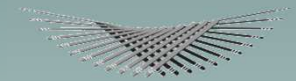


Campaign dashboard

Ian Hutchby



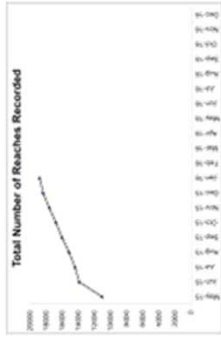
KO AWATEA
HEALTH SYSTEM INNOVATION AND IMPROVEMENT

COUNTIES
MANUKAU
HEALTH

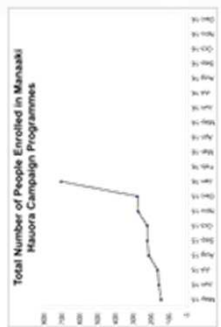
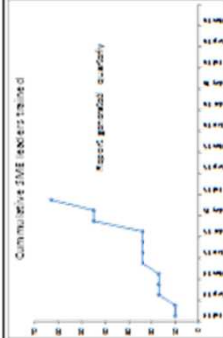
Project Progress Score

0.5 Intent to participate	1.0 Charter and team established	1.5 Project planning started	2.0 Activity but no change	2.5 Changes tested, no improvement	3.0 Modest improvement	3.5 Improvement	4.0 Significant improvement	4.5 Sustainable improvement	5.0 Outstanding sustainable improvement
Project has been identified no charter or team	A charter has been completed and reviewed. Individuals or teams have been assigned but no work has been accomplished.	Organisation of project has begun (i.e. what resources or other support is likely to be needed, where we will focus first, tools/materials needed gathered, meeting schedule developed)	Initial cycles for team learning have begun (project planning, measurement, data collection, obtaining baseline data, study of progress, surveys etc)	Initial cycles for testing changes have begun. Most project goals have a measure established to track progress. Measures are graphically displayed with targets included.	Successful tests of changes have been completed for some components of the change package related to the team's charter. Some small scale implantation has been done. Anecdotal evidence of improvement exists. Expected results are 20 % complete.	Testing and implementation continues and additional improvement in project measures towards goals is seen.	Data on key measures begin to indicate sustainability of impact of changes implemented in the system.	Data on key measures begin to indicate sustainability of impact of changes implemented in the system.	Implementation cycles have been completed and all project goals and expected results have been accomplished, organisational changes have been made to accommodate improvements and project changes permanent.

Jun Jul Aug Sep Oct Nov Dec

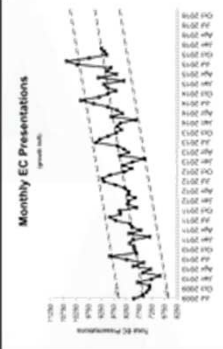
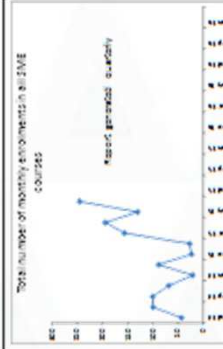
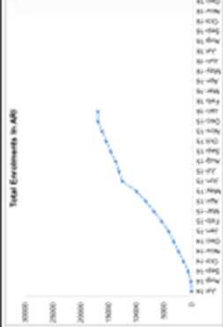
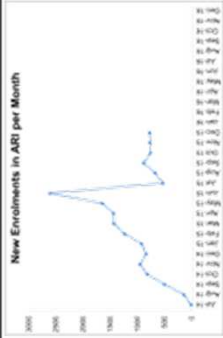


Target: 20,000 by December 2016



The table in this number of reaches reported can be explained by a review of the items occurred in January and all items reported thereafter. [Click here to view the table.](#)

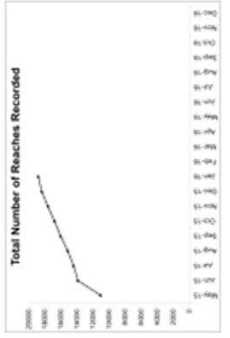
Manaaki Hauora Campaign Dashboard January 2016



