

April 2022

# Te Rerenga

News from the Western Bay of Plenty Primary Health Organisation



Western Bay of Plenty  
Primary Health Organisation

TŪNGIA TE URURUA KIA TUPU  
WHAKARITORITO TE TUPU  
O TE HARAKEKE



*The CPRT team, led by Sarah Johnson (centre), and administrators Renee Still (left) and Jen Moore (right) have developed local COVID referral processes.*

## COVID data reveals patient need

**About 10 percent of patients testing positive for COVID in the Bay of Plenty each day are not enrolled with a GP.**

The observation follows analysis of local COVID data by Network Services Development Advisor Trish Anderson and the COVID Primary Response Team (CPRT). The team was set up in December ahead of the Omicron response.

Team Lead Sarah Johnson says, after a busy four months supporting the GP network to manage COVID positive referrals, the PHO was pulling together valuable population data.

An average of 1200 patients recorded positive RAT results each day in the Bay of

Plenty earlier this year. About 10 percent are not enrolled with a general practice.

Sarah says the finding is "quite significant." "These are the patients whom we know have largely been disconnected from health services for a while. In the future, we really want to reach out and support them.

"Even though we don't know them as our patients, we have a duty of care and a sense of responsibility to ensure they have access to healthcare, should they need it."

*Story continues next page ...*

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Cover story continues ...

After work to analyse the Bay of Plenty's unenrolled population COVID data is complete, the PHO will look at ways it can re-engage with these, at times, hard-to-reach patients.

Sarah says many learnings have come from Aotearoa's COVID response, which has brought into focus where some of the greatest community needs are.

"The local Welfare hub has been incredibly busy this year. With Omicron, most people can manage their symptoms at home. The greater concern is their welfare needs, that come from the social isolation, financial stress, and the strain on their mental wellbeing."

Two administrators joined the CPRT team this year – Jen Moore and Renee Still. With Sarah, they've developed local COVID referral processes, working across the Bay of Plenty network and with telehealth providers Tunstall and Evolve.

"Our team is aptly named because we've had to respond to different

challenges. Every day is different and we've had to frequently update processes as things have changed at short notice."

Enrolled COVID-positive patients are automatically allocated to their general practice for follow-up care via the National Contact Tracing System, which integrates with COVID Clinical Care Module (CCCM), an online system designed to support patient case management.

The CPRT team manually allocates unenrolled patients to Tunstall for clinical care. Tunstall also handles any weekend care of high needs patients when practices don't have capacity. When patients are treated for COVID symptoms in Tauranga or Whakatāne hospital, the CPRT team also handles the referral forms on discharge.

Having operated through the peak of Omicron, Sarah says responding to COVID is like a spiderweb.

"It's intricate and sometimes we can get tangled up and trapped in the web! But we're all connected and it's quite beautiful when it all comes together."

## Surveillance on Delta

A positive Delta case recorded in the Bay of Plenty in March has prompted a trial investigating Delta's presence here.

The trial, involving four practices across Te Puke, Pāpāmoa, Tauranga and the Eastern Bay, will determine how widespread the Delta variant is. Patients who record positive RAT results will be invited to have a PCR test so public health officials can determine the exact COVID variant.

Sarah says it's assumed that most COVID cases are the highly transmissible, but less severe Omicron strain. Delta symptoms can be more serious, so it is important for Toi Te Ora Public Health and the Ministry of Health to understand how widespread it is in the community.

"The trial will allow us to give feedback to the ministry with accurate surveillance data."

# Māori health leaders unite in Tauranga Moana

Our PHO had the privilege of hosting the GPNZ Māori Health Leaders rūpū in February.

Established two years ago, the rūpū is a collective of Māori Health leaders from across the national PHO network. It is currently chaired by Irihāpeti Mahuika.

The group had a tough 2021 with many of the planned hui cancelled. This made the event in Tauranga Moana extra special for everyone.

Participants identified four key areas for development including Māori governance and partnership, recruitment of Māori into primary care, General Practice support tools to make Māori health planning intentional and authentic, and the development of Tikanga within our own whare (both GPNZ and PHO networks). The rūpū then paved out a progressive workplan.



Attendees of GPNZ's first hui for its Māori Health Leaders rūpū in 2022.



