consumer and specialist experience improve.</p>
11.10 am	Time to move between rooms	
11.15 am	<p>Decreasing waiting times for community physiotherapy to prevent harm</p> <p>Ashley Simmons Te Whatu Ora Waitematā</p> <p>Patients referred to community physiotherapy were experiencing potentially, preventable falls or decline in mobility that result in harm, injury, hospital admission and premature death whilst waiting for intervention due to the extended waiting times for first specialist assessment. The changes implemented in this quality improvement project, that will be presented, have aimed to increase the number of patients receiving first specialist assessment within 14 days from referral. Starting January 2023 the changes implemented to date demonstrate an increase from 33% at baseline to 65% of patients seen within 14 days</p>	<p>Zero seclusion: safety and dignity for all</p> <p>Karl Wairama Te Tāhū Hauora Health Quality & Safety Commission Karen O'Keeffe Te Whatu Ora Northland</p> <p>The Zero seclusion: safety and dignity for all Aukatia te noho punanga: noho haumanu, tū rangatira mō te tokomaha project team has worked for the past four years in collaboration with the 19 localities with mental health inpatient units to find alternatives to seclusion for people who are experiencing distress. This presentation will describe the improvement processes the project utilised including the hybrid improvement model utilising an initial co-design phase with a strong focus on equity and cultural intervention followed by a formative collaborative approach to move towards zero seclusion and reducing outcome inequities.</p>
11.30 am	Time to move between rooms	
11.35 am	<p>Local solutions improve rehabilitation outcomes after major trauma in Aotearoa</p> <p>Jessica Lockett</p>	<p>SOĀLAUPULE: Inclusive decision-making and power-sharing to inform systems change</p>

	<p>Te Tāhū Hauora Health Quality & Safety Commission</p> <p>A national rehabilitation collaborative brought together 9 project teams from across New Zealand. The work identified and implemented initiatives that removed barriers to achieving best outcomes for patients with major trauma and increased the quality improvement skills of clinicians.</p> <p>The project methodology was both evidence-based and co-designed with consumers. Robust processes identified problem areas, measurable change ideas were explored, and sustainability planning supported implementation of successful innovations.</p>	<p>Toleaoa Schuster, Tutulumanulagi Ltd Annie Ualesi Called Limited Jodi Meadows Ara Manawa – Te Toka Tumai</p> <p>Samoans have turned to the concept and process of Soālaupule in addressing matters of complexity, or matters that are challenging and require an holistic and inclusive approach to seeking solutions and building consensus around those solutions.</p> <p>Combining Co-Design mindsets and tools with Samoan worldview on strategic engagement and inclusive decision making, this session harnesses Soālaupule as an approach to creating an enabling space that fosters power sharing, shared solutions and the recognition of the social, political, relational capital among professionals and families in identifying appropriate models of care for addressing impacts of rheumatic fever & heart disease.</p>
11.50 am	Time to move between rooms	
11.55 am	<p>Enhancing diabetes clinic attendance for high-risk patients in community-based settings</p> <p>Amy Liu Te Whatu Ora Te Toka Tumai Sam Semper Te Whatu Ora Te Toka Tumai</p> <p>The global diabetes pandemic is of grave concern, and Aotearoa New Zealand is no exception. The diabetes register showed that the number of people with diabetes has surged to nearly 300,000 and is projected to grow by 70–90 percent by 2040, causing a staggering annual budget escalation to \$3.5 billion. Disproportionate effects are evident among Māori and Pacific communities, who face three to five times higher incidence rates of type 2 diabetes, exacerbated by adverse outcomes and socioeconomic challenges. A concerning trend of missed appointments, reaching rates as high as 43 percent, disproportionately affects these communities, underscoring the urgency of enhancing diabetes clinic attendance within community-based settings.</p>	<p>Poipoia te Pā Hārakeke: Community enablement model using locality approaches.</p> <p>Leigh Haldane Te Whatu Ora - Hauora A Toi Bay Of Plenty</p> <p>Poipoia te Pā Hārakeke: A community enablement model using a locality approach. The name Poipoia te Pā Hārakeke speaks of ‘nurturing the shoots of the hārakeke plant so it will grow healthy and strong’. This is a story about relationships, trust and improving access to allied health services through mahi tahi.</p>

