

# How the Campaign will Work?

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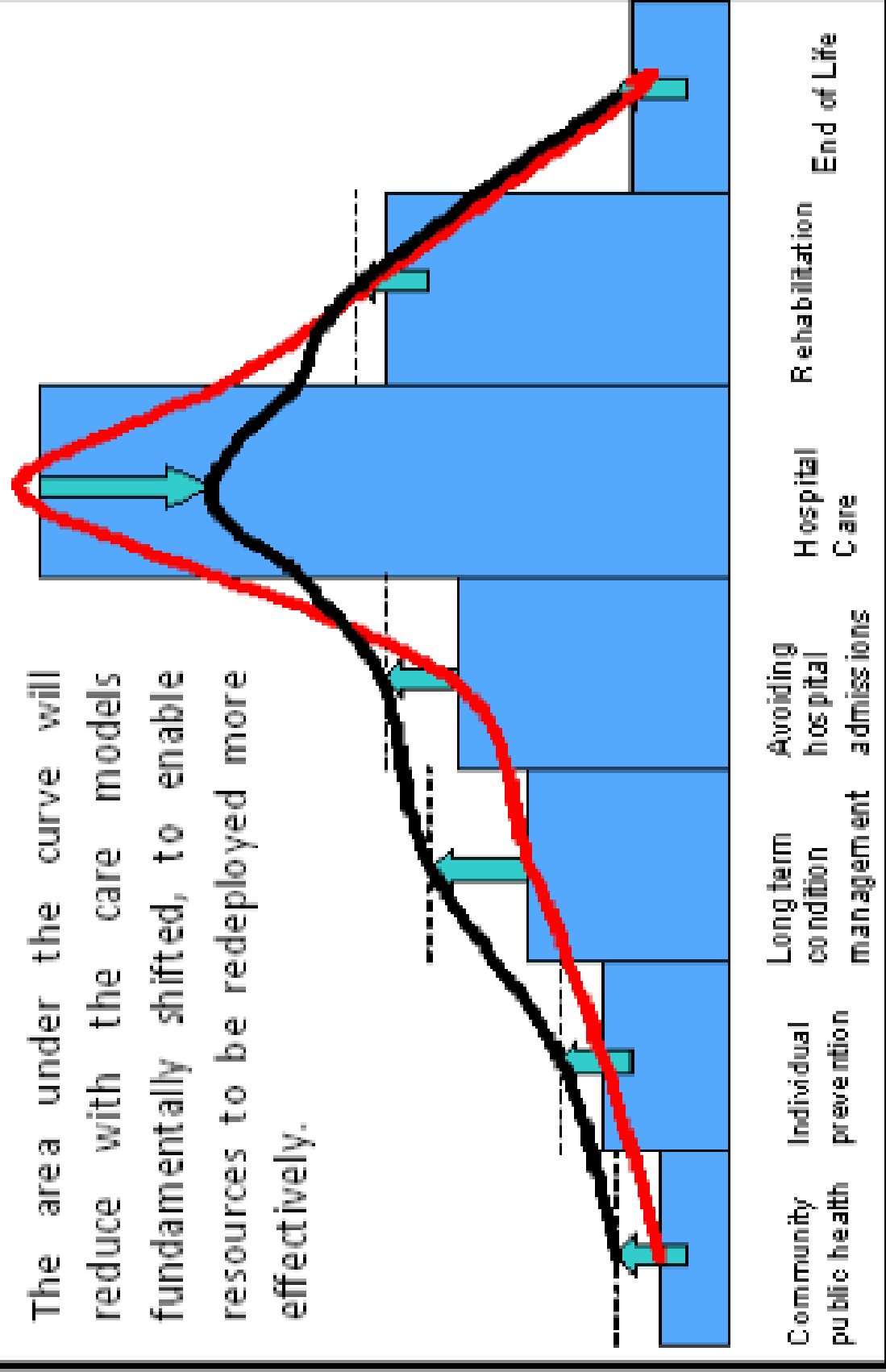


C O U N T I E S  
M A N U K A U

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H E A L T H

The area under the curve will reduce with the care models fundamentally shifted, to enable resources to be redeployed more effectively.



