

# Building Responsiveness Into Teams' Efforts (BRITE)

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 [Manaaki Hauora #CMH50K](#)



## Aim

To improve health provider self management capacity and capability\* and to improve consumer engagement and self-care skills# as demonstrated by reaching at least 500 people (consumer and health providers) via BRITE projects by Dec 2016.

\*as seen by Maanaki Hauora website initiatives and tool kits

#as seen by the Facebook and Newsletter initiatives



# Driver Diagram: BRITE (Health Navigator)



**Aim & Measures**

**Primary Drivers**

**Secondary Drivers**

**Change Ideas**

AIM: To improve health provider self management capacity and capability and to improve consumer engagement and self-care skills as demonstrated by reaching at least 500 people (consumer and health providers) via BRITE projects by Dec 2016.

Building consumer engagement and self care skills

Effective communication infrastructure

Building capacity and capability of health professionals

- Knowledge and information
- Self-care skills
- Social support
- Ongoing support needed for SME graduates
- Activation and engagement

- Health Navigator website
- Supporting learning & behaviour change
- access to SMS information

- Sharing knowledge and ideas
- Toolkits for health providers
- Training for HPs

- Home based alternative to SME Toolkit for patients
- Link to Health navigator resources
- Creating a Facebook page
- Newsletter for SME group graduates

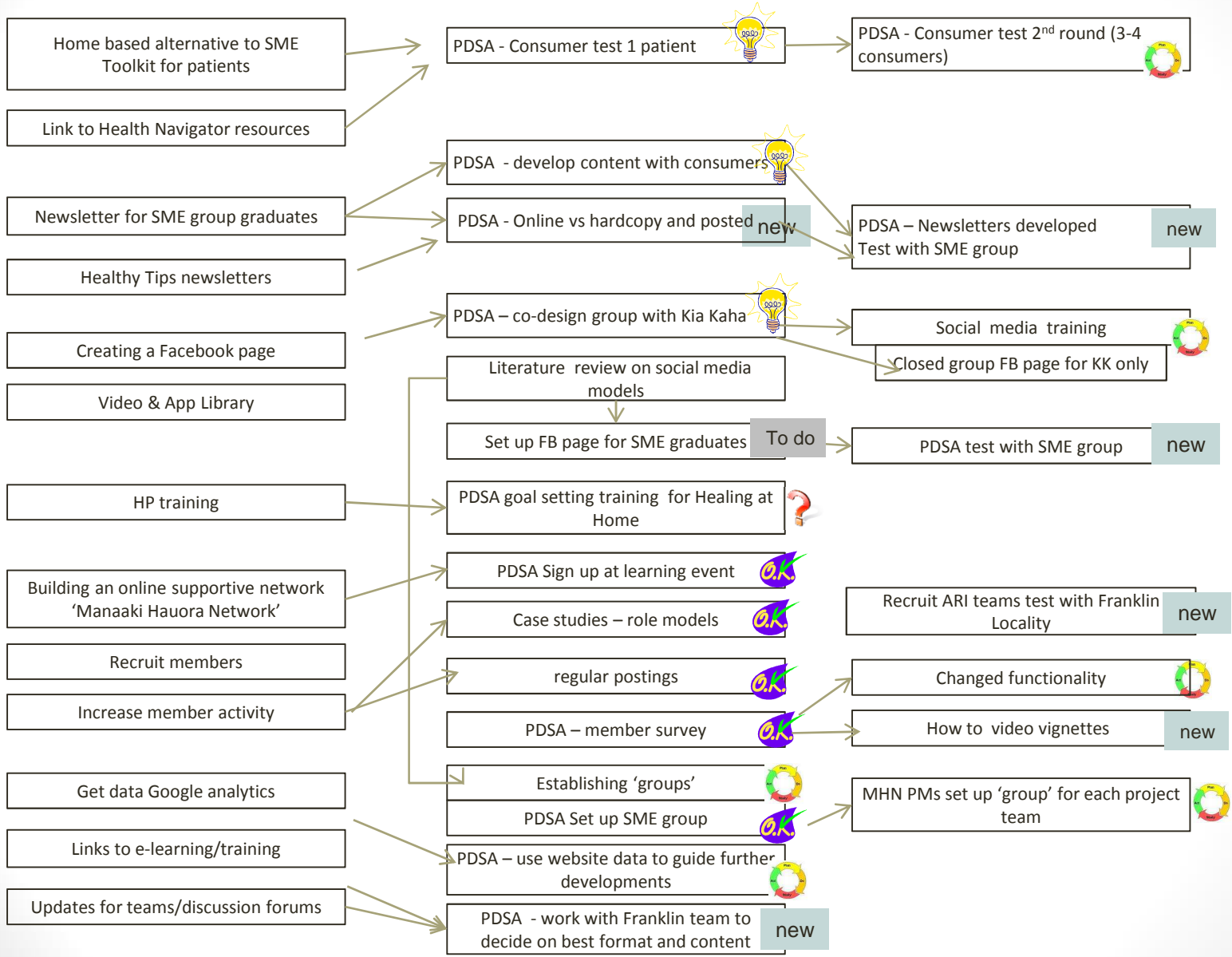
- Healthy Tips newsletters
- Video & App Library
- training

