The world can see in us an example of love and unity. We are broken-hearted, but we are not broken.

- Imam Gamal Fouda

Pegasus Health extends grateful thanks to our friends and colleagues from Kāhui Tū Kaha from Auckland, who sent a team of Muslim mental health support workers to Christchurch following the March 15 attacks.

Their generosity and support enabled us to provide an integrated response to our community in its time of need.
Welcome to the 2019 Pegasus Health Annual Report.

Pegasus Health is a primary care network, providing leadership, support and services to general practices and community organisations with the aim of ensuring Canterbury people are well and healthy in their own homes and communities.

This report contains a variety of stories to provide readers with context and insights to the valuable partnerships and relationships we have with many organisations and how we all work together to benefit the people of Canterbury.

He waka eke noa. We’re all in this together.
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Chair's Report

My first 12 months as Chair of Pegasus Health has exposed me to what can only be described as relentless levels of change, challenge and opportunity. I have watched our general practice community deal with a measles outbreak and the onset of a rampant flu season; I have seen them implement new Community Services Card fee changes and embrace new programmes to address mental health. I have listened to them passionately advocate for improvements to New Zealand’s health system and I have seen them respond to the aftermath of March 15 – a resounding demonstration of how deeply they care for their colleagues and their communities.

I’ve enjoyed spending time over the past 12 months engaging with our network. The introduction of Neighbourhood Meetings, and engagement with our rural practices, has been invaluable in helping me to understand the complexity of the primary health care environment, its challenges and constraints, and how Pegasus can help shape and determine a better future for general practice and primary healthcare. The Deputy Chairs, Dr Simon Wynn Thomas and Dr Caroline Christie, have been particularly focused on enhancing our membership engagement.

Highlights for me this past year have included:

- Working with the Canterbury DHB and Orion to provide the HealthOne electronic record, which provides secure access to patient health information for clinicians across the South Island.

- Seeing the true value of the Homecare Medical national telehealth service, which we own in partnership with ProCare. This service provides free, 24/7 health, mental health and addiction support across digital channels, as well as clinical support for general practices after hours. The increase in calls to the ‘1737’ service after the events of March 15 proved just how vital this service is in looking after the mental wellbeing of our people.

- Our annual Health Workforce Development Scholarship Awards, which support Māori, Pacifica and Culturally and Linguistically-diverse (CALD) students studying medicine, nursing or allied health. Many of the recipients have overcome enormous struggle and adversity to pursue their dreams of working in the health sector and it is an absolute pleasure to know we are supporting them to create better futures for their families, whānau and communities.

- Pegasus people being recognised for their work through industry and professional awards – this year for IT innovation (BeeFound) and for Quality Improvement and Innovation (‘Motivating Conversations’ and the ‘Triple Whammy’ project).

Continued on next page.
Looking ahead, we are eagerly awaiting the next step in the Health and Disability System review process. Our submission is currently before the Review Panel and we’ll be working with our network to make a further submission during ‘Phase two’ of the process later this year. I’m confident that together we will succeed in communicating the value of general practice and ensuring the needs of a sustainable general practice network are clearly understood by those involved in policy development.

Pegasus Health makes an enormous contribution to the health of our community. This is evidenced through the success of our clinical education and professional development programmes, our community-facing services, commercial investment, advocacy and network support and our ability to influence system-level improvements and change.

Strengthening our strategic resilience and focus has been a key part of 2019 and it will continue to drive our focus in the coming 12 months. Our governance and advisory boards are guided by Pegasus Health’s four defined ‘areas of focus’ – advocacy and influence, the future of general practice (sustainability), technology and leadership. These areas of focus reflect the priorities of our member network and they ensure we are able to deliver successful outcomes for our network, members, partners and funders – and ultimately, our community.

I’m proud to be part of an organisation that values and respects all members of its primary care network and I hope you experience these values in all of your dealings with our people. No matter what our role at Pegasus – whether IT support or clinician, practice manager or pharmacist, nurse, accounts payable, community support worker, receptionist or admin – we all share a common goal of working together to support general practice to support the people of Canterbury.

My thanks go to the general practice teams who continue to support Pegasus in so many different ways. I am also extremely grateful to all of my fellow Board members, who have worked hard, as a tight team, throughout the year to advance the role of Pegasus. I am appreciative of the constructive relationships we enjoy with stakeholders across the health system, who support us and work with us, advancing primary care, and positive community health outcomes.

Finally I want to thank CEO Vince Barry for his leadership, and the valued team at Pegasus who are committed to achieving, and in many cases exceeding, the challenges laid down for them in a complex and ever-changing health environment.

PETER TOWNSEND
CNZM
The Pegasus Health Population Health Advisory Board (PHAB) was established in April 2018. PHAB’s purpose is ‘to provide advice to the Pegasus Health Charitable Limited (PHCL) Board on ways that Pegasus can continue to improve health outcomes and reduce health inequities in the Canterbury population, and on occasion, beyond’. In September 2018, PHAB added two youth members to help improve our awareness of, and responsiveness to, youth health issues.

During the last year, PHAB has reviewed relevant population health data and developed the following priority areas (with an overarching priority of improving equity):

- Reduce Pacific ASH rates for children aged 0-4 years
- Improve oral health
- Reduce amenable mortality.

We were assisted in developing these priority areas by having access to an excellent Population Health report prepared by Andrew Halim, Pegasus Population Health Analyst.

PHAB has made the following recommendations to the PHCL Board towards achieving these priorities:

- That PHCL writes to the Minister of Health, Ministry of Health, and the Chief Executives of CDHB, and Christchurch City Council to signal their support for water fluoridation (these letters were sent in July 2018)
- That PHCL write to Southern Community Laboratories about their proposal to establish an online direct-to-consumer lab testing service, outlining the clinical risks, and stating that PHCL does not support the introduction of this service, which was not aligned with the ‘Choosing Wisely’ campaign (this letter was sent in July 2018)
- That PHCL accept PHAB’s Priorities and Recommendations. PHCL approved these priorities and recommendations in May 2019.
- That PHCL issue a press release about fluoridation to accompany the release (due later in 2019) of a University of Canterbury report about childhood ASH rates including dental admissions. PHAB has also provided advice on the PHCL Board’s Strategic Approach, the Pegasus Access to Primary Health Care Services for People with Very Poor Access project, and the Pegasus Continuous Improvement Plan. PHAB is planning to work more closely with the Canterbury Clinical Network’s Population Health and Access Service Level Alliance to improve equity of health outcomes in Canterbury.
PHAB also endorsed the following:

- A new Pegasus Consumer Engagement position statement.
- A pilot programme to be delivered by Suzanne Pitama and other members of the Māori/Indigenous Health Institute (MIHI) of the University of Otago, Christchurch, to a Pegasus practice, to improve health outcomes for Māori.
- A Pegasus collaboration with Veterans Affairs to provide screening to Vietnam veterans for diseases associated with exposure to Agent Orange.

PHAB sought information from the Ministry of Health about the use of Community Treatment Orders for Māori patients, and a detailed response was received from the Ministry of Health in August 2018, including their plans to improve mental health services for Māori.

I wish to thank all the PHAB members for their expertise and commitment to improving the health of the Canterbury population, and the Pegasus Health staff who have provided PHAB with information, advice and support.
The Clinical Quality Advisory Board (CQAB) was established in June 2018. Our mandate is to oversee activities within Pegasus that involve the clinical care of patients and to provide support to the Pegasus Board to achieve its mission to improve health through high performing teams and innovative community and primary healthcare.

The CQAB takes both a ‘big picture view’, for example in promoting and supporting quality improvement, as well as ensuring a more focused response to specific questions and emerging governance issues.

Over the past 12 months, we have advised on a wide range of areas that span Ministry of Health consultations that impact on primary care – such as their consultation on revising the NHI data, to nurse prescribing and the Choosing Wisely campaign.

Of particular note, we have heard from Dr Clare Healey about family violence in Canterbury and general practice’s role in responding to this sadly-prevalent issue in our communities. As a consequence, an across-Canterbury PHO group has been established to provide increased support to general practice in their role.

We have also received regular updates about the pastoral care programme from Dr Caroline Christie. She has reported an increasing demand for service and the high value it is seen to have for the general practice community.

In July 2019, we were delighted to welcome a consumer representative, Donald Pettitt, the first of two to join CQAB. We believe that having this community input will provide an important perspective on the work we undertake.
Pegasus Health Nurse Membership

Chair's Report

Annual General Meeting
A fabulous group of membership supporters attended the AGM but unfortunately a 40% quorum was not achieved, therefore the meeting was reconvened a week later. The Annual Financial Statements were adopted, and it was agreed that, from an exemption notice, a financial audit was not required. Jeanette Hight, a current director standing unopposed for re-election, was appointed. We are fortunate to have Jeanette’s nursing expertise on our board and this year we also congratulated her on becoming a Registered Nurse Prescriber.

Our guest speaker at the AGM was Joy Harding from Cashmere Health. Joy was the recipient of the Nurse Maude Outstanding Contribution Award at Pegasus Health’s 25 year anniversary, having made a significant contribution to local nursing and the wider work of Pegasus Health. Joy spoke of her nursing career, including her early appointments in the UK and a variety of roles since moving to live in New Zealand, including her current work as a practice nurse and small group leader. She expressed optimism for the future of primary care, and encouraged nurses to grab any opportunities that arise and make a difference.

This year, members were given the opportunity to give input to the Chair to assist in the Charitable Board’s annual strategic planning session. Thoughts were invited regarding focus on the challenges arising from an ever-changing environment, including a whole health system review, funding changes, corporates, future digital changes, innovative models of care, and the wellbeing of the organisation and members. Valuable information was gratefully received by the Charitable Board.

Activities throughout the year
This year has been exceptional with the devastating events of 15 March and the effect it has had on our Muslim Community, the measles outbreak and the increased numbers of influenza cases coming on top of the demands of General Practice. The Nurse Membership Directors want to take this opportunity to acknowledge the compassionate and professional approach from all nurses in the Pegasus Network.

This year we welcomed four new members – Marlys Piper, Kate Morahan, Dawn Wilkinson and Michele Bleeker.

One of the Charitable Board’s current areas of focus is developing leadership to assist practice teams to work collaboratively and build the knowledge and business capability to help meet the future needs of our aging and changing population. This leadership programme has started with great feedback and we encourage nurses to engage with this ongoing programme.

Continued on next page.
Our membership scholarship this year was awarded to two recipients:

1. Nurse practitioner, Jo Talarico, to further her postgraduate study in the addictions field  
2. Brigid Sinclair, to attend the College of Nurses Aotearoa Leadership Workshop.

Reports from the scholarship recipients are available on Pegasus World.

The Nurse Directors have attended the bimonthly Pegasus Nurse Advisory meetings and have provided the newsletter that goes out to the members. We use the information provided about nurse achievements, innovations and information to benefit our practices and patients.

Review

At the Charitable Board’s strategic planning session, a decision was made to review Nurse Membership. The review focuses on the appeal, relevance and effectiveness of Nurse Membership, particularly in view of the extensive resources and initiatives that have been instigated in an attempt to improve its visibility to the majority of nurses working in general practice.

A group of Nurse Membership Directors, members and non-members was formed to undertake this review. From an equity perspective it was agreed that services and initiatives that Pegasus provides to nurses in general practice should be provided and available to all nurses, not just members. The Charitable Board has asked for further work to be undertaken to develop a future proposal for all nurses in general practice.

Acknowledgements

We would like to acknowledge the increased pressure and stress that the measles outbreak, and the work that this has created in general practice for our members. Incredible leadership and resilience has been demonstrated throughout and we invite learnings to come to us so we can share them among our members to build on for the future.

Thanks to the Pegasus nursing team Michael, Di and Jo, Adrian in Governance Support, Sue in admin and CEO Vince, Chair Peter and directors from both the Nurse Membership and Charitable Board, for all the support given to us throughout the year, it’s very much appreciated.
It’s been a difficult year in general practice. Our practice teams have had to respond, amongst other things, to funding changes, to a measles outbreak, to a shortage of influenza vaccine and to a high prevalence of influenza-like illness in the community. I would like to thank my colleagues for their dedication and acknowledge the excellent clinical care given, as usual, despite these and other challenges.

The challenges themselves have reinforced to me the centrality of Pegasus Health to supporting our practices. When things aren’t going as well out there as they might, our members are quick to bring this to our attention. And, in terms of the issues referred to above, and other matters, it has been heartening to see the rapid and effective response given by Pegasus, at operational, strategic and Board level.

There are three particular things to which I would like to draw attention in this report:

1. Engagement

As referred to above, this year witnessed the first phase of reforms to general practice funding. Whilst I have not heard a single colleague take issue with the need to ensure affordable and equitable access to health care, there has been concern that any further reforms need to take into account the sustainability of general practice and the importance of investing in its infrastructure. We have engaged closely with our clinical teams and sought to understand their reality, and ensuring that their views are incorporated into the advocacy work (referred to below) that Pegasus continues to perform on their behalf.