# What is a Collaborative?



*Brings together groups of practitioners to work in a structured way to improve aspects of the quality of their service.*

*Involves meetings to learn about:*

- *best practice in the area chosen*
- *quality methods*
- *change ideas*
- *share their experiences of making changes in local settings.*

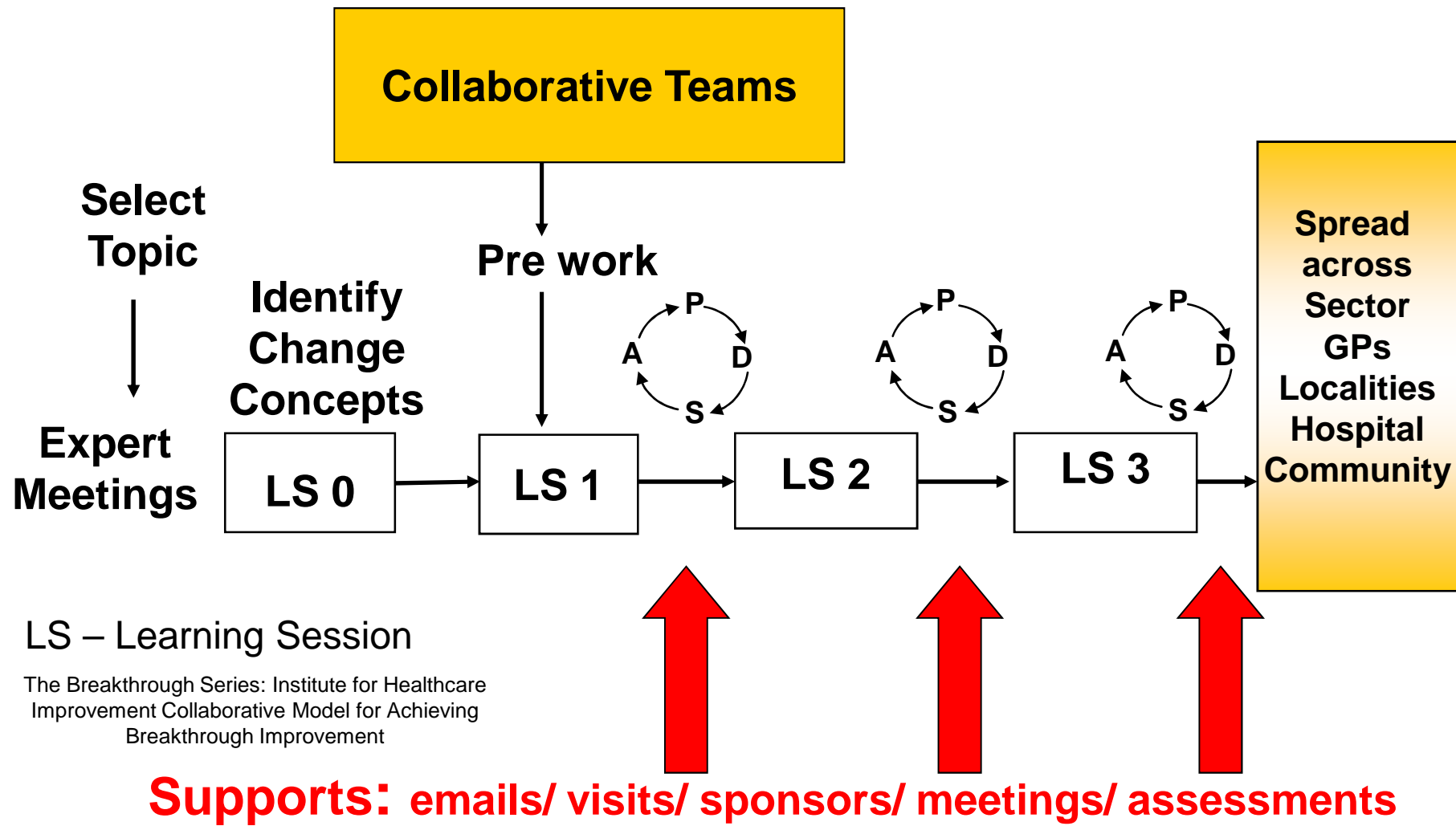
Ovretreit et al. (2002)