- Building an online supportive network 'Manaaki Hauora Network'
- Recruit members
- Increase member activity
- Get data Google analytics

# Driver Diagram/PDSA Tree: BRITE



## Change ideas



**Key**

- Adopt
- Adapt
- Abandon
- What next?
- Testing

# Manaaki Hauora Network – Testing change package 1

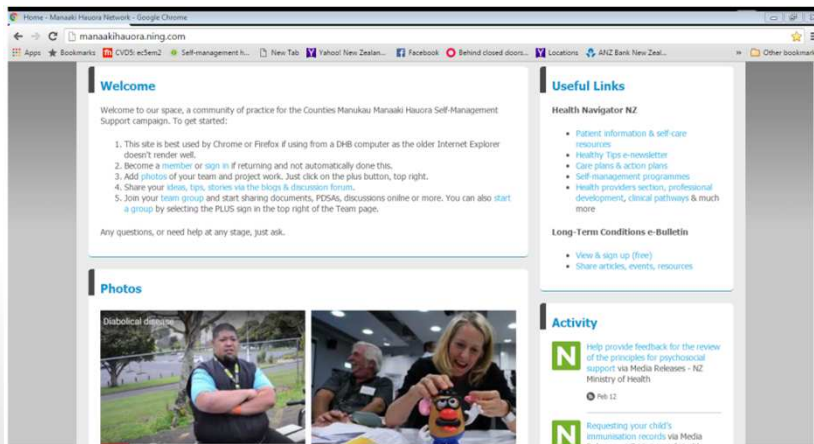
**Development:** The website was built (including content) over a 4 month period from May to August 2015

**Ideal Model:** All collaborative team members accessing resources, posting on forum and sharing documents within their own project team ‘groups’

**PDSAs so far:** functionality issues relating to access, collecting data using google analytics, responding to user survey by changing structure and layout of website, developing a series of ‘how to use’ video vignettes

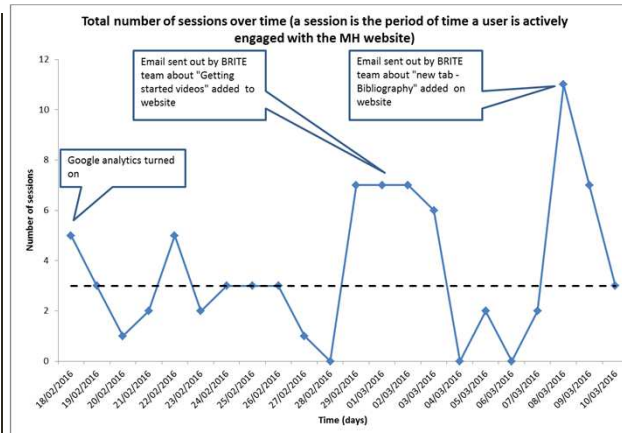
**Future PDSA tests:** Increasing membership and activity by ensuring that every collaborative project team is set up as a ‘group’ within the website, enabling primary care staff to become MHN members and developing content to support ARI; starting with Franklin Locality.

**Opportunities:** Primary care staff who are involved in rolling out ARI are asking to be able to access resources and learning opportunities as well as being able to access presentations and documents relating to meetings and learning sessions. This is a group who already know each other and have a common interest (ARI) therefore has potential to increase both membership and activity on the website.