On a more general note, the Board has for some time been working out how to engage more proactively and meaningfully with our members. One of the successes of the past year has been the initiation of informal “meet the Board” events, held in various community locations around the city. At these meetings, the Board Chair and the two Deputy Chairs (Dr Caroline Christie and myself), our CEO and other board members have met with members and discussed openly the various issues that we are facing.

This work appears to have been appreciated by those who attended and has been immensely helpful to the Board in making sure that the work done at the Board table is informed by the intelligence gained from the frontline. We plan to continue these meetings, as well as the various other existing methods of liaising with our practices. I would encourage as many of my colleagues as possible to take advantage of these meetings. And, as ever, I call upon all members to contact me, or any of the other Board members, if there is anything that they would like to discuss.

Continued on next page.
2. Advocacy

Be it general practice funding reforms, the management of a measles outbreak or any other relevant issue, Pegasus has this year strengthened its role in advocacy, understanding that healthy and sustainable general practice is a prerequisite for a healthy Canterbury. We also advocate strongly for the needs of our communities, focusing on the most vulnerable and those with the greatest need.

3. Pastoral care

Some of you may know that, as well as sharing the role of Deputy Chair of Pegasus Health’s Charitable Board, Caroline Christie and I also lead the pastoral care programme. This highly valuable service tends to fly somewhat under the radar, giving the sometimes confidential and sensitive interactions with members that it can involve. But, as of March 15 this year, we took on an even more important role in supporting GPs and practices affected by the Christchurch mosque attacks. We worked hard to support our practices during an immensely difficult time for all of us. I would like to acknowledge all the practices affected by this atrocity and would wish the reader of this report to know these practices showed courage, humility and compassion well beyond that which could be expected of any of us. And, I am sure that I speak on behalf of the many Pegasus staff who supported these practices, it was a privilege to be able to serve them at such a difficult time.
Over the past 12 months, New Zealand’s healthcare system has seldom been out of the headlines. Whether being praised for its role in helping the community in the aftermath of March 15, criticised for its perceived failures in some sectors and communities, or being reviewed and reformed, healthcare has evoked much sentiment and debate.

Those at the ‘frontline’ delivering primary healthcare services in the community take a cursory glance at the headlines on a rare tea break and simply get on with the job. Often it feels like they’re constantly being asked to do more – oftentimes, with less. And I can’t see that changing anytime soon.

But what I can see changing is the way we support our primary care network, patients, businesses and communities and how we deliver services in the future.

One example is Health Care Home (HCH), which is a patient-centred model of care that addresses many of the issues facing general practice – increasing workloads leading to burnout, an aging workforce of GPs, nurses and practice managers and the growing diversity and complexity of care they are required to provide. Pegasus is working with a number of practices to implement HCH principles and I believe it’s both a partnership and an investment that will contribute to a healthier future for our people and our health care system.

One of the biggest headline-grabbers of 2019 was the government’s Wellbeing Budget, which has a huge focus on wellbeing initiatives being delivered through primary care.

Prior to the announcement of a $1.9 billion injection into mental health and wellbeing services over the next five years, changes had already impacted our members. In 2018/19, Pegasus refined its primary mental health service to more efficiently manage demand. Although we have seen a funding focus being taken off the extended consultation of GP team members with patients, I am confident that the $1.9b will ensure that resources will be made available to replace that.

I understand that the government’s approach is designed to ensure greater access to services and give people more choice about the kinds of support available to them. General practices are at the heart of realising this vision and our team at Pegasus is committed to supporting them to provide accessible, easy-to-navigate, culturally-appropriate and connected-to-community services.
The year ahead will deliver more of what we have become very accustomed to in the primary health sector – change.

Our priorities in supporting our members will include a redoubled focus on advocacy – specifically around the Health and Disability Review, the repeal, review and replacement of the 1992 Mental Health Act, the establishment of the new Mental Health Wellbeing Commission, the delivery of a coherent suicide prevention strategy and the investment of $455m into the ‘access and choice’ programme, which will look to enhance primary care and community wellbeing services.

The latter will allow further investment in programmes like the one we have been demonstrating at Doctors on Riccarton and Piki Te Ora, where we are supporting new roles into general practice teams to support immediate access to mental health and wellbeing support. There will be a real emphasis on collaboration across the sector in Canterbury to ensure that the initial investment gets spread across all relevant communities. I pride myself on Pegasus’ long-established, trusted and positive relationships with our DHB, PHO and non-government organisation (NGO) colleagues and I know that together with our general practice teams, we will deliver the best possible care in our community.

In closing, I want to acknowledge the enormous contribution our general practice teams and their partners make to the health and wellbeing of Cantabrians. I am a firm believer that primary care is the foundation of any successful health care system and time and again, you prove that no matter what ‘life’ throws at you, you remain focused on delivering positive outcomes for our population and health system.

I’m also enormously proud of the support provided by the Pegasus Health team. My thanks to the Chair, Peter Townsend, and Board members for their governance, strategic influence and stewardship. Together, we are supported by a management team wholly focused on supporting our members, network, systems and community. And finally, to the ‘people’ of Pegasus Health – I am grateful to come into a workplace every day that is full of talented, passionate, diverse and determined people – each and every one of them committed to making life better for the people of Canterbury.
We are often asked questions about what we do and the purpose of our organisation.

Last year we developed some info-graphics to help explain the depth and breadth of our activity and how we partner with a wide variety of groups and organisations to provide supports and services to general practices and the community.
FACTS & FIGURES

**CERVICAL SCREENING**

65.8%* of women aged 25 to 69 have received a cervical smear in the last three years (as at 30 June 2019). While the percentage shows a small reduction, overall 1,200 more women received smears last year than the previous year.

*Note – the screening coverage period changed in 2017 to 36 months from 39 months previously. This has had a minor negative impact on overall coverage statistics.

**BETTER HELP FOR SMOKERS TO QUIT**

43,045 smokers received smoking cessation advice and support from their general practice team in the 2018/19 year. Overall coverage was very high across Quarters 1-3 (88%-90%) but the impact of external factors in early 2019 (measles/terror attack) meant coverage dropped to 80% in Quarter 4.

The Stop Smoking Support team, based at Pegasus, contacted 10,948 people on behalf of their general practice team to offer brief advice and cessation support. Of those contacted, 1059 accepted a referral to a cessation support service.

**MORE HEART & DIABETES CHECKS**

In the last five years, 90,414 people had been assessed for cardio-vascular risk, as at 30 June 2019. This means 66% of the eligible population having had a risk assessment by their general practice team.
FACTS & FIGURES
CONTINUED

INCREASED IMMUNISATION

In the 2018/19 year, Pegasus general practices vaccinated 91% of Māori children, 96% of Pasifika children, and 95% of children across all ethnicities at the eight months of age milestone.

At the two-year-old milestone, Pegasus general practices vaccinated 91% of all Māori, 94% of all Pasifika and 94% of all two year olds.

These results put Pegasus PHO among the top performers for vaccination rates compared with other PHOs.

B4 SCHOOL CHECKS

A total of 5200 Pegasus-enrolled children had a B4 School Check in the 2018/19 year, which equates to 93% coverage. 200 of these checks were completed in the child’s own home by the Pegasus B4SC Mobile Outreach team. Overall, 105% of Māori children and 100% of Pasifika children received their B4 School Check.

A total of 344 dental referrals, 276 vision referrals, and 249 hearing referrals were made as an outcome of the checks. 541 children were referred to a health professional due to concerns about growth/weight, while 141 families declined a referral.
**ENROLLED POPULATION BY ETHNICITY 2019**

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<th>Number</th>
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**ENROLLED POPULATION BY AGE 2019**

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<tr>
<td>65+ years</td>
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</tr>
<tr>
<td><strong>Total</strong></td>
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ACCOLADES AND AWARDS

It has been an exciting year in terms of awards and professional recognition gained by Pegasus Health teams working with Canterbury Health System partner organisations.

All Abuzz

In November 2018, BeeFound, our online platform that enables General Practice to search for and book GP, Nurse Practitioner, Registered Nurse, and Enrolled Nurse Locums was named as a finalist in the NZ Health IT Solution category at the 2018 New Zealand Health IT (NZHIT) Innovation Awards.

NZHIT is an industry group of health software companies, partners, consultants and healthcare providers, with a broad range of supporting members, including academia, clinicians, researchers and policy makers.

The awards have been established to recognise the “innovation, investment and hard work that goes into creating solutions that have a positive impact on the delivery of healthcare services.”

Eirlys Beverley-Stone, Digital Platform Manager for Pegasus Health, was delighted with the recognition.

“Being named as a finalist for this award was a great honour. “Our vision for BeeFound is to make life simpler for both practices and locums. We know already from feedback that the stress and time involved in finding locum cover for practices has reduced since BeeFound became available,” says Eirlys.

Read more about BeeFound at www.beefound.co.nz
Innovation galore!

Also in November, two Pegasus services working with health colleagues won recognition at the Canterbury Health System Quality Improvement and Innovation Awards:

Motivating Conversations

‘Motivating Conversations’ is a Canterbury Health System programme with contributions from partner organisations. It aims to help primary health professionals better communicate with their patients by developing their motivational interviewing skills.

This programme was the winner in the ‘Improved Health and Equity for All Populations’ category.

More than 220 primary health care professionals attended Motivating Conversations between 2017 and mid-2018, and Motivating Conversations has maintained a high level of satisfaction among the participants and is well-used in the workplace.

Reducing the Triple Whammy:
Small Group Education to Improve Safety and Reduce Harm in Primary Care

The Clinical Quality and Education (CQE) team was awarded the CDHB Consumer Council Award and was also a finalist in the ‘Improved Health and Equity for All Populations’ category for their work on ‘Reducing the Triple Whammy.’

Back in 2011, the CQE team began a project to address the prescribing of the potentially dangerous combination of drugs known as the ‘triple whammy’, which can lead to acute kidney injury and significant patient harm. The ‘triple whammy’ occurs when a patient, who is already taking a diuretic plus an ACE inhibitor or ARB, is prescribed (or buys over the counter) an anti-inflammatory for an unrelated condition. In 2010, there were over 3000 primary care patients in Canterbury on this combination.

Louise Kennedy, Team Leader Clinical Quality and Education at Pegasus Health.
A further reiteration of the key messages was incorporated into a Small Group education round on deprescribing in 2018 with updated data. In addition to the education, an audit tool was developed on GPVu, and the HQSC raised awareness of this combination through the Polypharmacy atlas of variation.

In 2014, a Small Group education round ‘The Declining Kidney’ directly focused on the triple whammy using local data to show extent of use, and challenging primary healthcare providers to review any patients on this combination. They were also asked to complete a questionnaire about their related knowledge and practice, and a patient handout was produced on the safe use of anti-inflammatories (available on HealthPathways and Healthinfo).

A drop in the prescribing of the triple whammy was observed subsequent to each of the interventions, and by the end of 2017, the prescribing of the triple whammy had dropped by 33%. Canterbury has the lowest rate of triple whammy prescribing nationally, and this has been sustained over time.

Canterbury NSAIDS + any Diuretic + ACE/ARB Inhibitors Patient count, 6 months Jul to Dec

The Small Group programme model of multidisciplinary education combined with smart use of data, demonstrates how areas for change such as the triple whammy can be detected, addressed and improvements sustained to improve patient safety and reduce harm.
2019 ANNUAL REPORT:
GENERAL PRACTICE PARTNERS
2018/2019 saw the introduction of four new members to the nursing team. These appointments were undertaken with a view to addressing equitable access for our populations across the Canterbury Health system by developing and promoting nursing roles that reflect the diversity of our community.

**NURSING ENTRY TO PRACTICE (NETP) INITIATIVES**

A culturally-appropriate and demographically-matched Primary Health Care nursing workforce is critical to providing equitable access and improved outcomes for population groups with poorer health outcomes. This is especially important for Māori and Pacific people, where the disparities in health status continue to persist and remain a priority for health care planning across the health system. The Health Workforce New Zealand [HWNZ] taskforce has identified Primary Health Care and community health as areas where the nursing workforce is pivotal in providing better integration of services to the population; their aim is to establish parity between Māori and Pasifika nurse numbers in the workforce and the Māori and Pasifika populations.

Pegasus has responded to this by working collaboratively with our colleagues across the Canterbury Health system to deliver two initiatives for new graduate Registered Nurses: Korimako and Toloa. These initiatives were developed in partnership with Pegasus Health, Te Matau a Māui Collective, Tangata Atumotu Trust and Canterbury DHB.

Both of these positions will be offered annually and are fixed-term for 12 months.

**Toloa  “E lele le Toloa ae ma’au ile vai”**

The Toloa initiative supports Pasifika graduate nurses to enter primary care through a ‘blended nursing’ model. The position is a 50/40 split between a general practice team and a pasifika NGO. This position is the first time a new graduate has worked in the Māori/ Pacific NGO sector in Canterbury.

