

# Manaaki Hauora Supporting Wellness

## Learning Session 3

Tuesday, 10 November 2015

### Pacific Fanau Ola Mangement Education Programme





**By 1 December 2016, we aim to improve the health literacy of at least 90% of the people who participate in the Pacific FME programme by the end of each programme attended.**

# Driver Diagram



## Primary Drivers

## Secondary Drivers

By 1 December,  
we aim to improve  
the health literacy of  
at least 90%  
of the people who  
participate in the  
Pacific FME  
programme  
by the end of each  
programme attended.

A sustainable  
programme

Active participation /  
completion of the course

Collaboration

Identify the cohort

Suitable / skilled facilitator

Future programme leaders

Develop content

Location or venue

Reasons for DNA

Marketing – LotuMoui Community

Whole whanau participation

Increase engagement & satisfaction

Tools and resources (visual and multi-lingual)

Incentivisation

Willingness to change

Spokespeople & community leader advocates  
(churches, pacific networks)

Patient stories

Health leaders

# Change Package

Pacific Fanau Ola  
Management Education  
Programme



Secondary drivers (Theory of change)	Change concepts & change ideas tested	Evidence of Improvement
<b>Identify cohort</b>	Pacific women who are known to the Fanau Ola team with long term conditions Pacific women who have long term conditions .	Task
<b>Develop content of programme</b>	Use of powerpoint presentation for the initial group engagement then build a relationship with one-on-one home visits and introduction to the family. Enable the women to ask question about their health Powerpoint - Determinants of health, what it is to be a Pacific person, how we look after ourselves matters, The reality of being Pacific and living in western culture, health literacy and it's importance (still working on this) Ask the participants what is most important to them.	Still in PDSA Participant number one is more confident in asking questions
<b>Location or venue + DNA</b>	Somewhere central to the ladies for a group session In their personal homes Where they are comfortable to meet and talk We need to be available to provide transport for our cohort as most don't have a transport or depend on family members .	Still testing



# Change Package (continued)



Secondary drivers (Theory of change)	Change concepts & change ideas tested	Evidence of Improvement
<b>Incentivisation</b>	<ul style="list-style-type: none"> <li>• Women's pamper products to take home for free</li> <li>• Free pampering during session to relax the ladies and make them feel good.</li> <li>• Food for them as the sessions are at night or during the weekend.</li> <li>• We have access to transport for the participants so it's not a barrier.</li> </ul>	Testing
<b>Marketing</b>	<ul style="list-style-type: none"> <li>• Lotu Moui ,Pacific Church, Community</li> <li>• Fanau Ola Team advocates who work with and interpret for Pacific patients in secondary care.</li> <li>• Counties Manukau GP Practice doctors and nurses</li> <li>• Mangere/Manukau/Otara Locality team who work with local community services to provide ease of referrals and use in Primary Care.</li> </ul>	To do...
<b>Whole Whanau Participation</b>	<ul style="list-style-type: none"> <li>• We are looking firstly at the patient and their individual needs and secondly the household for better understanding of generational passing down of diseases.</li> </ul>	Still testing
<b>Willingness To Change</b>	<ul style="list-style-type: none"> <li>• There needs to be a readiness to hear the truth about their health a willingness to learn and also an acceptance of diagnosis and situation.</li> <li>• The focus may need to come off the disease and we will be able to identify the change motivator. At times it's the children and family.</li> </ul>	To do...

# Potential for Spread

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Management Education  
Programme



- The opportunities for this work to be extended can be through the Primary Care Networks that are developed currently in Counties Manukau using the Localities framework especially for identified high Pacific population areas such as Otara/Mangere and Manukau.
- Opportunities for referrals from GP Practices within the Otara/Mangere and Manukau areas in conjunction with At Risk Individuals (ARI) Programme.
- Current monthly Multi Disciplinary Team (MDT) Meetings at key GP Practices who have concerns for complicated patients and families in their Practices.



# Achievements to Date

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- *Had our first group meeting with Pacific women identified with Long Term Conditions by the Lotu Moui Coordinator.*
- *A Pacific FME Coordinator role created and person employed*
- *One-on-One session visit conducted and maintained to build relationship with patient.*
- *First participant is asking more questions about her health*





# Most successful PDSA cycle

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- The PDSA 2 is the most successful so far with the one longer group session in the weekend (4hrs) then One-on-One engagements by different communication methods immediately with participants and relationship development in their homes while meeting family members at the same time.
- Definitely PDSA 1 has the most learning, our initial thought was to have 3 or 4 group sessions and then visits with the family in the home. The first session was well attended but we were met with barriers after the 1<sup>st</sup> session of mainly transport issues and as a result attendance was very poor.

USE PDSA IN THIS SLIDE TO EXPLAIN





# Measures Summary

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- Number of patients participating in the programme
- Number of patients with full reach
- Health literacy before the programme and after the programme
- Total family reach of the participating patients in the programme
- Programme completion rate



# Highlights and Lowlights



- Beginning of the project slow and hard.....
  - Participant is really motivated.
  - Participant is asking question.
  - Participant enjoys going out.

# Patient & Whaanau Stories

Pacific Fanau Ola  
Mangement Education  
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## Before

- .
- .
- .

## After

- .
- .
- .



# Collaborative Team Members

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