# Stepping up under pressure

General practices have stepped up to provide extraordinary support to COVID-positive patients as part of Aotearoa's Omicron response.



Phone calls to check on the health of patients in isolation have been part of the evolving COVID Care in the Community model, requiring primary health practitioners to work in different ways to meet the needs of those in their care. Concern for the highest needs patients has been a major priority, requiring thoughtful communication and clinical oversight. This work is in addition to everyone's busy daily workloads.

As well as managing their own patients, an important part of the response has been the case management of patients who aren't enrolled with a Bay of Plenty practice. This work relies on practice teams who volunteer to be part of a Duty Practice weekdays roster, as well as an on-call weekend/public holidays clinician roster.

We wish to acknowledge the following practices and clinicians for stepping up to be part of the week day roster: The Doctors Tauranga, Pāpāmoa Beach Family Practice, Epic Health, Tara Road Medical Centre (for Nov/Dec.), Fifth Avenue Family Practice and Dee Street Medical Centre.

We'd also like to thank the following

practitioners for their on-call weekend and public holiday availability: Dr Luke Bradford, Dr Alison James and Dr Fhiona Barrett (Fifth Avenue Family Practice), Kirsty Cooke, NP (The Doctors Pāpāmoa), Rosemary Minto, NP (Tauranga Moana City Clinic), and Mary Jo Gagan, NP (Third Age Health), Dr Dan McIntosh and Dr Lara Cunneen (Dee Street Medical Centre), Dr Hannah Jenkins (Gate Pa Medical Centre), Dr Byrdie Johnston (Riverslea Medical Centre), Dr Sarah Felt (The Doctors Phoenix), Lorraine Hogan, NP (The Doctors Bayfair), Dr Jen Brodie (Pāpāmoa Pines Medical Centre) and Debbie Smith (NP) at Toi Ora Health in Opotiki.

Your willingness to participate in the scheme is highly valued.

## Practice perspectives

Western Bay of Plenty practice managers say managing COVID positive patients and the challenges of Omicron united their teams.

The Doctors Tauranga, Epic Health, Dee Street Medical Centre and Fifth Avenue Family Practice volunteered to be part of

the week day roster, taking on responsibility for COVID patients who aren't enrolled with a local practice.

Pam van der Nest from The Doctors Tauranga says they had a designated doctor who worked with the team on all COVID-positive patients. The workload was a 'dramatic increase' but working as a tight unit ensured they had the resources to cope.

Working through the peak of a pandemic required everyone to 'think on their feet', she says.

"Volunteering for the roster was a chance to support our community...no amount of planning would have made it easier."

At Epic Health, staff held short meetings, quickly determining those patients most in need. Working as a team and prioritising staff welfare was essential, says Practice Manager Wendy Sharplin.

"Many hands make light work but we all needed to take a breath, and look after each other to make sure no one had overcommitted."

At Dee Street Medical Centre, practice manager Camilla Wilkin says communication and teamwork were essential in managing COVID cases. "Patients we managed were hard to engage with and also to contact. For the clinicians, it was a matter of allocating and directing the flow of patients, communicating and pitching in."

The team at Fifth Avenue Family Practice managed one of the earliest casual community cases at Mount Maunganui. Lessons learned through the process were later shared as a team, says practice manager Leigh Kennedy.

"We treated people who haven't accessed the health system for years. Some asked us later to look after them and their whānau on a more regular basis, so that's been rewarding."

The experience also revealed some high welfare needs in the community.

"It was a good experience to support those most in need. Being on the roster positioned us well to cope with the next phase that hit from January onwards. That's when we started to see more of our own patients and all doctors shared in managing their care. Since we had the knowledge and systems in place case management was much more seamless."

# Minister visits IPMHA team at Pāpāmoa Pines Medical Centre

Minister of Health Andrew Little visited IPMHA Services at Pāpāmoa Pines Medical Centre to meet the Integrated Primary Mental Health and Addiction (IPMHA) services team in March.

During the visit, Minister Little met with Practice staff including in-house Health Improvement Practitioner Margie Proposch-Bacon, Health Coach Adam Bettridge and Bharat Mahajan, Western Bay of Plenty PHO IPMHA Programme Lead.

“It was a real opportunity for the Minister of Health to engage with Practice staff and hear about the difference the IPMHA service is making within the GP Practice and to the lives of patients,” says Bharat. “The Minister of Health was very engaging and took the time to chat and listen to the experiences of staff.