In September 2018, Suli Tuitaupe started as the first Toloa NetP nurse. Suli is employed by Pegasus Health and hosted for his first year by Local Doctors Eastcare (formerly Eastcare Health) and Tangata Atumotu trust.

Suli’s commitment to creating equitable health outcomes for Pasifika people was recognised earlier this year when he was awarded the Clinical Excellence Award at the NetP Nursing graduation ceremony.
Suli is also a past Pegasus Workforce Development scholarship winner; he is active in the Samoan community through his role in the Tutupu Project (Health Champions in Churches) and he is the new graduate representative on the Pegasus Nurse Advisory Board.

Suli is part of the CDHB 2019 promotion of nursing and says that being a nurse means “…empowering individuals, whānau and communities with health literacy so they can make informed decisions, being an advocate, being patient-centred for the best outcomes, promoting illness prevention, health education and holistic health, and improving health equity for all New Zealanders.”

**Korimako “Iti Rearea, teitei Kahikatea ka taea”**

> Even the small bellbird can ascend to the great heights of the Kahikatea tree.

The Korimako initiative provides a new graduate nurse, who is Māori, the opportunity to complete a NetP year working in both primary care and the community through a kaupapa Māori provider. This position is also a 50/40 split between a general practice team and the Canterbury DHB.

In December 2018, Hayley Lotter was appointed as the first Korimako NetP nurse. Hayley is also employed in the Pegasus Health Nursing Team and is hosted for her year at Te Rawhiti Family Care and at Te Puawaitanga Ki Ōtautahi Trust.

Hayley is also part of the CDHB promotion and to her, being a nurse means “…having mahi I can be proud of for not only enriching my own life, but enriching the lives of others. I can use my experiences to whakamana (empower) whānau to realise their own strengths and take their oranga back into their own hands.”
In April, Hayley was awarded a Nursing Now Scholarship to attend the pre-World Health Assembly event for young leaders held in Geneva. Hayley says she was incredibly privileged to be one of 24 nurses from across the world selected to attend the Assembly event.

“We attended a number of workshops with the International Council of Nurses (ICN), the World International Summit for Health (WISH), the World Health Organisation (WHO) and the International Federation for Medical Students Association (IFMSA), looking at global nursing development, international policy and leadership, and strategic networking. We then got to attend the first three days of the 72nd World Health Assembly, where I connected with the New Zealand delegation,” says Hayley.

This was the first time young/novice nurses have ever been invited to a WHO event, so Hayley feels it was a huge honour and privilege to be representing New Zealand young nurses. It was also the kickstarter for the commitment the WHO is making to the advancement of nursing globally, with 2020 being declared the International Year of the Nurse and Midwife.

“Through this experience I have discovered what is out there in terms of opportunities for young nurses. I have grown hugely in confidence, I have made some incredible connections both here in New Zealand and globally, and now have an idea as to what’s the next step for me,” says Hayley.

REFUGEE HEALTH SUPPORT NURSE

New Zealand accepts three categories of refugees into the country: quota, family reunification and asylum/convention refugees. We are also currently piloting a community sponsorship refugee visa. Quota refugees make up the largest number of refugees into New Zealand and are people who the United Nations Refugee Agency has mandated overseas as refugees. These people are selected for resettlement in New Zealand under the annual Refugee Quota Programme.

Upon arrival into New Zealand, Quota Refugees spend six weeks at the Mangere Refugee Resettlement Centre for orientation to the New Zealand way of life. They receive health screening and treatment as required, and are then relocated to the region where they will be supported to settle.

Evidence suggests that a collaborative and integrated approach among agencies supporting resettlement contributes to positive integration and wellbeing outcomes.

Pegasus Health receives funding from CDHB to provide services to former refugees across all three PHOs. The contract and funding allocation was reviewed and some of the funding was reallocated to meet the changed needs of this community and of the general practices serving them.

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In March 2019, Sahra Ahmed was appointed as the Refugee Health Support Nurse. This position has been incredibly challenging especially following the events of March 15. The role continues to develop as we realise the challenges faced by refugees and the teams providing their care and support.

Sahra is very active in the Muslim community and has had the opportunity to meet both Prince William and the Prime Minister.

Sahra has recently travelled to Geneva to take part in the United Nations High Commission for Refugees. This conference brought together people working on the ground with refugees and provided the opportunity for them to give refugees a voice at the UN. Sahra travelled with Third Culture Minds – a group that works with young refugees to promote advancing the mental health and wellbeing of ethnic youth.

HEALTH CARE HOME/IFHS NURSE

We are introducing the Health Care Home (HCH) model to general practices across Canterbury as part of a revised IFHS Programme.

Nursing expertise is required to support nurses working in general practice with the integration of this new model. This will include developing plans for individual practices, supporting implementation and change processes, as well as providing ongoing support to establish the new ways of working.

In March 2019, Joy Harding was appointed into a 0.5 FTE nursing role within the Pegasus Health Nursing team. Her primary focus is on working with general practice teams to integrate and enhance improved ways of working, and be professionally accountable for providing patient-focussed and culturally appropriate nursing advice based on the HCH framework.

Continued on next page.
Joy continues to work as a Registered Nurse in general practice, is a Pegasus Health Small Group Leader and is a member of the Nurse Advisory and Clinical Quality Advisory Board.

A current area of focus, as part of strategic initiatives identified by the PHCL Board, is to improve and consolidate the future of general practice. The revised IFHS Programme introduces new ways of working requiring a wide range of nursing perspective and skills. Responding to the need for increased capacity to support the IFHS programme will help ensure this strategic initiative is met.
Pegasus has teamed up with Pacific Radiology and ACC to implement the High-Tech Imaging (HTI) pilot programme. This 14-month pilot explores the feasibility of General Practitioners requesting a Magnetic Resonance Image for their ACC patients. The GP is able to receive the reports before making a decision on the right care pathway for the patient.

Data gathered since the project commenced in September 2018 shows there have been health gains for patients and the Canterbury Health system and the service will now be rolled out to all general practices in the region.

Through the programme, General Practitioners undertake musculoskeletal examination training delivered in partnership with Health and Sports Central. They are further supported by clinical guidelines available on Health pathways.

Above: Dr Martin Wilson (left) receives his certificate of completion for HTI training from Mark Liddle, Chief Operating Officer, Pegasus Health.
Diamond Harbour Medical Centre’s mantra of being “Your friendly local medical centre” is true in so many ways.

The building’s claim to fame is that it was built in a little over 24 hours (just missing out on a Guinness Book of Records title). In true community style, a group of residents got together and formed the Diamond Harbour Health Support Group in 1991. They wanted to improve their health facilities and they were prepared to do it themselves.

Builders, engineers and suppliers donated time, skill and materials to construct the purpose-built medical centre. It replaced a series of “borrowed” facilities, including a Church cottage and a house.

Practice Nurse, Nicky Palmer, is still part of the Support Group, which meets four times a year. They are still in service maintaining the facility and its grounds and fundraising to purchase new items. A heat pump is one of the newer acquisitions; an equipment shed and an electrocardiogram machine have also been added thanks to community support.

The practice is currently owned by Drs Peter Davies, Bronwyn Graham and Better Health and joined as a Pegasus Health PHO member in January 2019.

Peter Davies says the practice has 1130 enrolled patients in a total community of about 1500. He’s been sharing his time between Barrington Medical Centre and Diamond Harbour for around 10 years and enjoys the slower-paced, higher-engagement experience at Diamond Harbour.

The Centre’s relationship with its community is very much a two-way arrangement. Diamond Harbour Medical Centre holds the district nursing contract so patients can receive a home visit from a general practitioner or nurse if required.

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“We have a very active older community, combined more recently with young families. The new preschool has been a great attraction for new residents. Our enrolled figures have grown by around 700 in the ten years I’ve been working in Diamond Harbour. However, being 45 minutes from a main hospital means we have to provide a much more ‘hands-on’ service,” says Peter.

This can mean observing or caring for ill and injured people in their own homes until an ambulance arrives.

“If you have an older person who has fallen while tree pruning or a mother with a feverish infant, you need to provide an on-call service. That’s a big commitment for a practice of two doctors and three nurses,” says Peter.

He points out that one of the greatly-appreciated aspects of Pegasus membership is the ability to refer patients to the 24 Hour Surgery. Another recent improvement has been the extension of funding for acute demand care.

“We may need to cancel appointments if we have to care for a person at home until the ambulance arrives. This can take up to three hours. Traditionally, this was time we were not reimbursed for. The new funding makes a big difference and allows us to provide this extra level of care,” says Peter.

Funding can be a particular challenge for small practices. Some costs like Cornerstone Certification are not scaled down per enrolled population. Despite this, Peter and Bronwyn love their ‘country practice.’ Future plans include an extra consult room to provide space for visiting health professionals, like Plunket and the Brief Intervention Counselling (BIC), or someone waiting for an ambulance.

Looks like the Health Support Group will have an extra item on their next meeting agenda!
This year’s City 2 Surf was all about whānau/families, fitness and fun.

Coming so soon after the tragic events of the Christchurch Terror attack on March 15, the decision to go ahead was applauded by the participants and their whānau/ families. Event organiser, Richard Negus, said after considering everything that had happened and how the people of Christchurch may be feeling, they would not let the actions of one person take away one of the City’s most-loved events.

Pegasus practices, staff and their loved ones joined in and celebrated their accomplishment at the Pegasus stall. Sausages, bread, spreads, coleslaw, fresh fruit and water were all on offer to fill tummies, while two massage therapists took care of sore muscles and tired feet.

Both North Avon and Rolleston Medical centres entered teams this year. Dr Hillary Gray, from North Avon Medical Centre, said it was great to get together outside the work environment.

“This is the first time we’ve done the City 2 Surf as a practice. Some of us walked the course and others ran. Some of us have trained for it, others haven’t. It was nice to be together without the work stress,” says Hillary.

Twenty two Pegasus practices (98 practice staff members) entered this year’s City 2 Surf as part of the Pegasus team along with 40 Pegasus staff members.

The Rolleston Medical Centre team also took time to catch up at the Pegasus stall. The food on offer was “much appreciated”.

Middle photo: Rolleston Medical Centre participants (left to right): Emily Bell, Tom Edwards, Dr Joanna Dixon, Dr Stephen Jachacy, Dr Peter Ryan, Dr Susie Marsh.

Bottom photo: Rolleston Medical Centre (left to right): Leanne Costello, Donna Payton, Nikki Coleman, Karen Fee.
HOME CARE MEDICAL CONTINUES TO EXTEND REACH AND SUPPORT FOR PRIMARY CARE

Over the last 12 months, Homecare Medical has continued to work with health partners and the sector to virtually support people to stay well and connect them seamlessly with care.

PUĀWAITANGA – TO BLOSSOM, TO FLOURISH, TO BREAKTHROUGH

Co-designed by Homecare Medical, Puāwaitanga is a phone and web-based service providing mental health and addiction support for people with mild to moderate symptoms of stress, depression, anxiety, and related issues. It is an alternative to face-to-face counselling, for those who have time, transport, or access challenges. After a successful pilot (eTalk with Canterbury DHB), Puāwaitanga-referring organisations now also include the Ministry of Social Development (where MSD clients in selected regions who are receiving a supported living payment can be referred by their case workers), Auckland University of Technology, and The University of Auckland.

Puāwaitanga is a truly client-led service, from its clinical processes and unique digital platform, to the diversity of its staff. Puāwaitanga operates on a ‘package of care’ model, where clients receive as many counselling sessions as they need over a 12-month period.

An independent evaluation by AUT found Puāwaitanga’s client-led processes had great outcomes for clients. The choice and flexibility of choosing a counsellor, having an individual plan and being able to schedule sessions around their lives is empowering for clients.

ASSESSING, ADVISING AND CONNECTING PATIENTS TO CARE AFTER HOURS

The Homecare Medical after-hours clinical team supports primary care partners by providing a clinical assessment or health information, and directing patients to the right place for information and care after hours, wherever they are.

PEGASUS HEALTH SUPPORT

Over the past 12-months, 168,411 after-hours calls were responded to from Pegasus practices, with 13,988 calls handled by the after-hours team and 154,423 calls assisted with IVR messaging and options. 43% of calls were from people over 65 years of age, followed by 14% by people over the age of 45. Mondays received the largest volume of calls, with the busiest hour of the day for calls was between 8am and 9am.

Continued on next page.
General Practice Partners: Homecare Medical

Continued

Psychological First Response to Christchurch Attacks

The 1737 need to talk? service has been utilised as a ‘psychological first response’ and has been promoted throughout the crisis response, ensuring all New Zealanders have unlimited access to virtual support and counselling, whenever and however they need it. In the days following the attacks, the service was strengthened by an additional 120 counsellors, psychiatrists and psychologists who worked to respond to the immediate needs of individuals and communities.