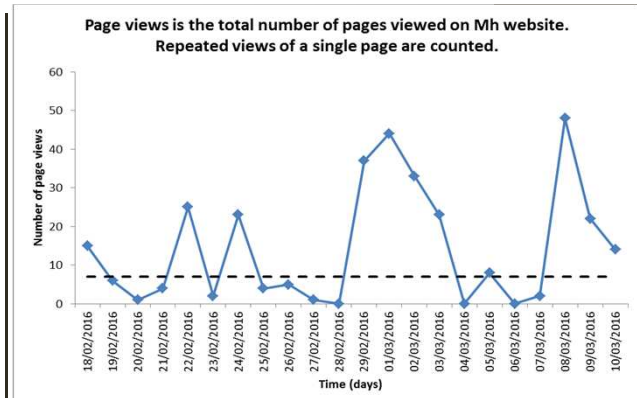


# Manaaki Hauora

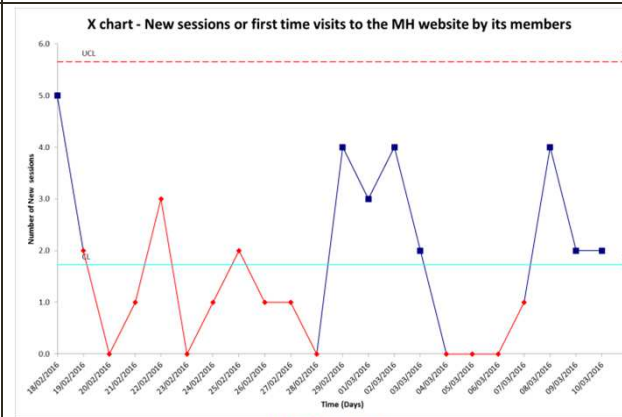
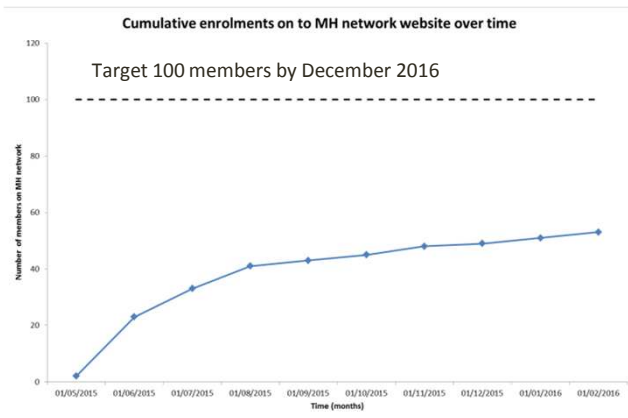
## BRITE team Dashboard for Manaaki Hauora Network as at 10/03/2016