“Staff were only too happy to talk about the benefits of the IPMHA service – no waiting list, appointments available on the same day and the opportunity to come back as often as needed.”

The Minister was also keen to learn about the hybrid model that enables health coaches to see patients in the community, hence removing barriers and increasing access, says Bharat.

Pāpāmoa Pines was one of the first GP Practices in the Western Bay of Plenty to roll out the new IPMHA services in November 2021. The purpose of the new

IPMHA services is to expand access to, and choice of, primary mental health and addiction responses, enabling people with mild to moderate needs to access free and immediate mental wellbeing advice and support, when and where they need it.

IPMHA services are being rolled out across Western and Eastern Bay of Plenty between November 2021 and January 2023. Currently, they are operating at Pāpāmoa Pines and at its Palm Springs clinic, as well as Mount Medical Centre and Chadwick Healthcare.



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Pictured from left: Phil Back (WBoP PHO), Natasha Edhouse (WBoP PHO), Margie Proposch-Bacon (WBoP PHO), Jo McIlwain (Pāpāmoa Pines), Andrew Little (Minister of Health), Glenn Dunkerley (Pāpāmoa Pines), Angie Warren-Clark (Labour MP), Kerri Fabish (Pāpāmoa Pines Medical Centre), Bharat Mahajan (WBoP PHO), Adam Bettridge (WBoP PHO) and Jenny Falconer (WBoP PHO).



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# Collaboration key to success

**As the PHO's newly appointed General Manager, Clinical Services and COVID Response, Wendy Horo-Gregory welcomes the opportunity to contribute, alongside her work colleagues, Practices, Iwi and whānau, to the health of communities in the Bay of Plenty.**

Wendy previously worked at Tū Ora Compass Health in Wellington as the Programme Lead for the Health Care Home programme. She has enjoyed a diverse clinical career over 30 years, including roles in hospital and primary health nursing, quality improvement, programme and service development, and management. Her interest in primary health lies in the belief that an "ounce of prevention is better than a pound of cure".

Wendy has spent her first 90 days acclimatising to her new role by taking a programme 'temperature check' of the services that sit within her responsibility. "My initial focus has been on supporting the work of the COVID Primary Response Team and the ongoing demands of this service.

"Currently I am reviewing service and performance data related to all services. I like the way data tells a story and understanding the reporting context helps make it meaningful. This, in turn, helps inform process, performance, and service improvements."

"A major drawcard to this role was the diversity of the work and the PHO's commitment to achieving equity of health outcomes for Māori. It also means I no longer need to travel to Wellington for work, every fortnight. I believe people are the best advocates of their health and the health of their whānau and, as a clinician,



*Wendy Horo-Gregory believes people are the best advocates for their health and the health of their whānau.*

I support ways of working that enable people to proactively participate in their care, in a way that is meaningful for them. To this end, I support collaborative ways of working."

Wendy says that while the impact of COVID-19 has been keenly felt and continues to be felt across a range of frontline health and social services and communities, the challenge is to look ahead at what a new post-COVID normal might look like. Technology enablers, previously unheard of pre-COVID, are now embedded ways of working for many e.g., GP triage, telehealth services and working from home to name a few. She says there is a need, however, to look at the impact of COVID's interruption on BAU activities, to ensure equity remains at the forefront of the PHO's mahi.

Wendy lives in Mount Maunganui with her whānau and enjoys being hands on with her "two beautiful mokopuna". Wendy's whakapapa hails from Taranaki, from a small rural community, Rahotu, but she loves the warm climes of the Bay area. For relaxation she enjoys swimming, reading and time with whānau and friends.

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## Juggle all worth it for new nurse practitioner

**Making an even greater difference to the care and quality of life for older people in aged residential care has motivated Kate O'Dwyer to become a Nurse Practitioner (Mātanga Tapuhi | NP).**

A nurse for 21 years, Kate secured her 'NP' status with sign-off from the Nursing Council earlier this year after completing a Master of Nursing and a nurse practitioner internship through the University of Auckland.

Studying part-time for two years through a pandemic while still working full-time and staying on top of family commitments was a juggle, she says.

"I'm no super mum and I couldn't have done it without the support of my husband Matt, and my kids Mackenzie (12) and Tully (9). The rest of the whānau also helped out, and I'm very grateful for their support in helping me reach my goal."