Over 13,000 counselling sessions were provided by phone and text over the three weeks following the attacks, with people getting in touch who were directly affected, witnessed events, were connected to family and the Muslim community, or who had watched the video of the events.

National Screening Services Coordination Expanded to Include Cervical Screening

In April this year, National Cervical Screening Programme coordination services transitioned from NZ Post to Homecare Medical. The coordination services include managing the national register and correspondence with women, and liaising with the regional centres, smear takers, laboratories, specialists and DHBs about the people they serve.

Homecare Medical supports the wider Ministry of Health strategy for national screening coordination services and has been managing the National Bowel Screening Programme coordination since late 2017.

National Telehealth Service Numbers in the Last 12 Months (Ending 30 June 2019):

- Over 821,000 contacts were made, 195,000 more contacts than forecast in the annual plan. In spite of the increased demand, 76% of contacts were responded to within agreed service levels.
- Those contacts came from 593,000 people (1 in 8 people in NZ).
MORE AT A KEY SERVICE LEVEL:

- The 1737 need to talk? service received over 86,400 contacts and supported more than 49,000 people in distress. This is annual growth of 51% in contacts and includes over 43,000 text exchanges.
- The Alcohol and Other Drugs team received 19,000 contacts, supporting 16,600 people with addiction.
- The Gambling Team received nearly 4,200 contacts, supporting 3,300 people dealing with the effects of problem gambling.
- More than 86,000 people accessed The Journal.
- The Quitline Team received over 51,000 contacts, supporting more than 12,000 people to start their quit journey, with 3,500 remaining smoke-free after 4 weeks.
- The Poisons Team helped 22,000 people, with 71% of contacts requiring no further medical treatment or self-care information.
- The Emergency Triage nurses triaged nearly 54,000 incidents, redirecting 40% of contacts to non-emergency services, which helps keep our hospitals and ambulances available for emergencies.
- The Emergency Mental Health Response Team triaged over 7,200 contacts from Police and Ambulance to support more than 5,000 people in social and psychological distress.

*figures have been rounded to nearest 100
Primary care organisations have been working with NGOs, DHBs, service users and international experts over the past five years to develop a new way to provide convenient, personalised care and support for people experiencing mental distress or addiction challenges.

The Te Tumu Waiora (TTW) model of care is the culmination of that work.

Te Tumu Waiora - te reo for ‘To head towards wellness’ is a new model of primary mental health and addictions care and support. It aims to provide all New Zealanders experiencing mental distress or addiction challenges with access to convenient, high-quality, integrated and person-centred care and support. This service is accessed through general practice and is based around new roles in the primary care workforce – the Health Improvement Practitioner (HIP) and the Health Coach. Based in the practice, these new team members provide advice and support to clients based on individualised goals, promoting self-management and connecting people to other services they may need.

The HIP and Health Coach work closely with local community NGO support workers, ensuring that people can access the full range of help they need to manage mental distress, encourage and maintain behaviour change and increase their wellbeing.

Te Tumu Waiora was first piloted in Auckland general practices in 2017 by a collaboration of ProCare Health, Total Healthcare, local DHBs and NGO partners, and with support from the Ministry of Health. Following successful evaluation, the model was extended to 23 practices across New Zealand by mid-2019.

Pegasus Health, along with its N4 partners (ProCare Health Auckland, Pinnacle Health Midlands and Tū Ora Compass Health Wellington) is now part of a national Collaborative, committed to implementing the TTW model to deliver accessible, integrated and high-quality primary mental health and addiction services and improved health outcomes for their populations. Two Pegasus practices – Piki Te Ora and Riccarton Medical are currently piloting this new model.
Mana Ake – Stronger for tomorrow, was established in March 2018 to promote wellbeing and positive mental health for children in years 1-8 across Canterbury Schools. It is a collaboration of work between the Ministry of Health, the Ministry of Education, Canterbury DHB, Police, NGOs, schools, Oranga Tamariki and consumers. The Canterbury Clinical Network (CCN) is responsible for leading the design and delivery of this initiative.

Mana Ake provides early intervention and support for teachers, families and whānau of children who are experiencing ongoing issues that affect their wellbeing, such as anxiety, social isolation, parental separation, grief and loss, and managing emotions.

The programme was rolled out to schools in April 2018, and by April this year had completed the recruitment, induction and deployment of its target FTE of 80 kaimahi (workers).

Figures at 30 June 2019 show that Mana Ake has supported over 1,394 children individually and 1,054 in groups in the short timespan since kaimahi started working in schools.

One of the ways the programme ensures it remains relevant and useful for the children it supports is through the development of Maia, a hypothetical child that Mana Ake holds central to everything it does. Clare Shepherd, Project Lead for Mana Ake, says the work they do focuses on supporting Maia to grow and be as strong and well-grounded as she can be, in the context of her whānau and community.

“Alliancing is really important to the way we work in ensuring resources across the system are accessed at the right time so Maia learns, grows and is supported socially and emotionally,” says Clare.

Kim Sinclair-Morris, CCN Executive Director, says it is wonderful to be supporting an initiative that is focussing on the positive mental health and wellbeing needs of our young people here in Canterbury.

“Mana Ake brings partners from across health, education and social sectors, alongside our communities, to design an approach that works for our children and whānau in their environment. The speed and scale of the implementation has only worked because of the commitment of all parties to achieve better outcomes for Canterbury children. Mana Ake is off to a great start and CCN is looking forward to building further on this work,” says Kim.
MĀTAURANGA MĀORI IN PHARMACY

Improving the health status of Māori and reducing health care inequity is a key priority for the Canterbury Community Pharmacy Group (CCPG). In December 2018, the group appointed Brendon McIntosh to a three-month contract as mobile Māori Liaison Pharmacist, supported by the Canterbury DHB-funded Leadership and Network, and the Medication Management Services contract.

Brendon is a Kia Tahu Pharmacist and this new role sees him working with both pharmacists and Māori patients to ensure their needs are being met. He has produced a report reflecting on how Māori experience Community Pharmacy in Waitaha (Canterbury).

Brendon says that the messages in his report are for all Pharmacy staff to help them look at how they interact with Māori and provide them with insights into how to better engage with their local Māori population.

Some key points from his report are:

• **Learning Māori Health Frameworks leads to increasing understanding**

Māori views on health are framed by a holistic approach that encompasses four key elements – wairua (spiritual), hinengaro (psychological), tinana (physical) and whānau (family/friends who are close).

Brendon says that no one expects you to be an expert.

“Just by showing a genuine interest, asking questions and then actually listening to the answer will go a long way towards a patient feeling more comfortable. They will also take more of an interest in their own health and therefore will listen and take on board what the pharmacist has to say,” says Brendon.

• **Whānau is of fundamental importance to Māori**

Whānau support can be crucial to the patient’s wellbeing and recovery.

“Always ask if there is someone they would like to join you for a conversation about that patient’s medicines, then acknowledge and involve this person. This respects different cultural perspectives and needs, and also supports the total health of the patient,” says Brendon.

He encourages pharmacists to consider a patient’s Tūrangawaewae, someone’s place of belonging, as well as whether family supports are in place and how connected they are with the Māori world.

Continued on next page.
• **Mana-enhancing interactions**

“Clinicians need to understand themselves first to then be able to have a different lens when interacting with people from a different background. Pharmacists need to see the patient as a real person, not just a number or statistic,” says Brendon.

The report has been well received by CCPG. Aarti Patel, CCPG General Manager, says Brendon’s work has been of great value to many health professionals. “For pharmacists, it is another way we can build on that close bond with our patients.”

Brendon has also created a resource for pharmacists, which includes a glossary of Māori terms (and how to pronounce them correctly), a ‘cheat sheet’, which is both culturally and pharmacy-specific, and a list of useful apps.

“I hope this resource is something a pharmacist can pull out at any time to build understanding and awareness of treating Māori patients. It is stuff that is already out there, but it’s about making it pharmacy-specific and outlining how to approach a Medicine Use Review from a Māori perspective,” says Brendon.

*Read the full report here.*

*Brendon McIntosh (photo credit: Great PR)*
2019 ANNUAL REPORT: 
SUPPORTING 
GENERAL PRACTICE 
TEAMS
SUPPORTING GENERAL PRACTICE TEAMS: HEALTH CARE HOME

FUTURE-PROOFING PRIMARY HEALTHCARE IN NEW ZEALAND

Pegasus Health officially welcomed two practices into the Health Care Home (HCH) family this year, with a further 20 Canterbury practices engaged in the HCH programme.

Travis Medical Centre and WeCare Wigram took very different paths to gaining their HCH Certification – proving that this model of care can be tailored and implemented to meet the specific needs and priorities of your business, patients and community.

“From the very first conversation we have with a practice about HCH, our commitment is always that it’s up to you to determine your HCH journey – we’ll support you to make it work for you” says Pegasus Health Chief Operating Officer and Chair of the National HCH Collaborative, Mark Liddle.

“Our mandate at Pegasus Health is to support general practice to be sustainable in the long term and to ensure people can access services close to home and stay well in their community. HCH contributes to both outcomes. It is proven, proactive, integrated and effective primary health care in action” says Mr Liddle.

The team at Travis MC have been steadily implementing changes to their model of care since 2011 and have now built a culture strongly focussed on continuous improvement. GP and practice owner, Dr David Pilbrow, says the HCH model ensures they put patients at the centre of everything they do.

“Our whole practice works together to ensure patients get the most appropriate care delivered by the most appropriate team member. It also enables them to take more of a lead in the relationship they have with their general practice, through clinical triage, proactive care planning and a secure patient portal. We’ve embraced Health Care Home because it enables the team at Travis to provide better care and deliver better outcomes for our patients, their families and our community.”
WeCare Wigram, based in Wigram and also servicing Lincoln, took a very different path to becoming HCH-certified. A brand-new practice serving a brand-new community, the team made the strategic decision to go HCH before the foundations of their building were even laid.

“Their vision from the outset was to create an environment that would improve patient experience and enable collaborative care” said Liddle. “We Care came to Pegasus for advice on how to design a practice from the outset that would be a model for the future, be sustainable and flexible in the long-term. Their proactive approach meant they designed the practice right, it really works for their community and has meant their journey to becoming HCH-certified has been relatively quick. They nailed ‘patient-centred care’ right from the beginning.”

HCH is a national ‘model of care’ programme that aims to improve access to care and puts the needs of patients and their families at the heart of local healthcare delivery. It is based on the principle that primary care is the foundation of a successful health care system, therefore improvements made here will deliver positive outcomes for our population and wider health system.

“As general practices come under increasing pressure from patients with increased health complexities, and an aging workforce and population, we need to rethink the way we deliver services in our community. HCH supports general practice teams to deliver that outcome – through a combination of systems and technology, processes, attitudes and behaviours.

“Our mandate at Pegasus Health is to support general practice to be sustainable in the long term and to ensure people can access services close to home and stay well in their community. HCH contributes to both outcomes. It is proven, proactive, integrated and effective primary health care in action” says Mr Liddle.
WHY HCH?

HCH is governed by a national collaborative of District Health Boards and Primary Health Organisations (PHOs). It is an extension of Pegasus Health’s Integrated Family Health Service (IFHS) programme, which has been operating in Canterbury for 8 years. There are currently just over 20 practices engaged in the HCH programme in Canterbury.

HCH home is a dynamic programme of system, process, behaviour and clinical improvement. It addresses many of the issues faced by general practice, such as increasing patient numbers and complexity of patient needs, the aging general practice workforce and unsustainable clinical workloads.

**HEALTH CARE HOME:**

- Improves your capacity to manage unplanned and urgent care
- Enables you to provide proactive care for your patients
- Gives your patients choice in how they interact with the practice and manage their own needs
- Provides better outcomes for patients with high or complex needs
- Promotes equity
- Reduces hospital admissions
- Improves business efficiency
- Upskills your whole practice team

**Talk to us:** The HCH Team at Pegasus will work with your practice team to tailor HCH solutions that will meet the needs and priorities of your business, patients and community.

**It’s up to you to determine your HCH journey – together, we’ll make it work for you!**
SUPPORTING GENERAL PRACTICE TEAMS:
LEAD – LEARN, EXPLORE, ASPIRE AND DEVELOP

Growing and supporting leaders of the future for primary health care is one of Pegasus Health’s four strategic Areas of Focus.

“Pegasus is a learning organisation and our networks and members cite education as one of the highest-value benefits we provide and one of the key ways they engage with the organisation,” says Vince Barry.

Building on the success of the ‘GPs as Leaders’, Pegasus rolled out the ‘LEAD’ programme in 2019 for everyone working in primary healthcare, including general practitioners, nurses, pharmacists and practice managers.

“LEAD is designed to deliver outcomes for individuals regardless of their position within the business or organisation. It recognises that leadership is an enabler and a critical element of success, which is why we broadened its scope to include anyone working in primary health care. Our ultimate goal is to grow capability and build capacity across the sector.”