12.10 pm	Tina Lunch and poster viewing	
1.00 pm	<p>The future of health care to 2030 and the Aotearoa New Zealand context Professor Jeffrey Braithwaite, Founding Director Australian Institute of Health Improvement</p> <p>Research has shown five recurring trends shaping health systems during the 2020s: sustainability, genomics, artificial intelligence and machine learning, demographics and new models of care.</p> <p>Nine priority areas are creating systems change: integration of care; financing, economics and insurance; patient-based care; universal coverage; clinical and information technology; aging population and demographics; preventive care; accreditation, standards and policy; and human development.</p> <p>In Prof Braithwaite's second keynote presentation, we will map the futurology work of the 5 + 9 model to the ideas that underpin the new mission of Aotearoa New Zealand's current health care system. Questions to discuss include: how might the many improvement initiatives in health care training benefit from an understanding of the five trends and nine priorities, and what challenges does this model pose to systems designers and change agents in Aotearoa New Zealand?</p>	
1.45 pm	Time to move between rooms	
1.50 pm	Concurrent workshops	
	Jean Batten ballroom	Richard Pearse room
	<p>Reframing disability in health – achieving equity in health care Rachel Noble, General Manager - Disability Te Whatu Ora Leo Goldie Anderson, Senior Advisor – Disability Te Whatu Ora</p> <p>In this engaging session, Rachel and Leo will delve into the importance of reshaping perceptions and approaches to disability within the health sector. They will emphasise the need for health care professionals and clinicians to work proactively towards making health services equitable for all individuals, including those with disabilities and their whānau.</p>	<p>He Pikinga Wairoa Nina Scott – Te Aka Whai Ora</p> <p>This workshop presents a Kaupapa Māori co-design framework that emphasises collaborative approaches and systems thinking when working with community providers to address health equity. Participants will explore how the framework can be used as a visioning, planning and evaluation tool to support quality improvement in health care.</p>
2.50 pm	Ti ahiahi Afternoon tea and poster viewing	
3.10 pm	<p>Improving systems of care using Resilient Health Care principles: Facilitating family escalation of concerns in paediatric emergency care Professor Janet Anderson – Professor of Human Factors Department of Anaesthesiology and Perioperative Medicine Monash University</p> <p>The ability of families and carers to escalate their concerns about possible deterioration to staff is highly variable and affected by many aspects of the system, yet recommendations often focus on reminding staff to listen to concerns. Resilient Health Care is a coherent set of principles about the nature of health care systems that are characterised by complexity, non-linearity and</p>	

	variability. These hallmarks of health care work have implications for the way quality improvement is approached. In a complex system, analysing the way work is done in practice and identifying how to manage complexity while still allowing the flexibility to solve problems are crucial for effective improvement. In this presentation, Prof Anderson will discuss how Resilient Health Care principles were used to generate a range of effective interventions in a study of escalation of family concerns in paediatric emergency care.
3.55pm	Quality Improvement Scientific Symposium 2023 awards Gillian Bohm and Dr Peter Jansen
4.05pm	Thoughts from today Dr Peter Jansen, Chief Executive Tumuaki Te Tāhū Hauora Health Quality & Safety Commission
4.15pm	Karakia whakamutunga Doug Edwards Kairuruku Ahurea Te Tāhū Hauora Health Quality & Safety Commission
4.30 pm	Symposium ends

Opening Waiata: Whakarongo ake au

Whakarongo ake au	I listen, where up high
Ki te tangi a te manu	A bird flies
E rere runga rawa e	It's cry rings out
Tui, tui, tui, tuia	Sew, stitch, bind it together
Tuia I runga	From above
Tuia I raro	From below
Tuia I roto	From within
Tuia I waho	From outside
Tuia I te here tāngata e	Interlaced by threads of human love
Tui, tui, tui, tuia	During the day
Ka rongō te ao	And at night
Ka rongō te pō	Sew, stitch, bind it together
Tui, tui, tui, tuia	