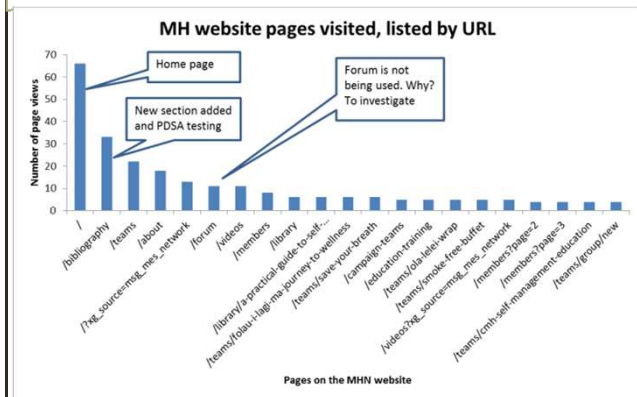
To date: 80 sessions in total



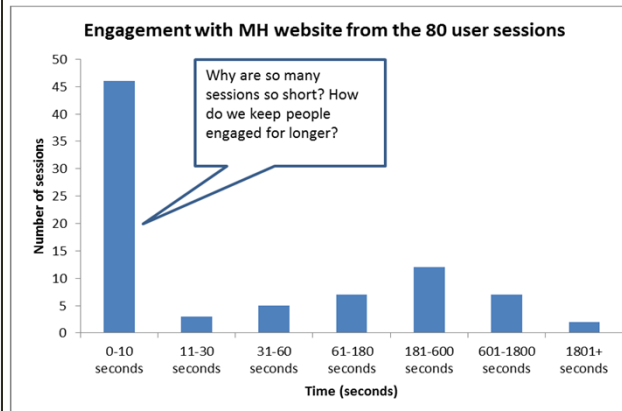
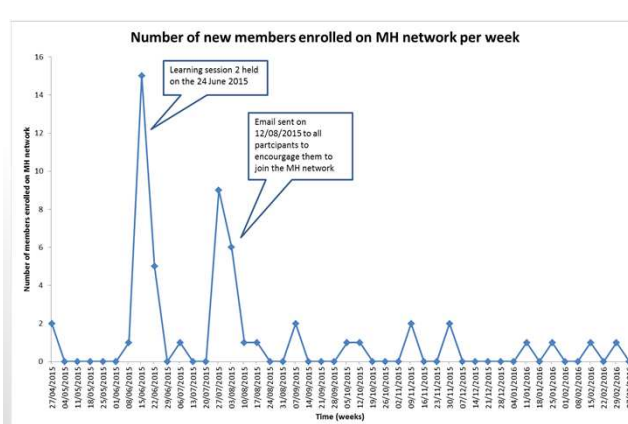
Of the 80 sessions -> 314 page views in total, average of 3.92 pages/session, average time on page 1min:16 sec



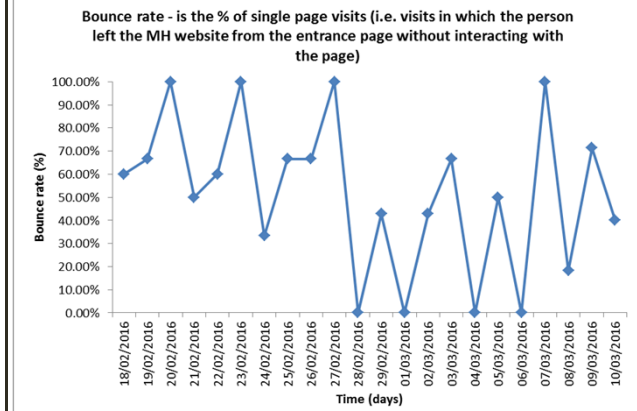
Of the 80 sessions, 38 were new user sessions (48.75%)



Of the 314 page views in total, these are the top 20 pages visited



Of the 80 sessions, avg session duration: 3min 45 sec



Of the 80 sessions, average bounce rate: 48.78%



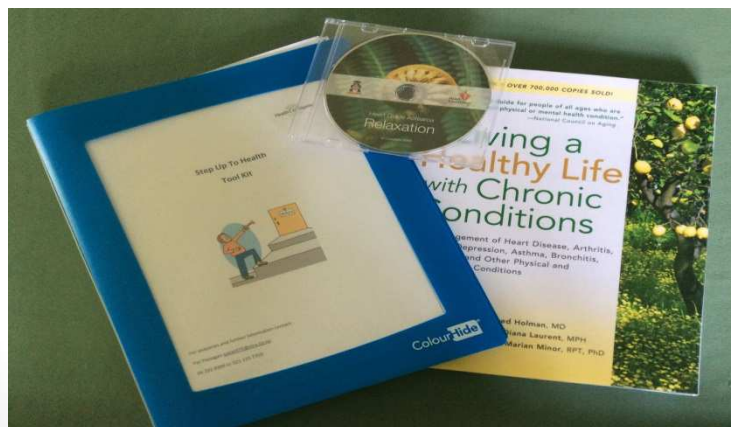
# Toolkits for Patients and the Public - Testing change

## Package 2

**Development:** The toolkit was developed over a 3 month period October to December 2015

**Ideal model:** All LTC patients who are not able/don't want to attend a SME group will be prescribed a self management toolkit by their primary care provider.

**PDSAs so far:** First draft is with consumers for testing, overall feedback positive with some suggestions being made around look and feel.



**Future PDSA tests:** make suggested changes based on consumer feedback and re test with more consumers, this time also within the general practice environment.

**Opportunities:** The toolkit has generated some interest amongst practice staff particularly practice nurses and team members who are wanting to/have received health coaching training. The toolkit has the potential to become a useful resource enabling the delivery of self management support in a one on one or group/whanau situation

## Facebook & News letters - Testing change Package 3

### Facebook

**Ideal model:** Members of the public and those living with LTC (who wish to use Facebook) can access good information and support via this medium.