LEAD is a three-year iterative programme that consists of five modules delivered each year. The first, ‘High Performing Teams’ facilitated by Ian Brooks from the University of Canterbury, was held in March and attracted a capacity audience.

‘Crucial Conversations’ followed in July, again attracting a capacity audience and the final seminar-style workshop is scheduled for November 2019.

As well as traditional, ‘class-room’ events, LEAD also includes networking events to boost understanding of the broader elements of ‘leadership’. PegTalks was the first of the networking events to be held in 2019 with seven speakers delivering impassioned, inspiring and candid accounts of their journey from far-flung corners of the world to primary health care in Canterbury and New Zealand.

Dr Ian Brooks, Christchurch-based facilitator and coach.

Continued on next page.
“PegTalks is a great example of leaders sitting quietly amongst us – seemingly ‘ordinary’ people working in healthcare who are in fact doing very extraordinary things. It’s often not until they stand up in front of us that we collectively realise the true value of their experience, knowledge and influence and we begin to understand that great leaders are at work in our community every day. Sharing and celebrating their work is just another way we learn,” says Vince.

WHAT IS LEAD?

LEAD is a structured pathway for anyone working in primary health care looking to boost their non-clinical training around leadership development and developing business skills for running a successful practice.

It consists of a series of leadership development workshops and an online business e-learning hub – covering topics such as team development, conflict resolution, strategic thinking and planning, maximising the benefits of technology for your business and patients, change management and business skills.

It includes social functions (Peg Talks and one wine and cheese evening) to encourage networking and improve connectivity and collaboration amongst all working in primary healthcare in Canterbury.

Want to find out more? Watch our Peg Talks videos on Pegasus World.

Feedback from the 2019 LEAD events has been overwhelmingly positive – “The whole thing was brilliant” and “I loved this workshop. Thank you so much – best thing I have been to at Pegasus in years.”
SUPPORTING GENERAL PRACTICE TEAMS:
READING IN MIND

READING IN MIND REACHES OUT AND UP

Pegasus Health’s Reading in Mind book scheme has significantly grown since its creation in 2016. The scheme supports people across Canterbury to better manage their mental health by providing online lists of recommended resources – books, DVDs, CDs, on a range of mental health and wellbeing topics. Reading in Mind is for people of all ages and backgrounds, and those looking to support family/whānau or friends who may be experiencing poor mental health.

Originally the scheme only operated within Christchurch City Libraries. Traffic to the website showed a steady increase from 2,500 page views August 2018 to January 2019, to more than 4,300 from February to June 2019.

Mindful that mental health in rural communities is becoming increasingly important, Pegasus Reading in Mind project manager, Katie Brown, presented the scheme to the Rural Canterbury Primary Health Organisation in April this year.

“We had such a positive response from those attending. They all wanted to have Reading in Mind for their rural patients/clients. So from there we promoted the scheme to Selwyn, Waimakariri and Hurunui libraries,” says Katie.

All books listed in Selwyn libraries now have links listed in the site, and work is continuing on links for Waimakariri and Hurunui libraries.

Further work has been done to enhance the overall experience. New books have been added to the resource. Website wording was revised in March to cover recommendations from mental health professionals, the Mental Health Foundation, Christchurch City Libraries, Canterbury’s Mental Health Education Resource Centre (MHERC) and Reading in Mind users. The Mental Health Foundation promoted the scheme in its March ‘MHF Resource Review”. The site is also now mobile-responsive and e-books and audio options are also clearly marked for people who wish to download them.

Jane Keenan, Selection and Access Librarian for Ngā Kete Wānanga o Ōtautahi – Christchurch City Libraries, says there are some exciting developments coming to Reading in Mind.

“We’re working to get a group of interested library staff to actively promote the scheme in Christchurch libraries. Plans are being made for events in our Ōtautahi Creative Space with Pegasus staff forming part of the panel discussion, and a visiting author event based on a Reading in Mind resource in late 2019. It’s all very exciting,” says Jane.
SUPPORTING GENERAL PRACTICE TEAMS:
POPULATION HEALTH ADVISORY BOARD

ADVOCATING FOR BETTER ORAL HEALTH

One of the Pegasus Population Health Advisory Board’s (PHAB’s) key roles is to provide advice on matters that would benefit from advocacy by Pegasus. In July last year, PHAB put its voice behind supporting the fluoridation of drinking water supplies in the Canterbury Region.

PHAB, which has been set up to advise Pegasus on ways it can continue to improve health outcomes and reduce health inequities in the Canterbury population and beyond, saw an opportunity to improve oral health. The area of oral health, particularly in children, is an identified priority area for PHAB.

At the time, the Health (Fluoridation of Drinking Water) Amendment Bill was undergoing its second reading in Parliament. Professor Ann Richardson, Chair of PHAB, says Pegasus wanted to support fluoridation of the Christchurch City drinking water supply. Half of the New Zealand population has fluoride in their drinking water. Christchurch is the only one of the four main urban centres without fluoridated water. The only significant part of the South Island that has fluoride is Dunedin and its surrounding areas. PHAB believes the decision to fluoridate drinking water should be made by central government rather than individual DHBs.

“We know that dental decay is the most common chronic disease among New Zealanders. We also know that fluoridation of drinking water is the most effective way to reduce the risk of dental decay. In Canterbury, we find the highest level of dental decay in Māori and Pasifika children. Putting fluoride in the water gives protection to all groups in our community, reducing inequity,” says Ann.

In response, Pegasus wrote to the Minister of Health, the Hon Dr David Clark, and the Ministry of Health, Canterbury DHB and the Christchurch City Council in support of fluoridation of local government drinking water supplies and for this decision to sit with central government. Feedback received was encouraging.

Pegasus will continue its fluoridation advocacy efforts, following the local body elections and release of the Ministry of Health’s report on avoidable hospitalisations in New Zealand children, which confirms that higher rates of water fluoridation, vaccination and access to primary health care can all contribute to keeping kids healthy and out of hospital.
SUPPORTING GENERAL PRACTICE TEAMS:
CLINICAL QUALITY AND EDUCATION

SERIOUS MENTAL ILLNESS – IMPACTS ON PHYSICAL HEALTH

Pegasus Health small group education sessions over the last year have introduced and built on a wide range of topics, from gender diversity to liver disease and refugee/migrant health.

The General Practitioner and Nurse practitioner small group sessions held in September and October looked at Serious Mental Illness and its impacts on physical health. Louise Kennedy, Pegasus Team Leader - Clinical Quality and Education, says the connection between mental and physical health is very complex.

“There is a strong link between chronic health conditions, a much shorter life expectancy and people with an addiction or experiencing a serious mental illness (SMI). I personally find it quite alarming that people with SMI have much poorer physical health and on average live 10 to 32 years less than the general population,” says Louise.

The SMI sessions were designed to make health professionals more aware of the health inequalities people with SMI/addiction come up against, and help them understand the links and show how clinical practice can be changed or enhanced to better help these patients.

Small Group participant Dr Mike Osselton, says the reminder about diagnostic overshadowing was really useful.

“Sometimes the complexities of SMI mean physical health concerns seem less essential to manage. Understanding that a person in front of me might live 30 years less than I do because of this was a sobering message,” says Mike.

The Small Group programme offers quality clinical education relevant to primary care settings, with a strong emphasis on evidence-based medicine.

There are currently 23 GP Small Groups, 21 Practice Nurse Small Groups and 16 Community Pharmacist Small Groups. The meetings are facilitated by experienced GP/PN/CP Small Group Leaders. Six Small Group Education rounds are offered each year with GP, Practice Nurse and Community Pharmacy Groups covering the same topics.

You’ll find more information about the Pegasus Health Clinical Quality and Education programme on our website.
SUPPORTING GENERAL PRACTICE TEAMS:  
STEP UP PROGRAMME

FROM PILOT TO EXPANSION

In February 2019, the Minister for Social Development, Carmel Sepuloni, announced the expansion of a Canterbury Health System-led programme called Step Up, which helps people with health conditions or disabilities to find and stay in work or to engage in education or training.

Step Up was conceived and devised here in Canterbury and implemented through a partnership between the Ministry of Social Development (MSD), Canterbury DHB and Pegasus Health, as part of a WellBeing@Work Oranga Mahi drive to build healthier, more connected workplaces.

The pilot Step Up programme started in Canterbury in March 2017. At the end of June 2019, 199 participants have enrolled into the programme, 42 participants have been supported to return or enter into paid employment, 30 into fulltime (30+ hours), 12 into part time (up to 30 hours), 20 participants into voluntary work, and 4 into study.

The majority of people (75 percent) on the Step Up programme pilot are living with mental health conditions, which create barriers to them finding and retaining work. Many find it hard to get and keep a job, or even have the confidence to start looking for one because they have ongoing health issues, insufficient support, or because they face discrimination.

With this in mind, the Step Up pilot was designed to reduce barriers to employment. Health Navigators employed by Pegasus Health provide support, such as attending doctor and MSD appointments; the Live Life Programme, includes mentors as part of an innovative approach to build the social skills and confidence necessary to take on work-related activities; additional case management is provided by Work and Income; and funding for four free general practice team consultations assist those in the programme with their health needs.

Through a feature unique to Canterbury, and only possible because of our strong relationship with primary care, clients are identified in general practice and referred to Step Up, where they receive individually-tailored support to identify goals to help them become work-ready. Canterbury’s input was instrumental in ensuring general practice teams were able to use their clinical judgement, rather than simply set eligibility criteria, to identify people who would benefit the most:

- In receipt of a main benefit (this includes Jobseeker Support, Sole Parent Support and Supported Living Payment)
- Have a medical deferral from work obligations
- Motivated to work towards return to employment
- Assigned to a Work and Income service centre within the Canterbury Region, excluding Ashburton
- Enrolled with a General Practice in the Christchurch region

Continued on next page.
**SUPPORTING GENERAL PRACTICE TEAMS:**
**STEP UP PROGRAMME**

**CONTINUED**

Dr Marie Burke, from Eastcare Health based in Aranui, has worked with the Step Up team and says the programme gives general practice teams a way to positively help people outside of the ‘traditional’ models of general practice and WINZ.

“We’ve had great communication with Step Up Health Navigators. The patients working with the navigators are happier. I have been impressed with the adaptability of the navigators. It’s refreshing to have a system that is not ‘one size fits all.”

Marie also says that success in Step Up is different for all patients.

“I know that the end goal is a job, but there are other successes. I have a couple of patients with autism and severe anxiety, who are both now doing voluntary work regularly and feeling very fulfilled by this. Their families have been delighted to see them doing something that they would not have thought possible in the past. One of the family members has told me that Step Up has been ‘a life changing process for them,” says Marie.

Tina is one of the participants who has re-entered the workforce through the Step Up Programme. She says the Health Navigator helped her with interview confidence and pointers on how to approach and talk about her illness with future employers.

“The Health Navigator also came with me to my appointments at Work and Income, which meant that if I forgot something, they were there to remind me. I never felt pushed to do anything I didn’t want to do – actually, I’ve been overwhelmed with how great Step Up has been. Even though I’m now working, I still have ongoing support from my Step Up Health Navigator,” says Tina.”

Pegasus Health Step Up Team – L-R Alex Beaton (Step Up Health Navigator), Melissa McCreanor (Community Liaison Access Manager), Anne Ramage (Step Up Health Navigator), Loni Beach (Step Up Team Leader), Bonnie Tainui, Maureen Van Venrooy, and Nicola Mansour (Step Up Health Navigators). Absent Samantha McIntyre (Step Up Health Navigator).

Watch a video featuring the Pegasus Health Step Up Navigators here.
SUPPORTING GENERAL PRACTICE TEAMS:  
24 HOUR SURGERY

24 HOUR SURGERY’S NEW BUSINESS AS USUAL

Two years have passed since the 24 Hour Surgery (24HS) opened the doors to its new facility in Madras Street. Our team provides the highest standards of care for patients in a purpose-built environment – no more blood tests in the corridor or dressings in the x-ray waiting room! The new observation room, with two ensuite rooms, is lovely for patients well enough to stay out of hospital but not yet well enough to go home. That said, while there has been a change of space, the purpose of 24HS remains the same as always: to cover General Practice when they are at capacity or closed. We are here for you!

Dr Jasmine Mackay has completed her first year as Clinical Director and has focused on continuous improvement, noting that small things done consistently well lead to excellence. Some of the highlights and difficulties Jasmine has experienced in the past year include:

Dr Alf Scragg: Alf is employed as a Clinical Leader and has proven himself to be a real asset to the 24HS team. He liaises with GP colleagues on a range of issues, including notes audits (and how they can be used for MOPS), and when patients raise a concern. He has assisted 24HS with guideline development and helped troubleshoot the best way to approach issues with GPs around roster issues.