# What works well?

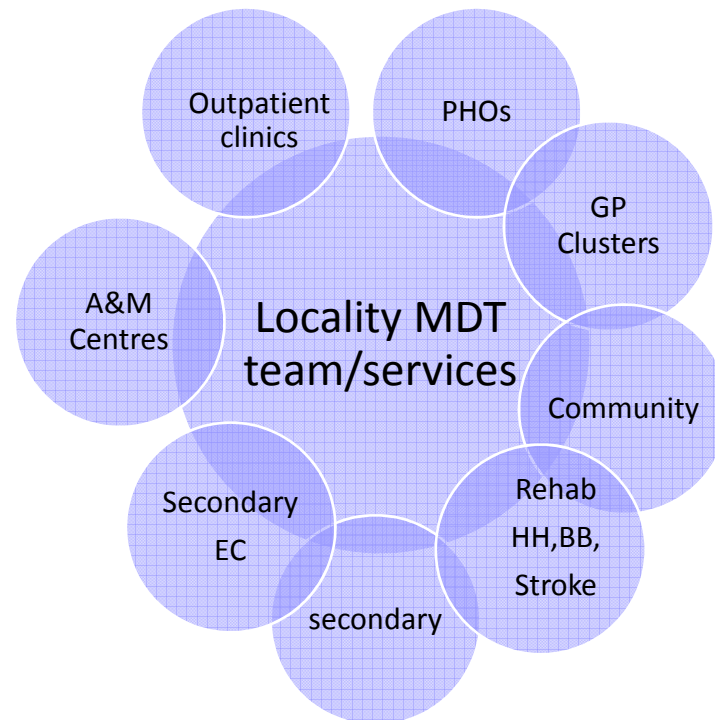


1. Alignment around a common goal/aim
2. Clinical, Management, Community & Quality Improvement experts
3. Multi-professional teams working across the Sector
4. Model for Improvement with clear & measurable targets
5. Structured series of Milestones & Activities

# Collaborative Model for Achieving Breakthrough Improvement



# Collaborative teams from....



# People's quotes

- I am very active now & it feels like it is my life again
- It has shown me tools to deal with everyday life
- Self confidence, meeting people with similar things, motivation, action plans
- Helped me learn some healthy coping strategies
- Helped improve my exercise, having medication, dealing with doctors & to be a better self-manager



# Vision



- **“Whaanau inspired, enabled, resourced to be in control of their health”**

- **Inspired**- Information/knowledge/communication
- **Enabled** – SMS/ engagement
- **Resourced** – co-ordination of services/ people