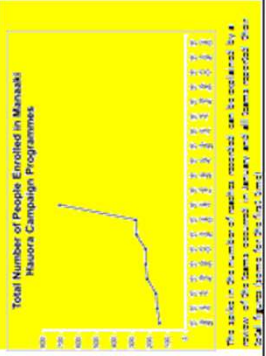
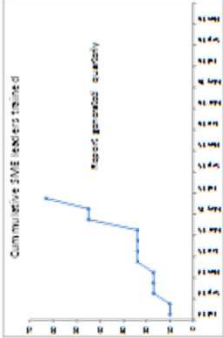


We Need You

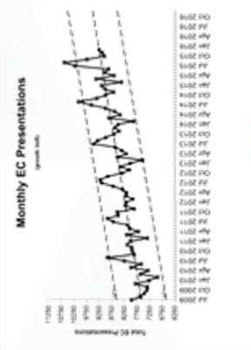
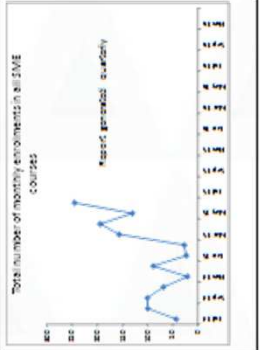
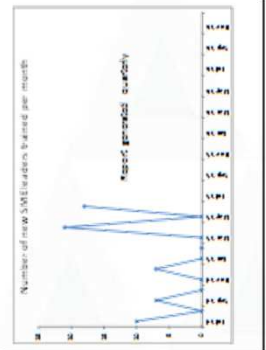
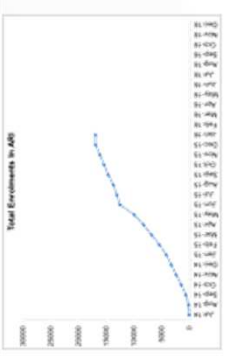