Alf has been particularly good at engaging patients, GPs and other health providers, who have frequent presentations to the 24 Hour Surgery in order to develop appropriate management plans.

Pictured right: Dr Alf Scragg outside the 24HS.

POCUS: The 24HS is excited to have purchased a Point of Care Ultrasound machine (POCUS). This technology is becoming increasingly common in primary care, enabling the clinician to perform ultrasound at the patient’s bedside, giving additional information to the history and clinical exam. The team are excited to learn new skills associated with this, and can definitely see how it will improve patient care. External and internal training has been arranged for 24HS staff, and we are very happy to include any GPs who are interested to learn more.

Nurse Practitioners: Our team has been exploring how best to establish extended nursing roles in the 24HS environment. They have undergone a process to develop a position for a Lead Nurse Practitioner, who will assist them in the development of a programme to not only train Nurse Practitioners, but also other extended nursing roles, such as nurse prescribers. The programme will minimise the patient wait and maximise the use of the skills of the clinical staff. There could be a wide scope here, and in future, potentially the 24HS could become a training post for these clinicians while they also work in general practice.

Continued on next page.
Measles: As you have all experienced, primary care was challenged this year with the measles outbreak and an early influenza season. The 24HS put their action plans into place and became adept at identifying and managing those with suspected measles. We’re proud of the team’s efforts over this extended period of time.

One of the first patients was seen at the 24HS and the team needed to do some contract tracing, they had several other patients subsequently diagnosed with measles that were all appropriately managed and isolated.

The 24HS team was able to support general practice and Public Health by providing urgent MMR and serology testing to contacts.

Mosque Shootings 15 March 2019: This was a day that no one in our community could have ever predicted. The 24HS team was contacted very early on by St John, who were able to provide them with information on what was happening. 24HS was a triage site for St John and we were able to assist by accepting non-shooting related ambulances from the community. As it was such an unknown, 24HS staff prepared the facility to see whatever may present – including keeping patients, who were unable to go home safely, comfortable. We were well supported by our Pegasus colleagues, who offered to help in any way. 24HS were kept busy in the evening and overnight with patients who would otherwise present to the emergency department.

24HS notes on Health One: The team have certainly heard GPs when they’ve said the notes transmission from the 24HS is challenging to read! This is not something that can be changed in MedTech, so a new approach was sought. Notes will still transmit to general practice overnight, however they will also be uploaded to Health One hourly. This will support GP teams to access their patients’ information easily, and in a far more readable way.

Sharing: A number of GPs have needed support this year when their practice has required cover due to unplanned leave. The 24HS have been happy to support the care of patients during these times.

A number of GPs have also approached 24HS for assistance with policy and procedures, emergency planning docs etc, and again we’ve been more than happy to help.
SUPPORTING GENERAL PRACTICE TEAMS:

24 HOUR SURGERY

CONTINUED

ACUTE DEMAND SERVICE CRITICAL TO CANTERBURY HEALTH SYSTEM

The 24 Hour Surgery and Acute Demand service play a vital part in the Canterbury Health System by helping to free up hospital facilities and looking after our population in the community.

The Acute Demand Team provides short-term assessments, treatment, and support to patients who may have otherwise been admitted to or have been recently discharged from hospital. Patients are referred to the team by either their General Practitioner (GP) or the hospital. The service is free of charge once a patient has been accepted under care by the team.

Acute Demand nurses see patients either at the Acute Demand Treatment area in 24 Hour Surgery, or in their home to provide treatment, such as administering IV antibiotics or assessing medical conditions. While under Acute Demand care, the patient’s GP is regularly updated on progress. Once the patient is sufficiently recovered, care is transferred back to their GP.

Canterbury DHB Chief Executive David Meates acknowledged this in one of his updates to stakeholders earlier this year…

“More acute care in home helps keep our hospitals free for those who need them

Last year more than 34,000 people received acute care in the comfort of their own home and surroundings. Not only is this better for the people receiving care, it’s better for our health system – keeping our hospital facilities free for those for whom there is no alternative.

This care is provided by a multi-disciplinary team that spans general practice, nursing, personal care, home care, a range of allied health staff including pharmacy and physio, and other clinicians.

At this time of year when our hospitals are busy, the flow on ‘busyness’ also impacts our health system’s community teams who go about their caring week in week out. Much of their work is seen only by the recipient and their family, so this week I wanted to publicly acknowledge the teams who are out in practices and in the community making a positive difference every day to ensure Cantabrians are well cared for.
SUPPORTING GENERAL PRACTICE TEAMS:
24 HOUR SURGERY
CONTINUED

Some people can avoid a hospital stay altogether by having in-home care after referral by their general practice team, while others can leave hospital sooner secure in the knowledge that there is a team of carers who will be visiting them at home to ensure their health needs continue to be met. We are fortunate to have such skilled teams working in our community – they are able to provide complex care in a community setting which, in some other areas of NZ, people would have to be admitted to hospital for.

This approach has been so critical to the Canterbury Health System being able to balance the unrelenting health pressures over the past six to seven years.

Thanks so much for everything you do.”

David Meates, CEO, CDHB
SUPPORTING GENERAL PRACTICE TEAMS: 
BEEFOUND

BEEFOUNDNZ EXPANDING AND DEVELOPING

BeeFoundNZ has continued to grow in the last year. As well as being available to all Pegasus practices, BeeFound is now operating in Wellington, Bay of Plenty and the West Coast.

In Canterbury, there continues to be strong demand for GP locums. BeeFound has also become an increasingly-favoured platform for Nurse Locums and Nurse Practitioners.

A number of new features have been incorporated into the site during the last six months:
• Cancellation reasons for locums and practices
• ‘Save a search’ and update of locum availability function for practices
• Practice notifications for new locums opting in to practices

Feedback from practices shows they find BeeFound simple and easy to use. Practice manager, Sandy Godsiff of Amyes Rd Medical Centre, says that she likes the responsiveness of locums using the service and that it has been a “much needed service” for their practice.

Showcasing BeeFound at the Auckland GoodFellow Symposium in March has led to increased interest from Auckland general practices. Enquiries are also coming in from Primary Health Organisations in both the North and South Islands, who are keen to offer BeeFound to their practices.

The team also promoted BeeFound at the RCNZGP conference, held in Dunedin in July, and they will be attending HINZ in November.

Find out more about BeeFound: BeeFound.co.nz

Pegasus Health Digital Platform Manager, Eirlys Beverley- Stone, (left) and Web Application Marketing Coordinator, Tina Morrell, promoting BeeFound at the RCNZGP conference in Dunedin earlier this year.
SUPPORTING GENERAL PRACTICE TEAMS: SUPPORT PLUS

PEGASUS SUPPORT PLUS: PREVENTION FOR ‘STICKY SITUATIONS’

Pegasus HR Support Plus is a suite of services designed to simplify the running of a primary or community care business. The team helps with recruiting and managing general practice teams and providing reliable IT solutions.

During the past year, HR Support Plus has completed 51 working assignments for our general practice business owners and community. The support provided includes:

- Training and coaching activities.
- Short term team interventions.
- Management of employee dynamics.
- Employee relations advice.
- Recruitment of Business Managers, practice staff and medical receptionists.
- The delivery of on-site team training on essential skills such as de-escalation techniques and how to handle difficult conversations.

Real-time coaching for Directors, Practice Managers, Nurses and General Practitioners with HR expertise has been really appreciated over short-to-medium term timeframes, says Natasha Kesseler, HR Consultant for Pegasus Health.

“We’ve heard from our evaluation surveys that this support is of high value to our clients and we’ve helped them through the ‘sticky stuff’. We make sure we follow through too, and give them plans and strategies for the future,” says Natasha.

The best idea, however, is to invest in team strategies early on so that HR problems don’t escalate to the ‘sticky’ stage.

Natasha Kesseler (right) talking about the benefits of Support Plus.
GP PLUS AND GP RECRUITMENT: HOME AND AWAY

Fiona Fidow, Talent Acquisition Partner with the Support Plus Team, says the GP Plus programme continues to grow.

GP Plus focuses on recruiting doctors and finding suitable placements for them in Canterbury practices. The service is available to both Pegasus member and non-member practices.

“We continue to have a variety of doctors coming through – from those who have just completed their training and are looking to experience a different health care system, through to more experienced doctors wanting a change after many years working in their own practice.”

With the Government’s ‘Wellbeing Budget’ set to change the landscape of the General Practice industry for the better in the next 3 - 5 years, Fiona says that Pegasus is well placed to invite new talent into our practices to be a part of the New Zealand Health industry and its exciting future.

The Support Plus team also works internationally to find and recruit talent for New Zealand’s growing GP community. In September, Natasha Kesseler was in London for a meet and greet with potential UK doctors.

“It’s important to be there on the ground to provide the whole picture around living and working in New Zealand. There’s nothing like a personal invitation,” says Fiona.
2019 ANNUAL REPORT: SUPPORTING EQUITABLE HEALTHCARE
SUPPORTING EQUITABLE HEALTHCARE: 
BACK UP

YOU’LL NEVER WALK ALONE

‘Back Up’ is a new service that provides support to Canterbury school communities affected by suicide.

In 2014, David Cairns, Suicide Prevention Co-ordinator for Pegasus Health, was contacted by a Christchurch high school counsellor, who was looking for support following the death of a student by suicide.

David was happy to help, but he was unprepared. He pulled together a list of resources he thought could help the school and worked alongside the counsellor. Together they addressed the needs in the community. It was a steep learning curve but important, as sadly it was not long before David was contacted by another school in the same situation asking for help. He realised that there was a real need for an approved, formalised kit of resources for the school community.

Back Up has been developed by the Canterbury Suicide Postvention Working Group, an inter-agency group with representatives from the Canterbury District Health Board and Pegasus Health. The Back Up kit is a purpose-written resource ready to be delivered to Canterbury School communities in need.

Rather than just a collection of different information, Back Up can be customised and tailored to suit all members in the school community – primary, intermediate or secondary schools, teachers, parents or students.

David says it is not something that is simply handed over with the recipient being left to ‘get on with it’.

“The Back Up kit is designed to be used with the person in need. The Back Up team walks alongside the school community, helping them for up to 14 months and then making sure they have set up ongoing support networks.”

The Back Up kit includes information from other organisations who are respected authorities in suicide risk management, mental health, grief and specific information to meet the needs of the cultural diversities that make up any community.
Pegasus’ primary mental health service continues to receive a high volume of referrals from general practice, with a steady increase over the past three years (see graph below). In order to manage demand, our service has adopted a clinical framework - Focussed Acceptance and Commitment Therapy (FACT) - which is evidence-based as being an effective model of care to use in primary health.

The Mosque attacks of March 15 placed extra pressure on our service. In order to meet the needs of the directly-impacted Muslim community, we needed to understand what kind of psychological support the community needed.

To help us with this, we employed the assistance of a wonderful team of Muslim social workers and community support workers from Kāhui Tū Kaha, a Kaupapa Māori NGO based in Auckland. They provided an assertive outreach model of care, which meant that people were seen in a culturally appropriate manner and received the ‘right service at the right time’.

The Government’s 2020 Wellbeing Budget has targeted frontline mental health services for people with mild to moderate mental health and addiction over the next five years. This funding will provide increased access to mental health and addiction support in general practice, utilising pilot programmes such as Te Tumu Waipara, which is currently being trialled in two Pegasus practices. You can read more about Te Tumu Waipara on page 38 of this report.
SUPPORTING EQUITABLE HEALTHCARE:
PARTNERSHIP COMMUNITY WORKERS

PARTNERSHIP COMMUNITY WORKERS GET CONNECTED

Pegasus Health’s Partnership Community Worker (PCW) service was implemented by the Partnership Health PHO in 2006 and became part of Pegasus Health in 2013 when the two organisations merged. The PCWs work with Pegasus general practices to support Māori, Pasifika, Refugee, Migrant, low income populations, and people who have a physical and/or mental health issue, find and use health care and community services.

Pegasus provides the funding and the PCWs are employees of the community agencies where they work. There are 19 PCWs located in 9 community agencies. Their aim is to identify, manage and reduce barriers for individuals needing health care and community services.

Melissa McCreanor, Pegasus Health’s Community Liaison Access Manager, and Maureen Van Venrooy, PCW Coordinator, work with the PCWs. There have been two very important developments for the service during the last year.

PARTNERSHIP WITH MHERC

Dr Chris Taua began working with the PCWs last August as part of a contract funded by the NZ Red Cross and supported by the Mental Health Education & Resource Centre (MHERC). The work has been part-formal education, part-mentoring and part-follow up support.

The first thing Chris did was to survey the PCWs to find out what they already knew about working with people with mental health issues and what they thought they needed to know. The findings were transformed into a suite of workshops including understanding common mental health conditions, compassion fatigue, boundaries and ethics, keeping themselves safe and verbal de-escalation of risky situations. In addition, the PCWs were given the opportunity to attend any of the workshops offered by MHERC.