A member of the PHO's Aged Related Residential Care (ARRC) team until recently, Kate also pays credit to her colleagues Fiona Holmes (Clinical Nurse Specialist) and

Pauline McQuoid (Clinical Pharmacist) and the WBOP PHO who have encouraged and supported her NP journey.

"Dr Anthony March and Nurse Practitioner Louise Fowler from Cicada Health were incredible mentors during my internship year. There are also many other nursing and NP colleagues, as well as the teams in aged care facilities, who provided me with support. It really does take a village!"

*Story continues next page ...*

Kate O'Dwyer story continues ...



New nurse practitioner Kate O'Dwyer.

Kate started her nursing career in Auckland, moving to the Bay of Plenty in 2011. She joined the PHO seven years later.

The region's expanding ageing population means there is a pressing need for gerontology nursing roles, she says.

"I've always enjoyed working in aged care, starting my career as a part-time caregiver while I was still in high school. Now as an NP, striving to provide a patient-centred experience is what drives me.

"I also enjoy collaborating with the wider medical and NP community and mentoring and coaching the aged care workforce. The focus is always promoting optimal function, comfort, dignity, and quality of life for residents."

Previously a Clinical Nurse Specialist, she could assess residents and make recommendations, but would need to contact a resident's General Practitioner (GP) to assess and prescribe if needed.

Now as a NP, she can see residents that require clinical assessment and treatment, make the diagnosis, prescribe, and order tests that may be necessary, then communicate plans with the GP.

"We need more NPs in aged care. It's another career pathway for nurses to take and it's very rewarding, clinically, especially if you don't want to go down the track of management.

"There's a growing community of us in the Bay of Plenty, which means we can always 'phone a friend' for support."

## Education and equity focus

Alice Talmage is helping to demystify diabetes for people in the Western Bay after joining the PHO as a Community Dietitian.

Her move to Tauranga follows a two-and-a-half year stint at a PHO in Dunedin where she helped deliver the Diabetes Education and Self-Management for Ongoing and Newly Diagnosed (DESMOND) programme.

Operating similar self-management groups here for people with Type 2 diabetes fulfils Alice's desire to empower people to make their own positive lifestyle decisions.

"I love getting everyone in a room and demystifying diabetes," she says. "People of all ages and backgrounds have diabetes and I want to help remove the stigma that can be attached to it."

Despite efforts put into raising awareness about the condition, there is still misinformation about treatments, and many newly diagnosed patients experience a lot of self-blame and embarrassment.

"We've come a long way but there's more work to do to educate people. Some people don't like to talk about it. Diabetes is a lifestyle disease but there's also risk factors that are outside of people's control.

"There's weight stigma that people can be dealing with and many feel they should have been more active or eaten differently. Yes, there's lots of things people can do for their lifestyle, but sometimes you are dealt an unlucky hand."

Alice stresses that there's no 'magic' type 2 diabetes diet, and people don't have to cut out all carbs and sugar from meals. "The message is to generally live a healthy lifestyle, which is what we want everyone to be doing. There's no crazy diets that people need to go on."

About 5 per cent of New Zealand's population has type 2 diabetes. Pre-COVID, this was predicted to increase to 7 per cent of the population by 2040 (equating to an estimated 430,000 people with type 2 diabetes).

Disruption caused by COVID is likely to increase the risks associated with developing diabetes for people, as well as make its management harder, says Alice.

"The vast majority of people have so much else going on with their lives in a



Dietitian Alice Talmage says disruption caused by COVID can make managing diabetes harder.

COVID environment, and diabetes is just one more thing to add to their list, so its management can feel quite overwhelming.

"Living through lockdowns, access to food has changed. Some people have made really positive changes working at home but more people have gone the other way. There's a lot of comfort eating and people weren't able to do the activities they once did. It's definitely been challenging."

Outside of diabetes education, Alice also runs self-management lifestyle groups for general health and wellness, sees people one-on-one in a clinic, and educates other health professionals.

Self-management groups have been run via Zoom in recent months, but it's hoped face-to-face sessions can return when fewer COVID restrictions are in place.