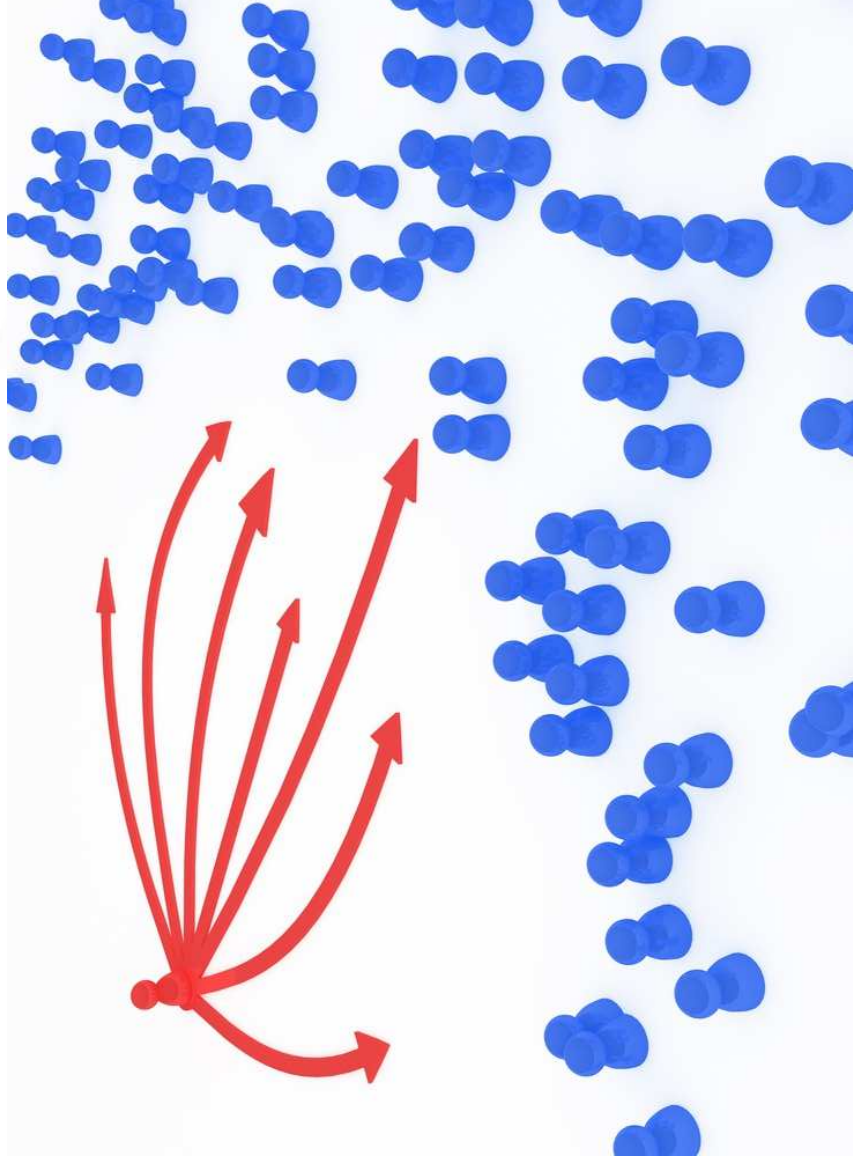


Target: \$0.000 by December 2015



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Definition of reach



The initial contact AND engagement of an individual that enables information sharing, and self-management support to be undertaken by the individual (and/or family and carer support).

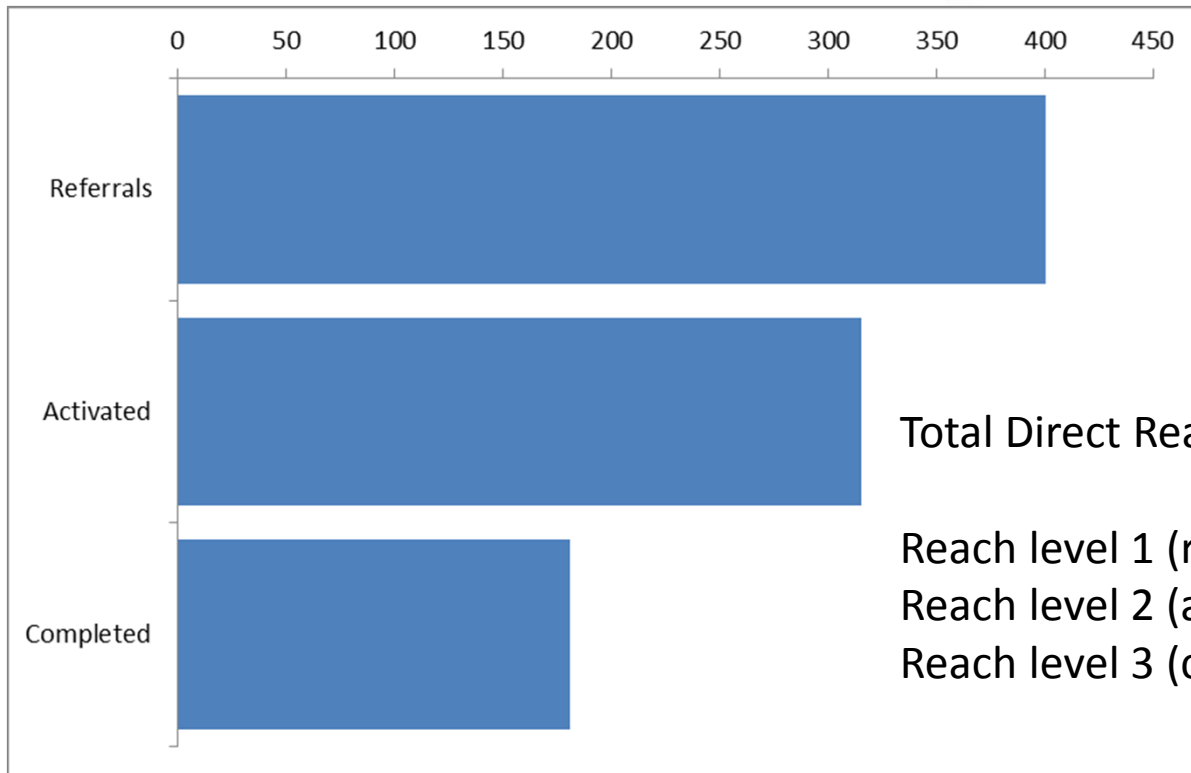
Quality of reach – face to face



1. Initial contact
2. In-depth conversation; follow up engagement; Q&A
3. Proven 'health' outcomes (including increased health status, health literacy, medications, managed conditions, etc)