Chris also worked with the PCWs as a mentor. She went with them to meet clients, observed, offered suggestions and had a debrief following the client contact.

Finally, Chris made herself available for the PCWs who wanted to check in, ask for suggestions and tell her about how they have handled a situation. Phone calls and one-to-one meetings were the usual method of this support.

Continued on next page.
Chris conducted a survey mid-way through the training to see how it was working for them. She says one of the big differences she noticed was the increase in confidence each PCW felt. The support the workers receive from Pegasus Health and MHERC was also evident.

“It’s been a tough year for the PCWs. The March 15 event led to a significant increase in mental health issues for their clients. Three of the PCWs work directly through the Christchurch Resettlement Service and were directly involved in supporting the Muslim Community throughout this time. Other PCWs were also supporting victims over the ensuing week,” says Chris.

The contract will end at the end of July and Chris is hoping to complete and publish a discussion paper about the work she’s done. She is awaiting final team surveys from the PCWs. In addition to the survey findings each PCW will be providing a portfolio of their reflections and how they have used the new skills they have learnt. The detail in these portfolios will also inform the discussion paper.

Chris says it’s been a real privilege to work with the PCWs.

“They’re a unique bunch of professionals. They don’t judge and they choose to walk into some pretty complex situations. We’re very lucky to have them in Canterbury and I applaud Pegasus Health for supporting this initiative. I’d also like to thank Pegasus Health, the New Zealand Red Cross and MHERC for the opportunity, it’s been a privilege and a huge learning curve for me,” says Chris.

**CONNECTING THE DOTS**

When Drs Hilda Mulligan and Mandy Wilkinson from WellConnectedNZ™ met Melissa McCreanor and the Partnership Community Workers (PCWs) at a Hui in January 2019, they quickly realised there were synergies between the PCW service and the aim and intent of WellConnectedNZ™.

WellConnectedNZ™ is a collaborative interdisciplinary project within the Healthier Lives National Science Challenge, one of 11 National Science Challenges designed to find creative solutions for improving the health of New Zealanders. WellConnectedNZ™ brings together researchers from the Canterbury District Health Board, the University of Otago, and the University of Canterbury.
Mandy and Hilda offered to partner with Melissa and the PCW teams to provide a ‘scoping’ of the PCW service to understand the navigation function of this role and the client experience.

“We looked at what the PCW service is doing, how they do it, and clients’ views about what their engagement with the service has meant for them. One clear message from clients is that they really appreciate how PCWs listen to them, believe in them and walk alongside them. This seems to be an inclusive and empowering approach to service delivery,” says Hilda.

The research showed that the PCW clients faced challenging personal situations, including extreme poverty, abusive relationships and serious health conditions. For some clients, English was not their first language, they were without a regular income, and also reported social isolation.

“The findings of this collaborative research between the PCW service and our team suggest that the PCWs provide advocacy and support, which helped the clients feel valued as human beings. This in turn facilitated them to feel they had choice and control over their lives, which provided a sense of self-determination, giving them the confidence and motivation to tackle their health issues,” says Mandy.

Hilda and Mandy are currently preparing a manuscript about the client perspective of the PCW service for publication in an international journal.

Read more about the Partnership Community Workers.

Find out more about WellConnectedNZ™:

www.wellconnectednz.org
@WellConnectedNZ
www.facebook.com/wellconnectednz
SUPPORTING EQUITABLE HEALTHCARE: 2019 SCHOLARSHIPS

INSPIRATION, VALIDATION AND MOTIVATION FOR RECIPIENTS OF HEALTH WORKFORCE DEVELOPMENT SCHOLARSHIPS

Twenty-one students from a wide variety of health studies received Pegasus Health scholarships at a community event held at Tūranga in May 2019.

Each year, Pegasus Health invites students who identify as Māori, Pasifika or from Culturally and Linguistically Diverse (CALD) communities, studying medicine, nursing or allied health to apply for the scholarships. Many overcome significant challenges to study health and there is always a tremendously wide diversity of personal stories behind each success.

PERSONAL HEALTH ISSUES INSPIRATIONAL

Meihana Ngatai’s nursing journey has been deeply touched by personal health issues. He had to undergo a three and a half year treatment plan for leukaemia from the age of 15 and he still remembers the professionalism and empathy of staff at Christchurch Hospital. His treatment successfully finished two years ago.

He takes his inspiration for nursing from this experience and a desire to help Māori gain better access to the health care they need. Meihana is particularly keen to work in mental health in rural settings where resources for Māori are especially limited.

He feels that enabling Māori to access these services will contribute to the overall use of services and therefore enhance Māori health outcomes.

“I’d really like to increase Māori representation in the health workforce,” says Meihana, who is in his final year of nursing study at Ara. The financial benefit of the scholarship will certainly help him reach his goal.

GREAT VALIDATION OF EFFORTS

Keke Avia wanted to work with people and saw a need in Pasifika social work. The 3rd year student feels the scholarship has provided extra incentive to continue with her social work studies.

“It is great validation of what I’ve been doing and really supportive,” says Keke.

She is currently in a placement in the General Medicine ward at Christchurch Hospital and hopes to investigate work with older people or Oranga Tamariki once qualified. The scholarship has also helped her make connections.

“Networking with others in health creates a much greater awareness of opportunities out there,” says Keke.
Deepti Raturi says she was always interested in health care. The third year nursing student really enjoyed biology at school and when she learned that her mother was quite unwell as a child, Deepti’s desire to care for others grew.

Born in a small northern Indian town, Dehradun, Deepti, her mother and siblings joined her father in New Zealand when she was 15 years old. After completing three years at Marian College in Christchurch, Deepti worked full time for six months to build up funds before starting her nursing studies. She still combines casual work at Vbase with her current work placement at the 24 Hour Surgery and study. The scholarship will provide some welcome financial support.

“I can’t do paid work at the same level now that I am on placement. I’ll use the scholarship to pay for Nursing State Final fees in July and some extra resources,” says Deepti.

Following completion of her studies, Deepti would like to work as a practice nurse in primary care.

“The thing I most enjoy about my career choice is the chance to empower patients with knowledge. Primary care is the perfect place to share this knowledge, where you have the time and opportunity to work with them,” says Deepti.

**Full list of scholarship recipients:**

**Māori:** Te Koha Russo-Greig, (Ngāpuhi) – Midwifery; Tea Elliott, (Ngāi Tahu, Te Arawa, Kāti Māmoe) – Medicine; Vanilla Tillman, (Uenuku, Ngāti Tūwharetoa) – Social Work; Jimi MacMillan, (Ngāti Awa) – Medicine; Meihana Ngatai, (Ngāi Te Rangi) – Nursing; Courtney Sullivan (Medicine); Shahana Truscott, (Ngāti Porou, Ngāti Kahungunu, Rongomaiwahine) – Nursing.

**Pasifika:** Raina Tekii – Nursing; Marita Naoupu – Nursing; Lynley Bowler – Nursing; Ateca Sher – Nursing; Theresa Fitzpatrick – Medicine; Danni Ryan – Medicine; Keke Avia – Social Work.

**CALD:** Salaamah Shah – Nursing; Deepti Raturi – Nursing; Sanil Karithadathil Sahadevan – Nursing; Sirwan Mohamadi – Social Work; Jan Dela Cruz – Nursing; Minien (Jessie) Cheng – Nursing; Hafsa Abdulhamad – Nursing.

Pegasus Health established the Māori scholarships in 2001 and followed up with Pasifika scholarships in 2007. Scholarships for CALD health students became available in 2014.
SUPPORTING EQUITABLE HEALTHCARE:
2019 SCHOLARSHIPS

Maori Scholarship Recipients
From left to right:

Pasifika Scholarship Recipients
From left to right:
Keke Avia, Danni Ryan, Marita Naoupu, Raina Tekii, Ateca Sher, Theresa Fitzpatrick
Absent: Lynley Bowler

CALD Scholarship Recipients
From left to right:
Minien (Jessie) Cheng, Sirwan Mohamadi, Deepti Raturi, Jan Dela Cruz, Salaamah Shah, Sanil Karithadathil Sahadevan.
MISTLETOE AND MILESTONES FOR SENIOR CHEF

In December 2018, Christmas celebrations were combined with a significant milestone for Senior Chef Graduates.

Senior Chef is a programme administered by Pegasus Health, which teaches older people living alone or with one other person, practical cooking skills, meal planning, budgeting, shopping tips and good nutrition. Senior Chef began in 2009 and runs courses throughout the Canterbury region, including Kaikōura, Rangiora, Kaiapoi, Lincoln, Ashburton and Christchurch.

The programme welcomed its 2000th participant during the year, which made its annual Christmas celebrations even more special.

Senior Chef Programme Administrator, Jane Callahan, says the programme has evolved a lot since it began in 2009.

“We have extended the age range of people who can attend and reviewed the criteria. Senior Chef is for Māori or Pasifika aged 55 years+ or other ethnic groups 60 years+. These people can also refer themselves to the programme, they no longer need to ask their GP to do it,” says Jane.

A Christmas-themed quiz, great food and the chance to catch up with class buddies led to a great turnout at the event and enthusiasm to spread the word about Senior Chef to their friends and family.

One of the tables at the Christmas event was made up of couples who had completed the course together. Janet and David McGimpsey, Kristine and Bryan Green, Judy and Murray Laugesen and Shirley and Howard Dabinett all completed the same course, which has led to new friendships between the couples and more equal sharing of cooking duties by each partner.

Howard says Senior Chef has helped a lot with his cooking confidence.

“We take turns at cooking now. It's been the best thing to expand my meal repertoire,” says Howard.

Listen to a podcast about Senior Chef here.

More information at www.seniorchef.co.nz
SUPPORTING EQUITABLE HEALTHCARE:
COMMUNITY ROUND UP

CHILDREN AND YOUNG PEOPLE TO BENEFIT FROM DONATIONS

Children waiting in the 24 Hour Surgery (24HS) and young people in Oranga Tamariki Residences benefited from wonderful donations from the 2018 Countdown Kids Appeal.

This annual appeal has been providing support for children’s hospitals and residences around New Zealand since 2007. Each year, thousands of Countdown and hospital staff rally their communities to support the appeal, and people participate by making a donation or engaging in local activities and raffles. The 2018 appeal was slightly different in that primary care organisations were also able to benefit via the Canterbury District Health Board.

Pegasus Health Director of Nursing, Michael McIlhone, says the appeal makes an amazing difference. Some of the money raised has been used to provide a quiet, interactive play area for children waiting at the 24HS.

“It’s been stocked with an array of toys, play equipment and a DVD player, items that are not too noisy, are washable, and without removable parts. The equipment is great for distracting and occupying children during their time with us,” says Michael.

Pegasus Health provides a primary health care service to young people at Te Puna Wai o Tuhinapo (TPW) Youth Justice Facility and Te Oranga Care and Protection Facility (Oranga Tamariki) who will benefit from additional medical equipment – a digital blood pressure device, Ophthalmoscope (used for eye examinations) and Thermoscan (Thermometer), as well as a trampoline to encourage physical exercise.

“We’re so appreciative of this funding, which will be used to make such a difference to children and young people in care,” says Michael.
CELEBRATING 10 YEARS OF KEEPING CANTABRIANS ON THE MOVE

There’s no such thing as a free lunch – and this was evident in June 2019 when guests attending the Active Canterbury Network’s 10-year anniversary celebration had to pedal their way to lunch with a ride on the ‘Smoothie Bike’.

“Promoting physical activity is what the Active Canterbury Network is all about” says coordinator, Nadine Milmine. “So even though we’re here to celebrate today, we still made sure our guests had a wee workout before they tucked into some cake!”

The Active Canterbury Network (ACN) is a collaboration of local organisations and service providers focussed on promoting active lifestyles. The network supports physical activity providers to build their skills and knowledge through training workshops, mentoring, nutrition programmes and networking opportunities.

The group is also an avid supporter of the hugely successful Walking Festival and they have just completed an online Activities Directory, which details all of the physical activity classes, groups and programmes on offer in Canterbury.

One of the group’s original members, Diana Saxton from Christchurch City Council, says the network has been successful because of its spirit of collaboration.

“He waka eke noa’ really sums us up” she said, “meaning we’re all in this together. There are few places around the country where organisations from the sport, health and recreation sector come together regularly to work in such a collaborative way. This culture is one of the key reasons why the Network has been so effective and successful over the past 10 years.”
SUPPORTING EQUITABLE HEALTHCARE:
COMMUNITY ROUND UP

Rebecca Logan works for Sport Canterbury. When she started in her role just over two years ago, she was tasked with getting 3000 older adults engaged with Canterbury’s 150 community-provided physical activity classes.

“Because of ACN, I had immediate access to all of this information and all of these people in the community who could help me. Very quickly, in fact within the first eight months, we had achieved our target of 3000. This success was entirely due to ACN’s established networks and relationships.