Resulting in People being in control of their health



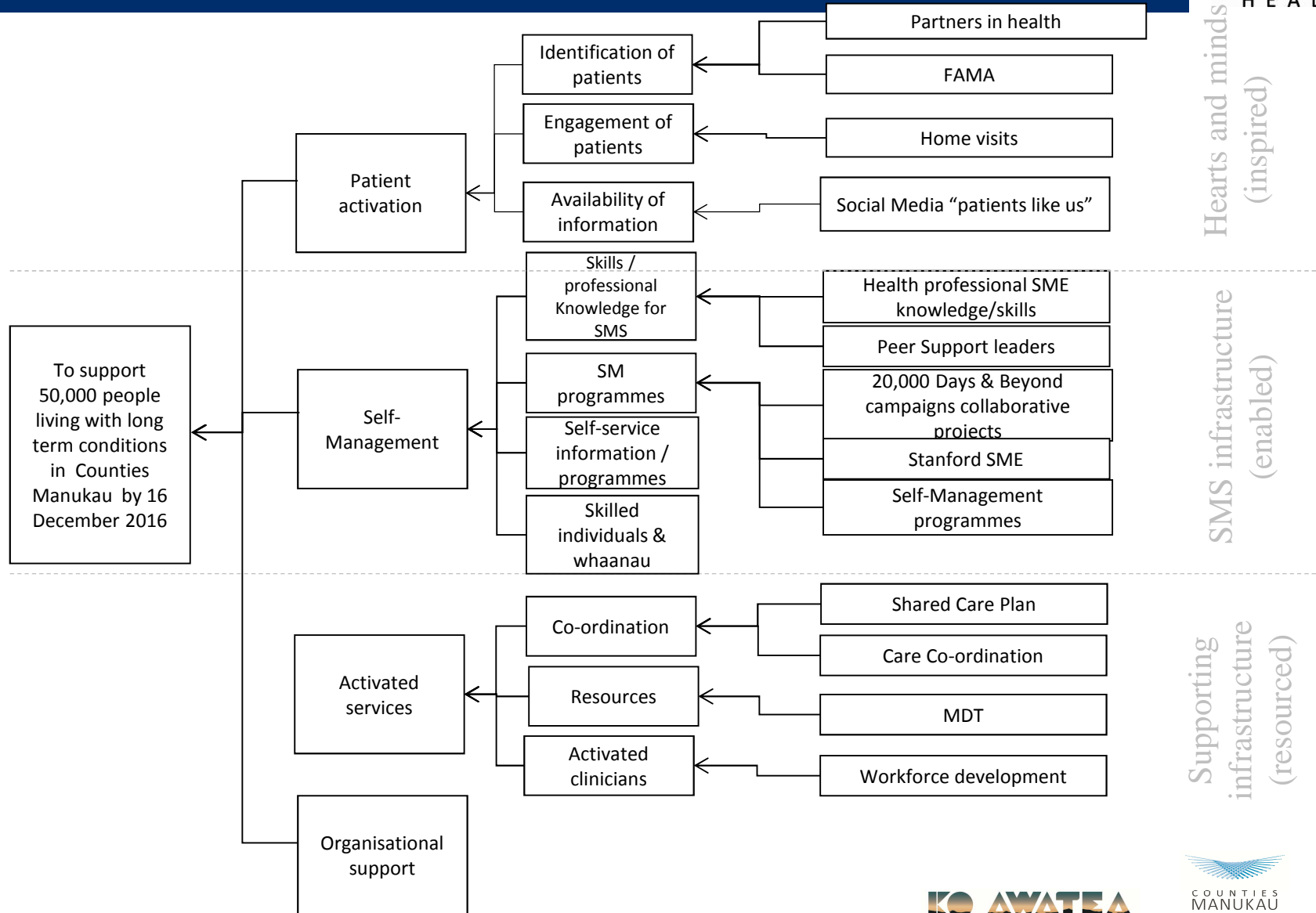
# Focus & Scope



## Aim

To provide self management support for 50,000 people living with long term conditions across Counties Manukau by 16 December 2016.

# Campaign Driver Diagram



# Assumptions



## **Phase 1 - September 2014 to August 2015**

- Development of clear, evidence based change packages
- Identification, engagement & activation for self management support

## **Phase 2 - September 2015 to December 2016**

- Going to scale – all GPs, outpatient clinics, hospital, locality based teams/ Accident & Medical Centres.

# Identify interventions

Gaps between Evidence & Practice



# Closing the Gap

- Evidence describes how to address the gap
- Environmental scan/  
Literature
- What is on clinician's  
minds?
- What's on Organisation's  
Leaders mind?



# Examples of Best Performance



- Someone is doing it somewhere
- Examples of best performance exists
- A good “business case” exists with improved outcomes
- Builds on better performance already being done



“We all have a part to play in improving the health of our community”



TOWARDS SUSTAINABLE HEALTHCARE

# At your tables

## Identify interventions/ideas:

- What are the gaps
- Where are /who has good examples of best practice & “bright spots”
- Does a “business case” exist

## Discussion:

- What do we know already
- What is the research/evidence
- What has been tried before
- What were the successes & challenges