Example – Kia Kaha

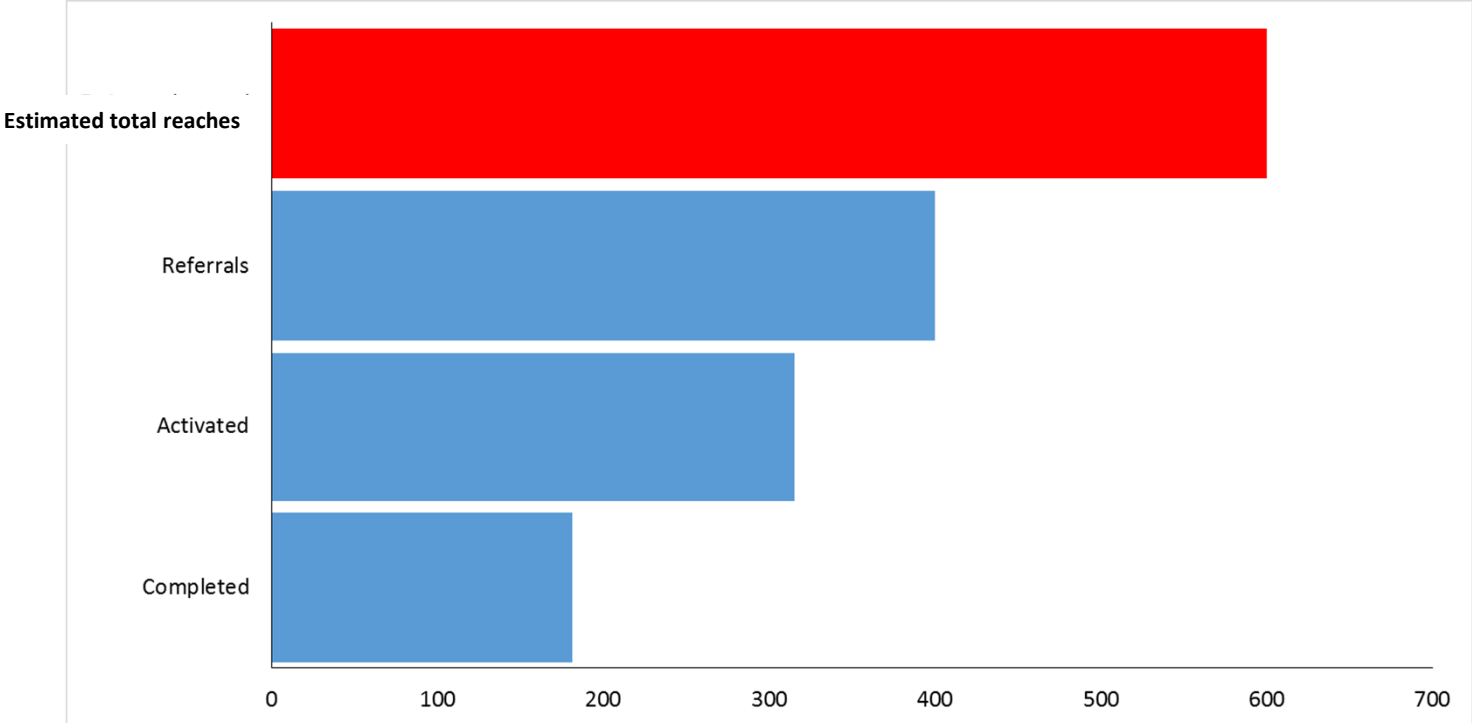


Total Direct Reaches = 400

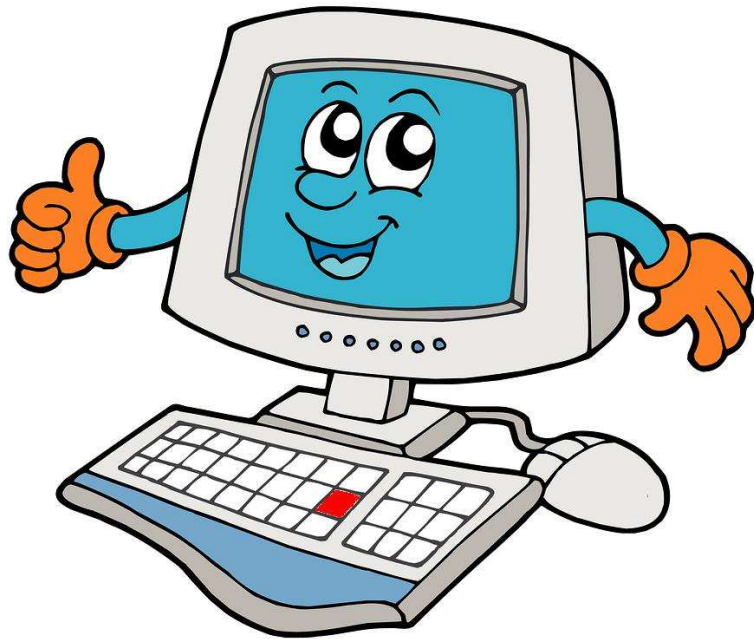
Reach level 1 (referred but not activated) = 85
Reach level 2 (activated but not completed) = 134
Reach level 3 (completed) = 181



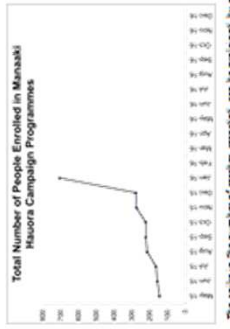
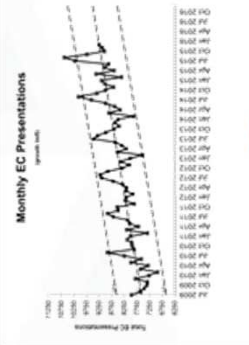
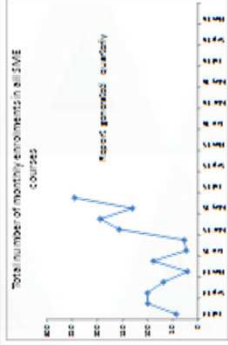
Indirect reaches



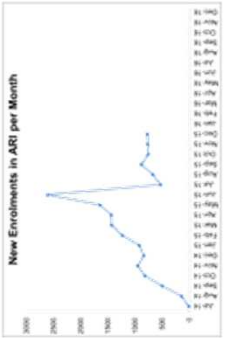