**PDSA so far:** as a result of a co-design workshop with a group of consumers in Otara a 'closed' group was set up and is being tested by the Kia Kaha team.

**Future PDSA tests:** Establish a Facebook page for aimed at supporting SME graduates. First test with East Health SME groups

**Opportunities:** 'Healthy Together' have a very popular Facebook page. This provides n opportunity to include relevant self management and 'keeping well' postings appropriate to needs of the wider general public living within CMH district.

### Top Tips Newsletters

**Ideal model:** All SME graduates will receive 4 newsletters (1 each week for 4 weeks post group). The newsletters will have content encouraging them to maintain their goal setting and reminders about strategies they have learnt on the course. At the end of 4 weeks they will go onto the Health Navigator mailing list and receive the regular quarterly Top Tips newsletter.

**PDSA so far:** content has been developed for the four newsletters with some changes based on consumer feedback.

**Future PDSA tests:** Test with an SME group at East Health (early March)

**Opportunities:** possibility to create a package of support resources for SME graduates including newsletters, Facebook and increased support from primary care teams prescribing self management resources (linked to SWICH project)



# Manaaki Hauora

BRITE team Dashboard for  
Tool Kits for patient and public,  
Facebook & Newsletter



1 group testing Facebook  
- Kia Kaha

4 Newsletters developed  
but testing with patients is  
the next step

150 videos added to  
Health Navigator website  
(baseline ~350 videos)

- 8 groups on MH website
- CMH self management education
  - OMG
  - BRITE
  - Save your Breath
  - Ola Lelei
  - Folau I Lagi Ma
  - Smoke Free Buffet

Repackage Facebook and  
Newsletter change ideas  
into 'Support for SME  
graduates'?

However as seen early  
activity within these groups is  
very low -> plan is to test  
ideas once groups are signed  
up.

1 Tool Kit for patients and  
HP developed and  
currently testing with  
patients to get feedback



# PDSA's / Key learnings

## Manaaki Hauora Network:

- Primary care nursing staff are time poor and have limited access to training and resources to support self management, also often have low levels of confidence in working in a web based environment. Therefore confidence and relevance have been limiting factors in getting people to become members and actively engage
- Our learning/experience mirrors the evidence; people generally only interact in the online space with people they already have relationships with, therefore some of the closed groups have been active.
- The DHB internet explorer browser does not enable some of the functions of the MHN website. Some have found this frustrating as it particularly impacts on the 'social' functions.

## Toolkits for Patients and the Public

The content of the toolkit is relevant and presented in an accessible way. – more work needs to be done.

Significant opportunity as a support for health coaching and providing SMS within the practice environment

## Facebook

High level of distrust exists and concern about 'bad behaviour' and sharing of personal information.

A managed members only page is acceptable

## Newsletters

Too early to say positive feedback so far – groups like the idea



# Risks and associated plan of action

## Manaaki Hauora Network

- Increasing membership and activity by ensuring that every collaborative project team is set up as a 'group' within the website, enabling primary care staff to become MHN members and developing content to support ARI; starting with Franklin Locality.
- **Risks** practice teams experience little value in being a member of MHN
- **Mitigation** work closely with the staff ensuring that they have input into the design and content. Provide practical and timely help and trouble shooting

## Toolkits for Patients and the public

- Make suggested changes based on consumer feedback and re test with more consumers, this time within the general practice environment
- **Risks** practice teams see little value in the resource or treat it as 'just another leaflet' and hand it out without providing any help or follow up.
- **Mitigation** work closely with the test sites and PHO staff to develop enabling resource/training for practice teams

## Facebook

Establish a Facebook page for aimed at supporting SME graduates. Second test with East Health SME groups

**Risk** SME graduates don't engage

**Mitigation** develop introductory leaflet to be given out at the last session along with sign up information. Work with members of the group to develop content.

## Newsletters

Test newsletters with an SME group at East Health (early March)

**Risk** SME graduates don't engage

**Mitigation** develop introductory leaflet to be given out at the last session along with sign up information. Work with members of the group to develop content.

# Highlights

- The level of activity within the SME Facilitators group on Manaaki Hauora Network
- Data from Google analytics demonstrates activity. Previously we had no data and wondered if everything was going into a black hole
- Feedback from Allan (our first consumer to test the toolkit)
- Feedback from practice nurses and graduates of the health coaching course about the toolkits potential in supporting a health coaching model