"I'm passionate that I can play a part in helping to reduce health inequities, so there's fewer barriers for people to participate. We're going to review and adapt the sessions so they are more culturally appropriate. We already partner with the Pacific Island Community Trust and have held marae-based sessions, and they should be more of a focus in future."



# Supporting wahine

Our 2022 Ūkaipō wananga got underway at Hungahungatoroa Marae in Matapihi in February. Four local māmā participated over four days, each weaving a beautiful wahakura (flax basket) for their pēpiē. The baskets promote safe sleeping in smokefree environments.

The DHB-funded programme also provides opportunities for other health and social service providers in Tauranga Moana to share their knowledge and support for the kaupapa.

In February, these included representatives from the Bay of Plenty DHB's dental health service, Plunket, Pēpi Ora, Family Planning, Accessible Properties, Waipu Hauora, Sport Bay of Plenty, Tutū Home-based childcare.

Ūkaipō coordinator Tiana Bennett says the programme continues to receive incredible support from the community.

"We are fortunate to have wonderful providers across the Western Bay who join us for a few hours and share what they do for tamariki, and their extended whānau.

"In a relaxed setting, māmā and their support people learn about the services that are available, and they connect with them on the day, or later, sometimes through me."

It was important for wahine to know help was only a phone call away, she says. Support was also available for breastfeeding, maternal mental health and addictions.

"Every whānau is on their own journey but we want māmā to know they can reach out when they need help."



*Two weavers from Tauranga Moana extending their skill and knowledge, helping to complete 10 wahakura waikawa for gifting to whānau.*

A weaving wananga was held in Te Teko recently with specialist weaver Jenny Firmin from Whanganui, following best practice guidelines for weaving wahakura waikawa.

Participants were taken through the steps to ensure a safe sleep device for pēpi was woven. Four weavers from Tauranga Moana attended the wananga and extended their skill and knowledge on how to weave the waikawa process. Ten wahakura were woven and have been gifted to hapū māmā as a taonga (treasure) for their whānau.



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# Finding jewels in population data

**According to the PHO's Chief Information Officer (CIO) Chris Dever, health is an information-based science – with a little bit of art thrown in for good measure.**

The seasoned veteran is well qualified to know – Chris has worked in IT for 40 years, and has experience across multiple sectors. He joined the PHO in 2021, leading a small team that provides digital support services, including data and server management.

“Although we have, for decades, collected significant volumes of data, we’ve only recently had the tools to start utilising that data to improve clinical efficiency and better support our patients.

“My role is to add momentum to that effort.”

His team’s every day mahi ensures that staff have the right equipment for their role and can use it effectively, manage the data collected from practices, the DHB and other

health data sources, and then analyse and display that data in a way that is meaningful for the PHO team and GP network.

Chris is the first to admit that IT has come a long way since he was first recruited to work on the Wanganui Computer Centre Project in the mid-1970s. His career has spanned major advances in the world of computing, from the release of the first PCs and writing his first computer program, to the development of mobile technology where everyone now carries with them a powerful computer in their hands.

He has always been interested in making technology deliver value to those who use it.

“Initially, value was major computing

tasks. Later, it meant that typists did not have to type draft letters, reports and memos and then type them again (with two carbon copies) after the author had edited them. We could also store files and find them again.

“More recently, we have been able to move from storing and retrieving data to being able to utilise that data to not only see what’s happening now, but to help predict what might happen in the future.”

The PHO has well-established processes to collect relevant data, in accordance with data sharing agreements with its partners. It also has tools that allows Chris and his team to standardise data that gets pulled from various Patient Management Systems.

“Then we have other tools that allow us to cut and slice that data to find the jewels amongst the numbers.

“This allows us to look at, for instance, the childhood immunisation records for our population, break that down across ethnicity and use that data to put outreach programmes or other actions in place to address equity issues.”

Cyber security remains an ongoing threat in IT, with a massive ransomware attack severely disrupting Waikato District Health Board’s services last year. The PHO is privileged to be the custodian of clinical records for the Western Bays’ enrolled population, and Chris says its paramount that all data is protected.

A focus for his team this year is updating some of the PHO’s technology, which will further enhance cyber security. This will include a review of backups, implementing ‘Two Factor Authentication’ and continuing to upgrade ageing infrastructure.

“We will also have a focus on broadening the scope and capability of our reporting.”



*Chris Dever helps the PHO to mine and store important population data to support service development.*