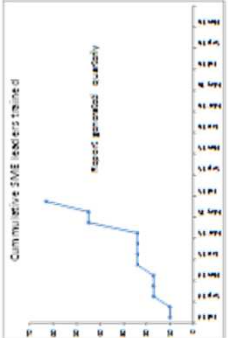
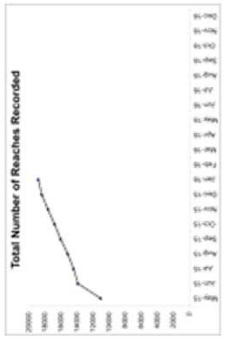
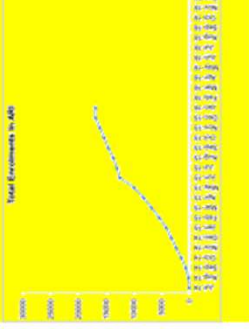
Quality of reach – web/social media



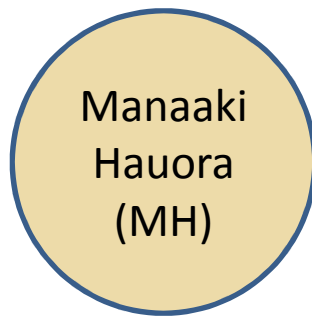
1. Initial viewing of website no engagement (quick in and out)
2. More time spent on webpages etc
3. Engagement with blogs, forums, likes, comments



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What are the overlaps?





So Again We Need You