Every DHB region around the country has someone doing my role and I know many of them have really struggled because they haven’t known how to reach out and connect. I was very lucky to have started in the CDHB region because those connections were already there for me.”

The ACN membership includes Christchurch City Council, CDHB (Community and Public Health), Dance/Arts Representative, Grace Training NZ (Whānau Whanake), Exercise Industry Representative, Pegasus Health (Charitable) Ltd, Selwyn District Council, Sport Canterbury, Waimakariri District Council and the YMCA.

POSITIVE AGEING EXPO

The Pegasus Health Population Health & Community Engagement Team contributed to this year’s Positive Ageing Expo held 1 October 2018 at Papanui High School. The event was successfully organized by Age Concern NZ.

The Positive Ageing Expo was well attended with over 2,500 people visiting the variety of stalls and exhibits from the participating organisations and service providers.

Pegasus Healthy Lifestyles Team promoted both Appetite for Life and Senior Chef programmes, with 22 new people enrolled into the Appetite for Life and 33 into Senior Chef programmes for 2019.

The Partnership Community Workers engaged with people around their enrolment with a primary health care organisation and the benefits of receiving support from their local general practice.
SUPPORTING EQUITABLE HEALTHCARE:
BUILDING ON PASIFIKA CHURCH RELATIONSHIPS

Close relationships built between health professionals, Pasifika parishioners and their communities are key to the ongoing work of the Tutupu project.

The Tutupu Project was established in 2017 as a collaborative partnership involving Healthy Families Christchurch (Sport Canterbury), Pegasus Health (Charitable) Ltd, Canterbury District Health Board (Community and Public Health), Etu Pasifika Trust and the Rural Canterbury PHO. Working with Pasifika providers and churches was an ideal way to connect with Pasifika people in an environment where they felt comfortable.

Maria Pasene, Pegasus Health’s Pasifika Manager, has been part of the project from the beginning. She’s seen the work flex and grow to meet specific needs.

“There are churches that have created community gardens to encourage their congregation to grow healthy, organic and fresh vegetables. Others have promoted and implemented health policies to improve nutrition, promote water as a first choice and celebrate their smokefree status,” says Maria.

More recently, the project has partnered with the Tangata Atumotu Trust, Vaka Tautua and Etu Pasifika to further build and maintain the connection with parishioners and their communities by working directly with church ministers and the churches previously involved in the project.

Over the last year, health messages have been further refined and tailored to fit specific groups – Pasifika women and Pasifika Matua (elders). A series of Fono (meetings) have been held and more are planned for these groups, where speakers share their knowledge, performances are given and health information provided. Four workshops are for Matua, two for women and one specifically for younger Pasifika women. The Pasifika Women’s Leadership Fono held in May this year in Christchurch invited women to dinner where they were celebrated as “strong trees in our communities in your roles as change makers, action takers, thought leaders and dream makers”.

One of the key messages given at the Fono was the importance of breast and cervical screening.

“It was very much about women looking after themselves so they can be all that they are with their families and in the community. When we fill other people’s cups by emptying our own, we become depleted and are unable to replenish ourselves or others,” says Maria.

The video “Time to screen” was shown and each woman asked to turn to the ‘sister’ next to them and ask if they were up to date with their mammograms and cervical smears. If they were not, they were encouraged to make an appointment there and then.

Maria then followed it up with a friendly reminder letter about the importance of getting checked.

“It was all done gently and with love,” says Maria.
SUPPORTING EQUITABLE HEALTHCARE:
BUILDING ON PASIFIKA CHURCH RELATIONSHIPS

The Matua Fono focuses on information especially relevant for older people. Information about Senior Chef, the Medication Management Services, Live Stronger for Longer and the particular importance of good nutrition, hydration, oral health and mental health are highlighted in information provided at each fono.

There are plans to continue the flow of information via facebook and e-newsletters.
SUPPORTING EQUITABLE HEALTHCARE:
HEALTHY LIFESTYLES

TURNING SERVICES INSIDE OUT TO MEET NEED

Pegasus Health’s Healthy Lifestyles services have “moved, shifted and been reshaped” to meet the increasing needs of people from more isolated rural locations and for people with increasingly high and complex needs.

The two main services – Appetite for Life and Senior Chef, have traditionally taken referrals for individual participants from general practices.

Work is currently underway to share the Senior Chef resources with more specialised groups. Rural communities will be having greater access to Senior Chef, with courses planned in Lincoln, Kaikoura, Ashburton and Rangiora.

Appetite for Life is a Canterbury based 6-week weight management and healthy lifestyle programme. The focus is on health gain rather than weight loss, supporting small changes in eating, activity and behaviour by promoting food that looks after health and weight and helping them to feel good about themselves throughout the process.

Pegasus is increasingly being approached by, and has formed links with, rural communities and organisations who work with the homeless, those affected by poverty and refugee and migrant communities - people traditionally regarded as ‘the missing out’.

Community groups such as the City Mission, Hagley Community College (refugee migrant group), Ōtautahi Community Housing Trust, 298 Youth, EMERGE Aotearoa and the Kimihia Parents College are also confirming programmes for their communities.

Donna Ellen, Community Support Manager for Pegasus says they’ve seen a real need to actively extend their services to people with high needs.

“With a strong focus now being placed on equity, we’re being asked for help from groups who may not have known about what we can offer. In response, we’re becoming more flexible and nimble so we can reach out to these communities and adapt our resources to fit what they need. For example some of our Appetite for Life and Senior Chef recipes are undergoing a ‘Pasifika makeover’ so the ingredients better reflect cultural tastes,” says Donna.
In June this year, Pegasus Appetite for Life (AFL) Facilitators ran a six-week course at the Christchurch City Mission. Jenny Muir, the Mission’s Drop-in Women’s Day Programme Co-ordinator says it was one of the best attended courses held there. It was open to men and women and advertised on posters throughout the City Mission’s various facilities.

“Our clients were really enthusiastic about the course and all 12 participants came to every session. At the end of each one they were bubbly and excited about having new ways to prepare food and the opportunity to try foods they hadn’t before,” says Jenny.

Some immediate benefits saw a couple of the participants start to eat breakfast each morning and one person lost five kilos in weight due to better health choices. Jenny followed each AFL session with another cooking opportunity to reinforce the learnings and all participants have recipes and workbooks to keep and follow.

Lana Shields, Learning and Development Team Leader for Christchurch City Mission, says the AFL facilitators were amazing.

“The first day of the course was full-on, as people who are not used to structure began to trust the Facilitators. They were asked so many questions! From the second session on they all settled in and loved the structure. The sessions were so practical and adapted to individual needs. They’ve gained some great life skills,” says Lana.

The Christchurch City Mission now plans to run two AFL courses each year with the next one taking place in October. Pegasus will continue to work with the Mission as it moves towards providing more activities and education around life skills for its clients.
We present consolidated “Group” financial statements.

The Company consists of Pegasus Health (Charitable) Ltd and its associates. The most significant being After Hours Properties Ltd (AHPL), which was an associate up until 18th December 2018. At that date, it became a wholly owned subsidiary following the acquisition of the remaining 50% of shares from Urgent Pharmacy Ltd.

The Group consists of the Company and its subsidiaries, most notably Pegasus Health (LP) Ltd, which holds our 50% investment in HomeCare Medical (NZ) Limited Partnership (HCM), and After Hours Properties Ltd (from 18 December 2018).

The financial statements for the year ending 30 June 2019 illustrate what has been overall a sound year financially. The significant financial transactions this year were:

- Purchase from Urgent Pharmacy of their 50% of the shares in AHPL, following a commercial negotiation underpinned by a jointly commissioned independent property valuation of the unit owned by this company;

- Subsequent sale, as one large block, of both units of the former 24 Hour Surgery building and four contiguous properties (Colombo Street complex), resulting in a $2.2M gain on sale for the Company and a $3.5M gain for the Group.

- Intangible assets such as software were assessed for impairment. The Sirius-related assets had a total cost of $3.6M as at 30 June 2019, comprising capitalised internal costs as well as external costs. These financial statements record an impairment loss of $2.2M reflecting lower than expected economic performance of these assets due to reduced market share. The revised asset value reflects the assessed on-going value of some of these assets to Pegasus.

- Continued strong performance by Homecare Medical, resulting in $1.3M (2018 $0.5M) income to the Group, and the repayment of a further $1M (2018 $1M) of original partnership capital related to the initial set-up. Two-thirds of Pegasus’ set-up investment has been repaid within the first three years.
Comprehensive Revenue and Expenses (aka Profit and Loss account)

The Company’s operating result, a deficit of $633k, was $107k better than budget, and the Group’s operating result was a surplus of $651k.

Revenue from the delivery of health services increased by $2.0M. The increase in revenue was across the business, including incremental increases for HealthOne and ERMS, and increased activity in services supporting general practice. New revenue initiatives include Step Up – a health navigator service, now offered within general practice that helps Cantabrians who are on a benefit and have a medical deferral to find and stay in work, and the implementation of the ACC High Tech Imaging initiative whereby General Practitioners are now able to order certain MRIs.

Operating expenses increased by $4.3M. Excluding a $1.9M one-off item commented on below, expense movements are consistent with activity levels. The most significant component of expenses, after wages and salaries, continues to be the data-related support of general practice information systems. The one-off item in 2019 is the impairment loss on investment in AHPL ($1.9M), which is required to be included in this category, but is matched by other positive entries, such as the $1.5M dividend from subsidiary (shown separately) and a deemed gain of $0.3M on AHPL shares.

Net finance costs (excluding the dividend receivable from AHPL of $1.5M noted above) were stable.

The Limited Partnership, Impairment, and Gain on Sale entries are covered in the bullet points above and not repeated here. All of the above come together to give a Group surplus of $642k (2018: $985k) demonstrating another sound year overall.

Financial Position (Balance Sheet)

Due to the result set out above, Company equity has decreased to $17.8M (2018 $18.5M), whereas Group equity has increased to $18.2M (2018 $17.6M).

Significant asset movements are:
- Cash has increased, as commented on in cash flows section below;
- Property, plant and equipment has reduced, due to the disposal of the Colombo Street complex;
- Intangibles have reduced, due to the Sirius impairment provision;
- Investments have decreased, largely due to Homecare Medical capital repayment.

The only significant liability movement is that $4M (net) of Current Loans was repaid on the sale of the Colombo Street complex. The sale also triggered a Revaluation surplus movement of $933k to the Accumulated revenue and expense account. Term Loans remained at $9M.
Cash flows

Cash was well managed to ensure Pegasus remained within its banking covenants throughout the year. At year-end, cash balances had increased by $2.2M to $4.1M.

Net cash generated from operating activities totalled $357k.

Cash generated from investing activities totalled $5.8M. The Colombo Street complex proceeds and Homecare Medical capital repayment being the inflows, and asset purchases and AHPL share purchase being the outflows.

Financing activities reflect the $4M debt repayment.

Primary Health Organisation (PHO) Function Special Purpose Financial Statements

These separate special purpose financial statements are produced to meet PHO reporting requirements. They are an extract from the full financials commented on above. The significant financial transactions bullet-pointed in the first section of this commentary do not involve PHO Function funds.

Our PHO Function had a stable twelve months of operations. This culminated in an operating surplus of $320k for the year. As expected, the cash position remained at $2.3M at year end, with over $100M of funds distributed to service providers, the most significant being general practices.

Summary

Despite a fiscally-challenging year, Pegasus remains in a sound financial position. Prudent and deliberate governance and management practices have been demonstrated, and a measured approach maintained. Cash position and Reserves remain strong. This financial year’s initiatives continue to position Pegasus well to support general practice through the challenges and opportunities ahead, enabling Canterbury people to be well and healthy in their own homes and communities.

We hope this commentary assists your understanding when reading both sets of the following financial statements.

Pegasus Health (Charitable) Limited Financial Statements 2019

Pegasus Health (Charitable) Limited Primary Health Organisation Function Financial Statements
The System Level Measures (SLM) framework continues to develop. Pegasus, along with other PHOs, receives a portion of Canterbury’s funding which is provided both to build capacity and to achieve quality improvements across the system. The pie chart which is similar to last year, shows that most of this funding is used to support quality improvement at practitioner and practice level, education and training; and innovation in planning new ways of working.

Income has increased slightly again this year reflecting the improved capability and capacity across the Canterbury Health System which is successfully delivering improvements in the system level measures as part of a wider programme of clinical governance.

Pegasus, as a key partner in the Canterbury SLM group, continues to be influential in the development of the SLM framework. These measures look at integration across the system rather than individual activity at general practice level. The Ministry continues to use our processes and plans as exemplars for the developing national programme.

- Administering Programme: 221,381
- Workforce Development/Scholarships: 98,655
- Clinical Service Development: 909,806.96
- Practice Support, Liaison and Coordination: 441,497
- IT Developments: 362,400
- Developing Models of Care: 244,113

**Total:** 2,277,852